



QUALITY ASSURANCE SYSTEM

FAHAD BIN SULTAN UNIVERSITY

Table of Content

Foreword	1
Introduction	2
Section – I Institutional Context & its Commitment to Quality	3
Institutional Context.....	4
Graduate Attributes	6
Management and Governance	7
Institutional Committees	9
Stakeholder Engagement Forum.....	15
Quality Assurance Management at FBSU.....	19
Quality Framework	24
Quality Model Adopted by FBSU.....	27
Section -II Quality Assurance in Academic Programs.....	34
Relationship of FBSU Quality Assurance System to NQF	35
Compliance of FBSU Quality Assurance Framework with NQF.....	38
NCAAA Standards for Teaching and Learning	39
Program Constituencies and Their Feedback for Program Development	42
Advisory Boards	43
Structured Feedback Collection and Analysis.....	44
Teaching and Learning Policies	46
Key Performance Indicator Framework.....	49
Graduate Attributes and Learning Outcomes	57
Quality Cycle of the Learning Outcomes.....	59
Assessment Plans.....	61
Levels of Assessment.....	62
Assessment Process of the Learning Outcomes	64
Evaluation Process of the Learning Outcomes	69
Process for Updating the Learning Outcomes.....	71
Curriculum Review and Development	72
Quality Assurance Administrative Calendar.....	78
Template for the Program and Course Documents	81
Monitor Quality of Core Courses Taught by other Departments	82
Quality Assurance Measurement Courses with Multiple Sections	83
Independent Verification of Student Achievement Process.....	86
Electronic Course Portfolio.....	88
Reporting and Handling of Ethical Misconduct.....	89
Internal Program Review	92
Institutional and Programs Accreditation	95

Section -III Quality Assurance in Administrative Support Services	99
Strategic Planning & Development Center (SPDC)	100
Deanship of Admissions and Registration (DAR).....	105
Deanship of Student Affairs (DAS).....	110
Deanship of Graduate Studies and Research (DGSR).....	115
Consultative Center for Studies and Community Service.....	120
The Library	126
Appendices 131	
Appendix I Faculty Member Annual Appraisal Form	132
Appendix II Faculty Ethics Case Reporting Standard Operating Procedure.....	135
Appendix III Infrastructure Quality Assurance and Review Process.....	138
Appendix IV Resource Allocation Benchmarks for Academic Facilities	140
Appendix V Infrastructure Quality Assurance (QA) Checklist.....	142
Appendix VI Infrastructure Quality Assurance and Review Process	144
Appendix VII Annual Facility Audit Process for Academic Infrastructure	146
Appendix VIII Annual Research Ethics Review Report.....	148
Appendix IIX Annual Research Impact ReporAnnual Research Impact Repor.....	150
Appendix IX Community Service Annual Impact Report	151
Appendix X Stakeholder Consultation Feedback Survey	154
References	156

Table of Figures

Figure 1: The Governance organizational structure of FBSU	8
Figure 2: Institutional Committees	10
Figure 3: Institutional Committees Framework - Interrelationships among the institutional, college, and department level committees.....	11
Figure 4: Interrelationships between DQAA and Institutional Committees	20
Figure 5: DQAA Organizational Structure	20
Figure 6: FBSU Quality Framework	25
Figure 7: Quality Model (PIMRU).....	27
Figure 8: FBSU strategic priorities	29
Figure 9: The organizational Structure underlying the strategic planning.....	30
Figure 10: National Qualification Framework Levels.....	35
Figure 11: Compliance of FBSU Quality Assurance Framework with NQF-Saudi Arabia.....	38
Figure 12: Design and Development of Academic Programs	39
Figure 13: Graduate Attributes and Learning Outcomes	40
Figure 14: Academic Programs Quality Assurance and Enhancement	41
Figure 15: Feedback Analysis Flow Chart	44
Figure 16: FBSU Surveys For calculating KPI Results	53
Figure 17: FBSU KPI Monitoring & Governance Process	54
Figure 18: Achievement of Graduate Attributes through PLOs and CLOs	58
Figure 19: The PIMRU Model.....	59
Figure 20: Sample 2nd page of prepared course syllabus using the assessment system portal	65
Figure 21: Sample Program Performance Evaluation Scores for Direct assessment method.....	66
Figure 22: Sample of embedded sheet in the indirect assessment results file	68
Figure 23: The major curriculum review process for academic programs	76
Figure 24: Guidance on the curriculum review process for academic programs and outlines	77
Figure 25: Ethics Reporting and Investigation Flowchart.....	91
Figure 26: DQAA Organizational Structure.....	100
Figure 27: SPDC Annual Workflow Timeline	104
Figure 28: DAR Organizational Structure.....	105
Figure 29: DAS Organizational Structure	110
Figure 30: RIC Organizational Structure.....	115
Figure 31: CCSCS Organizational Structure	121
Figure 32: FBSU Community Services Process Flowchart.....	122

Table of Tables

Table 1: Committees and the respective NCAAA Standards assigned to each.	12
Table 2: Strategic plan implementation, monitoring, reviewing and updating calendar.....	33
Table 3: Cascading KPI Flow from University to Department.	50
Table 4: Data Sources of NCAAA KPIs	52
Table 5: KPI Data Providers and KPI Owners.....	54
Table 6: Program Learning Outcomes	61
Table 7: Quality Administrative Calendar for Faculty (Week 1 to Week18)	79
Table 8: Calendar for Department Chairpersons	80
Table 9: Calendar for Administrative offices	80
Table 10: Ethics Case Tracking System	91
Table 11: Internal Assessment Process documents.....	92
Table 12: DQAA Centers and Units.....	95
Table 13: Major tasks of Accreditation.....	96
Table 14: Institution and Colleges – International Accreditation Agencies.....	98

Acronyms

CLO:	Course Learning Outcomes
PLO:	Program Learning Outcomes
KPI:	Key Performance Indicators
PI:	Performance Indicators
QAAC:	Quality Assurance and Accreditation Center
TLC:	Teaching and Learning Center
CSI:	Center for Statistics and Information
SPDC:	Strategic Planning and Development Center
QAAC:	Quality Assurance and Accreditation Center
DQAA:	Deanship of Quality and Academic Accreditation
DAR:	Deanship of Admission and Registration
DSA:	Deanship of Student Affairs
CL:	Central Library
CCSCS:	Consultative Center for Studies and Community Service
RIC:	Research and Initiative Center
IQC:	Institutional Quality Committee
IEQPC:	Institutional Executive Quality and Planning Committee
ICC:	Institutional Curriculum Committee

FOREWORD

The Quality Manual (QM) is a crucial component of Fahad Bin Sultan University's internal Quality Assurance System (QAS), showcasing a strong commitment to instilling a culture of quality and excellence in the institution's educational practices, spanning academic programs and their supporting services.

FBSU-QAS aligns seamlessly with the National Quality Framework, ETEC-NCAAA, and international educational standards. The highest level of quality commitment comes from top management, with the direct involvement of the President in all quality assurance activities, reinforcing FBSU's commitment to excellence in quality education.

Additionally, the manual provides an overview of Quality Assurance System by higher management, outlining mandated tasks and activities that support the quality practices of academic programs. Administrative offices contribute quality services to support the functioning of academic departments, contributing to the realization of FBSU's vision.

All FBSU stakeholders are required to follow the contents of this Quality Assurance Manual to ensure the systematic adoption of FBSU quality procedures and practices at all levels. The Deanship of Quality and Academic Accreditation team is available to support and welcomes feedback on the provisions within this manual, with the satisfaction of all stakeholders being central to our continuous improvement processes.

INTRODUCTION

Fahad Bin Sultan University is committed to develop a comprehensive system of academic quality management to ensure the highest levels of performance and increase the quality and effectiveness of its educational programs and support services.

As one of FBSU's goals and quality culture, FBSU always looks for a management concept that would direct the collective efforts of all managers and employers toward satisfying stakeholders' expectations by continually improving activities. The establishment of the FBSU QMS is essential to provide a definition of the policies, systems, and procedures as a basis for its implementation and continuous improvement

The Quality Manual provides a snapshot of the structure of the university's Quality Management System (QMS), the interrelation of the academic and administrative processes that constitute the system, and the operational arrangements which support the quality assurance standards for teaching and learning and its support services at the University. FBSU's QMS is based on the ETEC-NCAAA standards at the institutional and program level and is also aligned with the international standards of Higher Education.

This Quality manual expresses FBSU's commitment to quality and continuous improvement. It gives an outline of the key processes with references to policies and procedures that comprise FBSU's QMS and provides a holistic and integrative view of the quality management of the university's academic and supporting service activities and practices.

This manual demonstrates a quality assurance system that involves strategic planning, curriculum planning and implementation, data collection, evaluation, continuous improvement, and then internal and external review.

The first section-I of the Quality Manual "Institutional Context and its Commitment to Quality" describes the structure and organization of the university and how it is managed.

This is followed by section-II "Quality Assurance in Academic Programs" which gives an overview of the quality assurance framework and the practices that are implemented at FBSU.

Finally, the Quality Manual is concluded by the section-III "Quality Assurance in Supporting Services", which provides comprehensive information on the considered quality assurance measures in providing services by the various administrative offices.

SECTION – I

INSTITUTIONAL CONTEXT & ITS COMMITMENT TO QUALITY

INSTITUTIONAL CONTEXT

The Fahad Bin Sultan University (FBSU) is a private university in the city of Tabuk that was inaugurated by Prince Sultan Bin Abdul-Aziz in the year 2004 (1424 H). FBSU was established to meet the rapid increase in the Saudi population, the rising demand for higher education, and the enormous pressure on public institutions to educate the growing numbers of young men and women.

FBSU started with one college – the College of Computing. At the beginning of the academic year 2008 (1427 – 28 H) a branch for girls was added and was followed by the addition of the two colleges of Engineering and Business and Management in (2008-2009) 1428 – 29 H. The College of Medicine was later established in 2023 (1444 -45 H.).

Today, FBSU consists of five colleges offering fourteen undergraduate programs that grant the Bachelor's degree and seven graduate programs that grant the Master's degree.

The University is governed by a Board of Trustees chaired by His Royal Highness Prince Fahad Bin Sultan Bin Abdul Aziz.

Vision, Mission, Goals, Objectives & Values

The vision, mission, goals, objectives and values of the FBSU are developed to motivate the efforts of the students, faculty members and all stakeholders and provide them with a clear direction to the future state of the program.

Vision

“To become a leading university in the Kingdom of Saudi Arabia in teaching, research, innovation, and community service.”

Mission

“FBSU is committed to providing high quality education and fostering scientific research, creativity, ethical conduct, integrity, life-long learning and community engagement.”

The mission of FBSU has been translated into a set of clear goals and objectives for facilitating its achievement.

Values

While advancing toward executing its mission, all the members of the FBSU are committed to the following core values

- Academic and Personal Integrity
- Lifelong Learning
- Teamwork and Collaboration

- Accountability and Transparency
- Equal Opportunities and Respect for Diversity
- Inclusion and Respect Pluralism of Opinions and Ideas
- Community Engagement

These core values establish what the FBSU stands for, and they provide the beliefs that guide all its activities.

GRADUATE ATTRIBUTES

Graduate Attributes

- 1) Deep Discipline knowledge and capability.
- 2) Creative and Critical Thinking.
- 3) Digital Capability.
- 4) Communication Skills.
- 5) Moral and ethical awareness.
- 6) Self-directed learning and team work leadership.
- 7) Social responsibility.

Institution Learning Outcomes

Knowledge & understanding:

- 1) Possess deep discipline knowledge in the field of specialty combined with contemporary pedagogical approaches and research methods to implement such knowledge.
- 2) Demonstrate knowledge and comprehension of the concepts, techniques and practices they have gained.

Skills:

- 1) Think creatively and critically and be capable of providing sound and innovative solutions to academic and work-based challenges.
- 2) Be able to adapt to and use the latest technological advancement to better serve their stakeholders and improve their own careers.
- 3) Be able to convey their ideas and communicate effectively with colleagues, stakeholders and society at large.

Values:

- 1) Exercise professional and ethical standards in their careers, workplace and community.
- 2) Demonstrate ability to perform career-related tasks professionally with autonomy and as a team member or leader while retaining a resilient passion for lifelong learning
- 3) Provide a significant and positive contribution to the development of their workplace performance and community involvement

MANAGEMENT AND GOVERNANCE

To achieve the vision and mission of the university, the chart below in Figure 1 introduces the University's Organizational Structure, supporting the academic and administrative operations of FBSU. Below is a list of the key councils and units involved in the implementation of the organizational structure at FBSU:

- FBSU Board of Trustees
- University Council
- Scientific Council
- College Councils
- Department Councils
- Assistants to the President
- President

All job descriptions and duties corresponding with the various elements in the Organizational Chart are articulated to facilitate effective management of FBSU. Terms of reference for the various councils and committees on the institutional and college levels are also in place.

The university is led by the President who is assisted by the Assistant to the President for Academic Affairs (PAAF) and the Assistant to the President for Administrative and Financial Affairs (PAAFA) who oversees the daily operations of the various academic and administrative units. The President is also assisted by Assistant for Legal Affairs, Assistant for Development, and Assistant for Information Technology.

Institutional commitment to quality improvement is shown by establishing the Deanship of Quality and Academic Accreditation, and the institutional level committees based on the 8 ETEC-NCAAA standards to strengthen the quality improvement processes at all levels within the academic and administrative units.

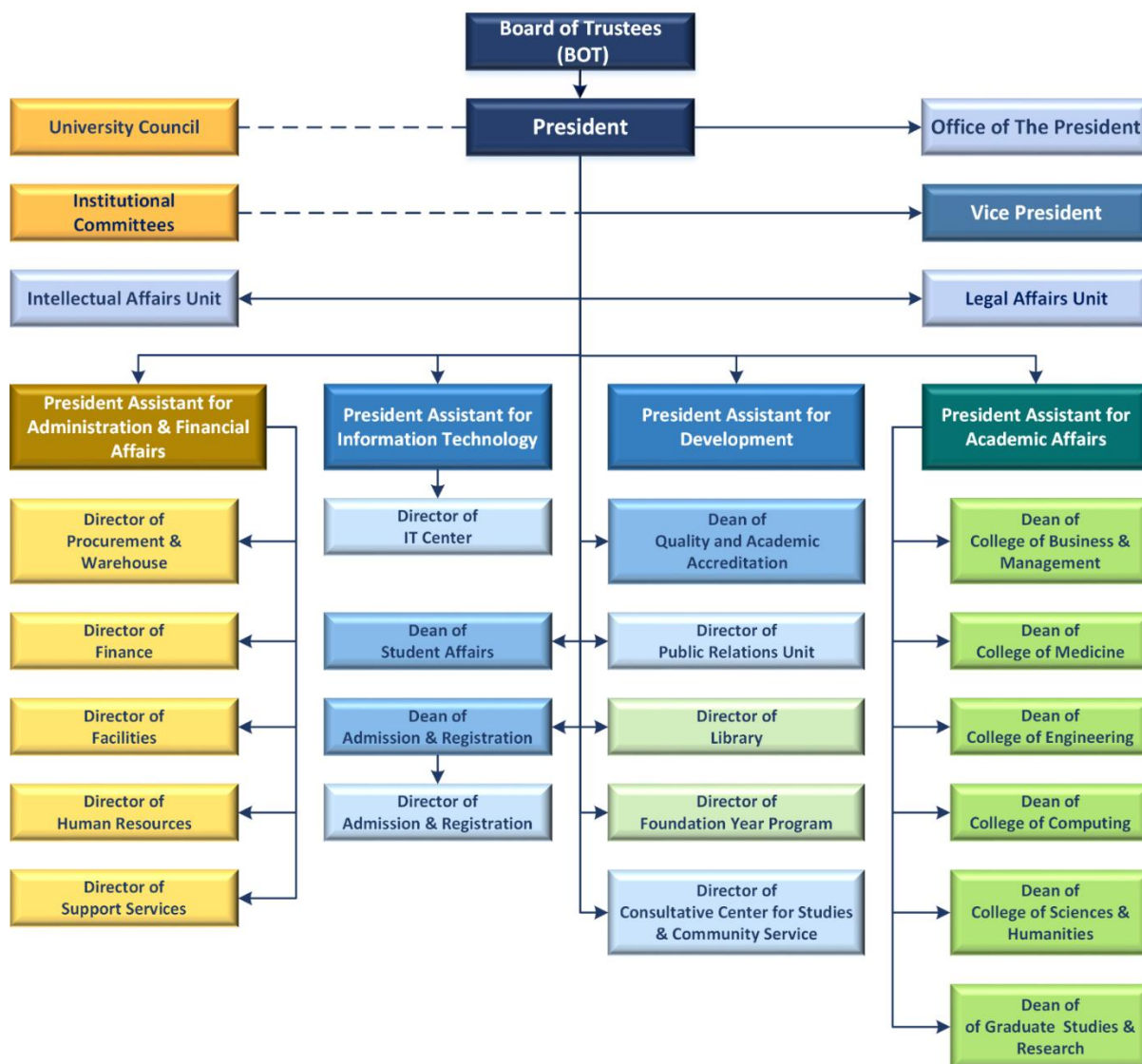


Figure 1: The Governance organizational structure of FBSU

INSTITUTIONAL COMMITTEES

Fahad Bin Sultan University strives to maintain the quality standards in all its educational and management programs, services, systems, and operations in alignment with the National Qualification Framework (NQF) as well as the professional international education standards (e.g., BCS, ABET).

FBSU filed for institutional accreditation in 2023 after successfully completing the self-study report and provided the necessary evidences. The process led to a Conditional Institutional Accreditation with 2 conditions pertaining to: 1) Ensuring implementation of appropriate mission and strategic framework in all its activities, and 2) demonstrating its capacity to have a comprehensive and uniformly implemented quality assurance framework at all its academic programs covering all related activities. Moreover, the NCAAA panel of reviewers also presented their feedback with a set of recommendations.

Accordingly, appropriate action plans have been prepared by the concerned administrative and academic offices for continuous improvement at both the institutional and program levels. This process has involved full commitment from top management down to every organizational unit within FBSU with respect to conducting regular meetings facilitated by the DQAA to following up the on the accreditation conditions and recommendations and the action plans at the institutional and program level to further improve the quality in teaching and learning, and to fulfill the requirement set forth for full accreditation.

Moreover, FBSU obtained the NCAAA approval for international accreditation application of all legible programs from professional international education standards (e.g., ABET, BCS, NAAB, etc.). The College Deans, Department Chairs and Program Coordinators, along with the college and department levels committees, are working relentlessly to assess and fulfill the requirement of the respective international accreditation entity and obtain the programs accreditation before the end of 2025. This process receives the highest level of commitment of top management and the support of DQAA and all administrative units and centers.

Such assessment process in all areas of organizational function provided feedback on quality performance. Based on this feedback, appropriate action plans have been prepared by the concerned administrative and academic offices for continuous improvement at both the institutional and program levels. This process has involved full commitment from top management down to every organizational unit within FBSU with respect to conducting regular meetings facilitated by the DQAA to following up the recommendations given by the external reviewers and the action plans at the institutional and program level to further improve the quality in teaching and learning.

FBSU Committees Framework

The different institutional committees support the management of FBSU, specifically on the aspects of:

- Development and implementation of the Strategic and the Risk Management Plans
- Continuous improvement for quality assurance and accreditation
- Connecting the colleges and departments across the institution

Figure 2 below shows that all institutional committees are under the Institutional Executive Quality Committee. It highlights that all committees are mapped with:

1. NCAAA Standards (The new 8 NCAAA Standards)
2. FBSU's 2023-2028 Strategic Plan Themes

All concerned colleges/departments/centers/offices and units are well represented.

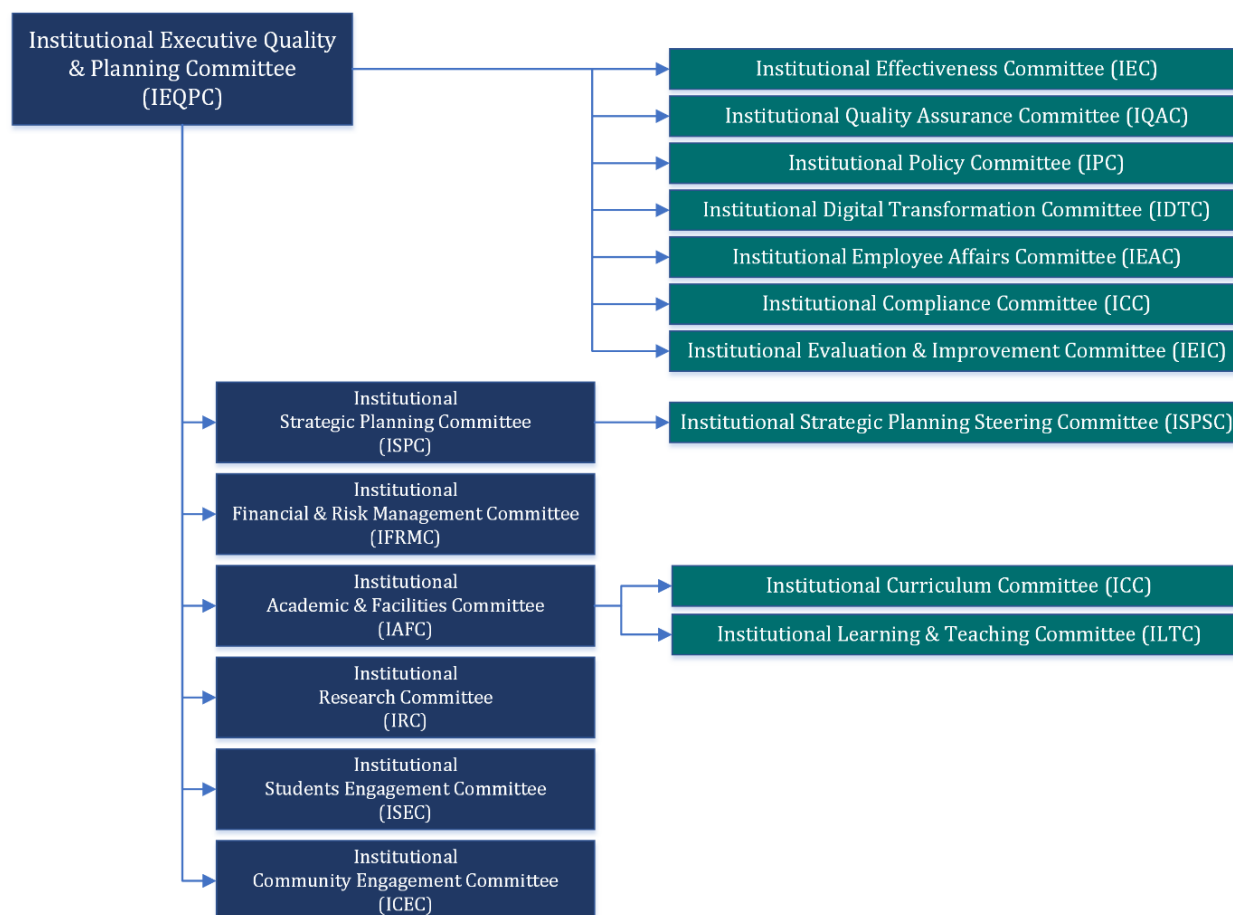


Figure 2: Institutional Committees

Figure 3 below shows the interrelationships among the institutional, college, and department-level committees. It also shows the communication flows and decision-making bodies among the three levels.

For detailed information about the formation and terms of reference for each of these committees, please refer to: [[Institutional Committees - Terms of Reference](#)]

To ensure to disseminate the information down to their respective faculty members, the institutional committees' chairs and all college deans are members of the Institutional Executive Quality Committee (IEQC).

The six college-mandated committees support the institutional committees. The chairs of the college-level committees automatically become members of the institutional committees. For the other institutional committees, colleges are represented as well with their selected faculty members. At the department level, the department heads have the discretion to form their committees based on the department's size.

The Deans/Vice Deans and Chairs coordinate with each other in assigning faculty members in the college and department level committees to ensure equal and fair assignments in the committee memberships.

Lastly, the Board of Trustees, University Council, and Committees chaired by the President are the bodies that can make decisions for the whole university. The College and Department Councils can make decisions that could only affect the college and department level operations based on existing institutional policies. The rest of the institutional, college, and department level committees can only make continuous improvement recommendations.

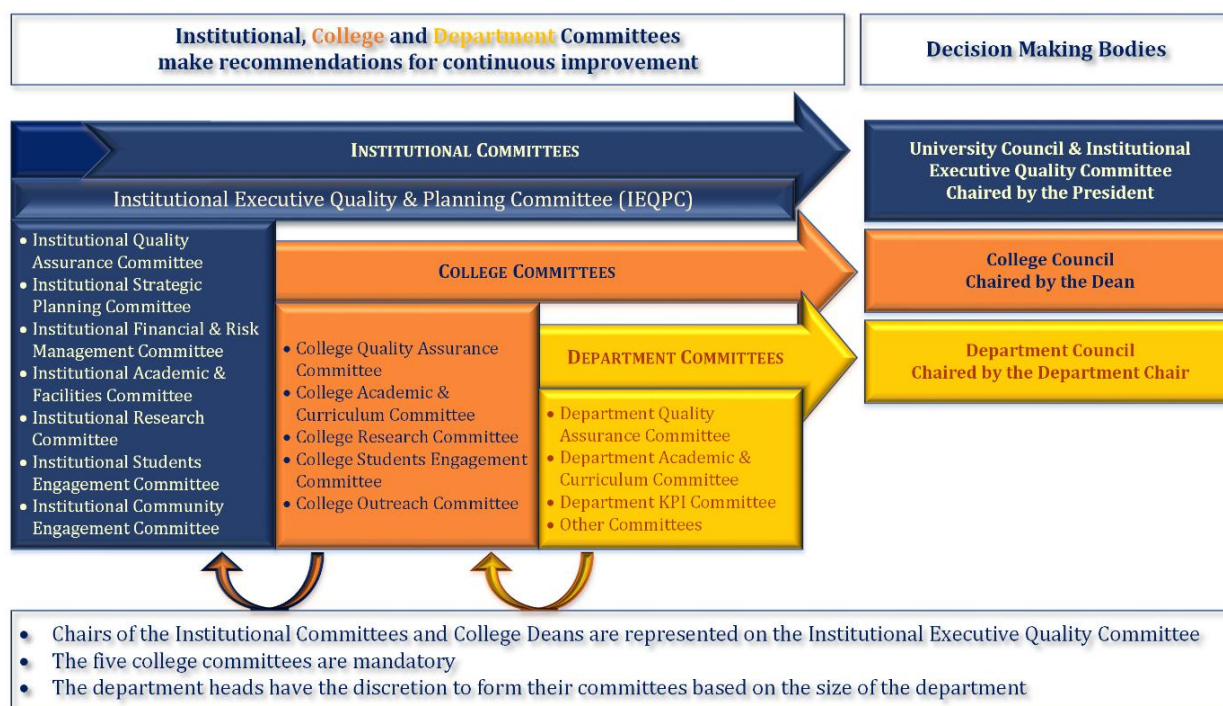


Figure 3: Institutional Committees Framework - Interrelationships among the institutional, college, and department level committees

Institutional Committees Alignment with NCAAA Standards

FBSU Committees alignment with NCAAA Standards is shown in Table 1.

Table 1: Committees and the respective NCAAA Standards assigned to each.

Committee/Center	NCAAA Standards
Institutional Strategic Planning /Steering Committee (ISPC) Institutional Financial & Risk Management Committee (IFRMC)	1- Mission, Vision and Strategic Planning
Institutional Executive Quality & Planning Committee (IEQPC) 1. Institutional Quality Assurance Committee (IQAC) 2. Institutional Policy Committee (IPC) 3. Institutional Effectiveness Committee (IEC) 4. Institutional Compliance Committee (ICC) 5. Institutional Financial & Risk Management Committee (IFRMC)	2- Governance, leadership, and Management
Institutional Academic and Facilities Committee (IAFC) 1) Institutional Learning and Teaching Committee (ILTC) 2) Institutional Curriculum Committee (ICC)	3- Teaching & Learning
Institutional Student Engagement Committee (ISAC)	4- Students
Institutional Employee Affairs Committee (IEAC)	5- Faculty & Staff
Institutional Financial and Risk Management Committee (IFRMC) Institutional Academic and Facilities Committee (IAFC) Institutional Digital Transformation Committee (IDTC)	6- Institutional Resources
Institutional Research Committee (IRC)	7- Research & Innovation
Institutional Community Engagement Committee (ICEC)	8 – Community Partnerships

Evaluating Committee Effectiveness

Evaluating Committee Effectiveness process provides a structured framework for assessing the performance and contributions of all standing and ad hoc committees within the University.

FBSU developed a policy Evaluating Committee Effectiveness (*summarized below*) for evaluating key dimensions such as participation, goal achievement, timeliness, documentation, and innovation, the process ensures that committees remain aligned with institutional priorities and operate with transparency and accountability. Regular evaluations, including annual reviews and post-task assessments, enable the identification of strengths, gaps, and improvement opportunities. Through clear reporting tools and a defined rubric, this approach promotes a culture of continuous improvement and supports strategic decision-making in committee formation, training, and operations.

Evaluation Frequency:

- Annually for standing committees
- Upon task completion for ad hoc or temporary committees

Evaluation Criteria:

Each committee will be evaluated based on the following dimensions:

No	Dimension	Criteria
1	Participation and Engagement	Attendance, active involvement of members, and collaborative decision-making
2	Goal Achievement	Completion of assigned tasks and annual objectives
3	Timeliness	Adherence to deadlines and meeting frequency
4	Documentation and Reporting	Submission of meeting minutes, reports, and deliverables

Evaluation Process:

Step	Description	Responsible Party
1	Define Annual Committee Objectives, initiatives, and action plans	Department Chair + Committee Chair + Committee members
2	Annual Committee Effectiveness Report, and performance report	Department Chair + Committee Chair
3	Evaluation, and Feedback Meeting with each committee to discuss results and areas for improvement	Department Chair
4	Action Plan Development for underperforming committees with follow-up timeline	Committee Chair

Committee Evaluation Rubric:

Dimension	Exemplary (4)	Proficient (3)	Developing (2)	Unsatisfactory (1)
Achievement of Objectives	Exceeded all objectives; delivered exceptional outcomes	Achieved most objectives effectively	Partial achievement; significant gaps	Few or no objectives achieved
Timeliness and Productivity	Always met deadlines; highly efficient	Mostly met deadlines; good efficiency	Often missed deadlines; delays evident	Rarely met deadlines; poor productivity
Member Participation	Full participation and strong collaboration	Good participation; minor issues	Uneven participation; some disengagement	Poor participation; frequent absenteeism
Documentation and Reporting	Meeting agendas, minutes, and reports always clear and timely	Documentation usually complete and timely	Inconsistent documentation; some delays	Poor documentation; missing reports
Innovation and Initiative	Proactively recommended strategic improvements	Occasionally suggested improvements	Rarely contributed new ideas	No initiatives or innovations suggested

Documentation Tools:

1. Committee Annual Action Plan Template.
2. Mid-Year Progress Report.
3. Final committees Action Plans Report.
4. Committee Evaluation Rubric.

Continuous Improvement:

Evaluation results will be used to:

- Inform reconstitution of committees for the next academic year
- Identify training needs or procedural gaps
- Align committee work more closely with university-level strategies and accreditation standards

This evaluation process ensures that all units, and departmental committees are held accountable, perform effectively, and contribute meaningfully to their academic, research, and administrative goals.

STAKEHOLDER ENGAGEMENT FORUM

Purpose:

The stakeholder engagement forums complement the [stakeholders engagement policy](#) and aim to foster open, structured, and inclusive dialogue between the university and its key stakeholders including students, faculty, staff, alumni, employers, industry partners, and the broader community. The purpose is:

- Foster direct engagement with students, faculty, staff, alumni, employers, and community partners.
- Gather feedback on strategic initiatives, academic programs, research priorities, and community engagement.
- Ensure that the university's strategies, policies, and services remain aligned with stakeholder needs, expectations, and emerging trends.
- Strengthen accountability, transparency, and responsiveness across university operations.

Forums may be organized at the university-wide, college, and department levels as appropriate.

Scope:

The stakeholder forums will cover broad strategic, academic, operational, and community engagement topics. The scope includes, but is not limited to:

- Strategic priorities and institutional development.
- Academic programs and quality assurance.
- Research and innovation initiatives.
- Student services and campus life.
- Community outreach and partnerships.
- Employer expectations and labor market trends.

Objectives:

The stakeholder forums are established to:

- Engage stakeholders in the university's decision-making and continuous improvement processes.
- Gather diverse perspectives on key strategic and operational issues.

- Identify needs, challenges, and opportunities from the viewpoint of various stakeholder groups.
- Strengthen transparency and trust between the university and its stakeholders.
- Enhance the relevance and impact of academic programs, research, and community initiatives based on external input.
- Support evidence-based planning and policy development through systematic stakeholder feedback.

Expected Outcomes:

The expected outcomes of the stakeholder forums include:

- A stakeholder feedback report capturing major themes, suggestions, and concerns.
- Actionable recommendations to inform university strategic reviews, planning cycles, and operational improvements.
- Demonstrated stakeholder engagement as part of institutional accreditation, quality assurance, and community partnership initiatives.
- Strengthened relationships with internal and external stakeholders, fostering a culture of collaboration and mutual understanding.
- A continuous improvement cycle where stakeholder input directly contributes to enhancing academic quality, research excellence, institutional reputation, and societal impact.

Structure of the Forum:

Component	Description
Format	In-person.
Frequency	Annual.
Duration day per forum (approximately hours).
Participants	Internal (Students, Faculty, Staff) and External (Alumni, Employers, Community Representatives).
Moderators/Facilitators	Senior faculty members and trained administrative staff.
Sessions	Opening Session (Leadership address)- Breakout Focus Groups (Thematic discussions)- Open Q&A Panel- Feedback Survey.

Forum Design Details:

Opening Keynote	University President presents the university's strategic achievements and future directions.
Breakout Sessions	Participants divided into thematic groups (e.g., academic excellence, research innovation, student life, community service). Each session led by a facilitator.

Open Q&A Panel	Open forum for stakeholders to directly pose questions or suggestions to university leadership.
Feedback Surveys	Distributed immediately after the forum to collect structured feedback on the forum experience and content discussed.

Feedback Mechanisms:

- Real-Time Feedback Collection: During sessions via live polls and moderated discussions.
- Post-Event Surveys: Anonymous structured Stakeholder Consultation Feedback Survey ([Appendix X](#)) to capture satisfaction levels, ideas, and critical feedback.
- Synthesis Report: All feedback will be categorized into thematic areas and reported to university leadership within 30 days' post-event.

Operational Plan for Annual Stakeholder Forums:

The operational plan ensures the stakeholder forum is purpose-driven, inclusive, structured, and produces actionable outcomes that are embedded into institutional improvement cycles.

Phase	Activity/Task	Responsible Unit(s)	Timeline / Milestone	Key Deliverable
Planning	Develop operational plan and forum design	Strategic Planning & Development Center	February (Yearly)	Draft Forum Operational Plan
	Obtain approval for the operational plan	Strategic Planning & Development Center	March	Approved Operational Plan
	Communicate the forum plan to colleges, departments, and stakeholders	Public Relations Office	April	Forum Communication Package
Preparation	Organize logistics (venue, invitations, materials)	Facilities and Procurement Units		Confirmed Venue and Logistics Checklist
	Publish public announcement and invitations	PR Office	May	Publicly Announced Forum Schedule
Implementation	Conduct stakeholder forums	Strategic Planning & Development Center	June (annually)	Completed Stakeholder Forums
Feedback Collection	Collect and document stakeholder feedback		June	Raw Feedback Database and Initial Summaries
Feedback Analysis	Analyze feedback and prepare synthesis report		July	Stakeholder Feedback Analysis Report
Feedback Communication	Share findings with university leadership and participants		August	Stakeholder Feedback Report Dissemination

Phase	Activity/Task	Responsible Unit(s)	Timeline / Milestone	Key Deliverable
Action Planning	Integrate key findings into university planning processes		September	Action Plan Updates Based on Feedback
Continuous Improvement	Evaluate the forum process and recommend improvements		December	Forum Process Evaluation Report

Risk Management and Mitigation:

Potential Risk	Mitigation Strategy
Low participation	Early communication; personalized invitations
Technology failure (for hybrid events)	Backup IT support and contingency systems
Unbalanced stakeholder representation	Targeted outreach to underrepresented groups
Miscommunication of forum outcomes	Clear and timely dissemination of post-forum reports

QUALITY ASSURANCE MANAGEMENT AT FBSU

Since the establishment of Fahad Bin Sultan University (FBSU), assurance of quality in teaching and learning along with support services has been embedded in every activity or service provided at the unit or institutional level.

FBSU management has developed a Quality Assurance Structure in alignment with the ETEC-National Qualification Framework and the 5-year FBSU Strategic Plan for initiating, monitoring, and reviewing the processes and reporting them periodically for continuous improvement. FBSU has adopted ETEC-NCAAA standards for quality in higher education as the choice to drive its quality assurance processes. In order for this goal, all NCAAA instruments relevant to FBSU's programs and administrative units are activated throughout the process. Experienced and dedicated members have been selected as the members of the Quality Assurance Committee at the Program, Department, College, and administrative level. Academic and Administrative unit leaders are either members of these teams or provide leadership and support thoroughly.

In order to fulfill its commitment to quality assurance and to enhance the quality culture, FBSU has established a Quality Assurance and Accreditation Centre (QAAC) in 2008, with a main objective of leading the University's progress towards continuous quality improvements. The Deanship of Quality and Academic Accreditation (DQAA) was established in 2021 in place of the QAAC. The DQAA works within the guidelines, directives and procedures of the National Center for Academic Accreditation and Assessment (NCAAA) and implements its policies and recommendation.

The DQAA was established in pursuit of continuous transformation towards development and excellence in FBSU by devoting efforts and energies to develop the practices and activities of the university system with its inputs, operations, and outputs according to standard criteria in order to achieve quality in education and continuous improvement in performance to provide the best educational service, raise the quality of education and strengthen the quality culture.

The Deanship of Quality and Academic Accreditation works in close coordination Colleges, administrative units, and committees to ensure quality in all the work processes related to teaching and learning along with its support services. Regular meetings are being conducted with the leaders of different Academic and Administrative units to take quality initiatives for imparting high-quality education. The interrelationships between DQAA and Institutional Committees is shown in Figure 4.

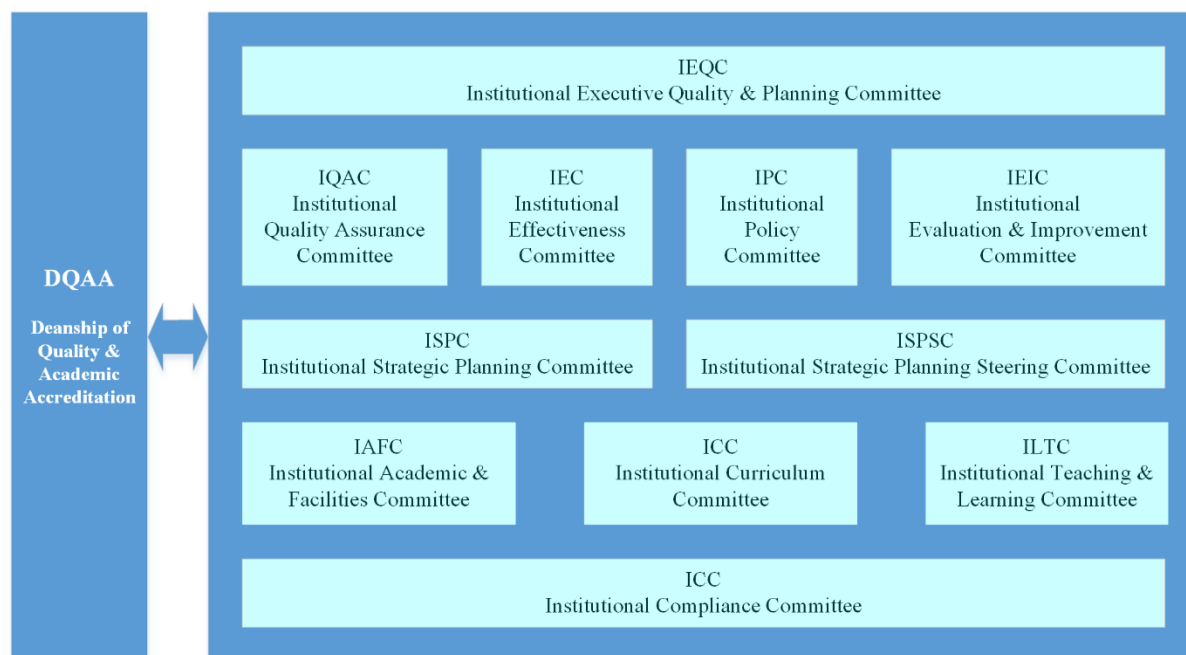


Figure 4: Interrelationships between DQAA and Institutional Committees

The Deanship oversees the academic and administrative quality assurance at the University. The Deanship is responsible for the supervision and coordination of the development of the following: strategy management, quality management in teaching and learning and its support services, and statistics and information of the university as shown in Figure 5.

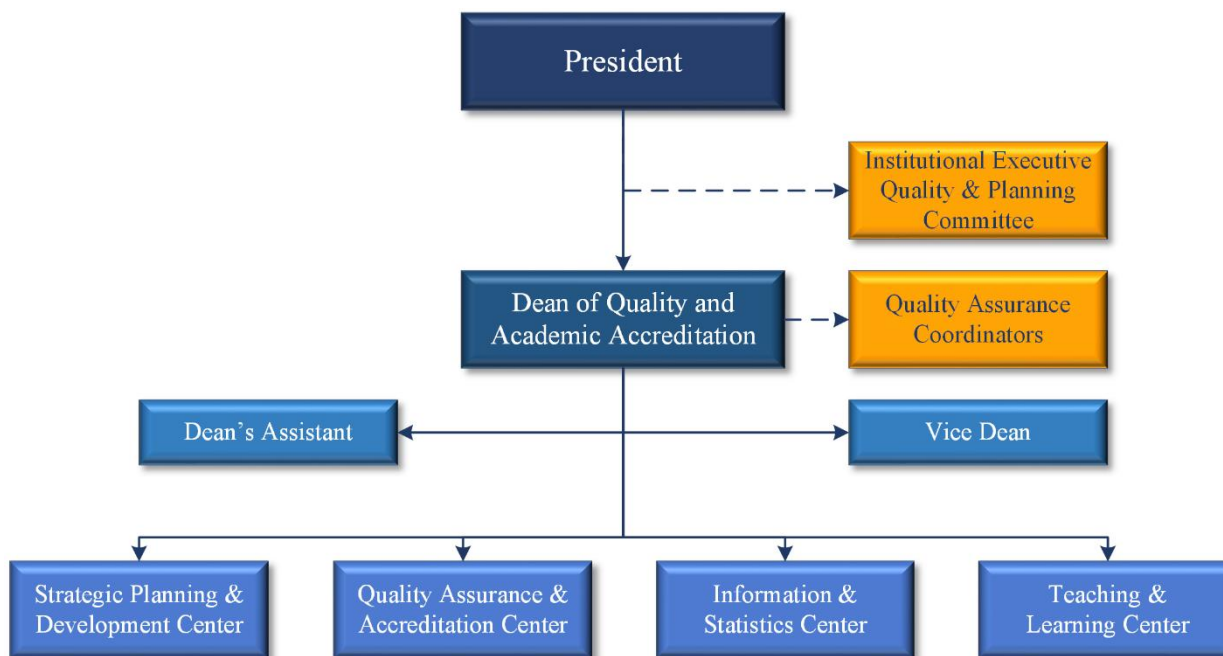


Figure 5: DQAA Organizational Structure

Quality Assurance and Accreditation Center (QAAC)

The Quality Assurance and Accreditation Center is responsible for the quality assurance programs and activities of the University. The Center provides advice to management related to continuous improvement on institutional effectiveness based on the University's strategic plan. The Center also leads and coordinates activities related to academic and administrative quality assurance and the Institutional and Programs accreditation.

The Center is responsible for coordination and guidance for the preparation of periodic self-studies for consideration within the institution and for use in periodic external reviews report directly to the President's office as shown in the organizational structure

The Center works in close coordination with Colleges and Administrative units to ensure quality in all the work processes related to teaching and learning along with its support services.

Terms of Reference:

- Planning, organizing, directing, and administering all policy implementation and review initiatives in line with institutional vision, mission, and values of FBSU.
- Monitoring and ensuring compliance with standards for quality assurance, continuous improvement, and accreditation.
- Monitoring the quality of services provided to stakeholders with respect to academic and administrative support to help the University reify its vision, mission, and core values.
- Maintaining high standards in all services to meet the national and international accreditation requirements in higher education.
- Encouraging continuous improvement in the management of quality academic and administrative processes in accordance to the national and international educational standards.
- Revising and monitoring self-assessment and evaluation processes including report requirements.
- Coordinating and leading the preparation of periodic self-studies for consideration within the institution and for use in periodic external reviews.
- Liaising, sharing and disseminating information about standards of good practice with all organizational departments/units related to accreditation.
- Liaising with national and international accreditation bodies.

Center for Statistics and Information - CSI

The Center for Statistics and Information is the designated center for official data collection, reporting and analysis for Fahad Bin Sultan University. It provides leadership for institutional effectiveness and organizational effectiveness through statistics and information. CSI plays a major role in linking the results of all surveys of the university and providing information and analysis impacting students, human resources, strategic planning, policy formulation, and enrollment management. CSI converts these into Key Performance Indicators. It is responsible for monitoring faculty, staff, and student satisfaction surveys, and responsible for data analysis, preparation of standard reports, as well as the design, development, and implementation of an interactive data reporting system. Moreover, the Center provides relevant, timely, and accurate information to the higher management and faculty in support of the institutional and program accreditation, planning, budgeting, and decision-making process of the university.

Terms of Reference:

- Link the results of all surveys of the university and providing information and analysis impacting students, human resources, strategic planning, policy formulation, and enrollment management. CSI converts these into Key Performance Indicators.
- Provide timely and accurate information via regular and ad hoc reporting of institutional data to Higher and Executive Management.
- Help in providing decision and planning support services to enhance institutional effectiveness and quality through data analysis.
- Provide administrative support for institutional effectiveness activities, especially regarding the evaluation of teaching and student learning outcomes assessment.

Strategic Planning and Development Center (SPDC)

The Center is part of the Deanship of Quality and Academic Accreditation (DQAA) and is responsible for the formulation, implementation, monitoring, and evaluation of the Institutional Strategic Plan of Fahad Bin Sultan University.

It collaborates with all academic & administrative leaders to support FBSU's core mission and assist in building performance measurement and management capabilities. The office engages with the FBSU community to advance the culture of strategic planning and continuous improvement.

Terms of Reference:

In alignment with the vision and mission of the Deanship of Quality and Academic Accreditation (DQAA), the SPDC's role is to:

- Lead the development and implementation of the institutional strategic plan and college strategic plans, aligning with the university's vision and mission.
- Collaborate with academic and administrative leaders to support FBSU's core mission and build performance measurement and management capabilities.
- Engage with the FBSU community to advance the culture of strategic planning and continuous improvement.
- Oversee developmental initiatives, ensuring their successful implementation and impact.
- Monitor and evaluate the effectiveness of the strategic plan and college strategic plans, identifying areas for improvement and providing recommendations for enhancement.
- Foster a culture of sustainability and social responsibility through institutional and college planning, thereby ensuring that the university's practices align with the needs of the labor market and the goals of the Kingdom's vision 2030.
- Provide accurate and timely data and information to support decision-making and improvement.
- Continuously monitor and evaluate the effectiveness of the SPDC's policies and procedures, ensuring that they are aligned with the university's vision and mission.

Teaching & Learning Center

The Teaching and Learning Center provides leadership in promoting success in learning by providing faculty and staff with research on best practices, support for curriculum development and innovation, forums for collaboration, consulting services on pedagogy and technology, workshops, seminars, and other forms of professional development. TLC is responsible for coordinating the Institutional Teaching & Learning Committee meetings with higher management and appointed members. TLC is responsible for communicating significant teaching and learning initiatives to all academic and relevant departments.

Terms of Reference:

- Offering a collection of lectures, workshops, and courses on the different aspects of teaching, learning, and academic contributions.
- Coordinating the Institutional Teaching & Learning Committee meetings with higher management and appointed members.
- Communicating significant teaching and learning initiatives to all academic and relevant departments.

QUALITY FRAMEWORK

The quality framework of FBSU, as depicted in Figure 6, is based on the principle that achieving quality at the University involves not only the academic units but also requires equal importance from the administrative office providing support services and facilities. The Quality Metrics identify the strengths and areas of improvement in the services and facilities offered by both academic and administrative units, aiming for continuous improvement and, consequently, contributing to the University's mission.

To ensure continuous quality improvement at FBSU, the defined quality assurance process cycle, as shown in the figure, is followed. Before delving into the details of the quality process, it is essential to highlight that the quality framework, in its cycle, considers inputs from the following entities in a top-to-down manner: 1) vision, mission, and values, 2) the 5-year strategic plan, 3) annual action plan, and 4) Key Performance Indicators (KPIs) received from academic functions and administrative support.

The quality assurance process cycle can be summarized as follows:

1. Develop an action plan for FBSU aligned with the four entities mentioned above. This involves:
 - Defining a set of actions to achieve the predefined goals and objectives.
 - Establishing an appropriate set of KPIs and targets for evaluating the plan's performance.
 - Determining a timeframe for implementing the action plan.
 - Identifying the beneficiaries.
 - Coordinating and discussing the plan while identifying effective ways of implementation.
2. Implement the action plan in coordination with various FBSU units. This stage also includes gathering opinions from internal stakeholders through meetings and surveys.
3. Monitor the achievement of the action plan.
4. Review the performance using the defined KPIs and targets. Prepare an annual achievement report and recommendations, and share it with the respective unit.
5. Update the action plan based on the review findings and recommendations for continuous improvement.

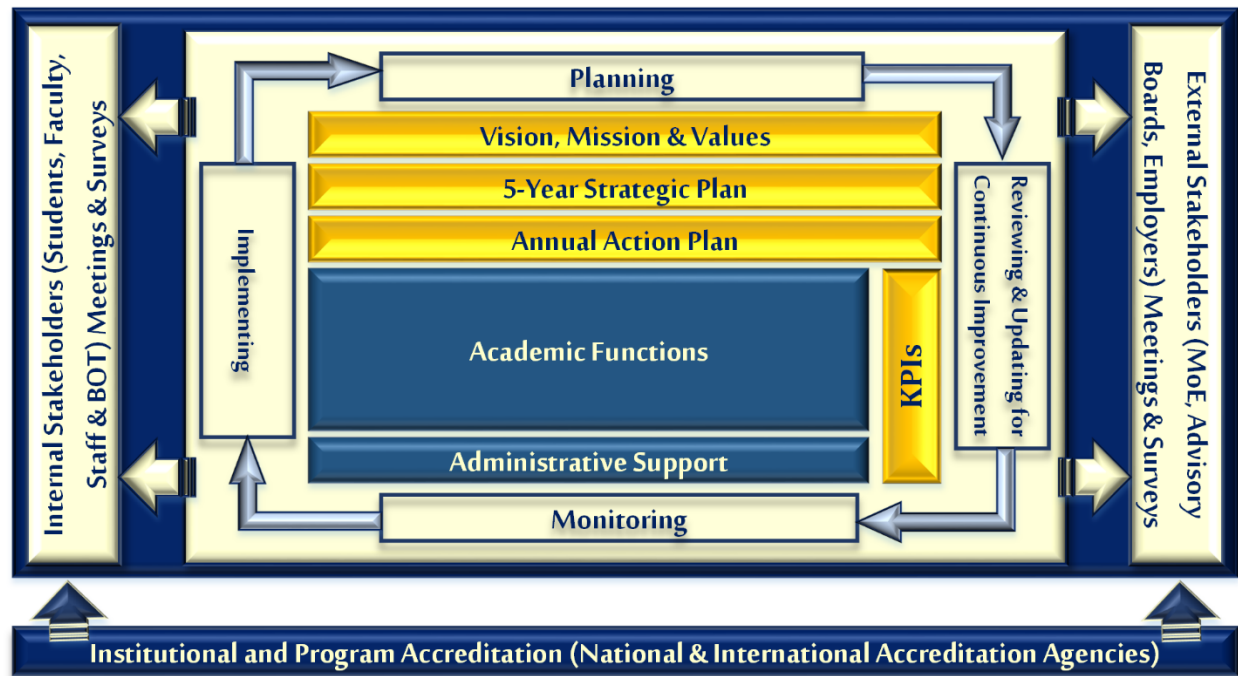


Figure 6: FBSU Quality Framework

Reasons for Establishing the Quality Assurance System (QAS)

The purpose of QAS is:

- To guarantee that various FBSU units adhere to NCAAA standards and requirements and apply high standard of quality in their practice.
- To assess FBSU against appropriate performance indicators using internal and external benchmarking or reference points with analysis and improvement applications.
- To ensure that various units of FBSU are committed to improvement.
- To confirm the University mission is used as a basis for planning, decisions and implementations.
- To ensure that the operational plans are effectively implemented in all University units.

FBSU views the Quality Assurance System as a set of monitoring processes implemented to help the University achieve excellence in teaching, research and community service. Besides, achieve internal customer (students) satisfaction and external customer (workplace) gratification by creatively fulfilling the NQF-KSA graduate attributes.

FBSU QAS aims to achieve the two instinct principles: "Fit for purpose" and "commitment to improvement." In FBSU, this is translated to graduates fit the workplace and capable of pursuing postgraduate studies, instructors conduct up to date research that could solve

surrounding community challenges. In particular, the QMS aims to:

1. Achieve student and Job markets satisfaction.
2. Achieve continuous improvement in QAS effectiveness.
3. Increase the faculty and staff capability on quality.
4. Enhance operational excellence to support QAS.
5. Ensure stakeholders involvement.

Quality Management Scope

The framework of the quality management system includes all policies, processes and procedures related to the academic and administration aspects of the university to ensure the provision of high-quality academic programs that conform to the future requirements of the community in Tabuk and the Saudi community in general. FBSU is therefore committed to implementing all academic quality requirements for the following reasons:

1. Ensure that FBSU have an effective system to provide high levels of learning and education in all programs offered, and support their improvement.
2. Follow-up the quality of academic programs and their conformity with the requirements of local and international accreditation authorities.
3. Develop structured policies to make the necessary changes in courses and programs.
4. Periodically review of key performance indicators for development and improvement.
5. Create an annual reporting system for all programs and write the appropriate action plan in response to recommendations from reviewers at different levels.
6. Regularly inform the University Council and the Board of Trustees of the reports on the programs to ensure that the required improvement is made in a timely manner.

QUALITY MODEL ADOPTED BY FBSU

The University is dedicated to attaining a high level of quality in both academic and administrative practices. ETEC-NCAAA's 7 Standards function as a meticulously designed tool for evaluating quality at FBSU. The Quality Assurance cycle at FBSU, depicted in Figure 7, focuses on ensuring quality in teaching, learning, and its supporting infrastructure and services.

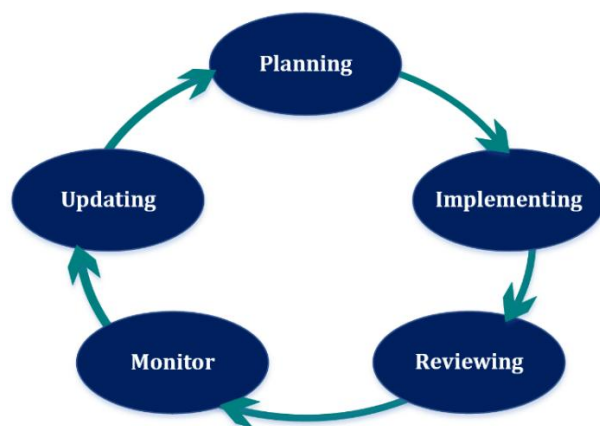


Figure 7: Quality Model (PIMRU)

Fahad Bin Sultan University requires all supporting services to adhere to the PIMRU (Plan, Implement, Monitor, Review, and Update) or PDCA (Plan, Do, Check, and Act) quality cycle to ensure the quality of services provided to stakeholders.

1) Planning

In this phase, all the important quality elements required by the DQAA are identified for planning the services such as:

Standards: An integral element of the FBSU quality model is the EEC-NCAAA standards at the institutional level. The standards are relevant to teaching and learning, institutional governance, and supporting services. All services are provided in alignment with the performance criteria mentioned in the standards.

Policies and Procedures: Policies and procedures, essential for any organization, serve as a roadmap for daily operations. They ensure compliance with laws, guide decision-making, and streamline internal processes. University policies are designed to guide and empower community members to uphold FBSU's values and expectations. These strategic guidelines and policies support the success of students, faculty, and staff in their daily work. All supporting services adhere to relevant FBSU policies and procedures, with this manual detailing the policies in each chapter to affirm the consistent provision of quality services to FBSU stakeholders.

Risk Management: Effective risk management is crucial in key operational areas of FBSU to address and manage threats and opportunities that may impact the successful delivery of operating plans. In this context, a 'threat' refers to an uncertain event with a negative effect on the likelihood of achieving FBSU's strategic goals, while an 'opportunity' is an uncertain event with a favorable effect on the likelihood of achieving FBSU's strategic goals.

FBSU's perspective on acceptable risk involves striking a balance between risk aversion and opportunity. In this regard, FBSU adheres to the Saudi Arabian CG framework (Resolution No. 8-16-2017; amended 20/5/2019) which emphasizes the importance of forecasting risks, disclosing them with transparency, and demonstrating commitment to effective risk management systems and internal control (Sarbanes-Oxley Act 2002, Section 404 Guideline, page 3).

Three types of risks will be identified:

- Academic Risk
- Financial Risk
- Other Risks

The [Risk Management Policy](#) outlines FBSU's approach to risk management and the mechanisms employed to identify, assess, and manage risks. All unit managers are required to be responsible and accountable for risk management. This policy is applicable to all academic and non-academic departments and staff at Fahad Bin Sultan University.

Mission Development: The mission of the FBSU is developed to motivate the efforts of the students, faculty members and all stakeholders and provide them with a clear direction to the future state of the program. It is important to recognize that the development of the mission, and goals is not a one-time activity, it is a regular, ongoing process, in order to align them with the faculty and University mission, vision and goals.

To guarantee a high quality mission, and values, their development is done through a collaborative process that involves students, faculty members, administrative staff and a sample of stakeholders from the local community. Mission review process includes distribution of questionnaires all stakeholders. The DQAA then compiles the responses, and the results are then given to the Institutional Executive Quality Committee that includes top management to fine-tune the findings. Following that, the findings are shared with a strategic planning team to establish the University's goals approved by the FBSU board of trustees. Finally, university management unanimously approves the mission and communicated to all stakeholders. Furthermore, the University Mission will be prominently displayed throughout campus.

Strategic Plan: The mission needs to be translated into a set of clear goals and objectives for facilitating its achievement. The purpose of strategic planning in universities is to establish overarching goals and objectives in accordance with professional and accrediting body regulations. These, in turn, offer guidance for long- and short-term action plans and ensure that decisions and operations align with the institution's mission, vision, and values. A strategic plan typically focuses on mid to long-term (5-year) goals and outlines the basic strategies for achieving them.

FBSU develop a new strategic plan every five years. The plan is formulated through collaboration among the Institutional Strategic Planning Steering Committee and the Institutional Strategic Planning Committee with active participation of the academic and administrative units. The strategic planning process comprises four major consecutive phases:

1. Strategy Formulation – Conducting an environmental scan and SWAT analysis to better understand the situation at FBSU.
2. Validation and Delivery – Preparing the document for presentation to stakeholders.
3. Implementation and Monitoring – Putting the plan into effect and overseeing its execution.
4. Evaluation and Feedback – Providing feedback to departments and units on successful implementation and recommending corrective actions.

The structure of the FBSU strategic plan starts by doing PESTEL and SWOT analysis, and revision of the mission, vision and values, and the formulation of the strategic priorities (Figure 8). This was followed by the formation of the strategic and operational goals, these goals are then realized in the action plan through a set of initiatives and KPIs to measure how well the university succeeded in achieving the operational goals.

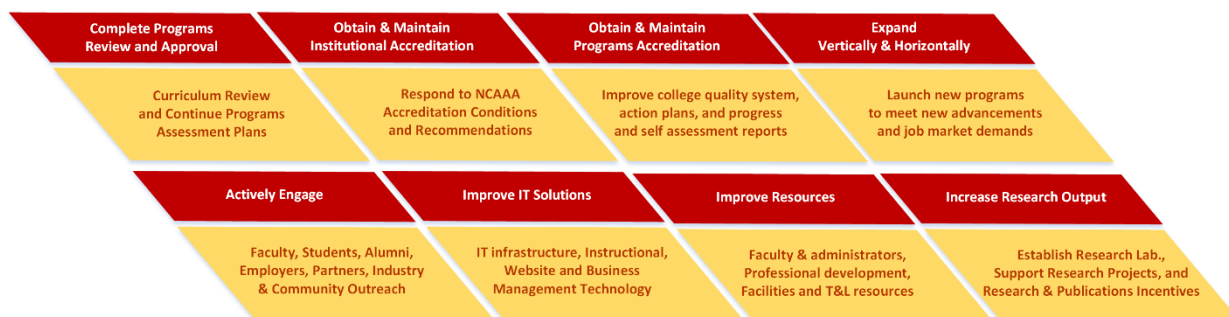


Figure 8: FBSU strategic priorities

Figure 9 shows how the program mission and objective fit together into the big operational picture. Every action in the program is contributing to fulfil its mission.



Figure 9: The organizational Structure underlying the strategic planning

The focus areas of the FBSU are:

1. Students.
2. Faculty members.
3. Research.
4. Facilities and infrastructure.
5. Community.

These focus areas lay the foundation of the FBSU strategic planning.

After the setup of the highest level strategic plan, the next step is to cascade it down through all the organizational levels and stakeholders in the institution. Cascading the strategic plan gets all committees, teams, and individuals working together towards fulfilling FBSU mission.

Annual Action Plan: The 5-year strategic plan is translated into annual operational plans, with goals and objectives achieved through planned initiatives outlined in annual operation plans. Each administrative unit and college is mandated to create an annual action/operational plan to fulfill the strategic goals and objectives assigned to them.

Documentation: A Quality Assurance System (QAS) is a formalized system that documents processes, procedures, and responsibilities to achieve quality policies and objectives. This ensures consistent delivery of a quality product or service to the customer, a practice strictly followed by all academic and FBSU.

A well-designed documented system offers numerous benefits, including routine adherence to quality standards, minimization of potential errors, quick access to relevant data, and easy monitoring for analysis and adjustments. QAS documentation serves various functions such as information communication, evidence of conformity, and knowledge sharing.

To ensure conformity, completeness, and accessibility of relevant QA documents, FBSU developed and implemented an automated document archiving and database system for the

different types and levels of quality related documents, such as a Quality Assurance manual, quality policy, documented procedures, and work instructions. The system provides templates for planning, implementing, and reporting for major QA functions. The system also provides access to the strategic and operational plans, bylaws, policies and procedures, and surveys and KPIs reports.

Resources: The annual operational plan guides every academic and administrative entity in identifying all kinds of resources to implement actions for achieving strategic plan goals and objectives. Resources, whether consumable or non-consumable items, are utilized to accomplish specific actions. Consequently, academic and administrative units prepare an annual budget based on operation plans and other operating costs at the end of the fiscal year, and submit it to higher management for approval. Resources are procured upon requests filed by the concerned deans/chairs of academic unit and heads administrative unit before the timeline for action commences.

Key Performance Indicators: A Key Performance Indicator (KPI) is a measurable metric demonstrating how well an organization performs against its key business objectives and priorities. Identifying and measuring the right KPIs facilitates faster achievement of results.

KPIs enable FBSU management to assess the performance of academic programs and supporting services. This allows relevant academic and administrative entities to make fact-based decisions and critical adjustments to execute strategies and achieve goals.

FBSU adopts ETEC-NCAAA Institutional and Program KPIs (refer to the [KPI Policy](#) for details) to monitor the quality of academic programs and support services. Additionally, it incorporates strategic KPIs to measure strategic objectives and monitor the performance of services provided to stakeholders.

Employee Evaluation: To ensure the quality of services provided by individual employees, whether faculty or administrative staff, FBSU directors and Deans conduct an annual evaluation for all faculty members and administrative staff.

2) Implementation

Every academic and administrative unit provides services in accordance with terms of references by implementing the annual operational/action plan. They communicate with respective units or Higher Management for support if required to complete the necessary actions. College and departmental committees are regularly contacted to implement actions within their scope of work.

3) Monitoring

The DQAA monitors the accomplishment of the action plan throughout the academic year and provides support to academic and administrative units based on requirements. Quality assurance concerns are discussed in regular Departmental, College, and Institutional Committee and University Council meetings. Appropriate improvement or corrective actions are taken after evaluating all options.

Programs working towards fulfilling the national/international accreditation and enhancing quality in all aspects, submit annual progress reports to Higher Management to ensure quality at the institutional and program level.

The DQAA, in cooperation with the academic and administrative units, computes and publishes KPI results for the previous academic year and establishes internal and external benchmarks for the next academic year.

4) Reviewing

The academic and administrative units in question submit annual accomplishment reports with evidences, disclosing the percentage of completion for each action and providing reasons for any unaccomplished tasks. Additionally, the DQAA monitors the completion of mandatory tasks in the administrative calendar assigned to academic and administrative units. The calendar reflects reporting from various hierarchical levels of the institution.

The closing the loop process, conducted at various levels of FBSU administration, is a crucial step in the Quality Assurance Cycle. This cycle, based on PIMRU and corresponding to academic years, involves faculty and staff and encompasses aggregating performance indicator results at the program, college, and institutional levels. The results are analyzed, leading to recommendations for changes in strategies to achieve measurable objectives effectively.

5) Updating

Incomplete actions are revisited in the upcoming academic year to close the loop. Additional actions may be taken to enhance the delivery of educational programs and the overall quality of education.

The Deanship of Quality and Academic Accreditation (DQAA) prepares a compiled feedback report for every program. This report includes an executive summary of all program statistics, strengths, areas of improvement, and recommendations for continuous improvement. The report is based on annual program reports, including KPIs and Program Assessment Reports from all colleges. The report is then submitted to concerned academic units for further improvement in achieving the University's mission. The SPDC also provides feedback on the action and progress reports individually to the respective units.

The implementation, monitoring, reviewing and updating calendar of the strategic plan is depicted in Table 2.

Table 2: Strategic plan implementation, monitoring, reviewing and updating calendar.

Activity	Responsible Unit	Timeline	Details
Strategic Plan Launch Communication	University President's Office	January (Year 1)	Official announcement; distribute to colleges and departments.
Initial Implementation Planning	Colleges & Departments	February–March (Year 1)	Each unit develops action plans aligned with strategic goals
Annual Strategic Plan Review	Statistics and Information Center	August (Every Year)	Submission of KPI reports by units; dashboard updates
	Institutional Strategic Planning Committee	October (Every Year)	Evaluate annual progress; recommend adjustments
	Strategic Planning & Development Center + Institutional Strategic Planning Committee	December (Every Year)	Annual report; revise KPIs if necessary
KPI Revalidation and Benchmarking	Strategic Planning & Development Center + Colleges	February (Every 2 years)	Review KPIs against national and international benchmarks
External Advisory Board Review	University President + Advisory Board	March (Every 2 years)	Gather external feedback on progress and relevance
Comprehensive Mid-Term Plan Review	Strategic Planning & Development Center + Institutional Strategic Planning Committee.	June (Year 3)	Mid-term evaluation; strategic adjustments if needed
Stakeholder Consultation Workshops	Strategic Planning & Development Center + HR + Deanship of Student Affairs+ Alumni Office + Center of Studies and Community Service	May–June (Every 2 years)	Engage students, faculty, staff, employers for feedback
Final Strategic Plan Evaluation	Institutional Executive Quality & Planning Committee	December (Year 5)	Final evaluation report; prepare for next strategic cycle
Next Strategic Plan Drafting Begins	Strategic Planning & Development Center + Institutional Strategic Planning Committee.	January (Year 6)	Based on final evaluation outcomes

SECTION -II

QUALITY ASSURANCE IN ACADEMIC PROGRAMS

RELATIONSHIP OF FBSU QUALITY ASSURANCE SYSTEM TO NQF

The FBSU Quality framework is in compliance with the National Qualification Framework (NQF). The NQF provides an integrated system that incorporates a high level of quality, competitiveness, and international recognition of national qualifications. It is designed to ensure that the quality of higher education is equivalent to high international standards and is widely recognized as such in the international academic and professional communities. The NQF represents a comprehensive and uniform system for building, organizing, and categorizing qualifications into levels based on learning outcomes. It is a functional tool to facilitate the transfer of knowledge, skills, and values across the various work environments at both national and international levels. The principal elements in the NQF are:

Educational Levels

The NQF has identified various education levels, shown in Figure 10, which are tiered vertical pathways graded according to the depth of learning areas and their accumulation in educational programs. They begin at early childhood education for the entry-level and end at level 8, the doctoral program. Each level has a specific Scope and depth and represents a scientific progression of the learning outcome, and each includes a description of the associated knowledge, skills, and values.

FBSU is currently offering two levels of education: Bachelor's and master's degree programs.

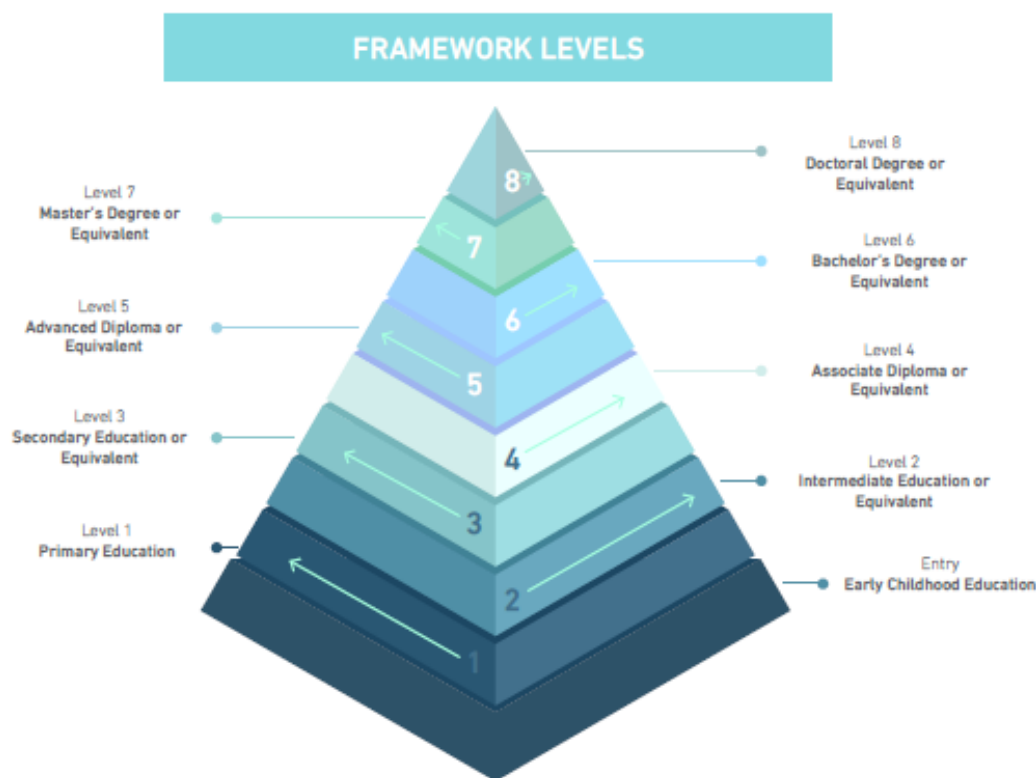


Figure 10: National Qualification Framework Levels

Credits Hours and Placement Requirements

The minimum required credit hours for undergraduate level programs are: 30 for an associate diploma degree, 60 for a diploma degree, and 120 for a bachelor's degree. The minimum required credit hours for postgraduate programs with a major project option are 39 for a master's degree and 30 credit hours for a doctorate degree. For postgraduate programs with a thesis option, the minimum required credit hours are 24 for a master's degree and 12 for a doctorate degree.

Placement Requirements for bachelor's degree

At FBSU, the Colleges of Business and Management, the College of Computing, and the College of Science and Humanities offer 4 years undergraduate degree programs equivalent to more than 130 credit hours. The Colleges of Engineering and the College of Computing offer 5 years undergraduate Engineering degree programs equivalent to more than 158 credit hours. The College of Medicine offer 7 years undergraduate degree in Medicine equivalent to 250 credit hours.

Secondary degree is required for admission for all the undergraduate programs, and the science stream secondary degree is required for all science programs in computing, engineering and medicine programs.

Placement Requirements for Master's degree

FBSU offer 2 years Master degree programs equivalent to 42 credit hours for project (non-thesis) option and to more than 39 credit hours for thesis option. Bachelor degree in related field is required for admission for all the Master programs.

Learning Domains

The broad categories of learning outcomes that a program is intended to develop. The NQF groups the kinds of learning expected of students into three domains and describes learning outcomes at each level in each of these groupings. They are organized according to each level specified in the Framework. These levels are progressive in terms of scope and sequence, from level 1 (early childhood education) to level 8 (doctoral education). They are expressed in terms of cognitive dimensions, skills, and values according to the following:

- 1) **Knowledge and Understandings:** This includes the knowledge and understanding of a learner of facts, concepts, principles, theories, processes, and procedures provided for in learning, work, or profession with consideration for:
 - Depth of knowledge can be general or specialized.
 - Breadth of knowledge can range from a single topic to a multi-disciplinary area of knowledge.

- Types of knowledge range from concrete to abstract from segmented to cumulative.
 - Complexity of knowledge type, depth, and breadth.
- 2) **Skills:** Defines what a graduate can do in the field of study, work or profession and can exhibit in applied settings (such as in school, training, internships, work, etc.). Skills are described in terms of the kinds and complexity of skills. The various types of skills are:
- Cognitive skills: These include critical thinking and problem-solving skills, inquiry, and creativity.
 - Practical and physical skills “Psychomotor skills”: These include using appropriate materials, devices, and tools, and applying motor and manual skills with ingenuity.
 - Communication, information technology and numerical skills: These include written, verbal, and non-verbal communication, numeracy skills, and the use and production of information and communication technology.
- 3) **Values, Autonomy, and Responsibility:** Represent the terms of principles, ethics, and standards that are oriented towards well-being and success in the areas of life, work, or profession including:
- Academic, professional values, and ethics.
 - Continued self-learning and autonomy.
 - Teamwork and responsibility.

COMPLIANCE OF FBSU QUALITY ASSURANCE FRAMEWORK WITH NQF

FBSU's Program or Institutional Assessment Process follows the NCAAA Standards. The best practices relevant are 3.1, 3.2, & 3.3 at both the institutional and program levels. Please find a diagram of the relevant best practices below as shown in Figure 11.

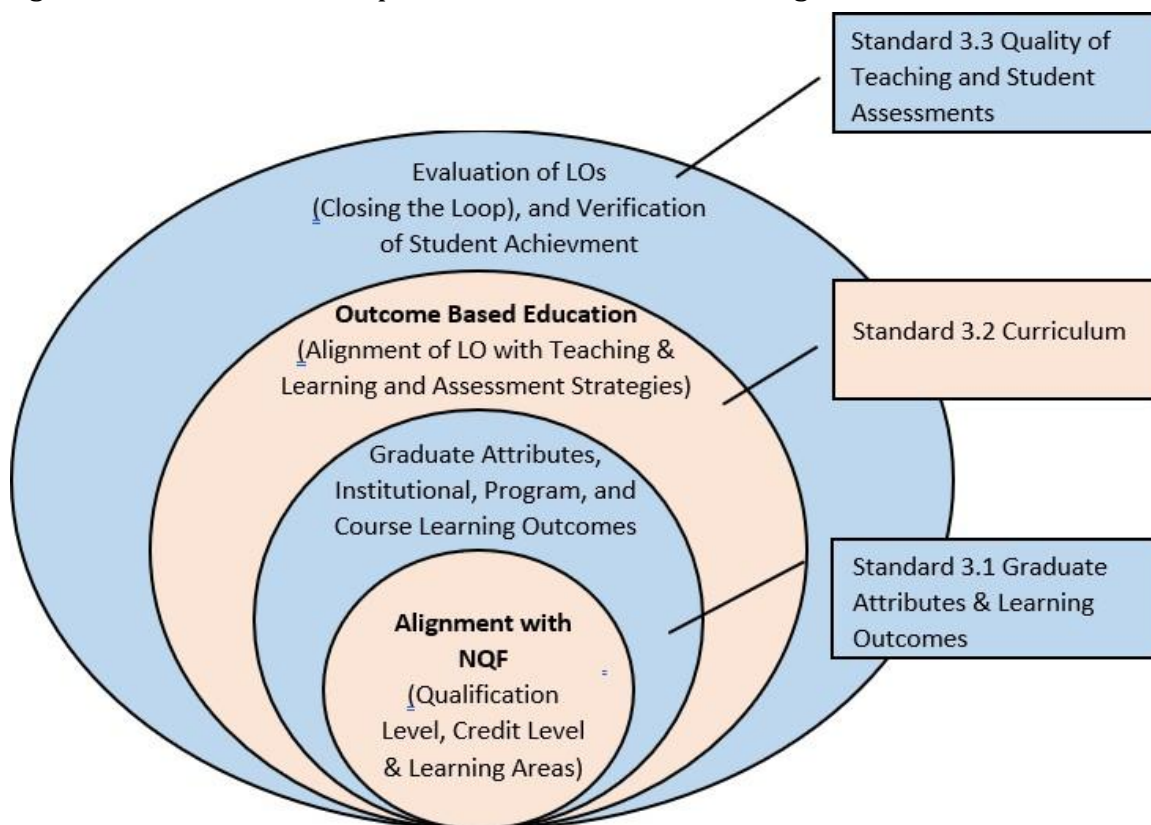


Figure 11: Compliance of FBSU Quality Assurance Framework with NQF-Saudi Arabia

It is important to highlight that the quality management system (QMS) at FBSU is aligned with the National Qualifications Framework as well as NCAAA's standards. The above diagram portrays this connection. The NQF is the guide for aligning our educational practices in line with the job market needs by ensuring quality practices across the educational sectors. FBSU has adopted the NQF as its framework for the quality management system at the university.

For detailed information about the National Qualification Framework, refer to the link [Guidelines for NQF](#).

NCAAA STANDARDS FOR TEACHING AND LEARNING

The National Qualifications Framework and the standards established by the National Accrediting Body, NCAAA, are the key elements used for creating the quality management system at FBSU. As our main business is teaching and learning, mentioning the action best practices for *Standard 3, Teaching and Learning*, is relevant. All colleges within FBSU are required to ensure that these best practices are implemented.

1. Services provided by DQAA and the institutional Committees for the Design and Development of Academic Programs

DQAA, in collaboration with the institutional committees IQC, ILTC, and ICC, ensure all academic programs at all levels meet the standards and requirements of the National Qualifications Framework (NQF). The programs follow the approved academic plan and implement FBSU Curriculum Review and Development policy in all the academic programs with the support of college and departmental level curriculum committees. The students and the faculty apply these teaching and learning policies. FBSU ensures the unified curriculum plans, program, and course specifications are followed in both the campuses, which are benchmarked with the professional bodies' specifications and meet the labor market and society needs.

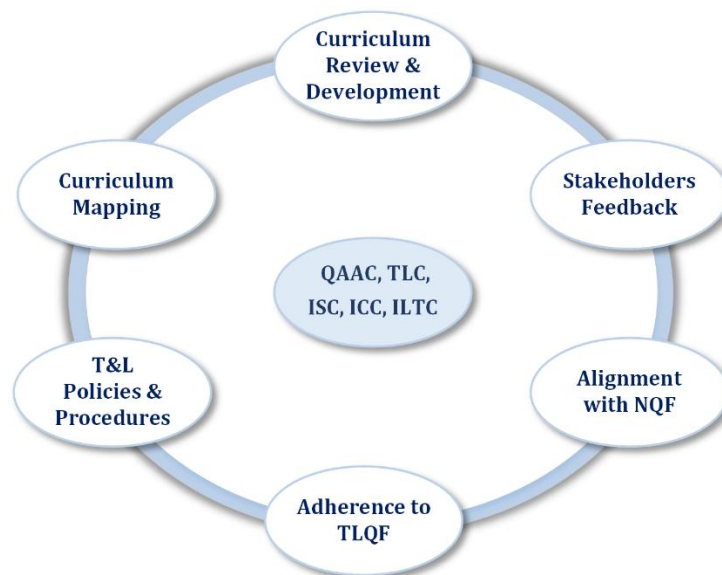


Figure 12: Design and Development of Academic Programs

2. Services provided by DQAA and the institutional Committees for the Graduate Attributes and Learning Outcomes

DQAA in coordination with the institutional Committees ILTC and IQC ensure the establishment of the graduate attributes in every academic program and their mapping

with that of the institutional Graduate Attributes. The graduate attributes are approved and publicized based on their consistency with NQF, FBSU's mission, educational goals, development requirements, and labor market.

The policies and procedures for assessing the graduate attributes and selecting assessment instruments using direct and indirect methods are documented in the [FBSU Assessment Handbook](#).

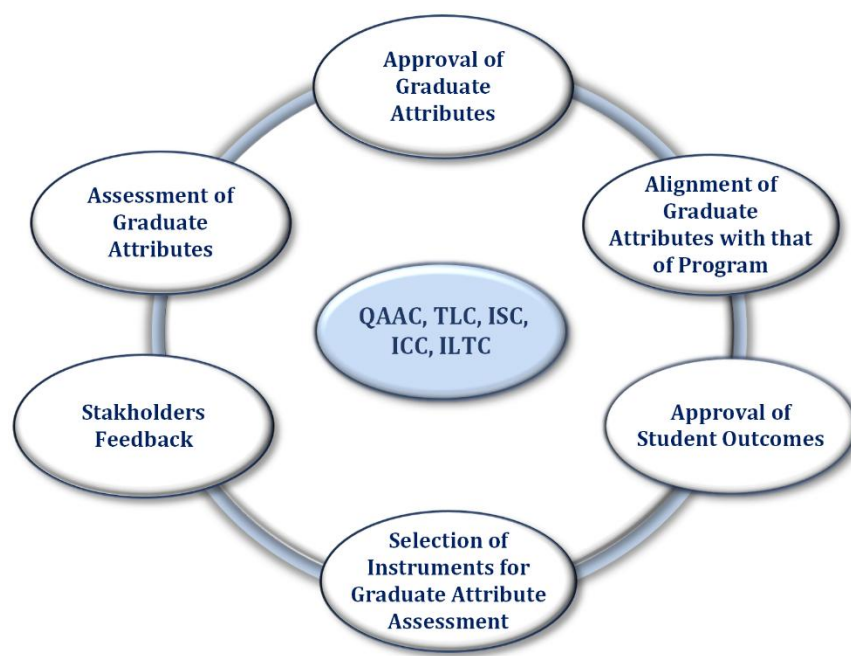


Figure 13: Graduate Attributes and Learning Outcomes

3. Services provided by DQAA and the institutional Committees for the Academic Programs Quality Assurance and Enhancement

DQAA in collaboration with the ILTC and IQC ensure that the updated program specifications are used, which might have changed due to major and/or minor changes in the academic program. The annual program reports prepared by the academic program are thoroughly reviewed by the QAAC and updated, which helps the departments make qualitative and quantitative fact-based decisions. TLC regularly monitors the learning outcomes assessment at the institutional, program, and course level. QAAC is responsible for the internal review of the programs after every four years. CSI helps the academic program in providing the necessary data for the preparation of the annual program reports. SPDC helps the academic program in reviewing the accomplishment of the strategic and operational plans. QAAC also supports the academic programs in performing independent verification of student achievement.



Figure 14: Academic Programs Quality Assurance and Enhancement

Refer to the FBSU [Teaching and Learning Quality Framework Policy](#).

PROGRAM CONSTITUENCIES AND THEIR FEEDBACK FOR PROGRAM DEVELOPMENT

The stakeholders of the learning outcome assessment process have their unique perspectives and interest in the success and continued improvement of the education offered at FBSU.

The main stakeholders are as follows.

1. **Students:** FBSU students who are completing their last semester before graduation. Since the students are the direct beneficiaries of a quality education system, their immediate feedback through student council, exit surveys, and interviews have high importance in FBSU's education system.
2. **Alumni:** Alumni are former students who graduated with an undergraduate or graduate degree. They are expected to become competent, professionally, and socially responsible individuals after earning a bachelor/master's degree in any academic program offered at FBSU. Their successful career, reputation, or professional growth demonstrates the achievement of learning outcomes. Alumni input is obtained through an alumni survey as well as the annual Advisory Board meeting (members are from the industry as well as our alumni).
3. **Faculty:** Faculty are the academic teaching staff of a university including Professors of various ranks, lecturers, and/or researchers. Their primary educational responsibility is to create an environment for leading the students to an effective lifelong learning process. Faculty input is obtained through regular Department/College Council meetings, Curriculum Committee meetings, and course reports.
4. **Employers/industry partners (and postgraduate universities):** Employers are those who are expected to hire new employees (graduated from FBSU) who are competent, productive, self-motivated learners, team players, and have excellent communication skills.
5. **Professional and Accreditation Bodies:** The Professional and Accreditation Bodies also play an important role in specifying the learning outcomes and/or their assessment strategies.
6. **Higher Education Institutions (Graduate Studies Program):** The entry requirements for higher education institutions also provide a coherent source for keeping the learning outcomes up to date.

ADVISORY BOARDS

FBSU mandates every college to establish an advisory board for every academic program composed of a group of academicians and community (alumni and employers) stakeholders from various local or international institutions/organizations. Advisory boards are composed of accomplished experts offering innovative advice and dynamic perspectives in their respective specializations. Members' diverse range of knowledge(s), skills, and abilities help the college ensure the academic program offerings are current. The board members meet once a year, provide strategic direction, guide quality improvement, and assess program effectiveness. The meeting minutes are recorded, and recommendations are taken into consideration for continuous improvement.

For further details, kindly refer to [College & Program Advisory Boards Bylaw](#) and [FBSU Advisory Board Bylaws](#).

STRUCTURED FEEDBACK COLLECTION AND ANALYSIS

Figure 15: Feedback Analysis Flow Chart

Action Taken:

Standardized Teaching Evaluation Surveys are administered to students at the end of each semester for all courses. Surveys include qualitative comments regarding:

- Teaching effectiveness
- Course content
- Assessment practices
- Learning resources

Responsible Unit:

Deanship of Quality and Academic Accreditation and Department Chairs

Formal Feedback Analysis Procedure

Survey results are compiled and analyzed statistically (mean scores, satisfaction rates) and thematically (for open-ended comments). Departmental Teaching Evaluation Reports are generated for each academic department. Each report identifies:

- Strengths (areas scoring above benchmark)
- Weaknesses (areas scoring below benchmark)
- Common qualitative themes (student concerns or suggestions)

Responsible Unit:

Quality Assurance Office + Institutional Research Unit

Action Planning Based on Feedback

After analyzing survey data, each Department Council holds a Teaching Review Meeting every semester to:

- Review the feedback analysis.
- Identify courses or teaching practices needing improvement.
- Recommend specific actions (e.g., changes to course content, new teaching strategies, more active learning, revision of assessments).

Course Action Plans are created by faculty members for courses scoring below target benchmarks or receiving significant negative feedback.

Responsible Unit:

Department Chair + Faculty Members

Documenting Changes and Improvements

A "**Feedback-to-Action**" is completed for each course at the end of the Course report:

- Key feedback points
- Actions taken or planned
- Responsible faculty members
- Timeline for implementation

This documentation is stored in the department's Annual Quality File and submitted to the Deanship of Quality and Development for central monitoring.

Feedback-to-Action Summary Sheet

Item	Description
Department of
Semester
Course Name and Code	(e.g., Electrical Circuit – ELEE)
Instructor Name	Dr.
Summary of Key Student Feedback	List major points raised in surveys, e.g., "Lectures were too fast", "More practice problems needed", "Unclear grading criteria"
Analysis of Feedback	Brief comment from the department, e.g., "Students struggled with rapid delivery; lacked hands-on practice."
Action Plan	Describe the action(s) the instructor/department will take, e.g., "Instructor will slow pacing, allocate more time for examples, and post additional practice sheets."
Responsible Person(s)	Dr.
Department of
Semester
Timeline for Implementation	Starting Semester
Monitoring Method	Review next end-of-semester survey.
Follow-up Status	To be filled after next survey, e.g., "Improvement observed, satisfaction increased by 20%".

TEACHING AND LEARNING POLICIES

The main policies for teaching and learning are listed below for easy reference:

1. [New Faculty Orientation Policy](#): It is mandatory for all new faculty members to participate in this orientation. The orientation should take place during the non-teaching week before the start of the academic semester.
2. [Course Design Policy](#) provides general guidelines for designing courses and modules in the context of an OBE (Outcome Based Education) system. It is required for all new faculty to attend a course design training on course design according to FBSU's policies and procedures.
3. [Course Syllabus Policy](#) provides guidelines for preparing course syllabus based on NCAAA and the program international accreditation agency requirements.
4. [Course Specifications Policy](#) provides guidelines for preparing course specifications based on NCAAA and the program international accreditation agency requirements.
5. [Course Learning Outcomes Development Policy](#) provides guidelines for preparing CLOs based on NCAAA and the program international accreditation agency requirements.
6. [Program Amendment Policy](#) provides roles and guidelines for making and approving major and minor program amendment.
7. [Program Specifications Policy](#) provides guidelines for preparing program specifications based on NCAAA and the program international accreditation agency requirements.
8. [Learning Outcomes Assessment Policy](#) outlines the main T&L quality assessment processes at the course and program level, including the use of an electronic software system.
9. [Professional Development Policy](#) emphasizes continuous improvement, requiring faculty members to remain current and up to date regarding their fields and the required T&L skills. The quality assessment- improvement cycle will not be complete without continuous support for the professional development of faculty members in all skill areas relating to Teaching and Learning. This policy describes FBSU's strategy regarding the development of T&L skills.
10. [Classroom Observation Policy](#) provides guidelines on the process and procedures of classroom observations.
11. [Program Assessment Policy](#) outlines the main T&L quality assessment processes at

the program level, including the use of an electronic software system. The policy uses outcome-based education as its underlying philosophy and employs several tools to assess T&L Quality and recommend improvements. The review process is cyclic, and the results are raised every year to the TLC.

12. [Curriculum Review and Development Policy](#) describes in detail the principles and procedures that should be followed to develop new curricula or review existing programs. The policy ensures that all FBSU programs remain current, sound, and relevant.
13. [Field Training Manual](#) associates academic studies with the business sector. The Program emphasizes theoretical studies and, at the same time, exposes the students to the practical environment of selected institutes and corporations during the training period. This method enables students to gain hands-on experience in a realistic environment. The goal of this practical stage is to enhance the students' skills and relate principles and perceptions to the practical field by allowing them to acquire new skills, getting them used to creative thinking, and permitting them to practice problem- solving and decision making.
14. [E-Learning Management System \(E-LMS\) Policy](#) enhances the quality and effectiveness of the University's E-LMS to provide students with access to fundamental course materials, resources, and any needful information.
15. [Teaching and Learning Quality Framework Policy](#) provides IT support for faculty members to become more effective and more efficient in their teaching. It is to encourage collaboration with students and faculty members to promote high-quality educational experiences at Fahad Bin Sultan University via the use of technology in the T&L cycle in line with the Learning Outcomes. The Teaching and Learning Center and the eLearning Center support, promote, and encourage faculty and staff to apply technology in their day-to-day academic and administrative-related tasks/responsibilities.
16. [Academic advising Policy](#). All faculty members within a degree-granting program will be assigned students to advise. Academic advising is mandatory for all students to be able to register for their courses. All faculty members are required to learn about the procedures required for advising by attending the workshop sessions offered by the Teaching and Learning Center TLC and the Deanship of Admission & Registration Office DAR. The purpose of this policy is to provide guidelines on academic advising for University-Level students.
17. [Student Special Needs Policy](#) identifies problems and other difficulties with students perceived as being somewhat challenged and in need of more remediation than the

norm in that group or class.

18. [Academic and Intellectual Freedom Policy](#) and [Academic Misconduct Policy](#) emphasize academic honesty and the avoidance of plagiarism and all practices that contradict well-established academic integrity standards.
19. [Faculty Code of Conduct Policy](#) provides guidelines on the code of ethics of faculty members. It is intended to help maintain a high standard of professional conduct and personal integrity. It provides the grounds for informing faculty members of the acceptable behavior that is consistent with the university mission, the system of values of the society, and the universally accepted principles or norms of academic professionalism.
20. [Faculty Evaluation Policy](#): Faculty members at FBSU will undergo annual performance evaluations to ensure their academic performance is commensurate with their rank and professional responsibilities, and that they remain accountable for their academic performance within their College. The results of the Annual Performance Evaluation are directly linked to decisions regarding faculty annual increments, contract renewals, and professional development plans.
21. [Assessment Moderation Policy](#) sets the mechanism to ensure that the assessment is consistent, fair, and accurate which results in making reliable evidence based decisions for the improvement of assessment practices.

KEY PERFORMANCE INDICATOR FRAMEWORK

FBSU KPI Framework is in line with the National Center for Academic Accreditation and Evaluation (NCAAA).

FBSU has adopted 23 NCAAA Key Performance Indicators (KPIs) at the institutional level, which are in line with the institutional accreditation standards. These indicators are annually measured to ensure the quality of the institution.

FBSU has also adopted 17 ETEC-NCAAA Program Key Performance Indicators at the program level which are in line with the 6 program accreditation standards. Additionally, FBSU has also adopted 19 NCAAA KPIs at the graduate program level which is in line with the 7 graduate program accreditation standards. These KPIs are annually measured to ensure the quality of the undergraduate and graduate programs.

In addition to that FBSU had adopted 51 KPI at the institutional level which helped in measuring the objective of the 3rd FBSU Strategic Plan.

KPI Framework Principles

To appreciate the extent to which academic programs' objectives are achieved and strategies are efficient, it is vital to define key performance indicators to tell stakeholders whether the academic program and the university are going in the right direction or not. The following principles should be taken into consideration:

1. **Relevance and Alignment with Strategy:** Each KPI is aligned with Fahad Bin Sultan University's Strategic Plan, so that it is transparently relevant to institutional goals (explicit and implicit). Key to satisfying this criterion is the need to ensure that the KPI is measuring both strategic performance and operational goals.
2. **Clarity:** The KPI provides clarity and a detailed explanation. It is also drilled down through the organization so that the FBSU view contributes to the overall institutional performance.
3. **Driver to impact real change:** In order to control the performance being measured and be able to impact real change, target benchmarking is set up and is accordingly compared.
4. **Data Availability:** All selected KPIs will be calculated based on the data availability. However, in the case of data unavailability for desired indicators, the indicator should be noted as an "aspirational indicator" and actions identified to source the required data in the future.
5. **Mixture of Quantity and Quality Indicators:** FBSU follows a holistic approach by

measuring its performance annually, quantitatively, and qualitatively through the KPIs.

6. **Ability to cascade indicators down to the relevant College and Department (Program) levels:** The KPIs at the institutional level are cascaded down either to the college or program level as shown in Table 3 below:

Table 3: Cascading KPI Flow from University to Department.

	Category	University	KPIs	College	KPIs	Department	KPIs
Goals	Goals related to teaching and learning						
	Goals related to research						
	Goals related to community services						

Program/Institutional KPI Terminology

For KPI Analysis, the following areas need to be highlighted:

- **Benchmark/KPI** refers to the key performance indicators of the program/institution approved by the institution (if applicable at this time). This includes both the NCAAA suggested KPIs chosen and all additional KPIs determined by the program (including 50% of the NCAAA suggested KPIs and all others).
- **Target Benchmark** refers to the anticipated or desired outcome (goal or aim) for each KPI. The target KPIs will be set by the KPI owners with the discussion of the KRC Committee.
- **Actual Benchmark** refers to the actual outcome determined when the KPI is measured or calculated.
- **Internal Benchmarks** refer to comparable benchmarks (actual benchmarks) from inside the program (like data results from previous years or data results from other departments within the same college).

- **KPI Analysis** refers to a comparison and contrast of the benchmarks to determine strengths and recommendations for improvement.
- **New Target Benchmark** refers to the establishment of a new anticipated or desired outcome for the KPI that is based on the KPI analysis.
- **FBSU Data Related Policies:** The overarching aim of the benchmarking and KPI policy is to contribute to the continuous improvement of FBSU performance.
 1. [KPI Policy](#): Key Performance Indicators and benchmarking should be embedded in practice within all key areas of the University for continuous improvement and demonstrated within the formation of its standards of practice and comparators for performance. This policy mandates how the University will review and assure the achievement of performance through the comparison of external and internal benchmarking. Adherence to this policy contributes to efficient and effective evidence-based decision practices.
 2. [Benchmarking Policy](#): FBSU compares its academic and administrative processes to analogous universities, both local and international; to track to what extent FBSU is on course to achieve its vision. Fahad Bin Sultan University (FBSU) believes that KPI (Key Performance Indicators) and benchmarking should be embedded in practice within all key areas of the University for continuous improvement. Adherence to benchmarking policy ensures efficient and effective evidence-based decision practices which are inevitable for this outcome. The purpose of the benchmarking policy is to provide clear guidance on all activities, warranting that the benchmarking process at FBSU is advanced in a synchronized, cautious, and systematic manner.
 3. [Proactive Data Collection & Management Policy](#): FBSU shall adopt a proactive, systematic data collection and management process to make sure that required data is available in a timely manner and with the expected levels of accuracy and integrity.
 4. [Data Access Policy](#) establishes clear guidelines for all staff members to follow in reference to data access and to maintain the privacy of the information of all the stakeholders involved.

Data Sources of NCAAA KPIs

The KPI framework of FBSU is based on several surveys and data provided by various units/centers. Table 4 below includes 23 Institutional and 4 Program KPIs.

Table 4: Data Sources of NCAAA KPIs

Data Sources	Description	Collection Timeline	Data Validation & Availability
Strategic Planning & Development Center (SPDC)	<ul style="list-style-type: none"> Percentage of achieved indicators of the institution strategic plan objectives [1 KPI] 	May-June	Aug
Quality Assurance and Academic Accreditation Center	<ul style="list-style-type: none"> Proportion of accredited programs [1 KPI] 	May	June
Center for Statistics and Information (CSI)	<ul style="list-style-type: none"> Faculty Satisfaction Survey (FSS) Program Exit Survey (PES) Course Evaluation Survey (CES) Employee Satisfaction Survey (EES) Students' evaluation of the quality of the programs Satisfaction of beneficiaries with learning resources Students' satisfaction with the offered services Satisfaction of beneficiaries with technical services Students' evaluation of the quality of the courses [P] [5 KPIs] 	May	June
Human Resources Office (HR)	<ul style="list-style-type: none"> PhD Holder percentage per department Faculty Retention Rate Percentage of teaching staff distribution [P] [3 KPIs] 	May	June
Deanship of Admissions & Registration (DAR)	<ul style="list-style-type: none"> Student Faculty ratio Retention Rate Graduation Rate (Completion rate) Average number of students per class [P] [4 KPIs] 	May	June
Alumni Centre (Deanship of Student Affairs - DSA)	<ul style="list-style-type: none"> Alumni Survey Employers Survey Graduates' employability Employers' evaluation of the graduates Students' performance in the professional examinations [P] [3 KPIs] 	May	June
President's Assistant for Administrative and Financial Affairs (VR-AFA)	<ul style="list-style-type: none"> Total Operating Expenses Percentage of self-income of the institution [2 KPI] 	August	August
Research & Initiatives Center (RIC)	<ul style="list-style-type: none"> Rate of Publications Rate of Citations Faculty contribution to Research Number of patents, innovations, and Awards 	March	April

Data Sources	Description	Collection Timeline	Data Validation & Availability
	<ul style="list-style-type: none"> Research budget External funding by PhD holders [6 KPIs] 		
Consultative Center for Studies and Community Services (CCSCS)	<ul style="list-style-type: none"> Satisfaction of beneficiaries with the community services Rate of Community education programs [2 KPIs] 	April	April

FBSU Surveys used for calculating Institutional and Program level KPIs

The following Figure 16 shows the type of the surveys used for calculating the following KPIs

- Students' evaluation of the quality of the programs
- Satisfaction of beneficiaries with learning resources
- Students' satisfaction with the offered services
- Satisfaction of beneficiaries with technical services
- Students' evaluation of the quality of the courses [P]
- Employers survey
- Alumni survey

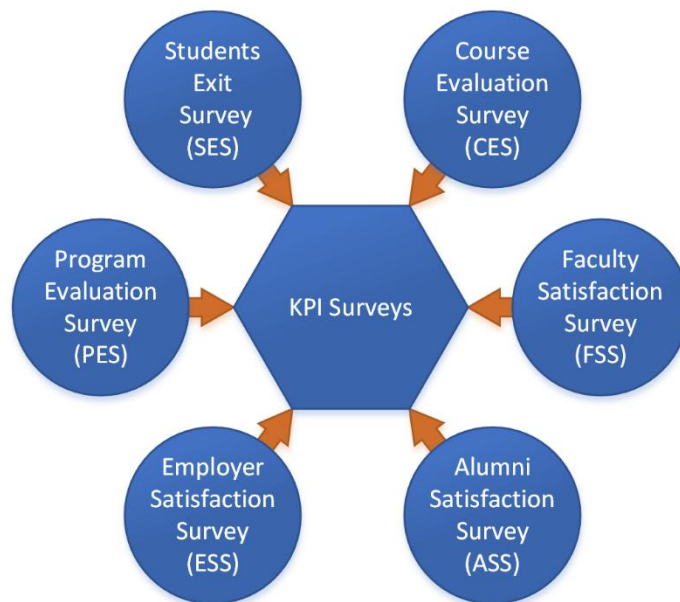


Figure 16: FBSU Surveys For calculating KPI Results

Governance, Report, and Monitoring

Given the significance of KPIs, FBSU conducts KPI analysis regularly for its quality assurance enhancement and continuous improvement endeavors.

The KPIs are reported annually, and improvement actions follow accordingly.

The KPI monitoring process is a continuous process. It provided as below in Figure 17 which data availability, validity, and analysis are shown including specified timeline:

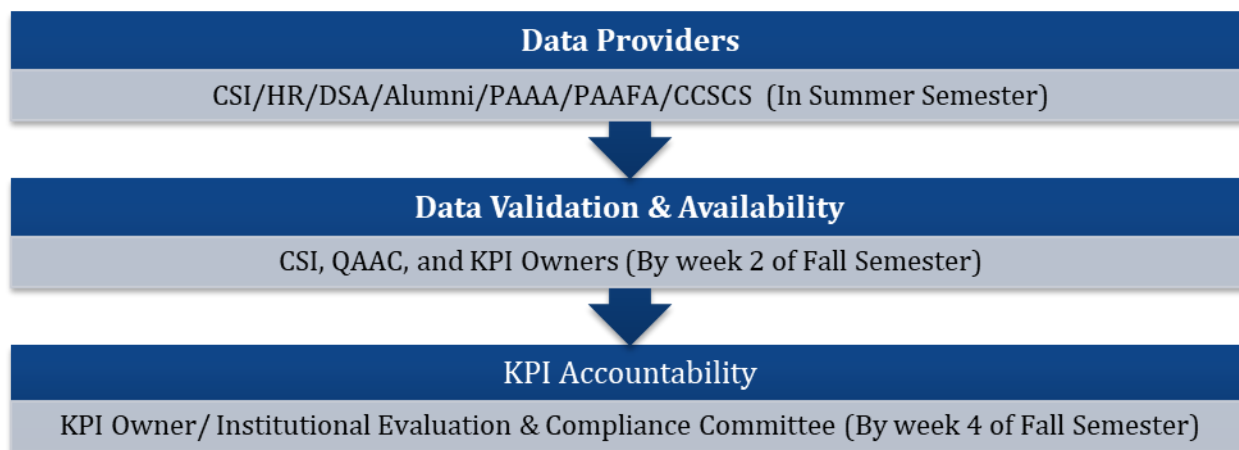


Figure 17: FBSU KPI Monitoring & Governance Process

Table 5: KPI Data Providers and KPI Owners

Description	KPI Owners (Institutional level)	KPI Owners (Program level)
<ul style="list-style-type: none"> Percentage of achieved indicators of the institution strategic plan objectives [1 KPI] 	<ul style="list-style-type: none"> Institutional Strategic Planning STEERING Committee (ISPSC) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Proportion of accredited programs [1 KPI] 	<ul style="list-style-type: none"> Academic Programs (Dean & Chairs) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Students' evaluation of quality of the programs Satisfaction of beneficiaries with learning resources Students' satisfaction with the offered services Satisfaction of beneficiaries with technical services Students' evaluation of the quality of the courses [P] [5 KPIs] 	<ul style="list-style-type: none"> Institutional Learning and Teaching Committee (ILTC) Institutional Academic and Facilities Committee (IAFC) Institutional Academic and Facilities Committee (IAFC) Institutional Online Education Committee (IOEC) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> PhD Holder percentage per department Faculty Retention Rate Percentage of teaching staff distribution[P] [3 KPIs] 	<ul style="list-style-type: none"> Institutional Employee Affairs Committee (IEAC) 	Academic Programs (Dean & Chairs)

Description	KPI Owners (Institutional level)	KPI Owners (Program level)
<ul style="list-style-type: none"> Student Faculty ratio Retention Rate Graduation Rate (Completion rate) Average number of students per class [P] [4 KPIs] 	<ul style="list-style-type: none"> Institutional Employee Affairs Committee (IEAC) Institutional Learning and Teaching Committee (ILTC) Institutional Students Engagement Committee (ISEC) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Alumni Survey Employers Survey Graduates' employability Employers' evaluation of the graduates Students' performance in the professional examinations [P] [3 KPIs] 	<ul style="list-style-type: none"> Institutional Students Engagement Committee (ISEC) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Total Operating Expenses Percentage of self-income of the institution [2 KPI] 	<ul style="list-style-type: none"> Office of the Vice President for Financial and Administrative Affairs (VPFA) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Rate of Publications Rate of Citations Faculty contribution to Research Number of patents, innovations, and Awards Research budget External funding [6 KPIs] 	<ul style="list-style-type: none"> Executive Research Committee (ERC) 	Academic Programs (Dean & Chairs)
<ul style="list-style-type: none"> Satisfaction of beneficiaries with the community services Rate of Community education programs [2 KPIs] 	<ul style="list-style-type: none"> Institutional Community Partnerships Committee (ICPC) 	Academic Programs (Dean & Chairs)

External Benchmarking for Institution and Program

External Benchmarks refer to comparable benchmarks (actual benchmarks) from similar programs/institutions that are outside the program/institution (national or international).

Competitive - Local/National/Regional

This allows for a form of benchmarking in terms of the university's mission; size, type of institution, research productivity, staffing levels, enrolments, and any other factors.

Aspirational - International

This allows for a form of benchmarking in terms of the university's mission strategically to be envisioned by Saudi Vision 2030.

FBSU has established benchmarking partnerships with the following institutions:

- Local/National Partnership: Effat Uni, Alyamamah Uni, Mohammed Bin Fahd Uni,
- Regional Partnership: American University of Sharjah.

PowerBI Dashboard

PowerBI Dashboards are used to provide required data and information to support academic programs, University entities, and other stakeholders. The dashboards are directly connected to the FBSU database that contains data from various data sources, such as e-registration data, HR data, survey data, etc. Additionally, dashboards contain the current and historical data that are presented in various visual and tabular formats to help provide insights about the metrics that guide the achievement of academic program goals and objectives. Therefore, the PowerBi dashboards will be developed and used for the following main purposes:

- Automating data collection process
- Disseminating the required data with stakeholders
- Automating KPI calculation process
- Providing data and statistics for annual reports.
- Providing data for further analyses related to quality assurance processes

GRADUATE ATTRIBUTES AND LEARNING OUTCOMES

Graduate Attributes are broader than learning outcomes. They help in developing academic, citizenship, and career competencies. They are not orienting a framework of educational outcomes that a university community agrees its graduates should develop because of completing their studies successfully.

Learning Outcomes:

The Learning Outcomes at the university level are classified into three categories where they must be all aligned with each other:

- Institutional Learning Outcomes
- Program Learning Outcome
- Course Learning Outcome

Institutional Learning Outcomes (ILOs)

ILOs are those skills, values, ideas, and qualities that FBSU believes are important for all undergraduates and postgraduates. Graduate Attributes are the qualities, skills, and understandings FBSU agrees its students should develop during their journey within the institution. They are qualities that also prepare graduates as agents for social good in an unknown future.

Program Learning Outcomes (PLOs)

PLOs are those outcomes each specific program finds important for its graduates to have mastered while in the program. FBSU adopts an outcome-based teaching and learning strategy which mandates every program to identify a list of PLOs to achieve the graduate attributes.

1) College of Business Administration

- Bachelor of Business Administration (BBA)
- Bachelor of Marketing (BMK)
- Bachelor of Human Resources (BHR)
- Bachelor of Logistics & Supply Chain Management (LSCM)
- Bachelor of Accounting (BACCT)
- Bachelor of Finance (BFINA)

2) College of Computing

- A Bachelor of Computer Science with one track:
- A Bachelor of Science in Information Technology with two tracks:
- Bachelor of Sciences in Computer Engineering.

- 3) College of Engineering
 - Bachelor in Civil Engineering (BCE)
 - Bachelor in Electrical Engineering (BEE)
 - Bachelor in Renewable Energy Engineering (BREE)
 - Bachelor in Mechanical Engineering (BME)
- 4) College of Humanities & Science
 - English Language and Translation
 - Law
- 5) College of Medicine
 - Bachelor of Medicine and Surgery
- 6) Deanship of Graduate Studies and Research
 - Master Program in Business Administration (MBA).
 - Executive Master Program in Business Administration (EMBA).
 - Master of Human Resource Management (HRM)
 - Master program in Civil Engineering.
 - Master program in Electrical Engineering.
 - Master Program in Computer Engineering.
 - Master program in Computer Science.

Course Learning Outcomes (CLOs)

CLOs are what students are expected to achieve in a course. All the course learning outcomes are mentioned in the course specification. The program learning outcomes are achieved by offering courses based on the academic plan. Every course lists a maximum of 8 CLOs which are mapped with specific PLOs.

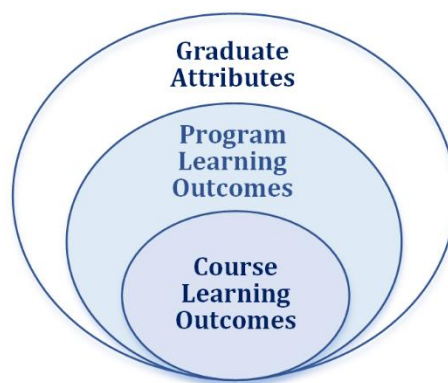


Figure 18: Achievement of Graduate Attributes through PLOs and CLOs

QUALITY CYCLE OF THE LEARNING OUTCOMES

FBSU assesses academic quality via the annual program reporting, the curricula review, and the assessment of learning outcomes every 2-4 years.

Learning Outcomes are assessed at the institutional, program, and course levels. The Teaching and Learning Quality Assurance and Improvement processes are based on a continuing annual cycle based on the principles of PIMRU (Plan→ Implement→ Monitor →Review → Update), as shown in Figure 19 below.

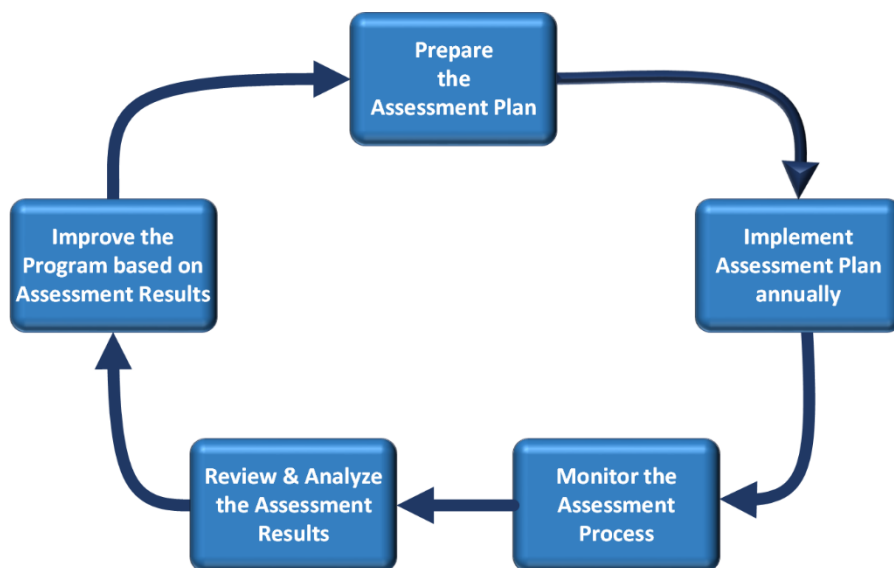


Figure 19: The PIMRU Model

Plan: In this phase, the plan is created for academic process components to improve students' learning. Across the institution, the programs are required to prepare an Academic Assessment Plan (AP), which shows a roadmap of assessing the learning outcomes from one level to the other based on its applicability for each level mentioned below.

- a. Course Level Assessment
- b. Program Level Assessment
- c. Institutional Level Assessment

Assessment Plans are based on OBE principles and Learning Outcomes. Assessment plans should include course level and program level assessments.

Implement: Implement the assessment plan every regular semester. Conduct direct and indirect assessments.

Monitor: Monitor the Assessment Process and Compute results using Direct and indirect assessment methods.

Review: Analyze and discuss the Assessment Results.

Update/Improve: Analyze differences in expected improvements, actual improvements, and previous assessment results (if any). Based on this, determine where improvements will be made. Take action and ensure improvements are being implemented. Some examples of improvement are a) Discuss curricular, learning activities, assessment strategies changes needed to meet outcomes, and b) Redefine ILO or PLOs or CLOs.

ASSESSMENT PLANS

The assessment plan should be based on Outcome Based Education (OBE) principles and Learning Outcomes. Assessment Plans should include course level and program level assessments following FBSU's rules and regulations.

Assessment Plan of the Program Learning Outcomes

While programs are expected to engage in annual assessment cycles, it is not a requirement that every program learning outcome is assessed every year. As part of the assessment planning process, programs should identify a two- or four-year cycle, unless otherwise required by the program accreditation authority.

For example, an assessment cycle for a program with 8 PLO's is shown in Table 6. Collecting data on the selected outcomes each year provides the opportunity for programs to analyze the assessment findings, plan, and implement improvements before the next cycle of data collection for a particular outcome.

Table 6: Program Learning Outcomes

Schedule of Assessment	Program Learning Outcomes							
	A	B	C	D	E	F	G	H
Semester 1								
Semester 2								
Semester 3								
Semester 4								
Semester 5								
Semester 6								
Semester 7								
Semester 8								

LEVELS OF ASSESSMENT

FBSU assesses learning outcomes at the following levels:

- Graduate Attributes (GA)
- Institutional level (ILO)
- Program level (PLO)
- Course level (CLO)

There are two types of tools used for assessing the learning outcomes: direct measures and indirect measures.

1) Direct measures

Assess the extent to which students' work meets the learning outcome performance standards. In other words, Direct Assessment Methods are methods for assessing actual samples of student work to provide evidence of student performance relative to the learning outcomes.

Selecting Direct measures

- A student's course portfolio evaluation using rubrics
- Projects & Presentations using rubrics
- Exam Papers using rubrics: Faculty members will be asked to use rubrics to assess final exam questions in selected courses.

Types of Courses Chosen for PLO Assessment

It is mandatory to use only the core courses for assessing the PLOs. In addition to that, it is preferable to use the courses at the mastery level for assessment purposes.

Assessment Instrument Used for PLO Assessment

The questions used for the final or midterm exams, should be used for CLO and, in turn, PLO assessment. For the PLOs which cannot be assessed through the exams, such as communication or teamwork, other appropriate assessment instruments should be used such as group projects, presentations, seminars, showcases, portfolios, etc.

2) Indirect Measures

Indirect measures compliment direct measures by providing supportive evidence, information, and student perspective. In other words, Indirect Assessment Methods are methods for assessing secondary information on student learning that do not rely on actual samples of student work.

Selecting indirect measures

There are many issues to consider when selecting indirect measures of learning. The institution should be creative in determining the most useful ways to measure student performance and ensure that the methods allow for meaning from interpretation and results. These methods may be quantitative or qualitative but should still address the key issues of strong measures.

Examples of indirect measures in the form of survey questions from the institutional surveys are to be mapped to the Institutional Learning Outcomes (ILO's). These surveys are listed below:

- **Program Evaluation Survey:** conducted on final year students before they graduate. The specific questions in the program exit survey can be used for assessing certain PLOs. In other cases, the academic departments can administer a survey for the graduating students, which will allow students to assess the satisfaction of the Program Learning Outcomes.
- **Alumni Surveys:** alumni are asked to rate the program outcomes and give their feedback regarding their experience through a survey that will be distributed annually.
- **Employer Surveys:** Employers will be asked to rate the achievement of program outcomes through a survey that will be distributed periodically.
- **Course Evaluation Surveys:** conducted at the end of every semester and provide feedback from all students for all courses offered in the University.
- **Learning Outcomes Exit Survey:** Faculty members conduct a survey about the satisfaction of the students regarding the achievement of learning outcomes.
- **Employer Feedback:** The employer or training organization's feedback based on certain performance criteria can also be considered an indirect measure of assessing the PLOs.

ASSESSMENT PROCESS OF THE LEARNING OUTCOMES

Assessment is an all-encompassing term that entails routine classroom assessment as well as external testing. Assessment is also a term that involves the method by which data is collected to measure what students know (knowledge), can do (skills) and enrich their values in connection to the learning outcomes at specific points during their learning activities, course, or program of study.

The assessment process of Learning Outcomes applies to all programs and departments on campus that have courses that contribute to a degree-granting program at the undergraduate and graduate levels. It is the systematic and ongoing method of collecting, analyzing, and using information from measured outcomes (both direct and indirect) to improve the quality practices of student learning.

FBSU has developed a robust portal Learning Outcomes Assessment system for direct and indirect assessments of the Course Learning Outcomes (CLOs), Program Learning Outcomes (PLOs), Institutional Learning Outcomes (ILOs/SLOs), and the related KPIs.

Direct Assessment

The direct assessment process starts with a well-structured syllabus, showcasing best practices in design, organization, and adherence to FBSU's quality frameworks. As exemplified in Figure 20, in addition to defining the CLOs, the course syllabus identifies the relationships and the course contribution to each of the NCAAA PLOs and the NQF weights of each PLO, the program PLOs in matrix formats. Such data is predefined in the system for all of the program courses and are updated at the beginning of each semester to reflect any approved modifications.

The results of students' assessments in the course for each CLO are posted on the system throughout the semester. Once the assessment of the course is collected, the system utilizes the mapping of the CLOs to the PLOs and ILOs to generate reports on individual and aggregate students' achievements in each CLO, and statistics in the forms of tables and graphical display of the level of PLO and ILO achievements.

Once the assessment of all courses in the semester is collected, the system generates a comprehensive Excel file (Example is shown in Figure 21) containing:

1. Detailed evaluation scores for each CLO and PLO
2. Course-specific contributions to program outcomes
3. Weighted average calculations across all assessments

This enables program chair and college dean and higher authorities to evaluate the program performance. They can:

1. Review quantitative achievement levels for all student outcomes
2. Analyze semester-specific program performance trends
3. Draw data-informed conclusions about educational effectiveness



FAHAD BIN SULTAN UNIVERSITY
COLLEGE OF ENGINEERING
RENEWABLE ENERGY ENGINEERING DEPARTMENT

Course Learning Outcomes (CLOs)												
CLOs												
1	Knowledge and Understanding											
1.1	Gain knowledge of the fundamental properties and behaviors of semiconductors.											
1.2	Identify and understand the basic working principles of diodes, transistors, and operational amplifiers.											
2	Skills :											
2.1	Explain and analyze energy bands, and PN junction formation.											
2.2	Analyze and Evaluate different types of diodes, transistors, and operational amplifiers, and their applications in electronic circuits.											
2.3	Analyze the operational amplifiers and explore their applications in electronics.											

Relationship to the Bachelor of Renewable Energy Engineering Program (ABET SLOs, PIs, NCAAA PLOs)

Mapping Matrix Weights

ABET SLOs and PIs	1			2		3	4		5		6		7
	1a	1b	1c	2a	2b	3	4a	4b	5a	5b	6a	6b	7
PIs-Weight (%)	25	35	40	55	45	100	55	45	60	40	55	45	100
NCAAA PLOs	K1	K2	S1	S3	S5	V1	K3	V2			S2	S4	
Course Contribution %	70	95	100										

Relationship to the Bachelor of Renewable Energy Engineering Program (NCAAA PLOs, NQF)

Mapping Matrix Weights

NCAAA PLOs	K1	K2	K3	S1	S2	S3	S4	S5	V1	V2
NQF-Weight (%)	30	35	35	30	25	20	15	10	55	45
Course Contribution %	70	90	100							
Competency Scale	I	P	P							

Contribution of Course to Meeting the Professional Component

This course contributes to the professional component by equipping students with essential electronics knowledge, enabling them to design and maintain systems that incorporate electronic components and controls, aligning with industry demands and sustainable practices.

Relationship to the Bachelor of Renewable Energy Engineering Program Outcomes

Relationship to the Bachelor of Science in Renewable Energy Engineering Program Outcomes															
ABET SOs	1					2		3	4		5		6		7
PIs	1a	1b	1c			2a	2b	3	4a	4b	5a	5b	6a	6b	7
NCAAA PLOs	K1	K2	S1			S3		S5	V1	K3	V2		S2		S4
CLOs	1	2	3	4	5										
CLOs-Weight (%)	15	35	10	35	15										

Relationship to the Renewable Energy Engineering Program Objectives (POs)

I	II	III	IV
✓	✓		✓

Prepared by Dr. Ammar Alkhatani
Date Spring 2024-2025

Figure 20: Sample 2nd page of prepared course syllabus using the assessment system portal

CourseID	Direct Assessemnt Results for Civil Engineering Program Fall 2024-2025												
ABET	ABET-SLO1			ABET-SLO2		ABET-SLO3	ABET-SLO4		ABET-SLO5		ABET-SLO6		ABET-SLO7
PI	PI 1-a	PI 1-b	PI 1-c	PI 2-a	PI 2-b	PI 3	PI 4-a	PI 4-b	PI 5-a	PI 5-b	PI 6-a	PI 6-b	PI 7
NCAAA	K1	K2	S1	S3	S3	S5	V1	K3	V2	V2	S2	S2	S4
CIVE 210 - Statics	85.58		88.29										
CIVE 211 - Structural Mech	73.17		85.47										
CIVE 220 - Engineering Ma													
CIVE 240 - Fluid Mechanics	72.64		76.47										
CIVE 250 - Environmental	65.31			61.21									
CIVE 260 - Spatial Measure													
CIVE 310 - Structural Analy													
CIVE 320 - Concrete I	92.84		85.34										
COEN 300 - Engineering Ec		88.59			72.19			85.29					
CSC 100 - Introduction to C													
CIVE 330 - Geotechnical Er													
CIVE 351 - Water and Was	89.47			87.50	76.39								
CIVE 360 - Transportation	72.81		66.53										
CIVE 430 - Foundation Eng													
CIVE 460 - Highway Engine	77.29		74.48										
CIVE 480 - Construction M	90.63		79.63										
CIVE 461 - Pavement Desig	72.57		82.50	82.69									
PHYS 102 - General Physic													
CHEM 101 - General Chem	81.15	93.75	79.55										
CHEM 101L - General Cher	93.11		95.83										
MATH 101 - Calculus I	100.00		77.50										
MATH 102 - Calculus II													
MATH 201 - Calculus and A													
MATH 202 - Differential Ed	100.00		59.98										
MATH 215 - Linear Algebra			75.00										
PHYS 101 - General Physic													
PHYS 101L - General Phys													
PHYS 102L - General Phys													
STAT 230 - Probability and	100.00	91.67											
ENGL 102 - Basic Academi						71.11							
SOCS 101 - Islamic Civiliza													
SOCS 201 - Islamic Civiliza													
ARAB 101 - Basic Academi													
ARAB 201 - Advanced Acad													
SOCS 202 - World Civilizat													
ENGL 203 - Advanced Acad						52.50							
ENGL 206 - Technical Writ						73.81	100.00						
ENGL 101 - Basic Academi													
CIVE 412 - Steel Design	68.88		79.17										
CIVE 205 - Engineering Dra	78.95									77.50			
CIVE 215 - Computer Aided	75.00					79.84							
CSC 101 - Introduction to C	92.20					79.17			100.00				
PHYS 103L - Physics Lab													
CIVE 471 - Quantity Survey	79.55		73.06										
CIVE 472 - Contracts and S													
SOCS 203 - History of the K													
IT 100 - Information Techn													
ENGL 100 - General Englis						82.89							
MATH 100 - Mathematics	92.86												
STAT 100 - Introduction to	84.38												
PHE 101 - Physical and He													
ELEE 230 - Programming fo		93.55	91.96									91.13	
CIVE 400 - Summer Interns													
CIVE 410 - Structural Analy													
CIVE 498 - Final Year Proje													
CIVE 499 - Final Year Proje													
COEN 401 - Communicatio						98.77	84.70	97.50					
CIVE 220L - Engineering M											100.00		
CIVE 240L - Fluid Lab											45.00		
CIVE 330L - Geotechnical E											53.13		
CIVE 260L - Surveying Lab											100.00		
PI AveragesPI Averages	83.56	91.89	79.42	77.68	73.92	75.53	92.35	90.32	100	77.5	74.53	91.13	

Figure 21: Sample Program Performance Evaluation Scores for Direct assessment method

Indirect Assessment:

While indirect assessment methods (e.g., student surveys) are equally valuable as direct assessment tools, they typically carry a lower weight in overall program evaluation. The assessment portal system supports this process through the following workflow:

- 1) Student survey design to measure students' self-evaluation of the level of their achievements in each of the course CLOs on a Likert scale of 5. This survey is conducted electronically on a special portal or via hard copies with strict confidentiality.
- 2) Following the closure of student surveys for the semester, the Program Chair and higher authorities gain access to:
 - Aggregated indirect assessment CLO results from all course evaluations
 - Comparative analysis of student-perceived outcome achievement (SLOs/PLOs)
 - Qualitative feedback trends across program courses
- 3) Student survey results dashboard in the portal will generate for each CLO assessment an excel sheet. Once all course surveys are completed, the system generates:
 - Student perception scores for each aligned PI/SLO/PLO
 - Thematic analysis of open-ended feedback
 - Benchmarking against direct assessment results
- 4) Finally, the results are compiled for each course and are weighted in the calculation of the final CLOs and reflected in the PLOs and ILOs.

Figure 22 below shows a sample results of an indirect course assessment results.

Target benchmark level of the Learning Outcomes

The targets are the expected level of aggregated student achievement, for each measurement method (direct and indirect). Targets are usually expressed in terms of the number or percentages. For example, a target might be expressed as at least 70% of the students will achieve a 3 or higher on each criterion of the rubric used to evaluate the research presentation.

Fahad Bin Sultan University					
Civil Engineering					
Civil Engineering					
Embedded Assignment					
Student Evaluation					
Input Form					
Performance Measure: CIVE 460 CLO2					
CLO2 : Understand highway earthwork, soil tests and Superpave mix design for highway projects					
Subject:	CIVE 460	Course Title:	Highway Engineering		
Course Id:		Designation:	Civil Engineering		
Course Hours:	3	Offering Semester:	20241		
Section Id:	21	No. of registered students:	26		
Assessed method used (Exam, Homework, Quiz,...):			Survey		
Number of assessed students:		25	Assessment date:	date assessed	
Assessor Name:		created_by			
Summary of Student Results					
Performance Measure	Number of Students scoring 1	Number of Students scoring 2	Number of Students scoring 3	Number of Students scoring 4	Number of Students scoring 5
crs_num PLOCode	1	1	5	3	15
AVG=	84 %				
Comments and proposed improvements, if any.					
Student Id:	Answer:		Evidence:		
1	5		Download Assessment		
2	3		Download Assessment		
3	5		Download Assessment		
4	2		Download Assessment		
5			Download Assessment		

Figure 22: Sample of embedded sheet in the indirect assessment results file

EVALUATION PROCESS OF THE LEARNING OUTCOMES

Evaluation Process of the Course Learning Outcomes

The Course Coordinators collect and analyze the CLO assessment results (direct and indirect) at the end of every semester, for the respective courses. The improvement actions related to learning outcomes, curriculum, and course management are discussed with the course instructors and then submitted to the Curriculum Committee for approval. These approved improvement actions are then submitted to the department chairperson to be included in the decision-making process and continuous enhancement of the program.

The course assessment results are also recorded in the annual Assessment Report for monitoring and feedback at the program level.

Evaluation Process of the Program Learning Outcomes

The evaluation process or closing the loop of student achievement (or learning) of the program learning outcomes starts after the completion of the assessment cycle which usually takes 2-4 years to complete depending on the number of the program learning outcomes. Every academic program prepares an annual program assessment report which includes an analysis of each PLO assessed along with the recommendations for improvement actions. This is followed by a comprehensive report on the achievement of learning outcomes at the end of the assessment cycle.

Evaluation Process of the Institutional Learning Outcomes

The evaluation process or closing the loop of student achievement (or learning) of the institutional learning outcomes starts after the completion of the assessment cycle which usually takes 2-4 years to complete. The Institutional Quality Assurance Committee prepares a report every 4 years on the achievement of learning outcomes.

The university Institutional Quality Assurance Committee reviews the annual assessment reports and provides feedback to the programs concerning assessment methods and the use of their findings. Each program must identify an assessment coordinator who will be responsible for developing, implementing, and maintaining the program assessment efforts, coordinating meetings with faculty to discuss assessment findings, and developing and monitoring the action plans. The committee works closely with the Departments that teach the General Education courses to develop, monitor, and review their assessment plan and communicate the findings to assessment coordinators from all colleges.

Examples of improvement actions:

1. Change of CLOs

2. Change of teaching strategies
3. Change of assessment method
4. Change of course contents.
5. Adding a core course to strengthen the achievement of a PLO.

PROCESS FOR UPDATING THE LEARNING OUTCOMES

Course Learning Outcomes

A change in the course learning outcomes is considered as a major change in the curriculum. The course coordinator can submit a change request form to the curriculum committee at the end of the academic semester, stating the valid reason for changing the CLO along with the revised CLO-PLO mapping. The curriculum committee validates the request and then seek approval of the Department.

Program Learning Outcomes

A change in the program learning outcomes is considered as a major change in the curriculum. The Curriculum Committee Chair can submit a change request form to the Department Council at the end of the assessment cycle, stating the valid reason for changing the PLO along with the revised CLO-PLO/Curriculum mapping. The Department Council committee validates the request from various perspectives and seeks approval from the College Council. This request is finally sent to the Institutional Curriculum Committee (ICC) for its approval.

Institutional Learning Outcomes

A change in the institutional learning outcomes is considered as a major change at the institutional level. The Teaching and Learning Center (TLC) approaches the Institutional Curriculum Committee (ICC) with a request for changing the ILO(s) stating the valid reason. The change should be aligned with the existing Program Learning Outcomes of the current academic programs. Based on the revised PLO-ILO mapping the ICC can approve or reject the change request. This request is finally sent to the University Council for approval.

CURRICULUM REVIEW AND DEVELOPMENT

FBSU strives to provide high-quality educational programs that satisfy the educational needs of students, while simultaneously meeting “market needs” and fulfilling the objectives of its declared mission. This requires that all academic programs should be continuously monitored, reviewed, and updated every 5 years. Five-year reviews are intended to ensure that curricula of programs continue to meet the educational needs of students and the objectives of the university. These functions encourage ongoing discussions about curricula and pedagogy, maintaining an ongoing educational assessment plan, and assuring the quality and integrity of the university’s academic programs.

FBSU has a [Curriculum Review and Development Policy](#), which is applicable to both graduate and undergraduate programs. This policy provides an overview of the curriculum development process and suggests a series of steps to follow in Curriculum Review. This policy provides guidance on the process for changes and additions with respect to credit-bearing courses or academic programs and outlines the roles of administrators and committees at the college and university levels within this process.

This Curriculum Review and Development also identifies the university committees associated with the curriculum and their responsibilities. The Institutional Curriculum Committee (ICC) is the university committee that oversees undergraduate and postgraduate curricula and reports to the Assistant to the President of the Academic Affairs.

1. New Program Design Process:

The following process is followed in the introduction of a new program:

1. Prepare a feasibility document showing the need for the program and its importance.
2. Submit a request for introducing the program to the Department and College Councils.
3. If approved, start the design process as follows:
 - a. Survey existing and related programs at local (national and regional) and international levels; identify the best practices regarding program structure, courses offered, pedagogy, and evaluation.
 - b. Prepare a report showing the results collected in step (a) above.
 - c. Derive the new program structure. Build up a detailed program and course specifications.
 - d. Prepare a full proposal describing the new program.

- e. The final program document should be prepared according to the structure below:
 - Introduction
 - Program Needs Analysis
 - Program Objectives
 - Program Learning Outcomes
 - List of Courses
 - Degree Plan
 - Course Descriptions and Specifications.
 - Program requirements
 - Preliminary Implementation Plan
 - f. Seek approval for the new program in the College Curriculum Review Committee in addition to the Department and College Councils.
4. Raise the new program documents to the Institutional Curriculum Review Committee.
 5. The Institutional Curriculum Review Committee verifies that the raised program proposal satisfies the basic requirements, and if so, prepares a report and raises it for approval by the University Council.
 6. The University Council seeks the views of at least one external reviewer before taking the final decision.
 7. Based on the reports of the external reviewers, the University Council takes the appropriate decisions.
 8. The final decisions are reported to the Vice President for Academic Affairs

2. Curriculum Review Process

Each program and department within the university is responsible for conducting a review of its academic curriculum every 4-5 years to meet the demands of the current market needs to be based on feedback from stakeholders (e.g., alumni, students, employers, faculty members, etc.) the College Advisory Board, and an Independent Reviewer.

All courses and requirements shall be reviewed and approved first by the College Curriculum Review Committee, the College Council, Institutional Curriculum Committee then the University Council.

Each department or program should design and conduct a review in the manner it regards as most appropriate. Any existing materials on the current curriculum may be used as resources. Upon completion of the review, the Department Chair forwards a report to the

Vice Dean/Dean of the College to be added to the College Council for approval.

This report will include the following points:

- a) An Executive Summary of the process used to conduct the review and its main conclusions. The summary will include the minutes of the meeting from the College Curriculum Review Committee.
- b) A copy of the updated syllabus along with the updated course specification based on the curriculum review.

a. Major Changes

Major Reviews conducted every Five Years:

A major change is one that significantly affects the program learning outcomes, structure, organization, or delivery of a program or the basis for its accreditation. These are reviews that may lead to changes in the courses offered at different levels and categories and the general program structure. Accordingly, major reviews need to be performed using a formal process (see the Major Review Process below) and require the approval of the Department Council, College Council, and University Council. The results of these reviews should be conveyed to the Vice President for Academic Affairs & Research.

This flowchart in Figure 23 provides scientific guidance on the major curriculum review process for academic programs. Each program within the university is responsible for conducting a review of its academic curriculum every 4-5 years.

Major Program Review Process:

The following process is followed in major program reviews:

- 1) Collect and monitor information and feedback regarding the current program from stakeholders and related organizations. The Curriculum Academic and Committee in each department may use different approaches to collect information and feedback from stakeholders. Stakeholders include faculty, students, employers, industry organizations, parents, etc. Related organizations include Accreditation Organizations, Standards Organizations, and local and international universities.
- 2) Assess the current program given the information compiled in step 1 above.
- 3) If there is a need for change or update, submit a "Curriculum Update" request to the Department Council.
- 4) If the Council approves, perform the indicated modifications, update, and submit a full document to the Department Council.
- 5) On approval by the Department Council, the document is raised to the College

Curriculum Committee.

- 6) On approval by the College Curriculum Committee, the document is raised to the College Council.
- 7) On approval from the College Council, the updated curriculum document is raised to the Institutional Curriculum Review Committee
- 8) The Institutional Curriculum Committee ensures that the raised report is complete and has gone through the full process.
- 9) If the raised report is complete, the Institutional Curriculum Committee raises the report to the University Council for action.
- 10) Based on the size and level of recommended changes, the University Council seeks the views of at least two external reviewers.
- 11) Based on the recommendations of the external reviewers, the University Council takes the necessary action and informs the respective Department.
- 12) The final decisions are conveyed to the President's Assistant for Academic Affairs.

b) Minor Changes

Continuous Monitoring of the Curriculum for Minor Updates:

The main purpose of these reviews is to ensure that course materials are properly updated and delivered using appropriate pedagogical approaches. These reviews do not affect the program structure or introduce any major changes. Accordingly, they are informal and do not need to cross-department borders. However, the results of these reviews should be reported to the Dean of the College and the College Council.

This flowchart in Figure 24 provides guidance on the curriculum review process for academic programs and outlines the roles of administrators and committees at the college and university levels within this process. It is based on the [Curriculum Review and Development Policy](#).

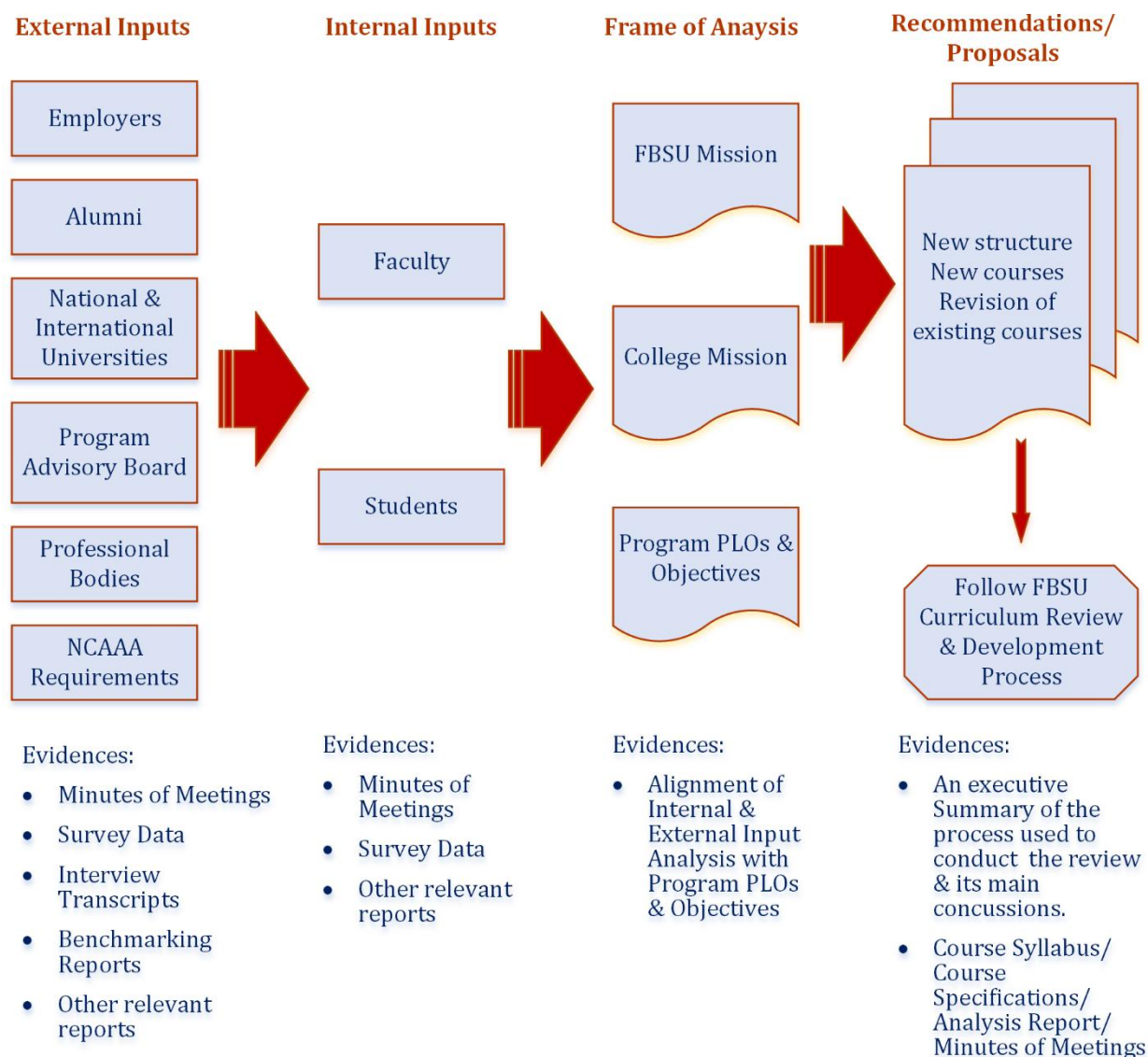


Figure 23: The major curriculum review process for academic programs

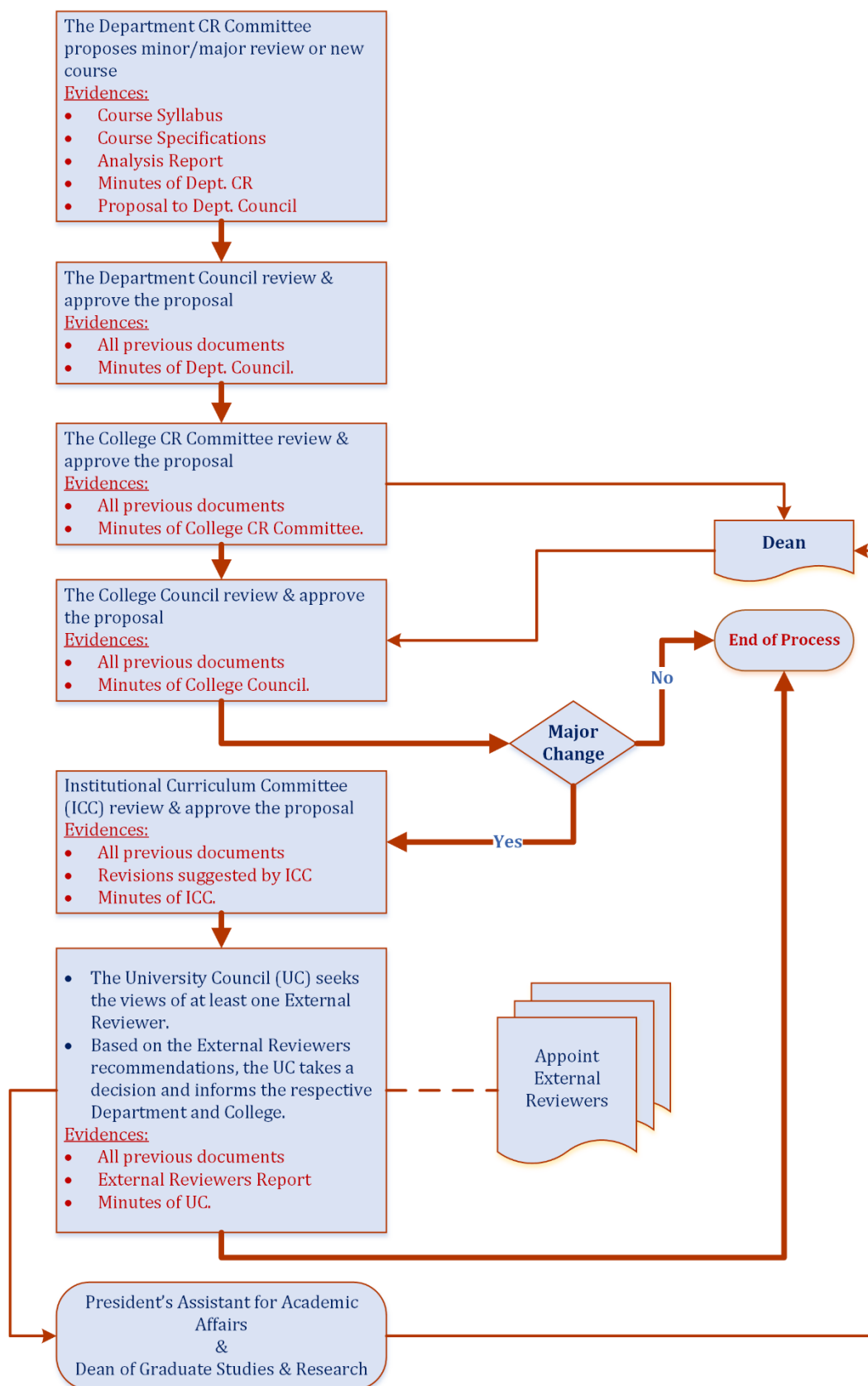


Figure 24: Guidance on the curriculum review process for academic programs and outlines

QUALITY ASSURANCE ADMINISTRATIVE CALENDAR

All academic programs are required to follow the PIMRU (Plan, Implement, Monitor, Review, and Update) cycle for delivering a program in accordance with the quality standards established by the FBSU that are in turn aligned with the national and international education standards.

FBSU prepares the DQAA calendar for the Department Chairpersons and the faculty members at the beginning of the academic year which is aligned with the FBSU academic calendar. The purpose of the detailed QA calendar is to keep track of the submissions of all the important documents to improve monitoring and review processes for continuous quality improvement in the field of teaching and learning.

Faculty Member Administrative Calendar

No	Name of the Document	Timeline
Beginning of the Semester (Week 1 to 2)		
1	Upload Course Syllabus to LMS	Beginning of the term
2	Submission of Course Specifications to the chairs	End of Week 1 of the term
3	Upload Course Outlines to LMS	End of Week 1 of the term
4	Updating the assessment schedule on LMS	End of Week 2 of the term
5	Door Class schedules with office hours	End of Week 2 of the term
During the Semester (Week 3 to 16)		
6	Submission of 20% midterm grades	Before the last day for dropping the course with W
7	Academic Advising Logbook	Throughout the semester
8	Maintaining Grade book on Moodle	Throughout the semester
9	DN forms (Progress Report, Attendance, and midterm grades till date)	End of Week 12 of the term
10	Submission of 60% of midterm grades on LMS	End of semester (before end of week 15)
11	Faculty Satisfaction Survey	Week 10-12 of the 2 nd academic semester or before the annual faculty evaluation
12	Update Faculty portal	This should be updated throughout the semester and submitted during week 12.
13	Submit annual faculty Evaluation evidence	Week 10-12 of the 2 nd academic semester
14	Submission of the final grades	Final exams will be during weeks 16-18
15	Submission of the Final Exam Student answers	Week 16-18 of the term

No	Name of the Document	Timeline
During the Semester (Week 17 to 18)		
16	Prepare section and combined Course Report	After the semester exam
17	Submit e-course portfolio	After the semester exam

Table 7: Quality Administrative Calendar for Faculty (Week 1 to Week 18)

Department Chairpersons Administrative Calendar

The calendar helps the Department Chairpersons to maintain proper documentation for the academic programs that are responsible for:

No	Name of the Document	Timeline
1	Annual Action Plan for the next academic year	End of the academic year
2	Program Specification Note: The Program Specification should be changed in case any curriculum changes have been made in the program, otherwise old copy can be submitted)	End of Week 5 of the 1 st term
3	Submission of NCAAA KPIs at program or department level for the previous year	End of Week 7 of the 1 st term
4	Annual Program Report of the previous academic year	End of Week 7 of the 1 st term
5	Updates on the Academic Advising List	End of Week 2 of each term
6	Receiving 20% midterm grades from the faculty	Before the course withdrawal date
7	Teaching Load (First draft)	As asked by the higher management
8	Recruitment Requirements	As asked by the higher management
9	Annual Budget	As asked by the higher management
10	List of Textbooks for the next academic semester	Week 8-10 of each term
11	Chairperson or Peer review of Classes	Week 4 onwards of the term or as arranged in the individual department but prior to week 15.
12	Faculty Annual Evaluation	End of each year. Results signed evaluations, etc.to be submitted to the President's Assistant for Academic Affairs.
13	Annual Strategic Plan Progress Report of the Program	End of each year. To be submitted to the Officer of Strategic Planning and Development Office

No	Name of the Document	Timeline
14	Department meeting minutes and closing the loop on the topics discussed in the meeting	Week 14 of each term
15	Program report (NCAAA template)	Week 5 of the following term
16	Help CSI in preparing Alumni Database	End of Week 8 of each term
Extra-Curricular Activities for the Department in collaboration with the various Administrative Units		
17	A report on the professional development activities w.r.t teaching and learning Concerned office: Teaching and Learning Center	End of the academic year
18	A report on the research activities Concerned office: Dean of Graduate Studies & Research	End of the academic year
19	Community Service Report from the CCSCS along with the results of the relevant NCAAA KPI Concerned office: Consultative Center for Studies Community Service (CCSCS)	End of the academic year
20	A report on the extra-curricular activities (workshops, field trips and student club activities) Concerned office: Deanship of Student Affairs	End of the academic year

Table 8: Calendar for Department Chairpersons

Head of the Administrative Offices Administrative Calendar

No.	Name of the Document	Timeline
1	Annual Action Plan for the next academic year	Beginning of the academic year
2	Employee Satisfaction Survey	End of the academic year
3	Annual Strategic Plan Progress Report	End of the academic year
4	Submission of data for calculating NCAAA KPIs at program/Institutional level for the previous year	End of the academic year
5	Office meeting minutes and closing the loop on the topics discussed in the meeting when possible	End of the academic year

Table 9: Calendar for Administrative offices

TEMPLATE FOR THE PROGRAM AND COURSE DOCUMENTS

The following documents are used at different levels

Institutional Level

1. 5-year Strategic Plan
2. Annual Action Plan for Administrative Offices
3. Meeting Minutes
4. Key Performance Indicator results:
 - a. Institution
 - b. ETEC_NCAAA
5. Annual Accomplishment Reports

College Level

1. 5 - year Strategic Plan-Colleges
2. Annual Action Plan
3. Meeting Minutes
4. Annual Accomplishment Report

Program Level

1. Program Specification
2. Key Performance Indicator results (Program)
3. Annual Program Report
4. Teaching load
5. Faculty schedules
6. Faculty Annual Performance Evaluations forms

Course level

1. Course Specification
2. Course Report
3. E-Course Portfolio

MONITOR QUALITY OF CORE COURSES TAUGHT BY OTHER DEPARTMENTS

The arrangements adopted at FBSU for monitoring the quality of courses taught by other departments follow a process that is aligned with PIMRU quality cycle shown in Figure 7.

Plan: The department for which the course or courses are offered shares the course objectives to the serving department, based on which the Course Specifications are prepared including Course Learning Outcomes (CLOs), Course Contents, Teaching Strategies, and Assessment Methods.

Implement: The course specification approved by the department should be used in both the campuses, based on which the course syllabi are prepared. The CLOs, course contents, tutorials, laboratory exercises, textbooks, number of assessments, and their weightage should be the same in the course syllabi for multi-sections.

Monitor: The quality of course delivery is monitored only by the serving department.

Review: Every course instructor is required to prepare a course report for his/her section. The course coordinator prepares a combined course report based on all the course-section reports. The final improvement action plan should be agreed upon by all the course instructors teaching the course.

The course serving department is required to share the combined course report with all the departments whose students enroll for the course as the core requirement for the program. They can provide suggestions for updating the course content, teaching strategies, or assessment methods.

Update: The course serving department considers the requests if feasible and updates the course specification based on the recommendations from the course report or the department.

Note: *This applies to only core courses of any program offered by other departments.*

QUALITY ASSURANCE MEASUREMENT COURSES WITH MULTIPLE SECTIONS

The following procedure is applied to all courses offered by the academic programs or service departments, which results in effective and smooth coordination between the course instructors in delivering courses across the multiple sections.

A) Planning phase:

This planning phase starts at the beginning of each semester and involves the following steps:

- 1) The course specification should be designed by the course coordinators in the spring semester to be used for the following academic year. The same course specification can be used for at least two terms unless there is proper justification for updating it.
- 2) The number of exams, home assignments, and the class tutorials in a course specification should be discussed with the course committees to see if a reasonable workload is given to students in each course. The workload should not exceed the learning hours of a course.
- 3) The assessment schema should be unified, allocating a reasonable proportion of the final grades to exams, class tutorials, discussions, home-based assessments like projects, homework assignments, and presentations.
- 4) The textbooks and their alternatives (if textbooks are not available) identified for a particular course should be used in all the course sections. The list of these textbooks should be submitted by each of the course coordinators to their respective curriculum committee and get approved by them.
- 5) The course coordinator should share the learning resources among other instructors teaching the same course. The best teaching practices should be shared as well.
- 6) The final exam date is recommended to be the same for courses having multiple sections offered preferably on both campuses.
- 7) The course coordinator chooses the assessment tools for assessing the course learning outcomes in all the course sections.

B) Implementation phase:

- 1) Faculty members teaching the same course should use a unified course specification, course syllabus, and textbook. *NOTE: No changes in the course specification are made during the academic semester unless approved by the curriculum committee and the department.*

- 2) The course topics covered by the course instructor should be the same which will be based on the approved course specification.
- 3) Each course coordinator will meet every month with the course instructor to follow up on the course coverage in terms of teaching and learning strategies based on meeting the outcomes of the respective courses.
- 4) The course coordinator should regularly share the learning resources among other course instructors. The best teaching practices should be shared as well.

C) Assessment phase:

- 1) The preparation of major and final exams should be done by all course instructors teaching the same course. They can divide the preparation of the exam by question, by topic, or by Course Learning Outcomes (CLO). The goal is to have unified major and final exams when possible.
- 2) In case the exam cannot be unified, several versions of the exam should be made, using the same assessment strategy.
- 3) Rubrics should be defined for each assessment.
- 4) The course coordinator/peer reviewer is responsible for approving the final version of the major and final exams along with their rubrics and answer keys.
- 5) The project work submitted by the students for some selected courses should be compared and evaluated by the other instructors for verification of the teaching standards.

D) Evaluation Phase

- 1) The post-exam phase should include the moderation of students' exams to ensure fair grading and adherence to the rubric/answer key designed for the respective major and final exams. A cross-grading scheme or a team grading scheme (*Refer to the [Assessment Moderation Policy](#)*) can be implemented mainly for the courses offered simultaneously on both campuses.
- 2) The course instructor is responsible for preparing the course learning outcome results using direct and indirect methods and analyzing each outcome to see if each of them has achieved the attainment level. Recommendations for continuous improvement in the achievement of each CLO are made accordingly. The course coordinator is required to prepare the aggregated CLO result based on all the course sections. Refer to the [Program Assessment Policy](#).
- 3) The course report should be submitted at the end of the term by every course instructor

for his/her sections, in which the concerned course instructor will analyze the problems encountered while teaching the course during the term and possible compensating action. This will be later used by the course coordinator for preparing a combined course report. The combined course report will be discussed with all the course instructors and analysis is done at the course level. The priorities of improvement will be finalized for the course.

- 4) Grade Inflation / Deflation Report. The course instructor should prepare the Grade Inflation / Deflation report for his/her course section. However, the Course Coordinator will analyze the unusual distribution of grades at the course level. Grade Inflation / Deflation is not applicable to University Requirement courses.

The criteria for grade inflation are as follows:

- For a course having more than 10 students, grade inflation is considered only if the number of students obtaining A+, A, and B+ is more than 50%.
- For a course with 10 students or fewer, grade inflation is considered only if the number of students obtaining A+, A, and B+ is more than 70%.

The criteria for grade deflation are as follows:

- For a course having more than 10 students, grade deflation is considered only if the number of students obtaining F, D, D+ is more than 50%.
- For a course with 10 students or fewer, grade deflation is considered only if the number of students obtaining F, D is more than 70%.

The department chairs are responsible for monitoring the cases of grade inflation or deflation. Department chairs shall follow the following process:

- a. Each instructor is asked to submit justification for all courses having grade inflation/deflation.
- b. The department chair shall review all grade inflation /deflation reports (old reports and new reports) to identify the source of the case, which can be the faculty member, the course, students' behavior, etc. Based on the result of the review, the department chair should implement necessary interventional action.
- c. At the end of each semester, the department chair shall prepare a grade inflation /deflation report and submit it to the College Dean. This justification or the action that was taken for improvement is also mentioned in the Annual Program report.

INDEPENDENT VERIFICATION OF STUDENT ACHIEVEMENT PROCESS

- 1) The academic programs at FBSU are required to implement the process of independent verification of student achievement once a year within the institution (internal) for at least two of the core courses offered by the department.
- 2) The department or course coordinators can nominate the faculty members as the reviewers/cross-graders for the courses selected in step 1.
- 3) The reviewers/cross-grade can be either an instructor from the relevant course group or instructors teaching the same course within or across the campuses.
- 4) The reviewers/ cross graders will randomly select students' answer sheets based on the following criteria:
 - For the number of course sections less than 3, choose 3 answer samples from each section.
 - For the number of course sections between 3 and 7, choose 2 answer samples from each section.
 - For the number of course sections more than 7, choose 1 answer sample from each section.
- 5) The course instructor will photocopy the student answers from the final exam before marking them and hand them over to the cross-grader/reviewer along with the answer key and the grading guidelines/rubrics.
- 6) The internal reviewer/ cross-grade will do the second marking of the selected sample answers based on the answer key and the grading guidelines.
- 7) The academic departments can use paired t-tests (optional) or any other suitable method to compare the two population means and calculate the confidence interval for the grades' mean difference. This test helps in determining the degree of confidence that all sections within a campus or across the campuses are grading the exams fairly and according to the predefined grading guidelines. If there is a major discrepancy in the marks, then other papers may also be reviewed. In some cases, the instructor) may also be asked to review or change the grades.
- 8) When the internal reviewer/cross-grader confirms the marks of the instructor (first marker), then a report is prepared by the Course Coordinator. The approved report with recommendations (if any) is sent to the Department Chairperson and the QA Committee at the department level.
- 9) The QA Committee at the department level will analyze the grading of the instructor and

the internal reviewer/cross-grader and prepare a compiled report with general or specific recommendations (if any) on the verification of student achievement within the college or institution.

- 10) The QA Committee at the College level (CQC) will ensure that the department conforms to the process of student verification. The CQC will approach the DQAA-QAAC in case of any quality matters raised.

ELECTRONIC COURSE PORTFOLIO

A well-organized course folder is very important in documenting the planning, process, and outcomes of a single course. The course instructor is required to archive the course syllabus, learning resources, assignments, assessments, grades, learning outcome Assessment Results at the end of every academic semester.

Course Portfolios: A course portfolio will be maintained for each of the taught courses. The course teacher will use the collected material to assess the achievement of course learning outcomes.

Course Portfolio Checklist

- 1) Course Syllabus
- 2) Samples of teaching materials: Course manual or notes, Lecture notes, Additions, and revisions, Support materials, Departmental resources, Expected format for assignments for current semester
- 3) Assessment: Assignments, Rubrics, Quizzes, Major Exams, Final Exam, and homework assignments (answer keys) for current semester
- 4) Samples of students' work (only 3 of each Assignment and assessment task for current semester: Best, Average, Lowest)
- 5) E-Register Grade Sheet (Grades and Statistics)
- 6) Grade Inflation and Deflation Justification
- 7) Assessment of Learning Outcomes:
 - a. CLO assessment,
 - b. Course Exit Survey and Results.
 - c. PLO report (depends on assessment cycle) for current semester
 - d. Course Report
- 8) LMS Documentation for current semester
- 9) Exams pre- and post- moderation reports
- 10) Student Evaluations for the current semester

REPORTING AND HANDLING OF ETHICAL MISCONDUCT

This section establishes a formal, documented mechanism for reporting, investigating, and systematically addressing violations of the University's Code of Ethics.

It aims to promote a culture of integrity, fairness, transparency, and accountability by ensuring that all misconduct is addressed promptly, impartially, and consistently.

Related Policies

- Student Code of Conduct Disciplinary Procedures
- Faculty Code of Conduct Policy
- Faculty Accountability Policy

Scope

This mechanism applies to all members of the University community, including:

- Students
- Faculty
- Staff
- Researchers
- Administrators
- External stakeholders (where applicable)

It covers all potential ethical violations, including but not limited to academic dishonesty, harassment, discrimination, conflicts of interest, abuse of authority, and breaches of confidentiality.

Reporting Channels & Mechanism

- Confidential Online Reporting Form available through the University Quality Assurance or University Research Ethics Committee.
- Dedicated Ethics Email Address managed securely by the University Research Ethics Committee.
- Direct Reporting to designated University Research Ethics Committee Chair, the Legal Affairs Office or Human Resources Department.
- Written Complaint Submission to the Department Chair, College Dean, or University President's Office.

Anonymity and Confidentiality

- Reports may be made anonymously.
- All reports are treated with the highest level of confidentiality.

- Identities of complainants and respondents are protected to the fullest extent possible.

Procedures for Handling Reports:

The following are sequence of reporting and investigation for handling of ethics reports:

1. Receipt and Acknowledgment

- The University Research Ethics Committee acknowledges receipt of the report within 3 working days.
- A preliminary review is conducted to assess jurisdiction and merit.

2. Preliminary Review

- Cases with sufficient basis proceed to formal investigation.
- Cases lacking evidence are archived confidentially, with an explanation provided where appropriate.

3. Formal Investigation

- An Investigation Committee is formed, comprising trained impartial members.
- The committee collects evidence, interviews relevant parties, and prepares a detailed report within 30 working days.
- Both complainant and respondent are given the opportunity to present their perspectives.

4. Determination and Action

- Findings are reviewed by the appropriate disciplinary authority (e.g., College Council, University Disciplinary Committee).
- If misconduct is confirmed, sanctions are imposed in accordance with university regulations and employment/student policies.
- Sanctions may include reprimands, academic penalties, employment suspension, or termination depending on severity.

5. Communication of Outcome

- Both the complainant (if identifiable) and the respondent are informed of the outcome.
- Actions taken to address the issue are documented internally.

6. Monitoring, Documentation, and Reporting

A confidential log of all reported cases, investigations, outcomes, and corrective actions is maintained by the Research Ethics Committee. An Annual Ethics Report is submitted to the University Council summarizing:

- Number of cases
- Types of violations
- Outcomes
- Systemic issues identified
- Recommendations for improvement (without revealing personal identifiers)

7. Continuous Improvement

The University periodically reviews its ethical reporting and enforcement mechanisms to:

- Ensure effectiveness;
- Identify patterns or recurring risks;
- Enhance prevention, awareness, and training programs.

Feedback from stakeholders regarding the reporting process is encouraged to refine and strengthen ethical governance practices continuously.

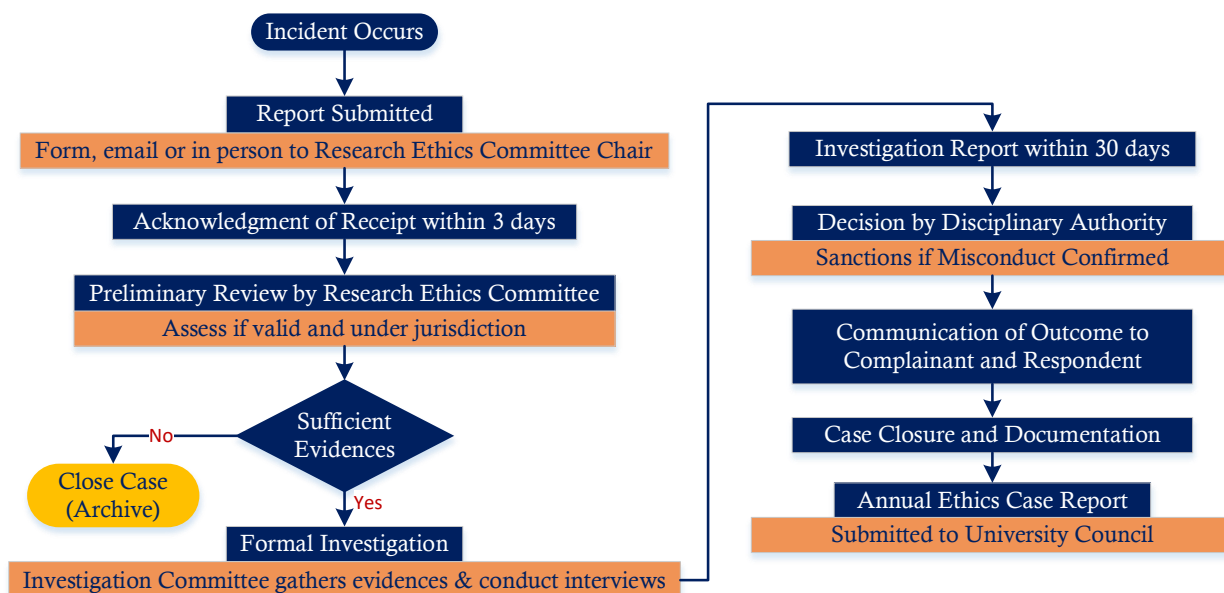


Figure 25: Ethics Reporting and Investigation Flowchart

Table 10: Ethics Case Tracking System

Case ID	Date Received	Complainant (Anonymous ID if needed)	Respondent	Summary of Allegation	Preliminary Review Outcome	Formal Investigation Outcome	Decision and Sanctions	Date Closed	Follow-up Actions

INTERNAL PROGRAM REVIEW

Internal assessment is the process in which the Deanship of Quality and Academic Accreditation (DQAA) responsible for internal quality arrangements for academic and administrative units, assesses the level of quality assurance measures adopted and practiced by an academic program with reference to the program eligibility criteria specified by the ETEC-NCAAA/International Accreditation body. Please refer to: ([Standards for Undergraduate Program Accreditation Eligibility Checklist](#)) and ([Standards for Graduate Program Accreditation Eligibility Checklist](#)).

Purpose

To assess whether an academic program is eligible for seeking program accreditation or re-accreditation.

Scope

The internal assessment process applies to both undergraduate and graduate programs assessing the quality assurance measures for teaching and learning and its support services.

Deliverables & Performance Indicator

The deliverables of the internal assessment process are listed below:

#	Name of the Documents	Responsible Entity
1	Internal Assessment Report Checklist	Program QA Committee
2	A Report on Internal Review Process	Program QA Committee
3	Program Improvement Action Plan	Program Chair
4	Progress Report of the Action Plan	Program Chair

Table 11: Internal Assessment Process documents

Internal Assessment Process

The following are the steps of the internal Assessment Process every three years:

- 1) DQAA/QAAC sends a memo to the program QA Committee Chairs about the timeline for the internal review process for the programs offered in the college.
- 2) DQAA/QAAC sends a memo to the Dean of the College about the timeline for the internal review process for the programs offered in the college and the names of the program QA Committee members.
- 3) DQAA/QAAC sends a memo asking the program chairs to provide the evidence based on the program eligibility checklist. The program chair provides the required program documents/evidence.

- 4) The program QA Committee will review the program documents and confirm them with the required list of evidence. In case of any missing documents, the committee can request the Program Chair to provide them.
- 5) The Committee Chair will submit the first draft of the report to the Program Chair and discuss all the observations and recommendations with them. The Program Chair has the discretion to approve or reject any observation/ recommendation provided he/she has a valid justification.
- 6) Based on the response from the Program Chair, the Committee Chair may revise the report.
- 7) The Committee Chair submits the final version of the Internal Assessment Report to the Dean- DQAA/QAAC. In addition to the recommendations for the program, the report includes recommendations for the administrative offices providing supporting services.
- 8) DQAA/QAAC will review and approve the Internal Assessment Report and share a copy of the report to the offices of the President and Dean of the respective Colleges.
- 9) DQAA/QAAC will request the Program Chairs for an improvement action plan based on the approved recommendations for the program.
- 10) DQAA/QAAC will request the administrative office(s) to provide their action plan for the recommendations (if any) as mentioned in the internal assessment report for a program.
- 11) QAAC will prepare a timeline to follow up with the recommendations and prepare a periodic report to the Dean-DQAA. The number of periodic reports might change based on the number of recommendations.

Guidelines for the Internal Review Committee

- 1) The Chair of the program QA Committee will conduct the first meeting appraising all members about the internal review process, program eligibility checklist, the expected evidence/documents, as well as their members' responsibilities.
- 2) The Chair will distribute the tasks among all the committee members.
- 3) All members use the Google Shared Drive folders prepared by the QAAC and complete the template and report after reviewing the documents submitted by the program.
- 4) The Chair will meet again with the members, where he/she discusses the reports prepared by the members for the sections assigned to them and finalizes the report.
- 5) Constructive feedback must be given in the report.
- 6) Personal opinions should be avoided in the report. Every comment written in the report should have a reference(s) that are approved by the FBSU.

- 7) The committee members must be punctual in completing the tasks assigned to them.
- 8) The report should remain confidential and not be shared with any entity internal or external to FBSU.
- 9) Institutional recommendations should be mentioned separately so that the responsible entities are involved in addressing them.

INSTITUTIONAL AND PROGRAMS ACCREDITATION

National Accreditation

FBSU is committed to the quality standards set by the National Center for Academic Accreditation and Evaluation (NCAAA) under the Education and Training Evaluation Commission (ETEC) in the Kingdom of Saudi Arabia. ETEC-NCAAA has two kinds of accreditation, namely: Institutional and Program based accreditation.

FBSU adopts the NCAAA Quality Cycle in ensuring the quality culture embedded in its day-to-day operations. The Deanship of Quality Assurance and Development (DQAA) centers work closely to ensure all the programs at FBSU follow the FBSU Quality Cycle. Please see table 12 below:

DQAA Centers/Units	Monitor the following
Quality Assurance & Accreditation Center (QAAC)	Program Specification, Course/Field Specifications, Course/Field Reports, Annual Program Report
Teaching Learning Center (TLC)	Assessment Plan, Assessment Report
Strategic Planning and Development Center (SPDC)	Action Plan, Accomplishment Report
Center for Statistics and Information (CSI)	All NCAAA and FBSU survey

Table 12: DQAA Centers and Units

Institutional Accreditation

FBSU was first fully accredited by NCAAA from May 2016 to April 2023. Starting 2022, FBSU schedules the preparation for the subsequent Institutional Accreditation four academic years before the accreditation expires. This preparation was led by DQAA in with the involvement of the whole FBSU community.

The FBSU community in coordination with the DQAA, prepared the Self- Evaluation Scales for the Institution (SESI) and the corresponding actions based on the priorities for improvement identified in the SESI. Then, these actions were implemented before preparing for the final version of the SESI. Evidences were collected, and the Self-Study Report for the Institution (SSRI) was prepared and submitted to the NCAAA. This was followed by External Review Panel evaluation which resulted in granting FBSU Conditional Accreditation in 2023. FBSU is diligently working on addressing the two provided conditions and engage external experts to guide the process. Table 13 below, which contains the major tasks of accreditation followed for the Institutional Accreditation.

Table 13: Major tasks of Accreditation

Tasks	Detailed tasks	Responsible
Application for accreditation	<ul style="list-style-type: none"> - Prepare a letter containing the approval from the president - Contract signing with the NCAAA 	<ul style="list-style-type: none"> - Office of the President - NCAAA - DQAA
Submission of the initial eligibility documents	<ul style="list-style-type: none"> - Prepare all eligibility documents (Believes standards are met and availability of eligibility documents) 	<ul style="list-style-type: none"> - FBSU academic and administrative units - DQAA Centers
Incorporating the feedback from the NCAAA	<ul style="list-style-type: none"> - Revise and update all eligibility documents based on the feedback of the NCAAA - Submit the final eligibility documents to NCAAA 	<ul style="list-style-type: none"> - FBSU academic and administrative units - DQAA Centers
Preparation of the Accreditation room	<ul style="list-style-type: none"> - Identify the room - Design the room and get the approval - Implement the design of the room - Include all required evidence in the room 	<ul style="list-style-type: none"> - Top Management - FBSU academic and administrative units - DQAA Centers - Institutional Supports
Preparation for the external review visit	<ul style="list-style-type: none"> - Determine the no Conflict of Interest with the external review panel - Finalize the schedule of the visit and detailed activities of the visit - Conduct orientation for all FBSU participants (Top management, academic and administrative staff, students, alumni, and employers) - Prepare for the campus tour - Send off with the top management - Arrange for the land transportation of the review panel (Receiving from the airport, FBSU-hotel transfers, sending to the airport) - Arrange for the food catering - Arrange for the PR coverage (Photos, welcome digital and website banners, fresh flowers) 	<ul style="list-style-type: none"> - DQAA and the whole FBSU Community - NCAAA Consultant
Conducting the site visit	<ul style="list-style-type: none"> - Proactive during the entire visit and alert with the additional request from the external review panel - Prepare for the exit meeting - Conduct post accreditation survey for all FBSU participants for continuous improvement 	<ul style="list-style-type: none"> - DQAA and the whole FBSU Community - NCAAA Consultant

Tasks	Detailed tasks	Responsible
Checking for the factual errors of the report of the external review panel	<ul style="list-style-type: none"> - Identify factual errors - Submit the factual errors to NCAAA 	<ul style="list-style-type: none"> - DQAA and the whole FBSU Community - DQAA
Preparation of the action plans based on the recommendation of the external review panel	<ul style="list-style-type: none"> - Develop action plans - Get the approval of the action plans - Submit the action plans to NCAAA 	<ul style="list-style-type: none"> - Top Management - DQAA and the centers/units/offices concerned
Implementation of the recommendations action plans	<ul style="list-style-type: none"> - Implement the action plan and collect evidences. - Submit the response to NCAAA 	<ul style="list-style-type: none"> - Top Management - DQAA and the centers/units/offices concerned
Implementation of the corrective actions in response to the accreditation conditions.	<ul style="list-style-type: none"> - Develop action plans - Implement the action plan and collect evidences. - Submit the response to NCAAA 	<ul style="list-style-type: none"> - Top Management - FBSU community - DQAA and the centers/units/offices concerned

Program Accreditation

In initiating the international program accreditation, the DQAA will prepare an Internal Assessment report for each program based on the timeline of the accreditation from the FBSU Strategic Plan. The Internal Assessment report contains a checklist and detailed report that a program may or may not be ready for the self-study process. Once the program is ready, the QAAC supports the college and program concerned to prepare and complete the Self-Evaluation Scales for the Program (SESP) based on the collected evidence. If the SESP of the program has compliance levels for all standards and essential criteria set by the NCAAA, QAAC conducts the Internal Review. The program finalizes the SESP, then prepares the Self-Study Report for the Program (SSRP) and participates in a Mock Review encapsulating the Internal Review.

The program presents the results of the Internal Review to the top management to get the final approval to proceed with the External Review, if deemed necessary. If approved by the top management, the major tasks will be prepared by the college and the department of the program with the support and assistance of the QAAC and NCAAA Consultant. These major tasks are in line with the ones shown in Table 13 above.

International Program Accreditation

FBSU is committed to the quality standards set by reputable international accreditation agencies and organizations. The institution, college, and the program's department identify a trustworthy international accreditation agency applicable to the program or the institution. Table 14 below shows the institution's corresponding international accreditation agencies, with website links, for which FBSU programs are currently seeking accreditation.

The NCAAA program accreditation initiation above is also applicable for international accreditation preparation. One of the differences is that the communication between the accreditation agency and the program will be through the College Dean and inform the President through the QAAC. In addition, for international accreditation, FBSU shoulders the hotel and airplane expenses of the review team. Other required processes of the international agency must be considered like ensuring the curriculum of the program follows the requirement of the agency.

Institution/Colleges	International Accreditation Agencies
College of Computer and Information Sciences(CCIS)	British Computer Society (BCS)
College of Business Administration (CBA)	Accreditation Council for Business Schools and Programs (ACBSP)
College of Engineering (CE)	Accreditation Board for Engineering and Technology (ABET)
College of Humanities (CH)	

Table 14: Institution and Colleges – International Accreditation Agencies

SECTION -III QUALITY ASSURANCE IN ADMINISTRATIVE SUPPORT SERVICES

The supporting offices (Deanship/Centers) help the academic programs in delivery the programs in alignment with the institutional and national quality educational standards. The following

1. Strategic Planning & Development Center (SPDC)
2. Deanship of Admission and Registration (DAR).
3. Deanship of Student Affairs (DSA)
4. Deanship of Graduate Studies and Research (DGSR)
5. Consultative Center for Studies and Community Service (CCSCS)
6. Library

STRATEGIC PLANNING & DEVELOPMENT CENTER (SPDC)

The Strategic Planning and Development Center (SPDC) is responsible for facilitating all planning-related activities across the university. It collaborates with academic and administrative entities, as well as institutional committees such as the Institutional Strategic Planning Committee.

Organizational Structure

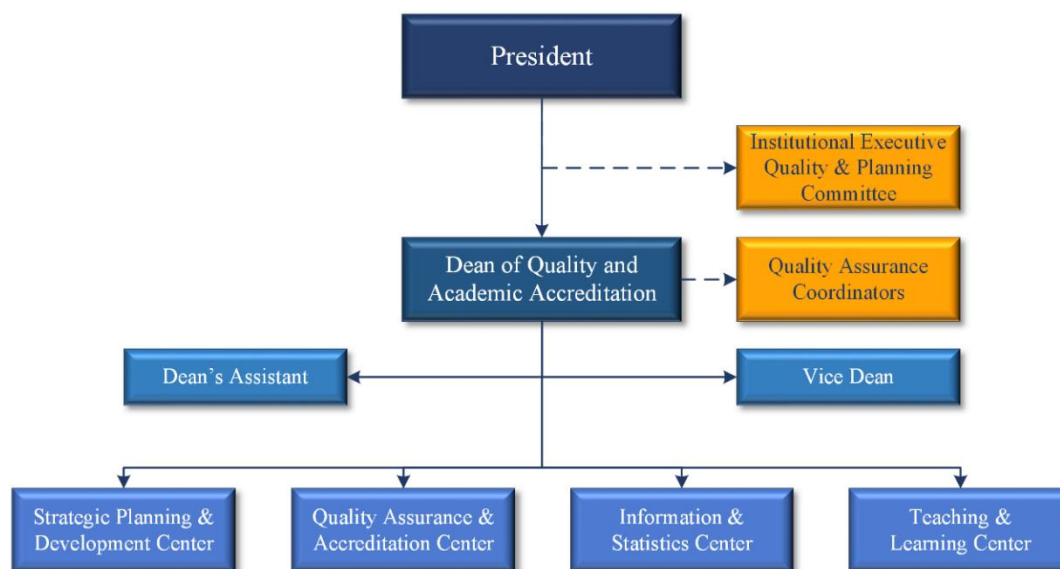


Figure 26: DQAA Organizational Structure

Quality Cycle Adopted by Center

SPDC ensures it is adhering to national and international norms to carry out its operations as laid down in FBSU's Strategic Planning Policy.

Phase I - Plan:

In accordance with international best practice, FBSU's strategic planning process has four major phases

- Strategy Formulation.
- Validation and Delivery.
- Implementation and Monitoring.
- Evaluation and Feedback

This approach is consistent with the Bryson strategic planning model (see Bryson's Strategic Planning for Public and Nonprofit Organizations, 2011).

Strategy Formulation

With regards to Strategy Formulation (Phase I), the planning team employed international best practice as a guiding principle

The FBSU strategic plan formulation process was designed based on four integrated stages:

- Wide stakeholder engagement and participation.
- Multiple alignment and comparison.
- Goal and Objective setting and revision.
- Reference to the status of the 2nd Strategic plan 2012-2017 (LEADER)

Alignment with NCAAA Standards

The following NCAAA Standards 1.1 and 1.2 are compiled by SPDC.

1.1 Institutional Mission and Goals

- 1.1.1 The institution's mission defines the purpose of its existence; is consistent with its nature, the needs of the community, and the national trends; and is periodically reviewed.
- 1.1.2 The institution's goals are linked to its mission, clear and realistic.
- 1.1.3 The institution's mission and goals are formally approved by the governing body and are widely publicized.
- 1.1.4 The mission guides all the institution's operations (e.g., planning, decision-making, resource allocation, academic program development).
- 1.1.5 The institution has values that guide the work and the behavior of its employees.

1.2 Vision and Strategic Planning

- 1.2.1 The institution has a clear, ambitious, and publicized vision.
- 1.2.2 The institution develops a well-defined, comprehensive strategic plan that is consistent with its vision and is in line with national development plans and programs (e.g., Vision 2030 and National Transition Programs).
- 1.2.3 The institution's strategic plan includes clear strategic objectives, linked to specific performance indicators to measure the extent of their achievement based on targeted performance benchmarks.
- 1.2.4 The strategic plan includes an estimation of potential risks and mechanisms to deal with them.
- 1.2.5 The institution adopts operational and execution plans for all its units, for which the strategic plan represents a reference framework.

- 1.2.6 The institution follows up the extent to which the strategic plan is implemented through specific mechanisms; prepares periodic reports on its progress; and develops and adjusts it as required based on the results of the review, assessment process, and changing circumstances.

The above NCAAA standards are fully integrated and adhered to in respect to FBSU's strategy formulation process.

Risk identification: SPDC is a small center with many deliverables and has a few major risks:

1. Lack of manpower or unexpected unavailability of manpower
2. Lack of support form, or unavailability of software
3. Lack of training to stay up to date in the latest techniques

Lack of manpower can be mitigated to a large extent by our ability to call upon the assistance of our broader support structure within the institutional planning committees. Issues with funding for software or licensing agreements are being handled through in-house development of resources to ensure technical know-how is maintained within the organization. Finally, the risk of becoming out of touch with training will be resolved by seeking out enrollment in relevant workshops and courses every year.

Policies

[Strategic Planning Policy](#): This policy guides the formulation of new 5-year strategic plans at the institution.

Processes

The Strategic Planning Policy will be supplemented with a strategic planning procedure document to inform leaders of the process followed. This can also assist in mitigating the risk associated with unexpected changes. All planning activities are cascaded through the institution to ensure regular reporting reaches the University Presidents and Vice/ Assistants Presidents. This is achieved through the following committees and reporting structures:

1. Institutional Strategic Planning Committee (ISPC chaired by the President)
2. Institutional Strategic Planning Steering Committee (ISPSC chaired by DQAA Dean)
3. Institutional Executive Quality & Planning Committee (IEQPC)
4. College Quality Committees (CQC)
5. Center and Unit Directors

Each college has its own strategic plan, which is broadly aligned to the institutional plan. The

annual monitoring and reporting by each CQC then informs the overarching achievement of the institutional plan. Likewise, institutional entities, such as the Information Technology Center, monitor and report on their planning activities and how they support the institutional objectives. Each entity engages with these documents at the beginning of each academic year to list their initiatives for the year, and at the end of the year for a final status update and annual accomplishment reporting.

5-Year Strategic and Annual Action Plan

SPDC facilitates and coordinates all the oversight of planning formulation, submission, and updating, in addition to accomplishment/achievement reporting.

Resources: The strategy adopted by the center to optimize expertise and to maintain a small center while incorporating and engaging key members of the FBSU senior team through the above-mentioned institutional committees.

Documentation:

SPDC communicates primarily through email for direct communication with key stakeholders. However, when appropriate and required, it also uses FBSU Twitter and formal publications to engage with and report to stakeholders.

Key Performance Indicators:

SPDC is responsible for:

KPI-I-01: Percentage of achieved indicators of the institution strategic plan objectives.

KPI-P-01: Percentage of achieved indicators of the program operational plan objectives.

Though it does not have specific indicators to measure its performance, internally, performance is monitored by the direct line manager.

Phase II - DO / Implement

Communication with all relevant entities stems from and is directed by the SPDC annual workflow chart below:

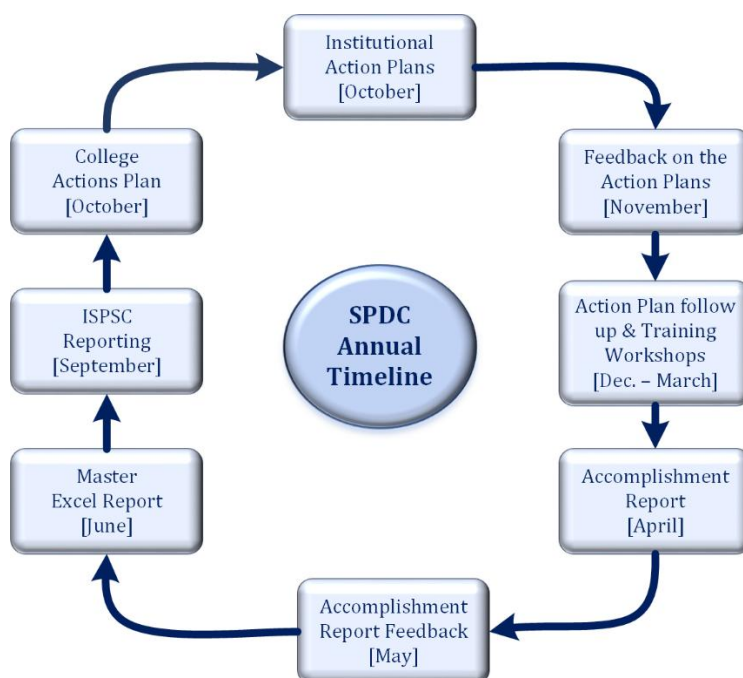


Figure 27: SPDC Annual Workflow Timeline

Phase III - CHECK (Monitor & Review)

Monitor

The center always maintains a log to consult, follow up and mark tasks as done in a timely and collaborative manner.

This is supplemented by monthly meetings where tasks, including feedback of submissions received and get the input and feedback of all members spontaneously.

This is further enhanced with meetings with the line manager to provide updates, receive feedback and proactively tackle any concerns.

Review

SPDC's status progress on its actions is updated at the end of each semester and at the end of the year, the accomplishment report is prepared. Although this is not a stand-alone report, it can serve as a portion, and contribute to larger institutional reports.

The quality of these deliverables is judged at the highest levels of the institution. This feedback serves as the focus for SPDC to then review and act on with an appropriate and proportionate set of actions.

Phase IV - ACT / Update

Feedback from any given academic year is incorporated into the next year's action plan to enhance the service provided. These can result in short minor changes or larger projects

DEANSHIP OF ADMISSIONS AND REGISTRATION (DAR)

The Deanship of Admissions and Registration (DAR) is the academic service unit of Fahad Bin Sultan University that administers operations in the areas of student admission, Scheduling, Registration/Enrollment, Student Records, Graduation, Faculty Teaching Loads, and other related services. <https://fbsu.edu.sa/All/sections/Deanship-of-Admissions#content>

Organizational Structure

The Dean heads the Deanship, assisted by the Director of Admission and Registration. The services provided by the Deanship are considered as the core supporting services for the academic units. The Dean of DAR supervises the Student Information System (SIS) in coordination with the CIS.

As shown in Figure 28, DAR is structured into five departments, namely:

1. Department of Undergraduate Studies with admission and registration officers.
2. Department of Graduate Studies with admission and registration officers,
3. Department of Student Files & Archives under the supervision of the Dean's Assistant for Quality Assurance,
4. Department of Certificates and Graduation, and
5. Department of Programs Schedule.

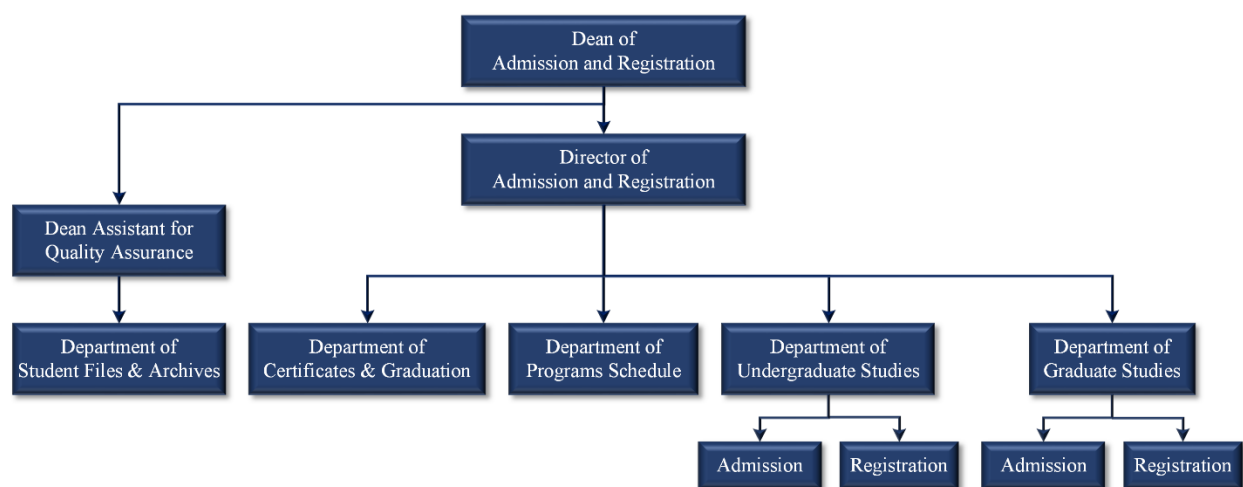


Figure 28: DAR Organizational Structure

Quality Cycle Adopted by the Deanship

DAR strives to ensure the quality of the services provided to its stakeholders through several methods. First, the annual feedback reports provided by the Deanship of Quality and

Academic accreditation (DQAA), the QAAC, and the Institutional Student Affairs' Committee (ISAC) are reviewed. Second, feedback provided by students and college deans is continuously received by DAR officials. These reports are analyzed, and areas of improvement are identified. Accordingly, plans are developed for improvement based on the resources made available by the FBSU management. The relevant bodies at FBSU have approved these plans. Then, the approved plans are implemented.

DAR quality cycle is listed below:

Phase 1 - Plan:

The important quality elements required by DAR for planning the services include:

Alignment with NCAAA Standards

The ETEC-NCAAA standards followed by DAR are:

4.1 Student Admissions

- 4.1.1 FBSU is committed to implementing policies and standards governing student admission, transfer, and credit equivalency and distributes students to academic programs according to specific, fair, and published mechanisms.
- 4.1.2 FBSU adopts procedures that ensure consideration of the recommendations from colleges and academic programs regarding the number of students planned for admission to the programs, taking into account the available resources.
- 4.1.3 FBSU adopts an effective electronic system to manage admission and registration processes, data retrieval, and requests for statistics, to monitor students' progress during their studies, and to provide electronic services to students with ease and speed.
- 4.1.4 FBSU makes available all information related to the types of programs and courses it offers, including their mode of instruction, financial costs, and services, and makes it accessible to everyone before the application for admission.

4.2 Student Records

- 4.2.1 FBSU maintains clear policies and rules for managing students' records, which define their content, mechanisms for protection, preservation, confidentiality, and accessibility, with the provision of backup copies.
- 4.2.2 The student record system provides statistical data to related parties at the institutional and program levels required for planning, reporting, and quality assurance processes (e.g., graduation statistics, ratios of students transferred, withdrawn, under probation, dropped, and deferred).
- 4.2.3 FBSU applies specific and appropriate procedures for updating students' records,

delivering student results, and timely revealing them.

4.2.4 FBSU establishes an effective mechanism for verifying that each student meets graduation requirements.

Risk identification

The risks related to the services provided by DAR include:

- A decline in student enrollment
- The decline in the quality of enrolled students
- Student retention
- Potential lack in the quality of student advising
- Lack of adequate space
- Lack of enough faculty members
- Retention of top-performing employees
- Lack of training
- IT security issues
- Integrity issues
- Reputation issues

Strategies that are adopted to address such risks include:

- Cooperating with the Institutional Risk Management Committee.
- Propose strategies to attract and retain high-quality students.
- Supporting the Student Advising Center to improve the advising process.
- Proposing strategies to attract and retain high-quality employees.
- Coordinating with the ITCS to continuously improve security measures.
- Identifying issues that might negatively affect the FBSU's reputation to mitigate them.

Policies:

DAR applies several relevant policies, specifically the Rules and Regulations for Undergraduate Academic Study and Examination, as well as the associated Executive Rules. These policies include admission, transfer, registration, assessment, student record management, graduation, calendar, and student transactions policies.

The admissions process, transfer process, scheduling process, course registration process, add/drop process, grade recording process, graduation process, withdrawal process, dismissal process, and calendar preparation process.

The admission and registration policies and processes are available on the FBSU website: <https://fbsu.edu.sa/All/Custom/Pages/Admission-&-Registration>.

Five-Year Strategic and Annual Action Plan:

The purpose of contributing to the FBSU Strategic Plan and implementing the goals and objectives assigned to DAR through the annual action plan is to improve the services provided to all stakeholders continually.

Strategic Goals and Objectives:

Goal 1.3: Improve teaching and learning process

- **Objective 1.3.3:** To nurture and sustain a culture that supports and strengthens teaching and learning excellence

Goal 2.3: Provide a variety of professional development opportunities for faculty and staff

- **Objective 2.3.2:** To establish a mechanism for the professional growth of academic and administrative leaders.

Goal 4.2: Transform IT infrastructure and application services

- **Objective 4.2.2:** To deploy FBSU Cybersecurity management practices.

Resources:

The strategy adopted by DAR for acquiring resources to carry out its functions effectively is based on reviewing the feedback provided to DAR and identifying gaps in accordance with the FBSU strategy. Based on these gaps, needed resources are identified and requested. The requested resources are provided to DAR upon approval from upper management.

Documentation:

DAR disseminates information about the services provided to FBSU stakeholders primarily through the FBSU website, email, SMS, and new student and faculty orientation sessions. Templates used for planning and reporting purposes are available in DAR's Admission and Registration Functions, including Policies, Procedures, Guidelines, Forms, and Assessment Responsibility (<https://fbsu.edu.sa/All/Custom/Pages/Admission-&-Registration>).

Key Performance Indicators:

- 1- First-year students' retention rate.
- 2- The proportion of administrative staff participating in professional development activities during the past year.
- 3- Number of identified cybersecurity breaches.
- 4- The Proportion of identified cybersecurity breaches that have been mitigated

Phase II - DO / Implement

- Admission information is disseminated early every semester for the upcoming semester.

- Registration information is disseminated early in every semester for the upcoming semester.
- Major information changes are disseminated regularly every semester.
- Graduation information is disseminated in advance of the graduation ceremony.
- Updates to the Policies are uploaded to the FBSU website as soon as the University Council approves them.
- The academic calendar is uploaded to the FBSU website as soon as the University Council approves it.

Phase III - CHECK (Monitor & Review)

Monitor

DAR conducts condition monitoring, and improvements are implemented in a way that does not affect daily operations. Progress is monitored through several internal and external mechanisms at DAR. Adjustments are implemented, and the level of improvement is measured through surveys conducted by the concerned offices.

Review

The various mechanisms by which the center evaluates the quality of its services include annual satisfaction surveys. The accomplishments report is submitted to the FBSU management at the end of every academic year to be consolidated with the overall FBSU accomplishment report.

Phase IV - ACT / Update

- DAR prepares action plans for the next academic year based on the accomplishments as well as the improvement requirements to report considering the evolving national and FBSU priorities.
- Coordinate with the concerned offices to provide needed resources for the upcoming academic year.
- Start the update process of relevant FBSU policies.
- Start the process of adding e-services or improving the current services.

DEANSHIP OF STUDENT AFFAIRS (DAS)

The Deanship of Student Affairs (DSA) strives to enrich student experiences outside the classroom as persons, scholars, and citizens by offering a wide range of extra-curricular activities, events, and dedicated units dedicated to serve the students' overall needs in the University.

Organizational Structure

DSA is structured into 3 departments, shown in Figure 29, namely:

- **Guidance and Counselling Department:** facilitates students' intellectual and personal growth, and addresses students' non-academic requirements and needs by offering social services and psychological counseling.
- **Outreach Department:** keeps in close touch with employers and FBSU alumni and alumni, and provides career counselling, work opportunities, services and workshops to graduates and alumni for preparing CVs and conducting job interviews.
- **Student Activities Department:** responsible for organizing extra-curricular activities and events, e.g., working with FBSU student clubs, scouts, and organizes and manage students' sport activities.

The academic counselling is the main responsibility of the students' academic advisors in their respective academic programs. An academic advisor, a faculty member, is assigned to each student to provide counselling, tutoring opportunities, and guidance to students regarding registration schedules and academic complications, e.g., low GPAs and absences.

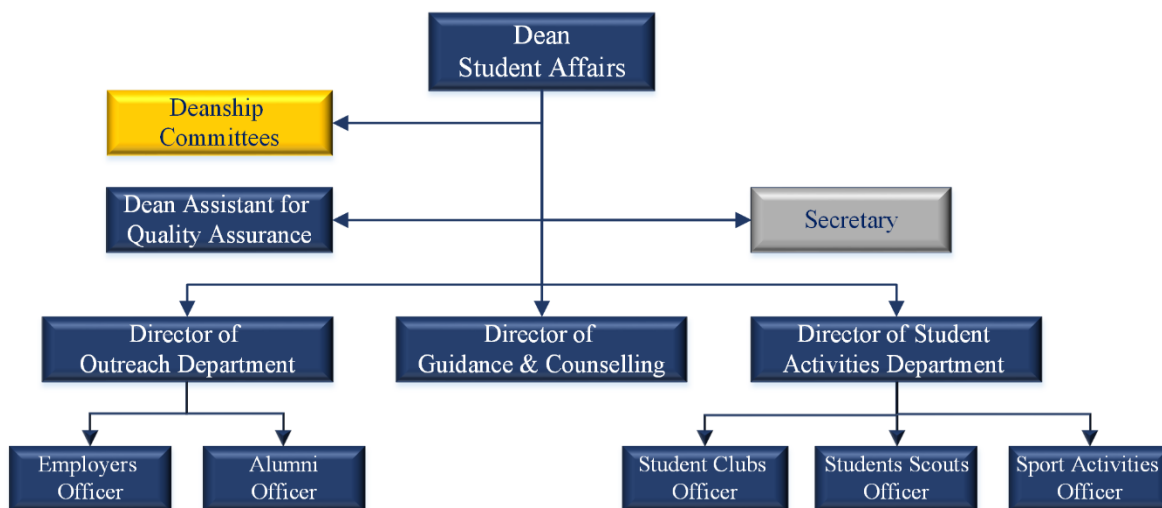


Figure 29: DAS Organizational Structure

Policies and Handbooks

- 1) [Plagiarism Policy](#): Defining what constitutes plagiarism and copy rights, and the responsibilities of all for dealing with and preventing such violations.
- 2) [Student Complaint Policy](#): A policy detailing the students' rights to voice their complaints to the Deanship of Student Affairs and to have their concerns answered in a timely manner.
- 3) [Student Code of Conduct Disciplinary Procedures](#): details the policies and procedures for Student's Rights, Disciplinary Violations, Disciplinary Actions, Formation and Terms of Reference of the Student Conduct Committee, Disciplinary Procedure, and Grievances against Disciplinary Decisions.
- 4) [Student Employment Policy](#): A policy identifying the terms and conditions applicable of students employment.
- 5) [Student Clubs Policy](#): A policy specifying the terms of reference establishment conditions and formation of the student clubs, and the process of conducting the club activities.
- 6) [Academic Advising Policy](#): All faculty members within a degree-granting program will be assigned students for academic advising. Academic advising is mandatory for all students to be able to register for their courses. The purpose of this policy is to provide guidelines on academic advising for all students at FBSU.
- 7) [Academic Counselling Policy](#): The purpose of this policy is to provide guidelines on identifying and supporting students who are in need of support or who are facing psychological issues.
- 8) [Students with Special Needs Policy](#): This policy is to provide support for any student who may need support in his/her learning experience at FBSU due to any special needs.

Students' Rights & Responsibilities

- All rules are clearly stated on the FBSU website.
- Violations and disciplinary actions are clearly stated in the code of conduct.
- Committees are created to follow up on these offenses such as the Student Conduct Committee.
- The existence of clear rules on violations, and bylaws.
- Unified and announced policies procedures.
 - Refer to [Student Orientation Policy](#)
 - Refer to [Student Code of Conduct Handbook](#).

FBSU has established several Student Clubs at both the institutional and program level

to engage students in a real-world experience that helps them learn about leadership and engage in extra-curricular activities. Examples of these clubs include: Entrepreneurial Club, Future Technologies Club, Mental and Cognitive Games Club, Culture and Art Club, Civil Engineering Club, Mechanical Engineering Club, Electrical Engineering Club, Renewable Energy Club, Law Club, etc..

The Student Clubs provide diverse activities and events for students and the university's community. Students in the clubs plan and coordinate special cultural, educational, and thought-provoking events.

Services

Assisting students with special needs:

- Students with special needs call the Students Scout Officer hotline to request assistance, whilst having their requests answered diligently and swiftly.
- Facilitates equipped with all necessary tools to facilitate navigation through the university's buildings
- Special allocation of parking for students with special needs- aimed at shortening the distance needed between the parking and the students' classes
- Certain amendments to the time, space, and privacy of students with special needs during final exams, depending on the specific case.

Guidance and Counselling, and Career Counselling:

- The Guidance and Counselling Department offers help and counseling regarding non-academic, social, and educational matters for all students. It aims to help students benefit from their skills and to graduate from the university at the expected time, provided with both educational experience and personal skills.
- Career counseling is aimed at assisting university students and alumni to build a deeper understanding of their field, prepare them for the labor market, learn how to overcome all obstacles, merge them in the work environment to gain a genuine and authentic experience in a realistic atmosphere during their field training.

International, Gifted, and Underachiever Students:

- A detailed policy will be created specifically designed for international students.
- Gifted students receive recognition through a multitude of certificates given to them by the Deanship of Student Affairs.
- Underachiever students are contacted and monitored by their academic advisors.

Student Activities:

- Students' extra-curricular and co-curricular activities are held regularly throughout the academic year. Additionally, monitoring and rewarding said activities will be done through the Events system.
- **Hosting guest speakers and guests from outside FBSU:**
 - Detailed info about the speaker, budget, and other requirements along with the approval letter must be submitted to the Dean of Student Affairs minimum of 2 weeks before the event date.
 - Booking Venue, IT request, Announcement (Email, Twitter, Instagram, SMS), Catering and Publications service and purchase forms must be submitted by the club supervisors to the responsible offices for each matter.
 - Approval from the Dean of Student Affairs.
- **Events for FBSU members only:**
 - The Department Chairperson and College Dean must approve the event.
 - Budget and other requirements along with the approval letter must be submitted to the Director of Student Activities minimum of 2 weeks before the event date. The Student Activities Director submits the proposal to the Dean of Student Affairs, for approval.
 - Booking Venue, IT request, Announcement (Email, Twitter, Instagram, SMS), Catering and Publications service and purchase forms must be submitted by the club supervisors to the responsible offices for each matter.
- **Field Trips:**
 - Budget and other requirements along with the approval letter must be submitted to the Student Activities Director minimum of 2 weeks before the trip date.
 - The field trip must be approved by the Dean of Student Affairs.
 - A detailed letter must be sent to the Assistant to the President for Administrative and Financial Affairs.
 - Bus request form and Announcement (Email, Twitter, Instagram, SMS), must be submitted by the club supervisor to the Vice President for Administrative and Financial Affairs.
 - Student guardian approval must be submitted to the Student Activities Supervisor minimum of 3 days before the trip.

- **Alumni:**

- Alumni are continuously contacted through all available means of communication, and through the Alumni Portal with their information being updated, regularly.
- Alumni career advising workshops are conducted annually, and work opportunities are disseminated to all relevant alumni.
- Alumni reunion will be held annually.

Coordination with Colleges, Academic, and administrative offices:

- Continuous communication through meetings, calls, and emails occurs between the DSA and all offices, ranging from students' activities, performance, and accommodations to organizing mutual events.
- All the processes, services, and implementations will be continuously monitored through surveys, which will be disseminated to students, annually. Upon receiving the results of the surveys regarding the services provided by DSA, proper action will be taken to either maintain or enhance the level of quality.

Key Performance Indicators

KPI1: Employers' evaluation of the graduates

KPI 2: Students' performance in the professional examinations

DEANSHIP OF GRADUATE STUDIES AND RESEARCH (DGSR)

The Deanship of Graduate Studies and Research (DGSR) is the administrative graduate studies and research structure at Fahad Bin Sultan University (FBSU) that provides faculty members and graduate students with different research services. DGSR was established in 2018, and since then the DGSR has continuously improved the research policies and bylaws at the university. DGSR is responsible for assisting FBSU researchers and providing them with the appropriate infrastructure to conduct their research activities. DGSR dean reports to the President of the university, which makes the decision process fast and effective. For more information, kindly visit our [DGSR webpage](#).

Organizational Structure

The following DGSR Organizational structure shows the hierarchy of the center, as shown in Figure 30. DGSR Dean reports to the President of the University, which makes the decision process fast and effective.

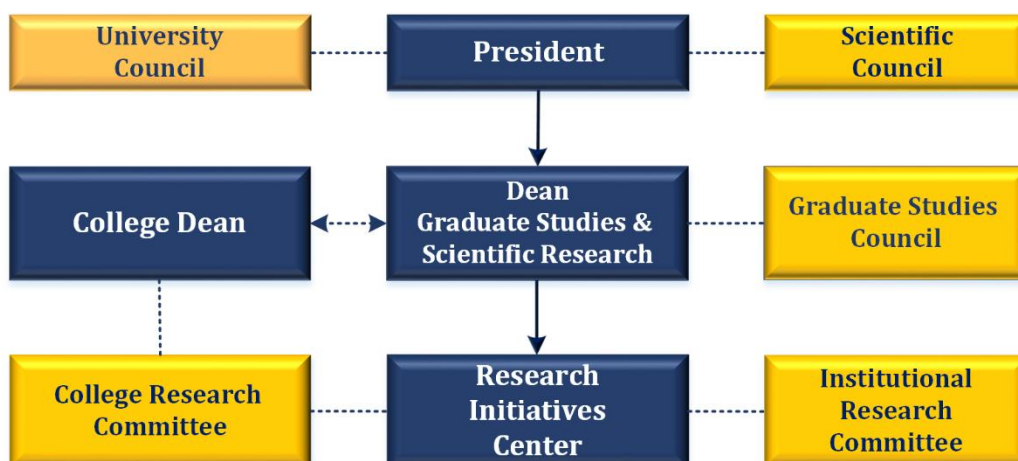


Figure 30: RIC Organizational Structure

The Research Initiatives Center (RIC) is responsible developing research strategy and initiatives, facilitating the research projects, and for evaluating the research performance at FBSU in terms of outcomes and expenditure. RIC works in close coordination with Institutional Research Committee (IRC) and the Research Committees of the Academic Colleges.

Quality Cycle Adopted by Center/Office

In this section, we introduce the important measures and best practices taken by RIC to ensure quality of the services provided to its stakeholders. To meet the requirements and the standard that FBSU follows, we have adopted the well-known quality assurance cycle

(i.e., PIMRU or PDCA) which are elaborated in the following phases as shown in Figure 7.

Phase I- PLAN:

The planning of all the services provided by the RIC involves

1. Alignment with NCAAA standards.
2. Risk Management.
3. Development of Policies and Procedures.
4. Development of 5-year Research strategic plan and annual research action plan to accomplish the strategic plan.
 - Identification of Key and operation performance indicators to achieve Research related objectives,
 - Estimation of budget to meet the research objectives, and
 - Planning for acquiring resources (including staff, equipment, and facilities).
5. Development of performance criteria for evaluating the quality of provided services.
6. Documentation.

Alignment with NCAAA Standards:

RIC adopts the following ETEC-NCAAA standards at the institutional level to ensure adherence of all phases of the quality cycle in providing services to FBSU stakeholders:

- Planning and Management of Research, and
- Support of Research and Innovation.

Risk identification:

It is mandatory for all the supporting units including RIC to identify risks related to the administration of the center as well as the services provided by it. These risks are categorized into financial risk, IT related risks and facility risks. The center analyses the probability and impact of these risks and develops strategies for mitigating or avoiding the risks. These strategies are included in the 5-year strategic and annual operational plans.

Policies:

The following research policies have been developed by the DGSR which are required to be followed by the FBSU faculty and students:

- [Research Policy](#): This policy provides a broad course of action for the development and implementation of research activity and management in the university.
- [Participation in Scientific Conferences Policy](#): This policy provides guidelines for attending scientific conferences by faculty members with master's and PhD degrees.

A scientific conference is a place where researchers and scientists from various countries are gathered to discuss and exchange ideas about the results of their scientific findings.

- [Research Citations Incentives Policy](#): This policy provides guidelines for financial incentives to faculty members who publish research papers in scientific journals listed in high- ranking databases or produce high-quality patents.
- [Research Publication Incentives Policy](#): This policy provides guidelines for financial incentives to faculty members who publish research papers in scientific journals listed in high-ranking databases or produce high-quality patents.
- [Research Project Funding Policy](#): This policy provides guidelines for funding research projects.
- [Conferences Attendance Policy](#): This policy provides guidelines for funding the attending scientific conferences by faculty members.
- [Intellectual Property Policy](#): The main purpose of this policy is to regulate and assign copyright to created works and patents based on international best practices. This policy applies to all FBSU members and visitors who have an official appointment at FBSU.

Processes:

The following processes for providing services are included in the policies

1. [Process for applying for participation in scientific conferences.](#)
2. [Process for applying for research publication incentives.](#)
3. [Process for applying for research project funding.](#)
4. [Process for applying for conferences attendance.](#)
5. [Process for applying for intellectual property.](#)

Forms:

The following processes for providing services are included in the policies

1. [Form for applying for participation in scientific conferences.](#)
2. [Form for applying for research citations incentives.](#)
3. [Form for applying for research publication incentives.](#)
4. [Form for applying for research project funding.](#)
5. [Form for applying for research publication support.](#)
6. [Form for applying for intellectual property.](#)
7. [Form for applying for patents incentives.](#)

Annual Action Plan:

RIC 5-year Research Strategy and Policies are aligned with the university strategy, policy, and governance for research.

The annual operational action plans are prepared to achieve the goals and objectives of the research strategy.

Resources:

Based on the Annual action plan guided by the 5 -year strategic plan, the resources are acquired before the beginning of the academic year. These resources can be either the RIC staff, formulation of the College Research Committees, establishment of research groups or labs. In addition to that, the equipment used for research labs and the facilities is prepared for accomplishing the goals and objectives at the institutional and college level.

Documentation:

RIC documents action plans, forms for all the processes, and templates for accomplishment reports at various levels such as research labs reports, research statistics, etc. These reports are submitted to the higher management on a periodic basis and discussed in the Institutional Research Committee.

Key Performance Indicators:

The following NCAAA and FBSU Key performance indicators are used for measuring the objective related to Research Theme.

KPI-I-16	Percentage of publications of faculty members
KPI-I-17	Rate of published research per faculty member
KPI-I-18	Citation's rate in refereed journals per faculty member
KPI-I-19	Number of patents, innovations, and awards of excellence
KPI-I-20	Proportion of the budget dedicated to research
KPI-I-21	Proportion of the external funding for research
KPI-P-14	Percentage of publications of faculty members
KPI-P-15	Rate of published research per faculty member
KPI-P-16	The average number of citations in refereed journals from published research per faculty member in the program

Phase II- DO / Implement:

The RIC Director disseminates the research policies (new and existing) at the beginning of the academic year and then regularly update the FBSU stakeholder through announcements and website. Moreover, RIC personal meet FBSU faculty and students on a regular basis to respond to their inquiries and obtain their feedback.

Services provided by the RIC are briefly described as follows:

Research Funding

FBSU provides different funding opportunities to its faculty members, including research projects, conference attendance, journal publication fees, and incentives. RIC's responsibility is to ensure the quality standard of all research activities and contents by following approved research bylaws and policies; all policies and bylaws are available on the [FBSU website](#)

Intellectual Property Management

Providing quality education is essential to recognize the intellectual achievements of the FBSU community. Therefore, RIC is implementing an approved Intellectual Property Policy, which has all the information needed to maintain the tradition of sharing intellectual property ownership with the creators of that Intellectual Property.

Research Repository

RIC will develop a reliable, comprehensive, and up-to-date research repository and information system (IS) that provides all kinds of data to monitor the research outcomes and expenditure. IS will use this repository to apply advanced data analytics and create dashboards for different stakeholders at FBSU.

Phase III – Monitor & Review

All the processes, services, and implementations are continuously monitored through surveys which are disseminated at the end of each academic year. In addition to that RIC has regular meetings with the College Research Committees, research lab leaders and the FBSU higher management to discuss the current situation and take fact-based decisions for improving the intellectual contribution at FBSU. Monitoring of research statistics is also done every semester.

At the end of the year RIC review the services provided and the research statistic and prepares an accomplishment report based on the annual operational plan.

Phase V - ACT / Update

FBSU conducts annual stakeholder (graduate students, faculty) satisfaction surveys to know their opinion about the quality of the services. Upon receiving the results of the surveys - regarding the services provided by RIC, proper actions are taken to either maintain or enhance the level of quality of services and research statistics. These actions are included in the annual action plan for the next academic year.

CONSULTATIVE CENTER FOR STUDIES AND COMMUNITY SERVICE

The Consultative Center for Studies and Community Service (CCSCS) at Fahad Bin Sultan University strives to serve the community through providing consultations, practice-based learning, training programs, projects, activities, and events.

The Center works in cooperation with the Institutional Community Engagement Committee and with the academic and administrative units at FBSU for performs the following tasks:

- Providing services to institutions, businesses, and individuals in the public and private sectors.
- Contributing to the development of human resources by holding courses, professional diplomas, workshops, seminars, and educational programs to qualify and develop the capabilities of workers in the public and private sectors, as well as university employees.
- Conducting studies and research, as well as providing necessary consultations, to assist in the development of national industries in terms of quantity and quality.
- Conducting and reporting on laboratory tests and analyses required by the public and private sectors; and

Visit the center webpage for further information: <https://fbsu.edu.sa/All/sections/The-Consultative-Center-for-Studies-and-Community-Service#content>

Definitions:

- **Community Service:** Conducting a workshop, event, course, or visit targeting an audience from the public.
- **Continuing Education:** Conducting an academic program with a specific number of hours in a continuous manner requires passing specific exams to earn certain certifications targeting an audience from the public.
- **ICEC:** Represents the Institutional Community Engagement Committee which ensures the quality of FBSU community activities outcomes from Colleges and CSCEC.

Organizational Structure

CCSCS serves the community via FBSU faculty, staff, and students through two main categories and four sub-categories as below in Figure 31.

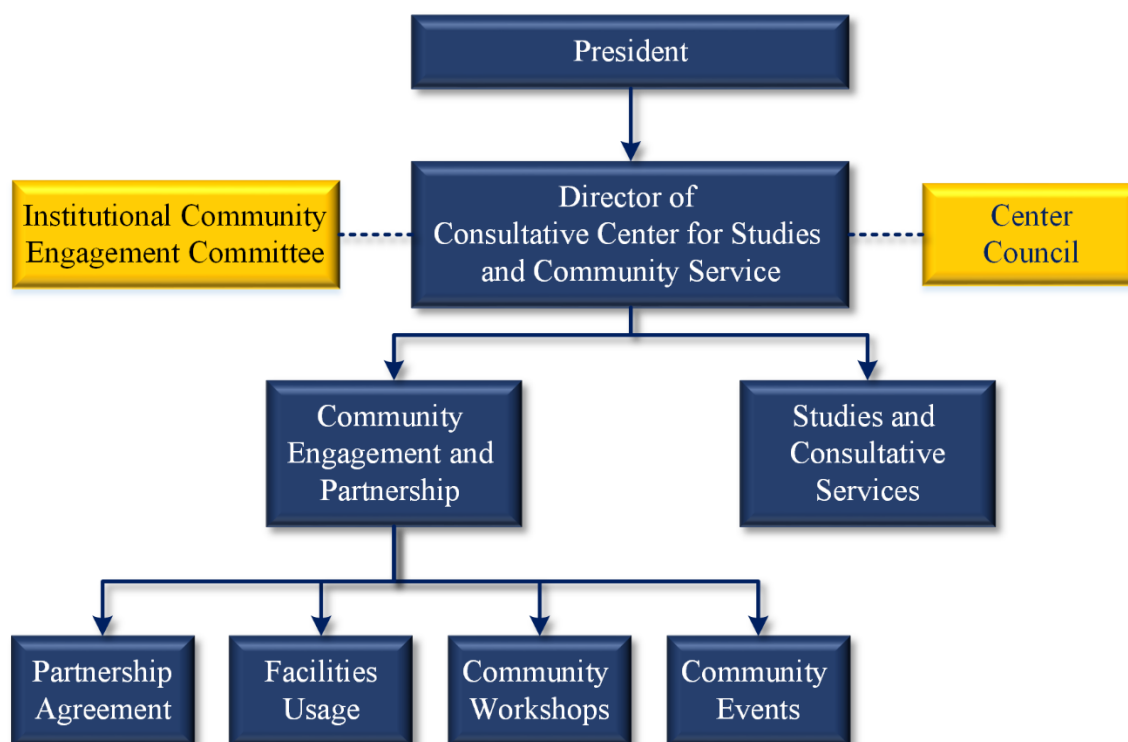


Figure 31: CCSCS Organizational Structure

Policies and Bylaws

Center Bylaws

Consultative Center for Studies and Community Service (CCSCS) bylaws stipulates the center governance including the formation and responsibilities of CCSCS Director and the formation and responsibilities of the Center Council. Moreover the bylaws stipulates the distribution of income generated from the center programs, workshops, and consultation. Kindly visit this link for more details: <https://fbsu.edu.sa/Bylaws/Consultative-Center-Bylaw.pdf#content>

Community Service Policy:

The purpose of the [Community Service Policy](#) is to promote personal, social, and civic development of FBSU students, faculty, and staff. It also aims to provide FBSU students with practical experience working with community-based organizations and individuals.

Community Service Quality Cycle

This process, shown in Figure 32, aims to manage and supervise FBSU Community Services on an institutional level via four phases: Planning, Implementation, Certification and Documentation.

Planning Phase	<ul style="list-style-type: none"> • Submit community service program proposal to the Department Chair for approval, • Dept. Chair submits the approved proposal to CCSCS.
Implementation Phase	<ul style="list-style-type: none"> • CCSCS submits the program to the PR for announcement on website & social media, • CCSCS arrange with administrative and academic units for logistical support,
Certification Phase	<ul style="list-style-type: none"> • Submit list of attendees, e-mails, mobile numbers, and attendance sheet, and test results (if any) to CCSCS . • CCSCS conducts participants' survey and issues certificates.
Documentation Phase	<ul style="list-style-type: none"> • Submit post program data to CCSCS. • CCSCS prepares and submits an accomplishment report to the Institutional Community Engagement Committee. • CSI updates the KPIs data.

Figure 32: FBSU Community Services Process Flowchart

Phase I - Planning Phase

Alignment with NCAAA Standard 8: Community Partnership

8.1 Planning and Management of Community Partnership

- 8.1.1 The institution establishes a plan for community partnership that is consistent with its mission, goals, and the needs of the community.
- 8.1.2 The institution ensures the active participation of its employees and students in implementing its community partnership plan through a clear and variety of tasks and activities.
- 8.1.3 The institution implements clear policies and procedures for the provision of consultancy and services to other sectors and specifies the related rights and benefits.
- 8.1.4 The institution implements specific mechanisms for documenting, monitoring, and assessing the effectiveness of its activities in the field of community partnership according to specific performance indicators; and prepares periodic reports that contribute to the improvement of the performance.

8.2 Activating Community Partnership

- 8.2.1 The institution provides the opportunity to employers and professional bodies to participate actively in the planning and development of institutional and program performance and to support their activities.

- 8.2.2 The institution encourages teaching staff, employees, and students to cooperate with the community institutions, various scientific and professional bodies, and to be involved in voluntary work.
- 8.2.3 The institution provides professional development and continuous education programs that contribute to meeting the community's needs.
- 8.2.4 The institution offers a variety of participatory initiatives with the community that contribute to the development of entrepreneurship and pilot projects.
- 8.2.5 The institution offers cultural, awareness, and service initiatives and activities that meet the needs of the local community.
- 8.2.6 The institution allows the community to benefit from its various facilities and resources (e.g., library, sports facilities, classrooms, and laboratories).

Risk Identification:

1. No coordination between the academic units and the CCSCS.
2. Faculty and staff are not actively participating in the activities.
3. Departments are not contributing to the community service activities.
4. Limited number CCSCS employees.
5. Lack of dedicated facilities for conducting the CCSCS programs.

All these risks have been assessed and different strategies have been adopted to avoid or mitigate the risks. For example, the limitation in number of center employees is mitigated through active participation of HR, Deanship of Student Affairs, and CSI management and employees. The coordination with academic units is dealt with through the participation of academic units' representatives in the Institutional Community Engagement Committee and the Center Council.

5-Year Strategic and Annual Action Plan:

CCSCS belongs to all goals of Theme 3: Community Engagement and Outreach in FBSU 5-year Strategic and Annual Action Plan and is related to most of its objectives as below:

Goal 3.1: Develop and improve FBSU's community service and education programs and initiatives

Objective 3.1.1 To increase faculty and student involvement in community service events and programs

#	Actions
1	Introduce a community service award for faculty and students
2	Raising awareness of community service opportunities among faculty and students
3	Recognize and publicize faculty and student contributions to community service
4	Support and host events and activities in collaboration with community-based organizations

5	Strengthen the collaboration of CSCES with colleges in designing and delivering training programs
6	Enhance and recognize volunteer participation of students and staff
7	Increase faculty and students participation in community related events

Objective 3.1.2 To enhance the engagement with third parties to support and sponsor community service and continuing education initiatives

#	Actions
1	Promote community service and continuing education projects
2	Sign MOU and increase collaboration with professional bodies
3	Expand continuing education programs in collaboration with government and private institutions
4	Promote the use of facilities for community service purposes
5	Extend the agreement with NEOM

Goal 3.2: Enhance community engagement and outreach

Objective 3.2.1 To increase stakeholders participation and involvement

#	Actions
1	Extend the agreement with NEOM
2	Enhance communication and increase collaboration with regional institutions
3	Enhance communication and increase collaboration with the private sector
4	Sign MOU and increase collaboration with professional bodies
5	Enhance communication with alumni
6	Provide services and lifelong learning opportunities for alumni
7	Enhance communication and increase collaboration with the employers

Resources:

CCSCS has access to all of the campus facilities including the computer and language labs that have been furnished with the most up-to-date PCs to meet the requirements for E4E programs which provide the highest standard of technical courses as Cisco, Oracle, and Microsoft. The labs have also been provided with a special internet broadband speed specifically for E4E programs.

CCSCS also has access to the classrooms and theaters to conduct workshops and events. Been granted to conduct technical training workshops utilizing the new state of the art labs such as the AI, Robotics, Renewable Energy, Electrical Power, and Environmental labs.

As CCSCS has agreements with several governmental institutions and professional bodies in the kingdom as well as international certification entities for organizing training and diploma programs, and for conducting international certification exams. Cooperation with FBSU faculty members has always been an opportunity at CCSCS programs as well.

Documentation:

A new portal for FBSU community services has been initiated, created, implemented among to ensure the accuracy and accessibility of the Center documentation.

Performance Indicators

CCSCS ensures spreading surveys for all programs' beneficiaries on the last day of the activity. As an encouragement of filling the surveys by most of the beneficiaries, CCSCS

requires that as a condition to receive the certificate. These surveys are used to measure and evaluate the following required NCAAA standard 8 Community and Partnership KPIs:

- **KPI-I-18:** Satisfaction of beneficiaries with the community services (Average of beneficiaries' satisfaction rate with the community services provided by the institution on a five-point scale in an annual survey)
- **KPI-I-19:** Percentage of faculty members and students participating in community activities

CCSCS in collaboration with ICEC analyzes the survey's results to evaluate the further possibility of participation in any activity organizer. An activity can be approved/disapproved based on the activity organizer's feedback from beneficiaries.

Phase II - DO / Implement

CCSCS Director will follow up with the activity organizer on which logistical support might be needed. The process of mechanism will be taken to implement the activity.

Phase III - CHECK (Monitor & Review)

Monitor

CCSCS monitoring and tracking for the programs on a daily basis utilizing feedback from the organizer, participants and the portal. This includes receiving complaints or suggestions from participants and solving them directly.

CCSCS Director discusses the raised issues with ICEC members in regular meetings and submits to the president's office for any needed support.

Review

A monthly meeting with closed project organizer is conducted to discuss issues regarding project documentation, surveys and the certifications. The result of the survey analysis will be provided to the organizer and the organizer department chair.

Phase IV - ACT / Update

- CCSCS prepares an action plan for the next academic year based on the accomplishment of the current year and the continuous improvement in the quality of the services, considering national and institutional priorities.
- CCSCS closes the academic year by providing to the president's office a summary infographic describing the projects created by the center and highlighting the main accomplishments of that year. CCSCS also updated the action plan every new academic semester since most of the projects are still running in the summer.

THE LIBRARY

Library's operations are carried out in line with the vision and mission of FBSU. The Library functions as a resource center with quality collections, including print, electronic, and A/V materials. The Library supports learning by providing a study room to students who prefer to work together on collaborative assignments within the library.

The Library is open during working days from 8 am till 8 pm. Moreover, the Library users can gain access to the learning resources on and off the campus. Users can also access the library services via mobile, iPad and Laptops.

The Library is augmented with a bookstore corner where students can purchase textbooks at cost, in addition to providing copying, printing and scanning services.

The library includes study areas equipped with PCs and Wi-Fi services. Through the library webpage, one can use search engines to access a number of quality information sources electronically in a full-text and full-image format, and popular and scholarly journals, encyclopedias and books held by the Saudi Digital library, as well as ProQuest Central and Ebrary that offer hundreds of thousands of digital titles in all disciplines.

The Library presents a host of information about library policies, regulations, resources, research tools, and the like for the purpose of provision of the best possible resources and services to FBSU community.

Organizational Structure

The Library is organized in a hierarchy with a Director, librarians, and bookstore keepers. Library staff are assigned various duties and report to the director of the library daily. The Director of the Library regularly reports to the Assistant to the President for Academic Affairs.

Quality Cycle Adopted by Library

In this section, more details are presented about essential measures practiced at the Library to ensure the quality of services for faculty, students, and staff. To satisfy community needs for quality sources and services, the Library has implemented the quality assurance method, PDCA, according to the following phases:

Phase I - Planning:

The planning of services by the Library involves:

- a. Alignment with NCAAA standards
- b. Risk Management
- c. Development of Policies and Procedures

- d. Development of a 5-year strategic plan. Development of annual action plan of the Library to accomplish the strategic plan
- e. Performance criteria for evaluation
- f. Documentation

Alignment with NCAAA standards

The Library adopts the following ETEC-NCAAA standards at the institutional/program level to ensure adherence to all quality cycle phases in providing services to the FBSU community.

- Learning resources for teaching, learning and research (Institutional)
- Learning resources for study and research (Program).

Risk Management

The Library strives to provide a safe learning environment for the students, faculty, and staff. For example, fire safety is considered as paramount important. The Library makes sure that fire extinguishers function and emergency exits work as well. Moreover, surveillance cameras have been installed within and at the entrance of the library to monitor activities and safeguard library property. Facemasks and hand sanitizers were provided to all the users to mitigate the spread of Covid-19 during the pandemics.

Policies

The following policies have will be developed by the Library which are required to be followed by the library users and staff.

1. Access & Use Policy: is to provide the guidelines on access to information resources at the Library.
2. Cataloguing & Classification Policy: is to provide a framework to maintain a uniform and appropriate standard of cataloging and classification.
3. Circulation Policy: to provide guidelines about standardized and efficient circulation service.
4. Collection Development and Acquisition Policy: is to provide Library staff, and FBSU community with clear procedures of collection development and acquisition.
5. Computers and Internet Use Policy: is to provide guidelines for using computers and equipment at the Central Library.
6. Document Delivery and Interlibrary Loan Policy: to help obtain materials unavailable via Central Library.
7. Food & Drink Policy: to maintain the cleanliness in the library and provide an attractive and conducive environment for study and research.

8. Reference Service Policy: to offer a uniform standard of reference service at the Library.
9. Noise Policy: to maintain a conducive and welcoming environment for reading and learning at the library.

5-Year Strategic and Annual Action Plan:

The Library's strategy and policies are aligned with the university strategy, policy, and governance for provision of learning resources and facilities.

The annual action plans are prepared to achieve the goals and objectives of the Library strategy.

Resources:

In alignment with the 5-Year Strategic Plan, the Library offers information resources (books, journals, reports, manuals, handbooks, electronic resources, etc.) for the FBSU community. The information resources are acquired based on recommendations of faculty and students. The Library coordinates with academic departments to provide the recommended textbooks. Equipment and furniture are purchased according to the library policy and feedback of the library users.

The Library also collaborates with the human resources department regarding recruiting library staff commensurate with their educational qualifications and professional experience.

Key Performance Indicators:

The following NCAAA Key performance indicators are used for measuring the objectives related to Learning Resources.

- KPI-I-07: users' satisfaction with learning resources on a five-point scale of annual survey in terms of:
 - adequacy and diversity (references, journals, databases... etc.)
 - support services for users to access learning resources
- KPI-P-17: users' satisfaction with adequacy and diversity of learning resources (references, journals, databases... etc.) on a five-point scale of annual survey

Performance Criteria for Evaluation

To ensure the quality services provided by the Library staff, FBSU management conducts an annual evaluation for all the Library administrative staff.

Documentation:

To disseminate information and to keep users aware of the services and facilities of the

library, the Library updates information on learning resources via the library website. The Library revises the policies regularly, reports to the higher management regarding library vital data, and maintains the archived documents concerning the stakeholders involved.

Phase II- DO / Implement

The library staff provides in-person and online workshops on library resources and services to FBSU faculty, students, and staff all year round. Following is a brief description of the provided services.

Circulation Service

Circulation Services includes borrowing and returning library materials. Circulating materials are checked out or in via self-check stations inside the library. Reference and reserve materials can also be borrowed from the library for a limited time.

Current Awareness Services

The Library regularly informs users of the new arrivals of reference, textbook, databases and so forth by the library website, social media, and displays of new arrivals to keep users abreast of the important development and acquisitions at the Library.

Reference Service

The Librarians provide ready reference and in-depth service in response to requests for information demands. Such a service is accessible in person, through emails, and by telephone.

Document Delivery Services

Document Delivery service provides the users with books, research papers and items unavailable through FBSU Library from local libraries, if possible.

In-Library Use

Non-circulating materials like reference works, periodicals and reports are only available for viewing inside the library. Moreover, these special collections may be checked out with restrictions and limits.

Textbook Service

The Library, in coordination with the academic departments, ensures timely delivery of the needed textbooks for instruction and study. Upon the request of academic departments and colleges, copies of text books and references are made available in the library bookshelf. The Library staff offer textbook sale services to students in the Bookstore corner of the library.

Phase III - CHECK (Monitor & Review)**Monitor**

The Library's director communicates with the stakeholders regarding library services and resources during the academic year. The library staff, meanwhile, provide data about library resources and services monthly. Library policies, procedures, and practices are also monitored and evaluated through surveys, by KPIs, and related standards.

Review

The Library reviews and revises the learning resources based on library survey, feedback from QAAC and stats of the Center for Statistics and Information (CSI). Annual report about the Library affairs is submitted to the office of President's Assistant for Academic Affairs.

Phase IV - ACT / Update

The Library takes appropriate actions and steps to improve the quality of the library collections and services according to users' recommendations and feedback. The adopted actions are exemplified with annual and 5-year action plans for the library operations.

APPENDICES

APPENDIX I

Faculty Member Annual Appraisal Form

Department/College:

Academic Year:

Faculty Member Name:

Rank:

Section 1: Teaching Performance (Weight: 50%)

Criterion	Excellent (4)	Good (3)	Satisfactory (2)	Needs Improvement (1)
Course Delivery	Mastery of subject; clear, engaging delivery	Clear delivery; minor improvements needed	Basic clarity; delivery sometimes ineffective	Poor delivery; lacks clarity and engagement
Student Feedback (Survey Results)	Avg. $\geq 4.5/5$	Avg. 4.0–4.49/5	Avg. 3.5–3.99/5	Avg. $< 3.5/5$
Course Materials and Organization	Innovative, well-structured, updated materials	Well-organized, mostly updated materials	Some outdated or disorganized materials	Poor or missing course organization
Assessment and Feedback to Students	Timely, clear, fair assessments; rich feedback	Timely and mostly clear assessments	Some delays or unclear feedback	Late, unclear, or unfair assessments
Student Support and Advising	Actively supports and advises students	Provides student support when requested	Limited student advising	Rarely available or supportive

Teaching Score Calculation:

Total Teaching Score = (Sum of scores across criteria \div 5) \times 50%

Section 2: Research Performance (Weight: 30%)

Criterion	Excellent (4)	Good (3)	Satisfactory (2)	Needs Improvement (1)
Research Output (Publications)	≥ 2 papers in top journals per year	1–2 good-quality publications	At least 1 local or conference publication	No publications or low-quality output
Research Funding and Grants	Leads external/internal funded projects	Participates in research grants	Occasional funding applications	No activity in research grants
Research Collaboration	Active collaborations nationally/internationally	Some collaboration activities	Limited collaboration	No collaboration efforts

Criterion	Excellent (4)	Good (3)	Satisfactory (2)	Needs Improvement (1)
Student Research Supervision	Supervises multiple student theses/ projects successfully	Supervises at least one student project	Occasionally involved in supervision	No supervision or involvement

Research Score Calculation:

Total Research Score = (Sum of scores across criteria ÷ 4) × 30%

Section 3: Service and Community Engagement (Weight: 20%)

Criterion	Excellent (4)	Good (3)	Satisfactory (2)	Needs Improvement (1)
Departmental/ University Committees	Leads key committees; very active	Active member of committees	Occasional involvement	No committee service
Professional Service	Leadership roles in professional associations	Active membership in associations	Occasional participation	No professional engagement
Community Outreach	Regular initiatives linking university and society	Occasional community involvement	Limited engagement	No community activities
Administrative Contributions	Successfully leads academic initiatives	Assists in administrative tasks	Minimal administrative contribution	Avoids administrative tasks

Service Score Calculation:

Total Service Score = (Sum of scores across criteria ÷ 4) × 20%

Section 4: Overall Performance Summary

Component	Weight	Score %
Teaching	50%	%
Research	30%	%
Service	20%	%
Final Appraisal Score = Teaching + Research + Service Scores		%

Performance Interpretation:

- 90–100%: Outstanding
- 75–89%: Very Good
- 60–74%: Good
- 50–59%: Satisfactory
- Below 50%: Needs Improvement

Recommendations:

Strengths:

Areas for Improvement:

Suggested Development Plans:

Faculty Reflection:

Signatures:

▪ Faculty Member: _____

Date: _____

▪ Department Chair/Appraiser: _____

Date: _____

APPENDIX II**Faculty Ethics Case Reporting Standard Operating Procedure****Purpose**

This SOP defines the standardized process for reporting, documenting, investigating, and resolving alleged violations of the Faculty Code of Ethics at the University. It aims to ensure that all cases are handled promptly, fairly, confidentially, and consistently, preserving the integrity of academic and professional standards.

Scope

This procedure applies to all faculty members at the University, including full-time, part-time, adjunct, visiting, and emeritus faculty, across all academic departments, centers, and colleges.

Definitions

Term	Definition
Ethical Misconduct	Any behavior that violates the University's Code of Ethics, including but not limited to plagiarism, discrimination, harassment, abuse of authority, breach of confidentiality, or conflicts of interest.
Complainant	An individual who files a report alleging a violation of the Faculty Code of Ethics.
Respondent	A faculty member alleged to have violated the Faculty Code of Ethics.
University Research Ethics Committee	A designated university committee responsible for receiving and managing ethics complaints.

Reporting Procedure**1. Initiating a Report**

Any individual (faculty, staff, student, external stakeholder) may report suspected ethical misconduct by a faculty member. Reports can be submitted through:

- Direct email to the Ethics Committee.
- Written report to the Department Chair, Dean, or University Research Ethics Committee.

2. Information to Include in a Report

- Name and contact information of the complainant (optional for anonymous reports).
- Name of the respondent (faculty member involved).

- Detailed description of the alleged misconduct.
- Dates, times, and locations (if applicable).
- Any supporting evidence (documents, emails, witness statements).

3. Receipt and Acknowledgment

- The University Research Ethics Committee acknowledges receipt of the complaint within **3 working days**.
- If the report is anonymous, acknowledgment is not possible, but processing proceeds.

4. Preliminary Review

The University Research Ethics Committee conducts a preliminary review within **7 working days** to:

- Confirm that the matter falls under the Faculty Code of Ethics.
 - Assess if sufficient evidence or grounds exist to warrant a formal investigation.
- Outcomes of the preliminary review:
- Proceed to formal investigation (if justified).
 - Dismiss the case (if unfounded or outside jurisdiction, with documentation).

5. Formal Investigation

A Faculty Ethics Investigation Committee is formed (3–5 impartial senior faculty members). The investigation must:

- Be completed within 30 working days (extension possible with justification).
- Involve interviews with the complainant, respondent, and witnesses.
- Gather and review relevant documentation or evidence.

6. Determination and Action

After reviewing the investigation findings:

- If misconduct is substantiated, appropriate disciplinary actions are recommended (ranging from warning to termination based on severity).
- If allegations are unsubstantiated, the respondent is formally cleared.

Final decision authority lies with the University President or delegated body (e.g., Faculty Disciplinary Committee).

7. Communication of Outcome

- The complainant (where known) and the respondent are formally notified in writing of the final decision.
- If corrective actions are required, a timeline for completion is provided.

8. Confidentiality

- All reports, investigations, and outcomes are treated as strictly confidential.
- Information is disclosed only to those directly involved in the handling of the case.
- Unauthorized disclosure of case information constitutes a separate ethical violation.

9. Protection against Retaliation

- Retaliation against any individual who reports misconduct in good faith is strictly prohibited.
- Any acts of retaliation will result in disciplinary action independent of the original complaint.

10. Documentation and Record Keeping

- All case records (report, investigation materials, outcomes) are securely stored in the Dean of Graduate studies and Research Office for a minimum of five (5) years.
- A de-identified annual ethics report summarizing cases and resolutions is submitted to the University Council.

APPENDIX III

Infrastructure Quality Assurance and Review Process

Purpose

To ensure that the University's teaching, research, and support facilities including laboratories, classrooms, libraries, and physical assets are systematically evaluated annually for functionality, safety, adequacy, and continuous improvement.

Scope

- Classrooms (lecture halls, seminar rooms)
- Laboratories (teaching and research labs)
- Libraries (physical and digital resources)
- Other physical assets (equipment, IT resources, common areas)

Responsible Units

Unit	Responsibility
Department/College QA Coordinators	Initial self-assessment of assigned facilities
Facility Management Office	Technical inspection and maintenance report
Library Administration	Library audit (physical and digital)
Information Technology Office	IT hardware/software infrastructure check
University QA Office	Aggregation, analysis, and reporting

Review Timeline

Activity	Timeline
Self-assessment by departments	January–February (every year)
Central audits by Facilities/IT/Library units	March–April
Consolidated Infrastructure Audit Report	May
Presentation to University Council	June
Action Planning for Improvements	July
Implementation during summer	August–September

Review Process Steps

Step	Description
1. Self-Assessment	Each department completes the Infrastructure QA Checklist for their labs, classrooms, and local facilities.
2. Central Audit	Facilities Management, Library Administration, and IT Office conduct their technical inspections and evaluations.
3. Consolidation	University QA Office consolidates self-assessments and central audit findings into a master Infrastructure Audit Report.

Step	Description
4. Reporting and Approval	Report presented to University Infrastructure Committee and University Council.
5. Action Planning	Required improvements prioritized, budgets proposed, and timelines set.
6. Monitoring	Improvements are tracked during the following semester, with a mid-year progress report.

Documentation and Evidence

- Completed Infrastructure QA Checklists
- Annual Consolidated Infrastructure Audit Report

APPENDIX IV**Resource Allocation Benchmarks for Academic Facilities****Purpose**

To define minimum resource allocation benchmarks for laboratories, libraries, classrooms, and equipment to ensure equitable, adequate, and quality learning environments for all students, aligned with national standards and international good practices.

Benchmarks**A. Laboratories**

Category	Benchmark
Lab Space per Student	Minimum 2.5 to 4 square meters per student during lab sessions.
Lab Equipment Ratio	Minimum 1 workstation per 2 students in experimental or computational labs.
Equipment Renewal Cycle	Major lab equipment should be renewed or upgraded every 5–10 years.
Lab Safety Compliance	100% of operational labs must meet university safety and risk management standards annually.

B. Libraries

Category	Benchmark
Study Seating	Seating capacity equal to at least 10% of total enrolled students at any time.
Electronic Resources	Access to at least 10 academic databases in major fields of study.
Computer Terminals	Minimum 1 public-access computer per 100 students.
Library Space per Student	Minimum 1.5 to 2 square meters per user in study areas.

C. Classrooms

Category	Benchmark
Seating Ratio	Seating available for 100% of enrolled students during peak periods.
Multimedia Equipment	100% of teaching classrooms equipped with projector, smartboard, or equivalent AV tools.
Classroom Furniture	Ergonomically appropriate chairs and desks, maintained on a 5-year replacement cycle.

Application and Review

- Benchmarks are applied during infrastructure planning, expansion, resource renewal, and annual facility audits.
- Adjustments may be made based on specific program requirements (e.g., engineering,

medical, or computing programs).

- Benchmarks are reviewed every 3 years for relevance to changing educational standards and technology.

APPENDIX V

Infrastructure Quality Assurance (QA) Checklist*(To be filled by departments/facilities managers annually)***General Information**

- Building/Facility Name:
- Department/College:
- Date of Review:
- Reviewer Name:

Classrooms

Item	Yes	No	Comments/Issues
Adequate seating and desks available for expected capacity?	<input type="checkbox"/>	<input type="checkbox"/>	
Functional air conditioning/heating?	<input type="checkbox"/>	<input type="checkbox"/>	
Functional lighting adequate for reading/writing?	<input type="checkbox"/>	<input type="checkbox"/>	
Working projector/smartboard/computer equipment?	<input type="checkbox"/>	<input type="checkbox"/>	
Cleanliness and maintenance satisfactory?	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency exits clearly marked and accessible?	<input type="checkbox"/>	<input type="checkbox"/>	

Laboratories

Item	Yes	No	Comments/Issues
Lab equipment functional and regularly maintained?	<input type="checkbox"/>	<input type="checkbox"/>	
Safety equipment available (eyewash stations, fire extinguishers, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
Proper ventilation systems working?	<input type="checkbox"/>	<input type="checkbox"/>	
Clear safety signage and operating instructions displayed?	<input type="checkbox"/>	<input type="checkbox"/>	
Stock of essential lab materials and consumables adequate?	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous materials properly stored and labeled?	<input type="checkbox"/>	<input type="checkbox"/>	

Libraries

Item	Yes	No	Comments/Issues
Sufficient seating and study spaces?	<input type="checkbox"/>	<input type="checkbox"/>	
Physical book collections updated and accessible?	<input type="checkbox"/>	<input type="checkbox"/>	
Reliable internet and digital access terminals available?	<input type="checkbox"/>	<input type="checkbox"/>	
Electronic resource systems (e-journals, databases) functioning?	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate lighting and ventilation?	<input type="checkbox"/>	<input type="checkbox"/>	

IT and Physical Assets

Item	Yes	No	Comments/Issues
Computers and printers operational?	<input type="checkbox"/>	<input type="checkbox"/>	
Software licenses updated?	<input type="checkbox"/>	<input type="checkbox"/>	
Wi-Fi coverage reliable across all teaching spaces?	<input type="checkbox"/>	<input type="checkbox"/>	
Backup power systems (generators/UPS) functional?	<input type="checkbox"/>	<input type="checkbox"/>	

General Facilities

Item	Yes	No	Comments/Issues
Accessible facilities for disabled persons available?	<input type="checkbox"/>	<input type="checkbox"/>	
Restrooms clean, functional, and sufficient?	<input type="checkbox"/>	<input type="checkbox"/>	
Security measures adequate (cameras, emergency alarms)?	<input type="checkbox"/>	<input type="checkbox"/>	

APPENDIX VI

Infrastructure Quality Assurance and Review Process

Purpose

To ensure that the University's teaching, research, and support facilities including laboratories, classrooms, libraries, and physical assets are systematically evaluated annually for functionality, safety, adequacy, and continuous improvement.

Scope

- Classrooms (lecture halls, seminar rooms)
- Laboratories (teaching and research labs)
- Libraries (physical and digital resources)
- Other physical assets (equipment, IT resources, common areas)

Responsible Units

Unit	Responsibility
Department/College QA Coordinators	Initial self-assessment of assigned facilities
Facility Management Office	Technical inspection and maintenance report
Library Administration	Library audit (physical and digital)
Information Technology Office	IT hardware/software infrastructure check
University QA Office	Aggregation, analysis, and reporting

Review Timeline

Activity	Timeline
Self-assessment by departments	January–February (every year)
Central audits by Facilities/IT/Library units	March–April
Consolidated Infrastructure Audit Report	May
Presentation to University Council	June
Action Planning for Improvements	July
Implementation during summer	August–September

Review Process Steps

Step	Description
1. Self-Assessment	Each department completes the Infrastructure QA Checklist for their labs, classrooms, and local facilities.
2. Central Audit	Facilities Management, Library Administration, and IT Office conduct their technical inspections and evaluations.
3. Consolidation	University QA Office consolidates self-assessments and central audit findings into a master Infrastructure Audit Report.
4. Reporting and Approval	Report presented to University Infrastructure Committee and University Council.

Step	Description
5. Action Planning	Required improvements prioritized, budgets proposed, and timelines set.
6. Monitoring	Improvements are tracked during the following semester, with a mid-year progress report.

Documentation and Evidence

- Completed Infrastructure QA Checklists
- Annual Consolidated Infrastructure Audit Report

APPENDIX VII

Annual Facility Audit Process for Academic Infrastructure

Purpose

To systematically audit the University's teaching, research, and student support facilities for compliance with defined resource allocation benchmarks, safety standards, and functionality requirements.

Scope

- Laboratories
- Classrooms
- Libraries
- Physical assets (IT labs, equipment rooms, common areas)

Responsible Units

Role	Unit
Audit Coordinator	Quality Assurance Office
Technical Inspectors	Facilities Management, Library Administration, IT Office
Departmental Self-Assessors	Department Facility Coordinators

Audit Timeline

Activity	Timeline
Self-assessment by departments using Infrastructure QA Checklist	February - March
Centralized audits by Facilities, IT, and Library teams	April - May
Consolidated Facility Audit Report submission	June - July
Corrective action planning and budget proposals	August

Audit Steps

Step	Description
1. Preparation	Distribute Infrastructure QA Checklists to departments. Review benchmarks and safety standards.
2. Self-Assessment	Each department reviews its own classrooms, labs, and resources against the checklist and benchmarks.
3. Central Inspection	Facilities Management, IT Office, and Library teams perform spot checks, physical inspections, and validation.
4. Gap Analysis	Identify deviations from benchmarks (e.g., insufficient lab space, outdated equipment, overcrowded classrooms).
5. Reporting	QA Office compiles findings into the Annual Facility Audit Report with recommendations categorized by urgency: Immediate / Within 1 Year / Within 3 Years.

Step	Description
6. Action Planning	Departments develop and submit improvement action plans, including resource requests if necessary.
7. Follow-up Monitoring	Mid-year review to assess progress on corrective actions.

The following Documentations should be prepared by the relative authorities.

- Technical Audit Reports (Facilities, IT, Library)
- Consolidated Annual Facility Audit Report
- Corrective Action Plans and Budget Requests

APPENDIX VIII**Annual Research Ethics Review Report**

Academic Year: _____

Introduction

This report provides an anonymized summary of research ethics cases and compliance activities reviewed by the University Research Committee (URC) during the academic year _____. It is part of the University's commitment to ethical research conduct, transparency, and continuous improvement.

Overview of Submissions

Submission Type	Number Received	Approved	Revisions Required	Rejected
Undergraduate Research Proposals				
Postgraduate Research Proposals				
Faculty Research Proposals				
Total Submissions Reviewed				

Research Ethics Violation Cases:

Type of Alleged Violation	Number of Cases	Outcome
Plagiarism (self or cross-institutional)		
Informed consent issues (e.g., improper documentation)		
Fabrication/Falsification of data		
Unauthorized use of human subjects		
Breach of participant confidentiality		

Total Research Ethics Cases Reported:

Confirmed Violations:

Actions Taken:

- _____
- _____
- _____
- _____

Key Issues Identified

- Increasing cases of unclear consent documentation in student-led projects.
- Lack of researcher awareness on IRB requirements for secondary data use.
- Plagiarism in early-stage research proposals (particularly among new graduate students).

Actions and Recommendations

Area	Action Taken / Planned
Education & Awareness	
IRB Process Improvement	
Plagiarism Prevention	
Monitoring	

Conclusion

APPENDIX IIX**Annual Research Impact Report**

Deanship of Graduate Studies and Research

Reporting Period: Academic Year _____

Introduction

This report highlights selected research projects that contributed to community development, public policy, environmental sustainability, or social awareness during the academic year. It reflects the University's commitment to producing socially relevant research and fostering active partnerships with the community.

Summary of Community-Linked Research Projects

Category	Number of Projects
Total	

Recommendations

Action	Responsibility

APPENDIX IX**Community Service Annual Impact Report**

Academic Year:

Executive Summary

During the academic year _____, the University expanded its community service initiatives across educational, environmental, health, and social sectors, reaching over _____ beneficiaries through _____ structured programs and projects. This report highlights the University's contributions to societal development, documents measurable outcomes, and identifies strategic opportunities for enhancing future impact.

Key Achievements and Statistics

Indicator	Result
Total Community Service Projects	
Total Direct Beneficiaries	
Volunteer Hours Contributed	
Faculty Members Involved	
Students Involved	
Partner Organizations	
Community Awareness Campaigns Conducted	
Capacity Building Workshops Delivered	

Thematic Areas of Engagement

Area	# of Projects	# of Beneficiaries
Education and Literacy		
Health and Well-being		
Environmental Sustainability		
Economic Empowerment		
Social Inclusion and Volunteering		

Selected Impact Case Studies

Case Study 1: _____

- Lead Unit:
- Goal:
- Method:
- Impact:
 -
 -
 -

Case Study 2: _____

- Lead Unit:
- Goal:
- Method:
- Impact:
 -
 -
 -

Case Study 3: _____

- Lead Unit:
- Goal:
- Method:
- Impact:
 -
 -
 -

Challenges and Lessons Learned

Challenge	Response / Lesson
Low participation in remote areas	Introduced mobile units and community ambassadors
Scheduling conflicts for student volunteers	Developed flexible volunteer scheduling system
Limited awareness of university service programs	Launched targeted social media campaigns

Recommendations for 2025-2026

Area	Recommendation
Scaling impact	Establish permanent university-community hubs in remote areas
Volunteer development	Launch "Service Learning" courses linking academic credit with community projects
Data tracking	Develop a centralized system for real-time impact monitoring and reporting

Prepared by:

Consultative Center for Studies and Community Service

Date: _____

APPENDIX X

Stakeholder Consultation Feedback Survey

*University Stakeholder Engagement
Feedback on Strategies, Programs, Research, and Community Initiatives*

Instructions:

Please rate your level of agreement with each statement below, based on your experience and perception of the University's initiatives and services. (1 = Strongly Disagree | 2 = Disagree | 3 = Neutral | 4 = Agree | 5 = Strongly Agree).

Section A: Strategic Initiatives and Institutional Direction

Statement	1	2	3	4	5
The University's strategic vision and goals are clearly communicated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University's strategic initiatives address real societal and economic needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University actively adapts its strategies based on emerging trends and stakeholder input.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I believe the University's strategic initiatives are achievable and well-prioritized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section B: Academic Programs and Curriculum Relevance

Statement	1	2	3	4	5
The University's academic programs align with current job market needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic programs offer students practical and applied learning opportunities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum content integrates community service, innovation, and sustainability.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University regularly updates programs based on stakeholder and industry feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section C: Research Priorities and Innovation

Statement	1	2	3	4	5
The University's research agenda addresses critical local, national, and global challenges.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are opportunities for stakeholders (e.g., industry, community) to collaborate in research projects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Research outputs contribute to social, economic, and technological development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University fosters innovation, entrepreneurship, and knowledge transfer effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section D: Community Engagement and Societal Impact

Statement	1	2	3	4	5
The University engages meaningfully with the local community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community service initiatives align with actual societal needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University values community input in shaping programs and projects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University's community outreach creates a visible positive impact.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section E: Governance, Transparency, and Responsiveness

Statement	1	2	3	4	5
The University communicates openly about policies, changes, and initiatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stakeholders are provided meaningful opportunities to provide feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The University takes stakeholder feedback seriously and uses it for improvement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have confidence in the University's leadership and governance processes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section F: Overall Satisfaction and Suggestions

Statement	1	2	3	4	5
Overall, I am satisfied with the University's responsiveness to stakeholder needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel encouraged to maintain or expand my partnership/relationship with the University.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Open-Ended Questions

1. What are the University's greatest strengths, in your view?

2. What areas should the University prioritize for improvement?

3. Additional comments, suggestions, or ideas:

REFERENCES

1. National Qualification Framework of Saudi Arabia
2. ETEC_NCAAA Institutional and Program Standards and Accreditation Forms
3. FBSU Assessment Handbook
4. FBSU Teaching and Learning Quality Framework
5. FBSU KPI Framework
6. FBSU 5-year Strategic Plan
7. FBSU Institutional Committees