



**Gulf University**



12-16 May 2024



Location  
Sanad



Institute Type  
Private



Status  
Listed on NQF



No. of Students  
1249

## Overall Judgment

**Compliant with the General Framework Standards**

## Standards' Judgment

Governance and Management	Human Resources Management	Quality Assurance and Enhancement
Infrastructure, ICT, and Learning Resources	Management of Academic Affairs	Teaching, Learning and Assessment
Research and Postgraduate Studies	Community Engagement	Student Support

## Review Summary

The Gulf University aspires to be a distinguished higher education institution in the Kingdom of Bahrain and the Gulf region, by embracing excellence through its academic programmes, scientific research, and national and international collaborations. The University is currently affiliated with the University of Northampton, an arrangement which is formalised by a Memorandum of Understanding signed in 2018 and a Memorandum of Co-operation signed in 2022 to offer franchised degree programmes.

The University has an effective Strategic Plan with clear objectives and key performance indicators, showing how the mission and vision will be achieved, which is translated into implemented and monitored operational plans. The Board of Trustees had oversight of



Fully Met



Substantially Met



Partially Met



Not Met

the implementation of the Strategic Plan. The Review Panel noted that the Chair and members of the Board of Trustees are nominated by the Directors and that the Chairperson of the Directors also has a seat on the Board of Trustees. Furthermore, the Directors are actively involved in the management of the University. This means that a clear separation between governance and management is difficult to achieve.

The University has an effective Human Resource Department Strategy aligned with the strategic themes delineated in the Strategic Plan. The Strategy encompasses a set of strategic initiatives and targets related to key activities including recruitment, development, and retention. The strategy also provides details of budget for these activities and identifies evidence of achievement of the initiatives. One of these initiatives is the Happiness Committee, which is responsible for contributing to staff well-being and recognising their achievement in a number of areas including teaching, scholarly achievement, community engagement, and innovation.

There is evidence of robust quality assurance arrangements with clear reporting lines and accountability. The institutional policies, procedures and regulations are clearly articulated and documented. Internal audits are regularly implemented, and stakeholders are engaged in different quality assurance activities. However, both staff and students expressed differing views about the permitted similarity index on Turnitin and penalties awarded for plagiarism during the interviews. Therefore, there is a need to conduct regular policy awareness campaigns. There is also a need to formalise all benchmarking practices. Although benchmarking at programme level is guided by policy, this is not the case for benchmarking at institutional and what the institution terms 'unit' levels.

Infrastructure, information, and communications technology and learning resources are adequate and upgraded on an ongoing basis. The related policies and procedures are in place including the institution's Health and Safety Policy, and the Library Policy and Procedures. However, during the site visit, the Review Panel found that safety equipment was missing in laboratories, and protective gear needed in one laboratory was stored elsewhere to prevent theft. In addition, first aid kits and the medication in the nurses' station need to be regularly checked to ensure that the contents are in good condition and ready for use. The Review Panel also observed that, although the Operational Plan

of the Digital Transformation Centre identifies tasks, it does not specify how their performance will be monitored.

There are appropriate arrangements in place to support the implementation of the academic planning framework with an academic leadership structure consisting of Heads of Departments, Programme Leaders and Domain Coordinators, as well as relevant committees and councils. The Review Panel noted that the teaching load is in excess of international norms and needs to be revised. The Review Panel also noted that the staff profile is dominated by staff appointed at more junior levels. In addition, in some areas, the profile is dominated by staff from particular backgrounds even though the University values diversity. Furthermore, the Review Panel observed that the arrangements for the mentoring of staff were relatively ad hoc and that more junior members of staff were sometimes mentored by Deans and Head of Departments, an arrangement which is not appropriate to a mentoring relationship.

The Gulf University prides itself on its approach to teaching, which focusses on project-based learning, using extensive verification and moderation processes, measuring learning outcomes, and industry-oriented graduation projects. The Review Panel noted that the Teaching Excellence and Technology Centre plays a notable role in supporting staff in updating their skills and becoming familiar with the newest teaching technologies.

The University collects a lot of data in relation to student achievements, but this is not always analysed as extensively as it could be or used to effect improvements. Furthermore, some of the programme intended learning outcomes are extremely complex combining several different concepts. There are also some inconsistencies and omissions in the mapping between some of the course intended learning outcomes and graduate attributes.

The University has developed an ambitious research strategy (Research Strategic Plan 2022-2027) which is aligned with its institutional Strategic Plan. The Plan is informed by various regional and international drivers, such as the Sustainable Development Goals. However, the Panel found that the large number of junior faculty members, high teaching loads, scarcity of research projects across the University contributed to an ad hoc research culture at the University and slow progress in attaining key research

targets. The University needs to ensure a steady increase in the number of publications in Scopus and Indexed Journals, particularly in light of the University's plans to attain an international ranking.

The University has a Community and Industry Engagement Policy and associated set of procedures. The Community Engagement and Continuing Education Centre has an operational plan demonstrating clear alignment of the related initiatives and tasks with objectives in the Strategic Plan. However, the Review Panel observed that no definition of the concept of Community Engagement exists at the institutional level to inform activities in this area.

Policies and procedures related to student support are in place. Students are provided with opportunities to engage in a wide range of extra-curricular activities. During the site visit, the Review Panel encountered a range of explanations of the term 'lifelong learning' and ways it can be developed in interviews with staff and students. These different understandings need to be clarified if the objective of developing lifelong learning is to be achieved. The Review Panel also noted that, currently, the counselling is provided by the Student Support Unit Director in coordination with academic advisors. The Review Panel is of the view that counselling should be conducted by a qualified counsellor.

Overall, the Review Panel is satisfied that Gulf University implements a variety of tools to improve the quality of its programmes and support services. It has adequate policies and procedures in place, covering the different functions of the University. There are some inconsistencies in the implementation of some policies and procedures that need to be addressed by the University. Also, more resources need to be dedicated to match the inspirations of Gulf University in relation to scientific research and international ranking.

## Commendations

1. Gulf University has an active Happiness Committee which is responsible for contributing to staff well-being and recognising their achievement in a number of areas including teaching, scholarly achievement, community engagement, and innovation.
2. The University provides its students with a range of opportunities to actively engage in social and recreational pursuits.
3. There is a Teaching Excellence and Technology Centre which plays a notable role in supporting the professional development of staff and contributing to quality in teaching and learning.

## Recommendations

1. Develop a clear understanding of the distinction between governance and management and implement clear separation between governance and management structures at the University.
2. Conduct regular policy awareness campaigns with staff and students beginning with the Plagiarism and Academic Misconduct Policy, and formalise practices used for benchmarking at an institutional and unit levels.
3. Conduct a thorough review of the health and safety aspects of the University to rectify any shortcomings and monitor the implementation of the tasks identified in the Digital Transformation Centre's Operational Plan.
4. Diversify the academic staff profile in terms of seniority and backgrounds, review their teaching loads, and ensure that their mentoring processes are formalised and that suitable members are assigned to junior academic staff members.
5. Analyse data collected in relation to student achievements of learning outcomes more extensively and use analyses to implement informed improvements, with a follow-up analysis of the effectiveness of the improvement actions.



6. Revise the Programme Intended Learning Outcomes and Course Intended Learning Outcomes, and ensure systematic and accurate mapping across Graduate Attributes, Programme Intended Learning Outcomes, Course Intended Learning Outcomes to allow for the accurate measurement of student achievements.
7. Define the concept of lifelong learning in the Teaching and Learning Policy and develop a deeper understanding of life-long learning as a concept along with ways it can be promoted amongst students and staff.
8. Align resources and the support provided to academic staff to the strategic goals related to research.
9. Develop a clear definition of Community Engagement to inform activities in this area.
10. Provide effective student support in the form of the provision of advice by a qualified counsellor.

## Standard 1 – Governance and Management

### Indicator 1 - Vision, Mission and Values

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| 1.1 | The institution has a publicly displayed vision, mission and values that are approved at the governing body level, guide its activities, and well communicated to stakeholders.   | ● |
| 1.2 | The vision and mission are appropriate for the institutional type and programmes on offer; are aligned with the national priorities and strategies of the Kingdom of Bahrain; and reflect the core functions of the institution and its values. | ● |
| 1.3 | The institution involves internal and external stakeholders in the development of the vision, mission, and values of the institution.   | ● |
| 1.4 | There is a process which ensures, a regular review of the vision and mission that takes into account the national, regional and international context with respect to trends in higher education and programme offerings.                       | ● |

### Indicator 2 - Strategic and Operational Planning

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| 2.1 | The institution has a strategic plan that was developed through a process of consultation with external and internal stakeholders.  | ● |
| 2.2 | The strategic plan has clear objectives and key performance indicators with specific targets that are consistent with the mission and vision statements and the strategic goals of the institution. | ● |
| 2.3 | There is an allocated responsibility at senior management level to ensure the implementation, monitoring and review of the strategic plan.  | ● |
| 2.4 | There are annual operational plans from which detailed action plans evolve for all academic and administrative departments in a manner that supports the strategic plan.                            | ● |



- 2.5 There are well-established processes for the annual monitoring and evaluation of the progress made in achieving the targets of operational plans, including data collection and reporting to senior management, with related remedial actions being clearly identified, coordinated, and executed. ●
- 2.6 There is an appropriate risk management system in place that enables the institution to mitigate and address relevant strategic and operational risks. ●

### Indicator 3 - Governance and Management Practices

- 3.1 There are clear terms of reference for the governance body (Board of Trustees) and any related sub-committees, in which the roles and responsibilities of the governing body members are clearly defined. ●
- 3.2 There are implemented policies and procedures for the governing body to oversee the achievement of academic standards and actively support the efforts made to achieve and maintain the academic standards for face-to-face, online and blended education. ●
- 3.3 The governing body and management have a clear separation of duties, both on paper and in practice and the members of the governing body are not involved in the day-to-day operations of the institution. ●
- 3.4 There are implemented procedures for the appointment and induction of members of the governing body, which ensure that they understand their specific responsibilities. ●
- 3.5 There are implemented mechanisms to evaluate the performance of the governing body members to ensure their efficiency and professional commitment. ●
- 3.6 Appointment to senior managerial positions is transparent, based on clear and published criteria, and supported by a robust performance management system. ●
- 3.7 There are formal procedures at the institutional level for scheduling and conducting meetings, and taking meeting minutes of councils, committees, and work teams. ●
- 3.8 The planning and allocation of resources (including financial resources) are adequate and linked to the operations and core functions of the institution. ●



- 3.9 There are approved delegations of authority for financial and management decisions that enable the managers of administrative and academic entities (e.g., Deans, Head of Departments, Directors, etc.) to achieve their objectives and maintain high standards. ●
- 3.10 The financial and accounting systems include processes to prevent and detect fraud, including internal and external financial audits and transparent reporting. ●
- 3.11 The governing body and management ensure the accuracy and currency of all published materials provided in printed form or electronically via the website or on social media, that inform students and the public about the institution, its services and activities (e.g., mission, vision, values, location, infrastructure, academic provisions, fees' structure, etc.). ●

## Indicator 4 - Organisational Structure

- 4.1 There is an accurate and up-to-date organisational structure that is fit for purpose and accessible to all staff and students. ●
- 4.2 Stakeholders' participation in decision-making, including students, is clear in the organizational structure, where appropriate. ●
- 4.3 There is effective coordination and leadership across the institution, especially among senior management. ●
- 4.4 All staff members know their roles and line of management in the institution and have clear job descriptions. ●
- 4.5 The channels of communication between the governing body, senior management, staff, students and other stakeholders are clear. ●
- 4.6 There is a structure for all active committees along with clearly articulated terms of reference and lines of reporting; and the effectiveness of these committees is regularly reviewed. ●
- 4.7 The institution has well-structured mechanisms to ensure proper circulation of the decisions and recommendations raised by its councils, committees, and work teams. ●

## Indicator 5 – Partnerships, Memoranda with other Institutions

- 5.1 For each programme where another HEI provides the curriculum and/or teaching or operates as a 'parent' institution, there is an active binding agreement between the institution operating in the Kingdom of Bahrain and the other institution, as per HEC regulations, which: ●
- (i) has been entered into after due diligence to ensure the credibility of the other organisation and the programme being offered in the Kingdom of Bahrain.
  - (ii) states whether the programme offered in the Kingdom of Bahrain is equivalent and contextualised to a programme of the same name offered in the home country and whether graduates of the Bahrain programme are recognised in the home country.
  - (iii) specifies in detail the roles and responsibilities of both partners, including the teaching and assessment commitments and quality assurance arrangements.
  - (iv) contains a risk-management strategy to protect students, should there be any dispute or closure situation.
  - (v) assists the institution in the Kingdom of Bahrain to improve the academic capacities of its own staff.
- 5.2 For each programme where another HEI, locally or internationally, provides some of the curriculum and/or teaching, the programme information provided to current and prospective students states clearly the institution(s) that is offering the degree, the name of the institution(s) that will be on the student's testamur, and which institution's rules and policies apply (i.e., the institution operating in the Kingdom of Bahrain or the other institution). ●
- 5.3 For each programme where another HEI locally or internationally, provides some of the curriculum and/or teaching, the programme information provided to prospective and current students states clearly which course or programme elements will be taught and examined by the other institution. ●
- 5.4 The HEI operating in the Kingdom of Bahrain has established processes and mechanisms that are regularly used to ensure that the partner (or parent) institution meets its obligations and, if needed, to approach the ●



concerned authorities to ensure that the partner/parent institution meets its obligations.

- 5.5 Where there is a memorandum of co-operation or understanding, the points of co-operation between the two institutions are clearly set out and there are mechanisms to monitor the implementation of the terms of the memorandum, providing regular feedback, for planning, informed decision making, and continuous improvement, where applicable. ●

## Standard 2 – Human Resources Management

### Indicator 6 - Human Resources

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| 6.1  | The institution has developed and implemented a human resources management strategy and operational plans that enable it to fulfil its mission and deliver quality higher education provision. | ● |
| 6.2  | There are implemented policies and procedures for staff that include selecting, recruiting, and retaining qualified and experienced academic and non-academic staff.                           | ● |
| 6.3  | The institution has a published equality and diversity policy, which ensures that all staff are treated fairly.  | ● |
| 6.4  | The institution has a clear policy in place regarding the handling of legal issues related to academic and non-academic staff.   | ● |
| 6.5  | The institution has a published systematic, transparent, and fair process for investigating, recording and monitoring complaints, and grievances of its academic and non-academic staff.       | ● |
| 6.6  | The number of qualified and experienced academic and non-academic staff is sufficient to adequately support the full range of the institution's academic and administrative functions.         | ● |
| 6.7  | The institution keeps up-to-date records of the qualifications and experience of its full- and part-time academic and non-academic staff.  | ● |
| 6.8  | There are implemented induction processes for all new academic and non-academic staff, whether full- or part-time.   | ● |
| 6.9  | There are transparent and fair policies and procedures in place to recognise and reward staff through promotion or financial incentives.   | ● |
| 6.10 | Staff satisfaction and exit surveys are regularly conducted and their results are used for quality improvements.   | ● |



## Indicator 7 - Staff Development

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| 7.1 | There is an effective institution-wide staff performance management plan and processes for annual evaluation and feedback on the performance of individual staff members.                          | ● |
| 7.2 | There are implemented policies and procedures for staff development and an institution-wide approach to the identification of staff development needs.   | ● |
| 7.3 | The institution supports its staff to gain qualifications/professional certificates as a continuing professional development outcome and provides them with appropriate development opportunities. | ● |
| 7.4 | The effectiveness of staff development opportunities is evaluated by participants and the outcomes of such evaluations are being addressed.  | ● |

## Standard 3 - Quality Assurance and Enhancement

### Indicator 8 - Quality Assurance System

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| 8.1 | There is a clear quality assurance management system that is rigorously and consistently implemented, monitored and evaluated, with processes and mechanisms to implement improvements across the institution and for which there are clear lines of responsibility and accountability. | ● |
| 8.2 | All institutional policies, procedures and regulations are clearly articulated, documented, and consistently applied and reviewed for effectiveness and enhancement, and are accessible and effectively communicated to students and staff.   | ● |
| 8.3 | There is a process to regularly monitor compliance with the HEC regulations.  | ● |
| 8.4 | There is an implemented mechanism to disseminate information, which ensures that academic and administrative staff members have an evident understanding of their role in quality assurance and enhancement.  | ● |
| 8.5 | The institution has a mechanism in place to actively and fairly engage students, individually and collectively, in the quality and enhancement of their educational experience.   | ● |
| 8.6 | The institution undertakes regular and systematic monitoring of its core operations and conducts periodic reviews of all key aspects of its performance against clearly specified and appropriate indicators.   | ● |

### Indicator 9 – Quality Enhancement

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| 9.1 | There is a clear and well-articulated and documented benchmarking policy, which is consistently implemented.   | ● |
| 9.2 | Benchmarking takes place against other appropriate national, regional or international institutions of a similar profile for all core activities of the institution. | ● |
| 9.3 | The findings of benchmarking exercises have been used to enhance the activities of the institution, where applicable.  | ● |



- 9.4 There are clear and documented approaches to eliciting stakeholders' feedback regularly through a variety of implemented mechanisms, including surveys to evaluate the effectiveness of the institution's services. ●
- 9.5 There are mechanisms to ensure the utilisation of the received stakeholders' feedback to improve the institution's services and to inform the relevant stakeholders of any actions taken. ●
- 9.6 The institution conducts regular cohort analysis and monitors employability rates to enhance the programmes' relevance to the market needs. ●

## Standard 4 – Infrastructure, ICT and Learning Resources

### Indicator 10 - Infrastructure

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| 10.1 | The institution ensures the compliance of its premises and facilities with the related HEC regulations through continuous reviews.   | ● |
| 10.2 | There are registers showing that the provided classrooms, tutorial and study spaces, library, offices, laboratories, amenities, medical facilities and security services are suitably equipped, sufficient and timetabled for the academic and non-academic activities and events. | ● |
| 10.3 | There is a record of all physical infrastructure and equipment showing scheduled cleaning, maintenance, and upgrades.  | ● |
| 10.4 | The institution has appropriate arrangements to ensure the security, efficiency, integrity and the availability of appropriate accommodation for conducting the examinations and other assessments.  | ● |
| 10.5 | There are formal, appropriate and implemented action plans whenever there is a need to modify or expand the institution's premises, and/or facilities to satisfy the requirements of the academic and administrative operations.   | ● |
| 10.6 | There are effective published policies and processes for occupational health and safety that are made available to staff, students and visitors, and comply with the laws and regulations of the Kingdom of Bahrain.   | ● |
| 10.7 | Access to the premises is appropriately restricted, secured and convenient for staff and students with special needs.  | ● |
| 10.8 | Where applicable, the residential accommodation offered by the institution is clean, safe, supervised and of a standard which is adequate to the needs of students, and there are arrangements in place to ensure regular inspections are conducted.                               | ● |



## Indicator 11 – Information and Communications Technology

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| 11.1 | There is an ICT operational plan - including active disaster recovery plans, and planned maintenance and replacement of ICT resources, which is systematically implemented, monitored and revised, to ensure that systems are fit for purpose, and up-to-date and reliable ICT services are available to all students, staff and other stakeholders. |  |
| 11.2 | There are up-to-date registers showing the provision of ICT systems and services, including the availability of sufficient hardware and software for staff and students.   |  |
| 11.3 | The institution uses appropriate management information systems to record and provide reports for the governing body, management and academic staff so that effective and informed decisions can be taken.   |  |
| 11.4 | The institution has formal arrangements to ensure that the ICT systems and services are accessible to staff and students with special needs, where applicable.   |  |
| 11.5 | There are effective arrangements that prevent unauthorised access to, and inappropriate use of, ICT resources, and provide adequate safeguards against copyright infringements of print and digital resources.   |  |
| 11.6 | The institution has appropriate policy and procedures for the use of its website and social media accounts, to effectively engage with its stakeholders and ensure the accuracy of the published information.  |  |

## Indicator 12 - Learning Resources

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| 12.1 | There are appropriate and effective policies and procedures for managing the utilisation of learning resources and dealing with the misuse cases of these resources.  |  |
| 12.2 | There are implemented policies and procedures to ensure that there are effective and adequate physical and electronic library and learning resources for students and staff, including access to the learning management system, databases, books and journals. |  |
| 12.3 | The institution has a comprehensive and well-managed learning management system, which is appropriate, sufficient to accommodate all users, and ensures the safety and integrity of personal data.  |  |



- 12.4 There is a system to ensure that students and academic staff are inducted and well-supported in the use of the learning management system, library and learning resources.



## Standard 5 – Management of Academic Affairs

### Indicator 13 – Academic Management and Integrity

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| 13.1 | There is academic planning derived and linked to the institution's mission and strategic goals, which clearly reflects among other aspects: a philosophy of teaching and learning; the type programmes on offer as well as the services provided to students; and the mechanisms to evaluate the achievement of strategic goals.  | ● |
| 13.2 | The institution has appropriate arrangements that include provision for academic leadership at programme and individual course level, and clearly identify academic staff responsibilities, as in teaching, research, scholarly activity, consultancy, community engagement and academic administration, to ensure a balance amongst these various responsibilities in line with the related HEC regulations and international norms. | ● |
| 13.3 | The institution has appropriate arrangements to ensure the balance between the number of senior academic staff with relevant experience and high academic ranks and junior academic staff who have just started their academic career as well as demonstrating diversification among their background and qualifications.   | ● |
| 13.4 | The institution employs an appropriate and effective mentoring system that provides guidance and continuous support for junior academic staff.  | ● |
| 13.5 | The institution has clear and published ethical and legal regulations, policies and procedures related to academic affairs and practices, which are implemented, regularly reviewed and accessible to academic staff and students.  | ● |
| 13.6 | There are effective arrangements in place to acknowledge intellectual property rights and to prevent, detect and deal with plagiarism, in addition to other forms of academic misconduct (e.g., cheating, forging of results, and commissioning others to do the work).   | ● |
| 13.7 | The institution has a set of comprehensive policies, regulations and procedures in place for staff and student conduct that deal with any unacceptable behaviour and discrimination.  | ● |

- 13.8 The institution has a clear and published policy on required student attendance and punctuality, and effective procedures and systems to monitor and enforce it. ●
- 13.9 The institution has a published, systematic, transparent, and fair process for investigating, recording and monitoring complaints and grievances of its students. ●

## Indicator 14 – Design and Approval of New Academic Programme

- 14.1 The institution has effective policies and procedures for the proposal, design and approval of new programmes, which take into consideration the mission of the institution, national priorities, employability skills, local, regional and international market demand including employability rates and the required infrastructure, learning and human resources to deliver the proposed programme. ●
- 14.2 The institution has formal and effective arrangements to ensure the involvement of internal and external stakeholders in the processes for the design and approval of new programmes and to demonstrate the compliance of newly developed programmes with the requirements of the NQF and HEC regulations. ●
- 14.3 The institution has formal and appropriate arrangements for benefiting from external expertise, regional and international reference points, in the design/development processes of new programmes. ●
- 14.4 Newly developed programmes have clearly articulated objectives/aims, learning outcomes, admission requirements, progression routes and career paths for prospective students. ●

## Indicator 15 – Academic Programme Reviews

- 15.1 There are effective policies and procedures for the review of existing/running programmes that ensure the involvement of all internal and external stakeholders, including students. ●
- 15.2 There are implemented policies and procedures for annual reviews of academic programmes, which include analysis of year-on-year results relevant to student satisfaction, achievement levels, completion rates and

progression to further study or employment, etc., that inform the improvement of programme quality and enhance the delivery of programmes.

- 15.3 There are implemented policies and procedures for periodic and external reviews to ensure that programmes and their curricula are up to date; reflect current research and trends in the discipline (fitness of purpose); and are relevant to the labour market and societal needs. ●
- 15.4 There is a clear mechanism to ensure that the results of the annual, periodic and external programme review reports and related action plans are being used by senior management for decision making and, where appropriate, being shared with all stakeholders including students. ●

## Indicator 16 – Admissions and Certification

- 16.1 The institution has up-to-date, clear, and accurate information about its academic programmes, admission criteria, which are published and available to prospective students and other stakeholders. ●
- 16.2 The institution regularly reviews admission criteria taking into account stakeholders' feedback and using information on students' outcomes, to ensure that the criteria are appropriately providing equal opportunities for prospective students and are aligned with local, regional and international academic norms for the discipline. ●
- 16.3 The language(s) of teaching and learning in the programme is clearly stated and the admission criteria include minimum language entry requirements that must be met. ●
- 16.4 The institution has clearly stated regulations about the transfer of credits from one programme to another or from another institution, that are fairly implemented for all relevant prospective students. ●
- 16.5 There is a policy and procedure in place to support access and recognition of prior learning, which accords with the NQF requirements, and there is an up-to-date register which is kept for all recognition of prior learning assessment and admission activities/records, where applicable, and where legislation permits. ●
- 16.6 The institution has a procedure in place to ensure that all application enquiries are responded to in a timely and appropriate manner. ●



- 16.7 The institution has formal arrangements that enable prospective students to appeal against access and enrolled students against transfer decisions. ●
- 16.8 The institution has a published policy that is administered effectively regarding the collection of and refund of student fees. ●
- 16.9 The institution has appropriate arrangements to ensure that foundation studies, including access courses and bridging courses, enable students to meet the admission criteria. ●
- 16.10 The institution provides students the opportunity to exit a programme at a given level and transfer to another programme, while specifying the details and the level of the other available programmes to transfer to and award given (if any) at the time of exit (where applicable). ●
- 16.11 There is an effective system for the management of students' information and academic records that includes processes for accurately entering and verifying data on enrolments and grades, backup of records, and processes to preserve the integrity and confidentiality of records and protect against unauthorised access or improper use. ●
- 16.12 There are effective mechanisms in place to ensure and maintain the safety and integrity of the process of certificate issuance. ●
- 16.13 The institution makes students records, transcripts and certificates available to its students in a timely manner. ●

## Standard 6 – Teaching, Learning and Assessment

### Indicator 17 - Management of Teaching and Learning

- 17.1 There are institutional/college teaching and learning policies and procedures, which include a range of appropriate teaching strategies, instructional methods (including e-learning) and learning resources that are consistently implemented, monitored and reviewed for effectiveness to achieve the learning outcomes. ●
- 17.2 The institution has an appropriate mechanism to ensure that all academic staff are consistently updating their course syllabi, which include mode of delivery, semester weekly schedule, instructional methods, and assessment types and dates, and which are made available to students on a regular basis. ●
- 17.3 Where practicums, work-based learning or internships, or capstone or graduation project are in place, there are implemented policies and procedures with regard to learning agreements if applicable, assessment strategies, and the roles and responsibilities of the various stakeholders. ●
- 17.4 There is a system to track and regularly monitor the student's learning experiences and progress, with mechanisms for improvement. ●
- 17.5 The institution has a consistently implemented, effective system to monitor the quality of all modes of teaching and learning (including e-learning), leading to continuous improvement. ●

### Indicator 18 – Graduate Attributes and Learning Outcomes

- 18.1 There are implemented effective mechanisms to ensure that graduate attributes at the institutional level and learning outcomes for all programmes and courses are clearly formulated and publicly available. ●
- 18.2 The institution identifies the employability skills as per the recent trends in the labour market and ensure these skills are embedded in the graduate attributes and the learning outcomes. ●
- 18.3 Benchmarks and external reference points are used to determine and verify the equivalence of learning outcomes with occupational standards, ●

where appropriate, and with other similar programmes locally, regionally or internationally.

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| 18.4 | There are implemented mechanisms to ensure that graduate attributes and learning outcomes are achieved across all programmes.   |  |
| 18.5 | The institution regularly tracks graduate destination and uses this information to inform the development of appropriate programme and course learning outcomes and ensure academic standards are attained. |  |

## Indicator 19 - Assessment and Moderation

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| 19.1 | There are effective assessment policies and procedures that contribute to the design of appropriate formative and summative assessments in terms of their level of complexity, validity, alignment with course and programme learning outcomes, rigour, and fairness and transparency of marking and timely feedback. |  |
| 19.2 | The assessment policies and procedures are published and systematically implemented across the institution.   |  |
| 19.3 | There are effective policies and procedures that govern the pre and post internal and external moderation of assessment and clearly state the roles and responsibilities of the moderators and the mechanism for their appointment.   |  |
| 19.4 | There is a clear and transparent grade appeal process that is communicated to students and consistently implemented across the institution in a timely manner.  |  |
| 19.5 | The institution has effective policies and procedures for the security and retention of assessment documents and records and back-up mechanisms.  |  |



## Standard 7 – Research and Postgraduate Studies

### Indicator 20 – Research Management and Support

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|------|---|---|
| 20.1 | The institution has clear research strategy which is aligned with the national priorities and encourages innovation and collaborative research.   | ● |
| 20.2 | The institution has implemented an operational research plan appropriate for its type and mission, which includes key performance indicators and targets, and is regularly monitored and reviewed for improvement to support the institutions' strategic goals. | ● |
| 20.3 | In accordance with HEC regulations, the proportion of the institution's budget allocated for the support of research is monitored and is sufficient to support the institution's strategic goals.   | ● |
| 20.4 | There are effective policies related to research ethics' issues, which are well-disseminated and consistently implemented.  | ● |
| 20.5 | There are fair, transparent and implemented research policies for the awarding of research grants, conference participation, academic promotion, or other incentives to support academic staff in developing their research output.                             | ● |
| 20.6 | There is an implemented systematic approach to ensure that research and scholarly activities have a positive impact on teaching and student learning and are relevant to academic and professional fields.  | ● |
| 20.7 | The institution has an appropriate mechanism to communicate its operational research plan to all relevant stakeholders.   | ● |
| 20.8 | The institution has formal arrangements in place for its research output to be documented and published <i>via</i> printed and/or electronic forms (catalogues, journals, website, social media accounts, etc.).  | ● |



## Indicator - 21 Postgraduate Studies (where applicable)

- |      |  |   |
|------|--|---|
| 21.1 | There is a mechanism in place to ensure that the learning outcomes of the research component(s) are aligned with the programme outcomes and are assessed properly in line with the NQF requirements.   | ● |
| 21.2 | The institution has implemented policies and procedures, which are aligned with HEC regulations, for the effective supervision and support of research students.   | ● |
| 21.3 | There is regular monitoring and review of research students' progress and satisfaction in their programmes of study.   | ● |
| 21.4 | There is a rigorously implemented mechanism involving well-experienced and qualified research supervisors, and internal and external examiners, for the assessment of the research component(s), to ensure that these are at an appropriate level and comparable to international standards. | ● |

## Standard 8 – Community Engagement

### Indicator 22 - Community Engagement

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|------|---|--|
| 22.1 | The institution has a clearly articulated community engagement statement, policies, and operational plan, which are aligned to its mission and strategic goals and are consistently implemented.            |  |
| 22.2 | The institution has appropriate arrangements for strengthening its links with the business community and ensuring its positive contribution to its core functions.  |  |
| 22.3 | The institution has appropriate arrangements in place for involving relevant external stakeholders, including alumni, professional bodies, and university partnerships, in community engagement activities. |  |
| 22.4 | The institution encourages and supports staff and students to engage in community and professional activities in line with its community engagement operational plan.                                       |  |
| 22.5 | The institution has a database of community engagement activities that is used for planning purposes.   |  |
| 22.6 | The institution has a mechanism in place for collecting feedback on community activities from relevant stakeholders and uses it for improvement of future community engagement activities.                  |  |

## Standard 9 – Student Support Services

### Indicator 23 - Student Academic Support

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|------|---|---|
| 23.1 | Prospective students are properly briefed on the nature and requirements of the programme(s) in which they are interested and provided with advice on choosing their programme of study.                          | ● |
| 23.2 | The institution has effective procedures for ensuring that all students are properly inducted on the various academic support systems and services available to them.   | ● |
| 23.3 | Reasonable accommodations are made for students with special needs, including academic support, where appropriate and for different modes of learning, and these are regularly monitored and reviewed.            | ● |
| 23.4 | Students have access to career information, advice and guidance, including progression to further study and any professional body exemptions that may be available.   | ● |
| 23.5 | The institution has appropriate arrangements for enabling all students to have fair access to academic staff outside regular teaching and learning sessions.  | ● |
| 23.6 | There are effective procedures to allocate for every student an academic advisor, who regularly follows up on and discusses the student's progress and provides them with guidance and advice in a timely manner. | ● |
| 23.7 | The institution has an effective mechanism to identify and support students at risk of academic failure.  | ● |
| 23.8 | There is an effective learning environment that promotes the concept of lifelong learning and ensures equal opportunities for all students.   | ● |

## Indicator 24 - Student Non-Academic Support

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|------|--|---|
| 24.1 | The institution has appropriate arrangements for providing all students with information on scholarships, financial advice and support and access to transportation services, where applicable.  | ● |
| 24.2 | There are appropriate arrangements in place to ensure that international students receive guidance and appropriate advice before and after their arrival in the Kingdom of Bahrain. This advice relates to travelling to and living in the Kingdom of Bahrain, information about the local culture, religious considerations, etc. | ● |
| 24.3 | The institution has appropriate formal arrangements for the selection, monitoring, and evaluation of its student recruitment agents, where applicable.   | ● |
| 24.4 | The institution has appropriate arrangements for providing all students with emergency contact numbers for support outside official working hours.   | ● |
| 24.5 | There is a range of effective student support services related to counselling, health, and welfare.  | ● |
| 24.6 | The institution provides students with opportunities, whether face-to face or virtual, to engage in wider social, recreational, community and cultural pursuits aimed to promote their development as individuals.   | ● |
| 24.7 | The institution proactively engages with its alumni and encourages their interaction with current students to provide support, mentoring and career advice.  | ● |