هيئة جودة التعليم والتدريب
Education & Training Quality Authority
Kingdom of Bahrain - مملكة البحرين

Academic Programme Reviews Handbook (Cycle 2)

Effective from: September 2020

Directorate of Higher Education Reviews

2010-DHR-FRA-059

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ABBREVIATIONS

APR	Academic Programme Review
APQC	American Productivity and Quality Control
BQA	Education & Training Quality Authority
CBHE	Cross-Border Higher Education
DGS	Directorate of Government Schools Reviews
DHR	Directorate of Higher Education Reviews
DPS	Directorate of Private Schools and Kindergartens Reviews
DVR	Directorate of Vocational Reviews
ENQA	European Association for Quality Assurance in Higher Education
GDR	General Directorate of Education & Training Institutes Reviews
GPA	Grade Point Average
HEC	Higher Education Council
HEI	Higher Education Institution
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
IT	Information Technology
MCQ	Multiple Choice Question
NQF	National Qualifications Framework
OECD	Organisation for Economic Co-operation and Development
QAA	Quality Assurance Agency for Higher Education

QAAP	Quality Assurance and Accreditation Project
RPL	Recognition of Prior Learning
SER	Self-Evaluation Report
SM	Supporting Material
UNESCO	United Nations Economic, Scientific and Cultural Organisation

1. INTRODUCTION

1.1 BACKGROUND TO THE EDUCATION & TRAINING QUALITY AUTHORITY

The Authority was established under the name of 'Education and Training Quality Assurance Authority' pursuant to the Royal Decree No. (32) of (2008) as an independent national authority governed and supervised by the Cabinet of Ministers of the Kingdom of Bahrain. It has been reorganized and renamed: the Education & Training Quality Authority (BQA) as per the Royal Decrees Numbers: (83) for the year (2012) and (74) for the year (2016). Under the Royal Decree of 2012, one of the BQA tasks is to ensure that the quality of education and training in the Kingdom meets the best international standards and practices, as it is entrusted with "reviewing the quality of the performance of educational and training institutions in the light of the guiding indicators they set", in accordance with the Economic Vision 2030 of the Kingdom of Bahrain, and the directions of the Government's work programme.

The BQA has three main core businesses, namely: the performance review of education and training institutions, conducted by the General Directorate of Education & Training Institutes Reviews (GDR); the management of the National Examinations and Qualifications Framework, by the General Directorate of National Qualifications Framework & Examinations. The GDR consists of four directorates: the Directorate of Government Schools Reviews (DGS), the Directorate of Private Schools and Kindergartens Reviews (DPS), the Directorate of Vocational Reviews (DVR), and the Directorate of Higher Education Reviews (DHR). The General Directorate of National Qualifications Framework & Examinations consists of the Directorate of National Framework Operations and the Directorate of National Examinations.

1.2 THE DIRECTORATE OF HIGHER EDUCATION REVIEWS

The BQA, through the DHR, carries out two types of reviews that are complementary. These are the Institutional Reviews, where the whole Institution is assessed according to specific Standards and Indicators, and the Academic Programme Reviews (APRs), where the quality of teaching, learning and academic standards are assessed in academic programmes within various Colleges according to specific Standards and Indicators. The DHR passes its judgements on both types of reviews.

The DHR completed Cycle 1 of the Institutional Reviews in 2013. Cycle 2 of Institutional Reviews commenced in the academic year 2018-2019 based on the Institutional Review Framework (Cycle 2) that was approved by the Council of Ministers Resolution No. (38) of 2015. With regards to the APRs (Cycle 1), this was divided into two phases. During phase 1, the review Indicators were applied to a limited number of academic programmes in different Colleges and this phase was completed in 2011. Phase 2 was conducted during the period

from May 2012 to December 2017, with all academic programmes offered by Higher Education Institutions (HEIs) in the Kingdom of Bahrain being subjected to reviews. Cycle 2 of the programme reviews commenced in the academic year 2019-2020, following the approval of the revised APRs Framework (Cycle 2) by the Council of Ministers Resolution No.17 of 2019.

The five main objectives of the DHR are to:

- enhance the quality of higher education in Bahrain by conducting reviews of the quality assurance arrangements of HEIs in the Kingdom and identifying areas of improvement and areas of strength
- conduct programme reviews within higher education to ensure that the standards of the BQA review frameworks, which are aligned to international standards are being met
- ensure that there is public accountability of higher education providers, through the provision of an objective assessment of the quality of each provider and its programmes (*documented in Review Reports*) for use by parents, students, the Higher Education Council (HEC), and other relevant bodies
- promote quality assurance in higher education through (i) facilitating capacity development workshops and related activities; (ii) liaising with the HEC, industry, businesses and other stakeholders; and (iii) identifying good practice where it exists and disseminating it throughout the Bahraini higher education sector
- serve an advocacy role for Bahrain higher education within the Kingdom, the region and internationally.

1.3 PURPOSE OF THIS HANDBOOK

This handbook serves firstly as a guide for HEIs undergoing programme reviews as per the requirements of the DHR; secondly, it provides programme reviewers with information regarding their roles and responsibilities as they carry out reviews.

2. THE REVIEW FRAMEWORK

2.1 OVERVIEW OF THE ACADEMIC PROGRAMME REVIEWS' FRAMEWORK

The APRs are specialised exercises, which focus on the academic standards of each programme amongst a set of learning programmes within a College in a particular disciplinary area, its delivery and quality assurance arrangements. Although the term 'College' is used for the purposes of this framework, the terms 'Faculty', 'School', (or any other terms) which refer to an entity that offers a higher education programme are used equivalently in the reviews. The scope of these reviews covers all taught and research programmes leading to a qualification at a Bachelor or Master or Doctorate level, including Cross-Border Higher Education (CBHE) programmes that are awarded by external bodies. Any foundation programme or provision may also be reviewed depending on how it is conceptualised by the Institution, for example, if it functions as an extended curriculum rather than a standalone programme.

Higher education programmes in Bahrain will be reviewed against each of the Standards and related Indicators set out in this section. The Standards include compliance with decisions of the HEC and its regulations. The Standards also cover the National Qualifications Framework (NQF) validation criteria, and therefore, the DHR review and the validation/revalidation of the programmes for the purpose of placement on the NQF will be carried out together, where applicable. Each Indicator includes 'What is expected of a programme offered in Bahrain?'. These expectations are intended to provide assistance in interpreting the Indicators. The Institution must comment on most if not all of these expectations in their self-evaluation and may choose to add their own practices, where applicable. Where the academic programme delivered is the qualification of another HEI outside the Kingdom of Bahrain that provides the curriculum and/or teaching or operates as a 'parent' Institution, the Institution must also clarify its compliance with the decisions of the HEC and its regulations and comment on the expectations which are specific to CBHE programmes. These expectations reflect and complement the expectations listed in the BQA Institutional Review Framework under Indicator 6 'Partnership, Memoranda and Cross-border Education'. These expectations are also aligned with the Criteria of CBHE of the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) and the Guidelines for Quality Provision in CBHE, which were developed by the United Nations Economic, Scientific and Cultural Organisation (UNESCO) and the Organisation for Economic Co-operation and Development (OECD), known as the UNESCO/OECD Guidelines.

2.2 STATEMENT OF PRINCIPLES THAT UNDERPIN THE PROGRAMME REVIEW PROCESS

The design and conduct of APRs are guided by eight principles drawn from key sources worldwide. These sources include the INQAAHE, and the European Standards and Guidelines published by the European Association for Quality Assurance in Higher Education (ENQA).

The eight principles are:

- HEIs providing award-bearing programmes are responsible for the quality of the programmes and the academic standards of the academic awards.
- Academic programmes need to demonstrate relevance and gain deserved recognition in the region and internationally.
- The review is a continuing process with internal elements that include a Self-Evaluation Report (SER) and external elements (such as an actual or virtual site visit conducted by a peer review panel, the members of which can be local, regional or international), resulting in a written report and a follow-up of improvement plans, which together serve to inform and support the programme's continuing improvement. In virtual site visits, interviews are conducted through Microsoft Teams or Zoom, or any other agreed upon application whereas the physical facilities and resources of the programme are examined through a demonstration video(s), and all the requested documents and evidences are submitted electronically. However, in some cases, an actual site visit tour of the institution's facilities may be conducted by a member of the review panel and/or representatives of the DHR.
- The processes of review and continuing improvement are enhanced when HEIs engage their stakeholders (those individuals, groups and organisations that have a legitimate interest in the quality of learning programmes and their graduates).
- Criteria for formal decisions are clear and applied consistently.
- Evaluation looks at the clarity of the stated programme aims, intended learning outcomes and takes into consideration the mission of the Institution.
- Review processes and the derived outcomes are evidence-based and conducted with openness and transparency.
- The peer review plays a key part in evaluating information, conducting analyses and conversations with HEIs and other stakeholders in order to reach evidence-based conclusions.

2.3 DEFINITION OF HIGHER EDUCATION PROGRAMMES

For the purpose of APRs, an academic programme is defined as 'one which admits students who, on successful completion, receive an academic qualification'. APRs apply to all academic programmes at Bachelor, Master and Doctorate levels in all HEIs as well as foundation programmes where appropriate. Where programmes are studied in more than one Institution, the whole programme is included in the review.

2.4 STEPS IN THE REVIEW PROCESS

As stated earlier, one of the main activities of the DHR of the BQA is the review of programmes within HEIs, to ensure that international standards are being met. The DHR will notify the HEIs that their programmes will be subjected to reviews and will prepare a schedule of reviews that is approved by the BQA. The review cycle starts with the HEIs being notified of the intended review dates. Each Institution submits the SER(s) and supporting materials (SMs) for each of its offerings, at least, two months before the scheduled Virtual Site Visit. The APR process include the following:

- a Virtual Site Visit that may include all the programmes offered by the College at the same time
- a Review Report for each programme, published by the BQA, that contains an overall judgement
- the College's submission of an improvement plan in response to the Review Report
- an Extension or Follow-up Visit for programmes receiving 'Limited Confidence' or 'No Confidence' judgements.

The detailed activities and typical timelines for the review process are given in Table 1 below.

Table 1: Activities and typical timelines for the review process in the APRs

Activity	Undertaken by	Timeline
Pre-Virtual Site Visit		
• Informing HEIs about Review Dates	➤ DHR Director	20 to 24 weeks before the Virtual Site Visit
• Conducting Self-evaluation Workshops	➤ DHR Director ➤ Review Directors	20 to 24 weeks before the Virtual Site Visit

• Appointing Review Panels
  o Panel members selection
  o Panel members approval by Chief Executive
  o Panel members approval by the Institution
• Inviting panel members
• Signing 'No Conflict of Interest' Declaration Forms
	➤ Chief Executive
	➤ General Director
	➤ DHR Director
	➤ Review Directors
	➤ Quality Specialists
	➤ HEIs
	➤ Panel members
		12 to 16 weeks before the Virtual Site Visit

• Initiating logistic arrangements (Travel/ accommodation	➤ DHR Liaison Assistant	12 to 16 weeks before the Virtual Site Visit

arrangements for panel members)		
• Submission of SERs and SMs	➢ HEIs	12 to 16 weeks before the Virtual Site Visit
• Sending SER and SMs to panel members	➢ Quality Specialists	10 to 14 weeks before the Virtual Site Visit
• Submission of Preliminary Report on SER and SMs • Identification of extra evidence needed and people to meet	➢ Panel members	6 to 7 weeks before the Virtual Site Visit
• Conducting Portfolio meetings (teleconference)	➢ Panel members ➢ Review Directors ➢ Quality Specialists	4 to 5 weeks before the Virtual Site Visit
• Conducting Preparatory meeting(s) (extra evidence, review schedule, briefings etc.)	➢ Review Directors ➢ Quality Specialists ➢ HEIs	3 to 4 weeks before the Virtual Site Visit
• Submission of extra evidence and names of interviewees	➢ HEIs	2 weeks before the Virtual Site Visit
• Finalizing Virtual Site Visit schedules and preparations	➢ Review Directors ➢ Quality Specialists	1 week before the Virtual Site Visit

The Virtual Site Visit

The duration of the Virtual Site Visit ranges from 3-5 days depending on the number of programmes to be reviewed within each College and may include an actual tour of the HEI facilities. as well as joint interview sessions with the Directorate of National Framework Operations.

3. THE REVIEW STANDARDS AND INDICATORS

The review framework, based on the four main Standards and 21 Indicators discussed below, is applicable to all academic fields, and HEIs. It will form the basis for the self-evaluation, the site-visit by peer reviewers and the Review Reports.

3.1 THE STANDARDS AND INDICATORS

> ## Standard 1: The Learning Programme
>
> *The programme demonstrates fitness for purpose in terms of mission, relevance, curriculum, pedagogy, intended learning outcomes and assessment.*

Indicator 1.1: The Academic Planning Framework

> *There is a clear academic planning framework for the programme, reflected in clear aims which relate to the mission and strategic goals of the Institution and the College.*

- There is a clear planning process to ensure that the programme is relevant, fit for purpose, and complies with existing regulations (e.g. license approval and occupational standards, where applicable).
- Potential risks, especially those related to the quality of the programme, its delivery and academic standards, are regularly identified and effectively dealt with.
- The programme adheres to the NQF's qualification design requirements as well as the related mapping and confirmation processes.
- The programme/qualification's title is concise and indicative of the qualification's type and content and is accurately documented on the certificates, programme description documents and the university's website.
- The programme has clear and appropriate aims that are regularly revised in consultation with the relevant stakeholders.
- The programme aims contribute to the achievement of the College and Institution missions and strategic goals, including those related to scientific research (especially in the case of research programmes).

   In case of a CBHE programme, the following also applies:

- In addition to licensing by the HEC, there must be a valid binding agreement between the Institution operating in Bahrain and the other Institution(s) in relation to the programme, whereby this agreement is regularly monitored and revised to ensure its effectiveness and that the institutions meet their obligations.

- The agreement states clearly the nature and mode of delivery of the CBHE programme (i.e. franchise, twinning, double/joint degree, validation, etc.), as well as the courses or programme elements that will be taught and examined by each Institution.
- The agreement specifies the title of the degree and the name/s of the Institution(s) that will be on the student's testamur and ensures the recognition of the programme in Bahrain and/or the country of the parent Institution.
- The agreement specifies which Institution's rules and policies will be applied in terms of teaching and learning, assessment, student admission, support, staffing, etc.
- The agreement specifies in detail the roles and responsibilities of the two institutions in terms of academic planning, maintenance of academic standards, staff capacity building and research, to ensure that the programme is of comparable quality.
- The Institution must provide clear, complete and up-to-date information about the offered CBHE programme and its characteristics.

Indicator 1.2: Graduate Attributes & Intended Learning Outcomes

Graduate attributes are clearly stated in terms of intended learning outcomes for the programme and for each course and these are appropriate for the level of the degree and meet the NQF requirements.

- There are generic graduate attributes that are defined at an Institutional level and embedded within the programme in terms of intended learning outcomes.
- The programme intended learning outcomes are clearly stated and linked to programme aims and are appropriate for its type and level.
- The programme intended learning outcomes are appropriately written (measurable) and meet the NQF requirements and international norms through benchmarking.
- The course intended learning outcomes are appropriate for the level of the courses and their contents, and there are mechanisms employed to ensure their appropriateness (NQF, benchmarking, etc.).
- The course intended learning outcomes are appropriately mapped to the programme intended learning outcomes.
- The learning outcomes required for the research components of the research-based programme are consistent with the required learning outcomes of the programme.

Indicator 1.3: The Curriculum Content

The curriculum is organised to provide academic progression of learning complexity guided by the NQF levels and credits, and it illustrates a balance between knowledge and skills, as well as theory and practice, and meets the norms and standards of the particular academic discipline.

- The study plan is organised to show appropriate progression year-on-year or course-by-course in terms of NQF levels and credits, with an appropriate list of pre-requisites and suitable student workload.

- The curriculum is regularly updated in light of benchmarking, professional associations, occupational standards and other expectations and requirements in the professional field, where applicable.
- There are mechanisms in place to ensure an appropriate balance between theory and practice, and between knowledge and skills in the curriculum.
- The course contents cover all elements expected in terms of depth and breadth.
- Textbooks and references are current and appropriate, and there is evidence of use of recent research findings and current professional practice in course materials and teaching and learning activities, where applicable.
- Where there is a research programme, there should be a structure that ensures that the intended learning outcomes are covered and stipulates how these outcomes will be achieved and measured.
- The research-based programme ensures that students receive training in the principles and ethics of scientific research in their specialisation as well as in-depth research training by supervisors with academic and research experience in the academic specialisation.

In the case of a CBHE programme, the following also applies:

- The programme adheres to the NQF of the country of the parent Institution, where applicable.
- The programme takes into account 'the cultural and linguistic sensitivity' of Bahrain, as per the guidelines for Quality Provision in CBHE of the UNESCO and OECD, known as the UNESCO/OECD Guidelines.

Indicator 1.4: Teaching and Learning

The principles and methods used for teaching in the programme support the attainment of programme aims and intended learning outcomes.

- There is an Institutional/College teaching and learning policy that refers to the use of a range of appropriate teaching methods.
- Teaching and learning methods stated in the programme specifications are in line with the Institution's teaching philosophy, informed by current research findings and enable the attainment of the intended learning outcomes.
- E-learning is a part of the teaching and learning policy and supports the attainment of the intended learning outcomes.
- The teaching and learning policy encourages students' participation in learning, exposure to professional practice/application of theory where applicable, and development of independent and lifelong learning.
- The learning environment strengthens the students' perceptions and research capabilities and motivates them to create and innovate.
- The learning environment promotes the concept of lifelong learning by encouraging all types of learning: formal, informal and non-formal learning.

Indicator 1.5: Assessment Arrangements

Suitable assessment arrangements, which include policies and procedures for assessing students' achievements, are in place and are known to all relevant stakeholders.

- There is an Institutional/College assessment framework, which includes policies and procedures appropriate for the type and level of the programme (e.g. coursework and research programmes) that are consistent with the decisions and regulations of the HEC and are implemented strictly and regularly.
- The policies and procedures are adequately disseminated to relevant stakeholders.
- There are formative and summative functions with clear criteria for marking, and appropriate mechanisms for providing students with prompt feedback on their progress and performance, which assists further learning.
- The evaluation of research takes into account the ethics and principles of scientific research in different disciplines.
- Students' progress in the research-based programmes is monitored and evaluated and their personal and learning needs are supported on a regular basis.
- There are transparent mechanisms for grading students' achievements with fairness and rigour, with appropriate provisions for internal and external moderation of assessment.
- There are provisions for addressing academic misconduct and appeals by the students.

Standard 2: Efficiency of the Programme

The programme is efficient in terms of the admitted students, the use of available resources - staffing, infrastructure and student support

Indicator 2.1: Admitted Students

There are clear admission requirements, which are appropriate for the level and type of the programme, ensuring equal opportunities for both genders, and the profile of admitted students matches the programme aims and available resources.

- There is a clear published admission policy, that ensures that appropriate students are accepted on an equal basis between females and males, which is consistently implemented and communicated to stakeholders.
- The admission requirements ensure the enrolment of students who are appropriate for the programme level and are consistent with local and international academic standards of the specialisation.
- There are appropriate remedial support measures (e.g. orientation, remedial courses, foundation programme, etc.) for inadequately prepared students to enter and progress in the programme.

- There are arrangements for access, progression, credit transfer (internal and external) and Recognition of Prior Learning (RPL), where applicable.
- The admission policy is regularly revised in light of student performance and feedback from relevant stakeholders, in addition to national and international benchmarks.

Indicator 2.2: Academic Staff

There are clear procedures for the recruitment, induction, appraisal, promotion, and professional development of academic staff, which ensure that staff members are fit-for-purpose and that help in staff retention.

- There are clear procedures for the recruitment, induction, appraisal, and promotion of academic staff, which are consistently implemented in a transparent manner.
- There are applied policies and procedures that ensure the quality of scientific research carried out by faculty members, and its alignment with the research plan of the College and the Institution.
- The academic staff workload is appropriate and allows for research and community engagement activities, taking into consideration special needs of women in particular in line with regulations/international practices.
- There are sufficient staff members with an appropriate range of academic qualifications, specialisations and professional experience to teach on the programme.
- There are suitable and effective arrangements/policies/procedures for identifying and supporting continuing professional development needs of all staff, which are consistently monitored and evaluated.
- There is evidence of providing opportunities to develop faculty capacity for supervising research thesis through professional development programmes (where applicable).
- There are effective measures in place to monitor staff turnover and ensure the retention of highly qualified academic staff members.

Indicator 2.3: Physical and Material Resources

Physical and material resources are adequate in number, space, style and equipment; these include classrooms, teaching halls, laboratories and other study spaces; Information Technology (IT) facilities, library and learning resources.

- Classes and laboratories are adequate in terms of number and size for the available students and are appropriately equipped.
- The IT facilities are adequate for students' needs (e.g. computer laboratories, Wi-Fi, e-mails, etc.).
- The library has adequate resources (including electronic resources) for the programme needs and encompasses appropriate informal study places.
- There is a formal mechanism to ensure the maintenance of the resources and facilities and to measure their adequacy.

- There are appropriate arrangements to ensure the health and safety of students and staff on campus.

Indicator 2.4: Management Information Systems

There are functioning management information and tracking systems that support the decision-making processes and evaluate the utilisation of laboratories, e-learning and e-resources, along with policies and procedures that ensure security of learners' records and accuracy of results.

- The Management Information System (MIS) is appropriate and provides a database for the programme's needs, which enables informed decision-making.
- The generated tracking reports/data of the utilisation of laboratories, e-learning and e-resources, etc. are used to inform the decision-making process.
- There are policies and procedures in place to ensure the security of learners' records and accuracy of results.
- The awarded certificates and transcripts are accurate in describing the achieved learning by students, and are issued in a timely manner.

Indicator 2.5: Student Support

There is appropriate student support available in terms of guidance, and care for students including students with special needs, newly admitted and transferred students, and students at risk of academic failure.

- There is appropriate student support in terms of library, laboratories, e-learning and e-resources, guidance and care (e.g. laboratory technicians, library induction, social and career counselling, etc.).
- Students are provided with career guidance services and support to help them prepare for work and plan their career paths.
- Arrangements are in place for inducting newly admitted students, including those transferring from other institutions with direct entry after Year 1.
- Academic advising supports students in achieving graduate attributes and learning outcomes.
- There are appropriate provisions to integrate women's needs, ensure equal opportunities for both genders, and support students with special needs.
- The type of support provided for at-risk students is suitable, and there is a monitoring system for assessing students' progress, which enables timely intervention.
- The provided support services are regularly assessed and improved in line with students' needs.

Standard 3: Academic Standards of Students and Graduates

The students and graduates of the programme meet academic standards that are compatible with equivalent programmes in Bahrain, regionally and internationally.

Indicator 3.1: Efficiency of the Assessment

The assessment is effective and aligned with learning outcomes, to ensure attainment of the graduate attributes and academic standards of the programme.

- There are valid and reliable assessment methods that are in line with current good practices in terms of the level of assessments' complexity, and meet the academic standards of the programme.
- There are appropriate mechanisms in place to ensure the alignment of assessments with learning outcomes and graduate attributes.
- There are mechanisms used to ensure that graduates' achievements meet the programme intended learning outcomes.
- There are mechanisms for monitoring the implementation and improvement of the assessment process.

Indicator 3.2: Academic Integrity

Academic integrity is ensured through the consistent implementation of relevant policies and procedures that deter plagiarism and other forms of academic misconduct (e.g. cheating, forging of results, and commissioning others to do the work).

- Policies and procedures relating to academic integrity, including those related to ethics and research are well-disseminated and known by students and staff.
- There are sound implemented processes for deterring and detecting plagiarism and academic misconduct, which are consistently applied.
- Cases of academic misconduct and plagiarism are recorded and appropriate actions are taken.

Indicator 3.3: Internal and External Moderation of Assessment

There are mechanisms in place to measure the effectiveness of the programme's internal and external moderation systems for setting assessment instruments and grading students' achievements.

- There are formal and appropriate procedures for the internal moderation of assessment and the selection of internal moderators.

- Internal moderation contributes to the review and improvement of both courses and the programme, as well as ensures consistent assessments and fairness of grading that meet relevant professional and academic standards.
- There are formal and appropriate mechanisms for the evaluation of the effectiveness of the programme's internal moderation.
- There are formal and appropriate procedures for the external moderation of assessment and the selection of external moderators.
- External moderation contributes to the review and improvement of both courses and the programme, as well as ensures consistent assessments and fairness of grading that meet relevant professional and academic standards.
- There are formal and appropriate mechanisms for the evaluation of the effectiveness of the programme's external moderation.

Indicator 3.4: Work-based Learning

Where assessed work-based learning takes place, there is a policy and procedures to manage the process and its assessment, to assure that the learning experience is appropriate in terms of content and level for meeting the intended learning outcomes.

- There is an appropriate policy and procedures to manage the work-based learning process, which ensure an equivalent experience amongst all students.
- The roles and responsibilities of the internship providers, academic supervisors, training supervisors and students are set out clearly and are communicated to all the relevant stakeholders.
- The work-based learning component contributes effectively to the achievement of the programme intended learning outcomes.
- The assessment of the work-based learning is well-managed, consistently implemented, and is appropriate in terms of content and level.
- There are arrangements to evaluate the effectiveness of work-based learning and its contribution to the achievement of the programme aims, and this evaluation is used to improve the work placements.

Indicator 3.5: Capstone Project or Thesis/Dissertation Component

Where there is a capstone project or thesis/dissertation component, there are clear policies and procedures for supervision and evaluation which state the responsibilities and duties of both the supervisor and students, and there is a mechanism to monitor the related implementations and improvements.

- The dissertation, thesis or capstone project component contributes effectively to the achievement of the programme intended learning outcomes.
- The roles and responsibilities of the supervisors and students are clearly stated in the relevant policies and procedures and are communicated to all stakeholders.

- There is regular monitoring and review of the progress of the students and their satisfaction with the supervision process and the resources available to carry out their research.
- There are rigorously implemented mechanisms for the assessment of the dissertation, thesis or capstone project component to ensure that it is at an appropriate and similar level of equivalent programmes.
- There is a mechanism for monitoring related implementations and improvements of the process.

Indicator 3.6: Achievements of the Graduates

The achievements of the graduates are consonant with those achieved on equivalent programmes as expressed in their assessed work, rates of progression and first destinations.

- The level of students' achievements is appropriate based on careful scrutiny of students' assessed work (different levels and types of courses), and reflects their ability to create and innovate.
- The ratios of admitted students to successful graduates including year-on-year progression, retention, and length of study are consonant with those on equivalent programmes.
- Student progression and graduate destinations data are used to ensure that academic standards are met.
- There is evidence of graduate and employer satisfaction with the graduates' profile.

Standard 4: Effectiveness of Quality Management and Assurance

The arrangements in place for managing the programme, including quality assurance and continuous improvement, contribute to giving confidence in the programme.

Indicator 4.1: Quality Assurance Management

There is a clear quality assurance management system, in relation to the programme that ensures the Institution's policies, procedures and regulations are applied effectively and consistently.

- There are appropriate Institutional policies and regulations for the needs of the programme that are regularly revised and well-communicated to all stakeholders.
- There is a clear quality assurance management system, in relation to the programme within the College, which is consistently implemented.
- There are mechanisms to ensure the consistent implementation of policies and procedures across the College and its Departments.

- Academics and support staff have an understanding of quality assurance and their role in ensuring effectiveness of provision.
- The quality assurance management system is monitored, evaluated and improved.

Indicator 4.2: Programme Management and Leadership

The programme is managed in a way that demonstrates effective and responsible leadership and there are clear lines of accountability.

- The College's organisational chart is appropriate for the management of the programme.
- The existing reporting lines are clear and ensure effective communication and decision-making.
- There are clear terms of reference for different management posts and committees.
- It is clear where the academic responsibility and the custodianship of the academic standards of the programme rest on different levels (Department, College and Institution).
- The programme management is appropriate in terms of demonstrating effective and responsible leadership.

In case of a CBHE programme, the following also applies:

- Ensuring the 'equivalent quality of the education' offered is the responsibility of the awarding Institution(s), as per the Criteria of CBHE of INQAAHE and the UNESCO/OECD Guidelines.
- 'Equivalent quality of education' entails that students on the programme are provided with equivalent learning opportunities, including the provision of quality teaching, work-based learning experience and opportunities, and access to facilities of the parent Institution such as the library electronic resources, where applicable.

Indicator 4.3: Annual and Periodic Review of the Programme

There are arrangements for annual internal evaluation and periodic reviews of the programme that incorporate both internal and external feedback, and mechanisms are in place to implement recommendations for improvement.

- There are appropriate arrangements for an annual internal programme evaluation, which results in a comprehensive report including recommendations for improvement on both programme and course levels.
- There are mechanisms for monitoring the implementation of the annual evaluation recommendations for improvement on programme and course levels.
- There is a comprehensive policy for the periodic review of the programme.
- The implemented periodic reviews are comprehensive and include feedback from internal and external stakeholders.
- There are mechanisms to ensure the proper implementation of the periodic reviews and related improvement plans.

Indicator 4.4: Benchmarking and Surveys

Benchmarking studies and the structured comments collected from stakeholders' surveys are analysed and the outcomes are used to inform decisions on programmes and are made available to the stakeholders.

- Benchmarks and internal and external reference points are used to determine and verify the comparability of academic standards with other similar programmes in Bahrain, regionally or internationally.
- Benchmarking outcomes are utilized to inform decision making.
- There are formal mechanisms for collecting structured comments from internal and external stakeholders (surveys, focus groups, etc.).
- The collected comments are analysed and used to inform decisions on the programme.
- There are mechanisms in place to implement improvements and to communicate the outcomes to stakeholders.
- Stakeholders are satisfied with changes implemented based on their feedback.

Indicator 4.5: Relevance to Labour market and Societal Needs

The programme has a functioning advisory board and there is continuous scoping of the labour market and the national and societal needs, where appropriate for the programme type, to ensure the relevancy and currency of the programme.

- There is a functioning programme advisory board with clear terms of reference and it includes discipline experts, employers and alumni.
- The feedback of the advisory board is used systematically to inform programme decision-making.
- There are implemented mechanisms to ensure that the programme meets the labour market, national and societal needs.
- There are formal studies with targeted data that enable the scoping of the labour market and the national and societal needs, to ensure that the programme is relevant and up-to-date.
- There is evidence that applied mechanisms are monitored and reviewed.

3.2 THE JUDGEMENTS

Each Indicator within a Standard will have a judgement; i.e. 'addressed', 'partially addressed' or 'not addressed' (Appendix I), and this will lead with the judgements of the other Indicators within this Standard to the Standard's final judgement.

A Standard will be given a judgement of 'satisfied' or 'not satisfied' depending on the number of Indicators 'addressed' or 'partially addressed' or 'not addressed' within it. Three Indicators or more must be addressed and the rest partially addressed for the judgement of the Standard

to be 'satisfied'. If less than three Indicators are addressed or in case one or more Indicators are not addressed, the judgement of the Standard will be 'not satisfied'.

The aggregate of Standards' judgements will lead to an overarching judgement – **'Confidence', 'Limited Confidence', or 'No Confidence'** as shown in Appendix II.

Standard 1, 'The Learning Programme' has a limiting judgement. In other words, if this Standard is not satisfied, the overall judgement for the programme will be **'No Confidence'.**

Programmes receiving an overall judgement of **'Confidence'**, will have their reports published after going through various BQA procedures, as outlined in Appendix III. If these programmes had already received an overall judgement of '**Confidence**' in the first APRs cycle, consideration will be made to reduce the duration of their Site Visit in the third APRs cycle. This is as a result of sustaining the same judgement in the second APRs cycle.

Programmes that receive a judgement of **'Limited Confidence'** will have the publication of the report deferred and will be subject to an Extension Visit**,** as outlined in Section 5 below and Appendix III. This will be in accordance with BQA procedures.

Institutions receiving an overall judgement of '**No Confidence**' will have the reports of their programmes published after going through various BQA procedures, and a Follow-up Visit will be conducted, as outlined in Section 5 below and Appendix III.

4. THE ACADEMIC PROGRAMME REVIEW PROCESS

4.1 INSTITUTING THE PROCESS

The reviews will be initiated by the BQA through the DHR. It is expected that all higher education programmes (Bachelors, Masters and Doctorates) offered by HEIs operating in the Kingdom of Bahrain will be reviewed during the APRs Cycle 2.

The BQA will select the order in which these programmes will be reviewed. Approximately five to six months before the review, the DHR will conduct a preparation workshop on self-evaluation, which the College management team is expected to attend. The workshop aims to support the programme team in conducting a robust self-evaluation.

The Director of DHR will send a letter informing each Institution about key review dates such as those for the submission of SER(s) and the Virtual Site Visit and will request the name of a Contact Person for the College with whom the DHR can communicate about the review(s).

4.2 SELECTION OF THE REVIEW PANEL

A Review Panel will be appointed for each programme. The Panel's size will vary depending on the number and range of programmes within the College being reviewed at the same time. A Panel Chairperson will be nominated for each programme and a dedicated Review Director will be assigned for each programme to be reviewed. The Review Director may be responsible for more than one programme within the College under review.

The panel members will be selected based on their academic expertise and experience in higher education reviews, as described in Section 6.4. They will be drawn from the DHR's register of international, regional and local reviewers. Care will be taken to ensure an appropriate balance of expertise on each Panel that is relevant to the nature of the programme(s) under review.

The DHR will provide the Institution with the list of proposed panel members. The Institution is asked to comment on the panel members who should not be appointed because of conflict of interest but the Institution cannot advise on its preferred membership, as per the BQA relevant policies and procedures.

The panel members will be requested to sign a declaration that they will keep confidential all information received in the course of the review. They will also need to declare formally any matters that could pose a conflict of interest in their serving as a panel member. If the DHR agrees that a conflict of interest exists, the panel member will be replaced. The Institution will be advised of the final composition of the Panel and provided with brief biographical details of each member. The panel members will be provided with briefing material on the Bahraini context and the use of the review Standards and Indicators before the Panel holds its first

virtual meeting, which is a teleconference, and with a face-to-face briefing before the Virtual Site Visit.

All communication between the Institution and the Panel is through the DHR Review Director(s). The institutions are not permitted to contact panel members directly.

Panel members require wisdom, sound judgement, an ability to respect others, and team skills. This contributes to ensuring that the Panel, as a whole, comes to a judgement that is fair, balanced and rigorous. Requirements and responsibilities of panel members and Review Directors are described in Section 6.3.

4.3 SELF-EVALUATION

One of the key principles of the BQA's initiatives in Institutional Reviews and APRs is that institutions are responsible for the quality of the programme and the standards of the academic award. The achievement of this requires all institutions to develop and apply internal systems and processes to support continuing quality assurance, reviews, reporting and improvements.

The review of each programme will be based on a critical self-evaluation by the programme management team. Such a self-evaluation not only enables the programme team to supply the information required but has the potential to lead to improvements even before undergoing an external review.

The DHR requires a programme SER to be prepared as a basis for the external review. Appendix IV provides guidance and templates 1 and 2 for institutions' SERs. Template 1 presents the profile of the programme and the data set used. This is not only used by the Institution as the basis for the evaluative report in Template 2 but also in the DHR Programme Review Report.

Once the database for internal review is established, much of the information can be carried over with updates each year. The Programme Review Standards and Indicators provide the structure for the analysis and evaluation in the SER and the same structure is used for the DHR Programme Review Report.

The self-evaluation process provides the information for which the Institution writes the SER for each programme to be reviewed. The process of preparing a self-evaluation is as important to the Institution as the content of its SER. In higher education worldwide, good practice is demonstrated when programmes are evaluated not as a one-time event for an external review or Virtual Site Visit, but as part of a process of sharing insights into the programme, clarifying the programme's aims and addressing gaps and anomalies that inevitably appear in the course of a rigorous evaluation. In addition, the SER should look forward and set out priorities for improvement.

The DHR will treat a programme's SER as a formal document of the Institution. It is, therefore, important for the Institution to have suitable mechanisms for checking the SER for factual accuracy and compliance with this Handbook before submitting it to DHR.

For each programme to be reviewed, a portfolio consisting of the SER, required data and tables in an appendix, and SMs should be submitted to the Director of the DHR by the agreed date.

The SER should be uploaded together with its attachments, SMs and demonstration video(s) of the programme's facilities on an electronic link which should be sent to the DHR along with four hard copies of the SER. The College will be informed if extra hard copies are required.

The Review Director will ensure the completeness of the submitted materials and the electronic link will be sent to the panel members.

4.3.1. CONFIDENTIALITY AND PRIVACY OF INFORMATION

The BQA and the panel members will treat the SER as confidential, in accordance with BQA policy. Any confidential SMs, such as financial-in-confidence documents, should also be clearly labelled as 'confidential'.

It is possible that the Review Panel may wish to see certain documents that an Institution would regard as 'in confidence'. Access to these documents will be negotiated with the College's Contact Person. The Panel would usually view these documents during the review. The Panel will not seek to view nor ask to see the personnel records of any individual. The Panel may ask to see details of students' records but would expect the Institution to provide these by student number, not by name, to protect the anonymity of individuals.

4.3.2. PROGRAMME SPECIFICATIONS

Effective evaluation and improvement depend upon clear aims and intentions being articulated in the programme specifications, which are used as part of the development of quality assurance. Each programme leading to an academic qualification must be specified using an approved template by the HEI that will include a concise summary of the programme's main features, and the learning outcomes that a typical student might reasonably be expected to achieve if he/she takes full advantage of the learning opportunities provided. It will also map the intended learning outcomes to the NQA Level Descriptors and shows how these intended learning outcomes are approached, assessed and achieved across the contributing courses.

4.3.3. COURSE SPECIFICATIONS

Each course is to be specified using an approved template by the Institution. It will include the title of the academic qualification, the course title, an overall aim for the course, the course content (topics), and a set of intended learning outcomes that are mapped to the NQA Level

Descriptors as well as the programme's intended learning outcomes, together with a summary of the approaches adopted for teaching, learning and assessment, the required texts and other teaching materials, facilities and resources required.

4.3.4. GUIDANCE ON BENCHMARKING

The benchmarking activities referred to here are the formal process of comparing data on certain programme specifications or aspects or processes used to manage the programme with similar programmes offered by different institutions or with different programmes within one Institution. It is essential that the Institution identifies formally and clearly what to benchmark and how to do it. Benchmarking could cover, but is not limited to, programme content, assessment practices and feedback policy, teaching methods, faculty members portfolio, staff development, quality management policies and processes, student support (both academic and non-academic), library size and content.

Sources of guidance and ethics for benchmarking include the 'Benchmarking Code of Conduct' published by the American Productivity and Quality Control (APQC), and the 'European Benchmarking Code of Conduct' published by Eurocode. The UK Quality Assurance Agency for Higher Education (QAA) also has published benchmark statements in a number of areas.

Formal policies and procedures governing the benchmarking activities are expected with clear benchmarking statements. Adequate records - for the activities and their output are required, including how the result of benchmarking was used in improving the programme, its delivery, and management - are expected to be provided to the Review Panel.

4.3.5. GUIDANCE ON THE ASSESSMENT OF STUDENTS' ACHIEVEMENTS

The assessment of students' performance and achievements in terms of the stated aims and intended learning outcomes of a programme presents a challenge in higher education worldwide. Success in this respect contributes to the level of confidence in the programme and its graduates more than any other single component of a programme. The development of an outcomes-related approach to higher education quality assurance requires considerable investment in student assessment strategies and methods and in an Institution's regulations and procedures, including internal and external moderation and evaluation.

Sources of good practice in assessment include the Code of Practice for Assessment published by the Quality Assurance and Accreditation Project (QAAP) in Egypt, and the Code of Practice on Student Assessment published by QAA in the UK.

The essence of good practice may be summarized as follows:

- Student assessment should be 'fit for purpose' in being appropriate for the articulated academic standards.

- Programmes may employ three forms of assessment: *diagnostic, formative and summative*.
- *Diagnostic assessment* determines the abilities of a student to determine the suitability of a course or programme; this is particularly useful for direct entry at levels of a programme higher than first year, and for some courses such as foreign languages.
- *Formative assessment* provides information for teachers and students on their progress and on what is being learned and applied, and on how the students can further their learning. Feedback to students should be prompt, fair, objective and may be structured in a standard pro forma or template for consistency; feedback may also be face-to-face or by other means.
- *Summative assessment* contributes to credits and can use a range of methods ranging from laboratory and other practical work through major projects, case studies and dissertations, Multiple Choice Questions (MCQs), to formal time-constrained and written examinations.
- Self-assessment by students features in programmes or courses where the student is given greater responsibility for their learning.
- Peer assessment may also be used in suitable contexts such as seminars, with students' presentations and group projects.
- In any viable student groups, a normal distribution curve will apply. A *normative assessment* method, together with the use of reference points such as trends in outcomes, may be used to moderate aggregate outcomes; selected criteria can, however, create bias in the student group.
- The development of outcomes-related approaches to higher education quality assurance emphasizes *criterion-referenced* assessment, where students either demonstrate the specified performance or not; criteria may be graded upwards from threshold in order to differentiate levels of performance.
- The balance and proportion of the total course assessment allocated to each type of assessment enables the students to demonstrate the achievement of all the intended learning outcomes, addressing knowledge and skills.
- Faculty members responsible for courses, their academic colleagues and assistant teachers and examiners, should have access to the detailed arrangements for assessment of courses at all times, including type of assessment, schedule, credit rating, criteria for marking and grading, marking schemes and model answers.
- Students should have access at all times (typically in a course specifications document, student handbook, programme handbook or website) to the schedule of assessment, the types of assessment, credit rating and criteria for marking and grading.
- The College or Institution should have a clear policy and set of regulations for assessing students' achievements, including clear job descriptions for the assigned faculty members, committee or board.
- Internal moderation is essential to the quality assurance of the assessment of students' achievements. It ensures, before the students take the assessment, that the assessment designed to establish the students' progress in learning and their level of achievements, is valid, fair and meets the intended learning outcomes. Following the assessment, it checks that the marks awarded are correct, fair and statistically normal.

- External evaluation provides an independent professional opinion on the appropriateness of the assessment of the students' performance and the academic standards achieved on graduation. This is sometimes referred to as 'verification of the academic standards attained'. The functions and responsibilities of the external evaluator are normally the responsibility of the Institution.
- Security of summative assessment is vital (in particular, ensuring that examination questions and answers are not leaked and that questions are not repeated unduly in successive years; ensuring anonymity of answer scripts to protect students from bias; preventing plagiarism and cheating by students; and ensuring that marks or pass/fail rates are not altered without justification).
- Results of assessment should be released as soon as they have been checked, ratified and endorsed by the appropriate committee or board.
- An appeals mechanism should be in place and made known to students.
- Adequate records for the programme are required, including the examination questions and results itemized for each student and each assessment; these provide information that will be examined by the Review Panel, the Institution's external evaluators or any appeals committee established to review assessment of students' work.

4.4 PORTFOLIO MEETING(S)

Once the SER(s) and SMs are submitted to the DHR of the BQA , copies are sent to members of the Review Panel *via* an electronic link. Panel members are requested to prepare a preliminary report, which is circulated to the entire Panel before the portfolio meeting.

Around two weeks after sending the documents, the Review Panel will hold virtual meeting(s) to:

- discuss the APRs process
- discuss the preliminary report(s) in detail
- identify any further information or clarification required from the Institution or other sources
- decide which information is needed in advance of, and which at, the Virtual Site Visit
- decide whether information will be sought from partner institutions and how this will be obtained
- decide on people to interview at the Virtual Site Visit and which parts of the campus and facilities to visit

Depending on the number of programmes that will be reviewed at the same time, the number and structure of the portfolio meeting(s) will be decided. A discussion in this regard will be held between the Review Director(s) and Chairperson(s), if needed.

The SER(s) will be read at two levels. At the first level, each panel member is reading for information on the extent to which the Standards and Indicators are met and will be forming preliminary views about this. At another level, the panel member is forming a judgement on

the quality of the self-review and the depth of the analysis itself, and attempting to answer questions such as:

- How thorough and perceptive is this SER?
- Does it show evidence of a genuine, useful self-evaluation, using appropriate standards and benchmarks?
- Does the SER propose appropriate actions on identified weaknesses?

Reporting on areas requiring improvement does not always mean that the Panel will say that the programme or its delivery is not satisfactory. In fact, it is a sign that the Institution's internal quality assurance arrangements are working, especially if there is evidence that the Institution has started to plan improvements. While there may be some things that only an external evaluation can reveal, the more rigorous the self-review and the more honest the SER, the less there is for the Review Panel to have to ask about and the more the visit can concentrate on verification and validation.

Following the portfolio meeting, the Review Director(s) assigned to the reviews, in consultation with panel members, map out a detailed programme for the Virtual Site Visit to the College. The Review Director(s) also produce a document detailing the issues identified by the Panel, grouped by topic, and the requests for further information identified at the Panel meeting. This further documentation might include 'other evidence' referred to in the SER, but it can also include any material the Panel wishes to see. The list of further information required and the provisional Virtual Site Visit programme are discussed with the Institution at the preparatory visit(s) undertaken by the Review Director(s).

4.5 THE PREPARATORY VISIT(S)

Approximately one to two weeks after the portfolio meeting, and before the Virtual Site Visit by the Review Panel, there are preparatory visit(s) to the Institution. These meetings may be held *via* Microsoft Teams or Zoom, or as agreed with the HEI representatives and the Review Director(s) on the Panel's behalf.

The purposes of the preparatory visit(s) are:

- to discuss the provisional Virtual Site Visit programme- check the appropriateness of selections and combinations of interviewees and ensure that the programme for the Virtual Site Visit meets the Panel's needs while being feasible for the Institution
- to discuss the further information required by the Panel — this might typically include questions of clarification (to which there are usually relatively short answers) and requests for further documents. The Institution may prepare provisional answers to the questions and assemble possible documents before the preparatory visit, and these can be reviewed at this visit to see whether they will meet the Panel's requirements
- to check whether there are any sensitive issues of which the Panel should be aware of
- to discuss the purpose behind the *Ad Hoc* interviews and how they will be conducted

- to review the logistics for the Virtual Site Visit and/or arrangements for an actual tour of the institution's facilities if it is agreed that a member of the review panel and/or DHR representatives will visit the HEI.

These activities can usually be achieved by the Review Director(s) meeting representatives of the Institution's management, the nominated Contact Person, and Head of Departments, although the Institution may well wish to involve others, such as the committee responsible for preparing the SER. The Review Director(s) prepares the agenda for the preparatory visit(s) and sends it, in advance, to the Institution.

After the preparatory visit, the Review Director(s) finalize the exact groupings of academic and administrative personnel, students and external stakeholders to be included in the Virtual Site Visit schedule. A final Virtual Site Visit schedule should be produced no less than one week before the date of the Virtual Site Visit. The Institution provides the additional material that has been requested on the agreed date prior to the Virtual Site Visit.

During the period before the Virtual Site Visit, there may be agreed virtual visits by the Review Director(s) and/or the Director of the DHR to overseas parent or partner organisations relevant to the programme(s) being reviewed. These visits are part of the formal Virtual Site Visit and involve similar preparations to the main visit which is agreed upon with the Panel. The Review Director will be acting on behalf of the Review Panel. Visits to other campuses (if applicable), may also occur during the review period. Before the Virtual Site Visit, panel members receive reports from the Review Director of any overseas virtual site visits or tours.

Panel members will prepare a set of suggested questions for each interview session of the Virtual Site Visit, with special attention given to the Standards and Indicators for which he/she is responsible. Panel members should also comment on the additional documentation submitted by the Institution.

4.6 THE VIRTUAL SITE VISIT

Starting from September 2020, a shift has been made from the conventional Site Visit to the Virtual Site Visit, where the interviews are conducted through the Microsoft Teams or Zoom application, or any other agreed upon application, and the facilities and physical resources of the programme are examined through demonstration video(s), which should be submitted together with all the supporting documents electronically to the DHR; however, it may be agreed – in some cases - to hold an actual tour of the HEI facilities by a member of the review panel and/ or DHR representatives.

The main purpose of the Virtual Site Visit is to allow the Review Panel to verify the most important claims made in the SER, and to triangulate evidence and acquire further insight into the Institution's operation through first-hand investigation. The Virtual Site Visit also provides an opportunity for peer reviewers and those directly engaged in the programme to

discuss the effectiveness of existing arrangements and the development of new internal systems for quality assurance, review, reporting and improvement. The value of the Virtual Site Visit – both to the Institution and the DHR – is closely related to the quality of the preparation, the information available, the dialogue and organisation of time.

4.6.1. PANEL PREPARATIONS AND DISCUSSIONS (DAY 0)

The day before formal interviews start, the Panel is briefed on the review process and then meets privately to prepare for the Virtual Site Visit. At these meetings, the Panel:

- receives a face-to-face briefing on the Bahraini context for the quality reviews and has the opportunity to ask about relevant issues and facts
- receives a face-to-face briefing on the main features of the APRs Framework and what is expected from the Review Panel
- discusses its members' preliminary evaluation of the SER(s) submitted by the Institution
- discusses the additional material received since the portfolio meeting
- notes any information that will be available on-site during the Virtual Site Visit
- reviews arrangements for the Virtual Site Visit and the Panel professional conduct expectations
- plans the interview sessions in detail, especially those for the first day.

By the end of this meeting, the panel members may not have reached agreement on substantive issues, e.g. whether a programme under review meets the Standard requirements or whether the programme is showing commendable good practice in a specific area or doing no more than would be expected of any HEI. Such differences, which are part of the process of applying professional judgement, must be resolved by the end of the Virtual Site Visit, so plans should be made for questioning and other forms of investigation in order to achieve this. The Chairperson(s) and the Review Director(s) have particular responsibility for ensuring that issues are resolved through Panel-only sessions during the Virtual Site Visit.

4.6.2. GUIDANCE ON CONDUCTING THE VIRTUAL SITE VISIT

The Virtual Site Visit always includes time for interview sessions. The interviews with students and staff are essential to the Programme Review. Some interviews are best pre-arranged and others may be arranged at short notice. *Ad Hoc* interviews may also be conducted during the site visit tour as detailed below. The reviewers will also wish to spend time reading the documentation provided and making notes. Course portfolios and samples of students' assessed work are a vital part of this supporting documentation. A sample of these course portfolios will be selected for uploading electronically so that the review panel can scrutinize the selected course portfolios as well as the question sheets, marking schemes and any written comments and feedback to students.

In case there is an agreement to conduct a tour of the HEI facilities, the Institution will be expected to provide a suitable meeting room that can adequately accommodate the Panel's meetings as well as the range of supporting documentation. The room should include worktables, power supply for laptops, a coffee machine, water and light refreshments. It would also be helpful to include a PC with internet access and printer. The Panel will need access to photocopying. The room should also be secure to protect the documentation.

The Institution should ensure that all documents are readily available for the Panel and provide access, if available, to the programme website or to a flash memory. Also, an index of all supporting documentation is required.

The Panel will meet regularly through the Microsoft Teams or Zoom application, or any other agreed upon application as a Panel but may also divide their attention across different programmes within the College or make enquiries under one or more of the four Standards in the APRs Framework. At the end of the first day, the Panel will meet formally to assess progress, discuss the evidence and set priorities for further enquiries. The final Panel meeting on the last day will discuss the evidence, agree on a generic comment on the quality of the SER(s) and the supporting evidence, and refer to the APRs Framework to make judgements that include a set of conclusions in relation to each programme reviewed.

During the Virtual Site Visit, Panel-only meeting sessions are held regularly. During these sessions, the key points from the previous session(s) are agreed by the Panel. The Panel also reminds itself of the focus of the subsequent session(s). At the end of the day, the Panel meets to discuss the day's overall findings and plan in detail the questions for the next day's interviews. There is a longer Panel-only meeting on the final day of the visit, to discuss findings before the end of the visit.

During these sessions, each panel member, under the guidance of the Chairperson of the Panel, will compile a record of the evidence provided and draft the section(s) of the programme Review Report that is his/her specific area of responsibility. Although, Standards and Indicators are divided amongst panel members to indicate the prime lead for each Standard, it is important to reach consensus amongst panel members, so that the Review Report and judgement reflects the opinion of the whole Panel, not just individual members. Panel members will also contribute to a brief set of conclusions, including the agreed summative judgement, a summary of identified good practice and any gaps or weaknesses leading to recommendations for improvement.

The Chairperson of the Panel for each reviewed programme co-ordinates the panel members' writing to produce a working draft of the Review Report for each programme, ensuring that it is shared with the Panel.

4.6.3. INTERVIEW SESSIONS

Meetings between faculty members, other employees, students, alumni and other stakeholders and the Review Panel are scheduled as part of the Virtual Site Visit schedule. The schedule of pre-arranged meetings should be agreed between the Institution and the DHR before the start of the Virtual Site Visit. It may, however, be desirable to arrange an additional meeting during the review to address any emerging matters. The time and place of the meeting, its focus, who is expected to attend and if necessary any special agenda, should be discussed and agreed by the Review Director and the College's Contact Person.

Meetings are a desirable means of confirming information and conducting open dialogue and can be the most efficient way of augmenting or clarifying information already provided. The Panel Chairperson may chair the meeting or assign one of the panel members to lead it. Shortly after a meeting, the panel members will reflect on the discussion, aggregate the information derived from it with other information, and consider the completeness of the evidence and any need for further discussions.

The focus of each meeting will be derived from the APRs Framework, the SER and the analysis of the SER by the panel members.

The views of students and other stakeholders, including graduates of the programme and employers of graduates, represent an important part of the evidence collected in the review process. The panel members will be focusing on key points emerging from their reading of the SER and supporting information. They will wish to reflect on the expressed views following the meeting and consider the full range of information when making their judgements.

Meetings with students should be separate from meetings with graduates and employers. In all meetings the lines of enquiry should be selective, based on the SER and information emerging during the Virtual Site Visit. The interviewed students should include a representative group of students across all levels with a range of tracks (if applicable) within the programme as well as members of the student council. Dialogue should be constructive and should avoid personalising criticism of staff. The Review Panel may decide to break a large group into smaller groups with one panel member leading each. Questions from panel members should be open and unbiased.

4.6.4. *AD HOC* INTERVIEWS

Ad Hoc interviews may be conducted with staff and students in relation to the reviewed programmes, independent of the Institution's influence (in cases where an agreement was made to conduct an actual tour of the HEI facilities by a member of the review panel and/ or DHR representatives). To achieve this, panel members will tour the campus and seek to speak with students and staff randomly. The Institution will be requested to distribute widely and

post notices to inform staff and students about the tour and the *Ad Hoc* interviews. The following rules apply to these *Ad Hoc* interviews:

- the panel member will introduce himself/herself to the interviewee, the purpose of the interview, and request his/her permission to conduct the interview
- interviews should be conducted in confidence and the duration of each interview should not exceed 10 minutes
- panel members will not intrude on teaching sessions
- *Ad Hoc* interviews may be conducted in staff offices and in common areas such as the library and the cafeteria
- findings of *Ad Hoc* interviews need to be triangulated in order for them to be used in the review.

4.6.5. DEMONSTRATION VIDEO(S)

In cases where the site visit is to be conducted virtually, the tour of facilities and resources will be replaced with a demonstration video. Therefore, the institution subject to an institutional or academic programme review is obliged to prepare a short demonstration video or videos, including a virtual tour of the institution/programme facilities and student training venues (as in the case of programmes of a more practical nature). It is imperative that the videos meet the following conditions:

a. The demo videos should be recent and up-to-date and should reflect the latest developments of the institution/programme facilities; it should also be supported by a high sound quality.

b. The videos should include a brief descriptive explanation of the facilities, delivered in the same language of the programme.

c. The videos should not contain any personal opinions of the institution's staff members, students or other stakeholders.

d. The videos should cover all the facilities agreed upon with the DHR.

e. In case the institution desires to display in the videos some other facilities that are not agreed upon with the DHR, it must first obtain the DHR's prior permission to do so.

f. All videos should be uploaded to a cloud site and their electronic links should be made available for the DHR according to the electronic format and dates agreed upon between the two parties.

4.6.6. GUIDANCE ON THE REPORTING OF OUTCOMES

The value of the review of programmes for the Institution depends on the quality of the reporting of the outcomes of the programme review(s). They should be evidence-based, arising from open discussion and resting on the professional opinions of the peer reviewers guided by the published framework.

During the Virtual Site Visit, the Chairperson of the Panel together with the Review Director for each programme will ensure that emerging matters deserving further attention, as well as any substantive issues are addressed in meetings with the appropriate responsible persons. Although conclusions will not be announced at the Exit Meeting, the openness and transparency of the review over the Virtual Site Visit should mean that there are no surprises for the Institution. Moreover, the Chairperson of the Panel will ensure that the Review Director is aware of the preliminary discussions and conclusions that the Panel is reaching at the time of the Virtual Site Visit.

For each programme under review, the Panel is to evaluate whether the programme satisfies each Standard, and a conclusion is to be reached by the Review Panel in the final meeting, which will be either:

(1) the programme satisfies all four Standards and gives confidence, or
(2) there is limited confidence because up to two Standards are not satisfied (excluding Indicator 1), or
(3) there is no confidence in the programme because more than two Standards are not satisfied or Standard 1 is not satisfied.

The Review Panel will also agree on recommendations for the programme's improvement. These recommendations will be reflected in the improvement plan for the programme and the balance between identified good practice and any expressions of limited confidence or lack of confidence stated in the conclusions.

4.6.7. CALL-BACK SESSIONS AND THE EXIT MEETING

The Panel may decide to provide a 'flexible/call-back session', which is a period set aside in the programme to be utilised by the Panel to meet individual staff members and seek responses to issues that have arisen during the Virtual Site Visit. Each individual staff is allocated a short session with the Panel to clarify specific issues and this session is normally scheduled toward the end of the Virtual Site Visit.

At the end of the Virtual Site Visit, the Panel also holds a brief 'Exit Meeting' with the President/Chief Executive of the Institution, and any other persons the President wants present. At this meeting, the Panel's Chairperson and the President can make some comments about the Panel's and the Institution's experience of the review process, but the Panel will not discuss any of its findings with the Institution.

4.7 THE ACADEMIC PROGRAMME REVIEW REPORT(S)

A written Review Report, for each reviewed programme, will be finalized by the Chairperson of the Panel and will be endorsed by all panel members. The Report is sent to the DHR Programme Review Director who is responsible for checking it for completeness and compliance with the published APRs Framework. If necessary, the Chairperson or other panel members may be asked to clarify or justify statements in the Draft Review Report. Once the Review Director is satisfied with the Report, it will be presented to the DHR Academic Committee for discussion and approval.

A Draft Review Report will be approved and adopted by the DHR when the DHR Academic Committee is satisfied that:

- the Draft Review Report is endorsed by all members of the Review Panel
- its structure is in line with the template
- its scope is appropriate to the programme being reviewed
- it offers evaluations and conclusions that are evidence-based
- there is consistency between the evaluation in its main text and the conclusions.

At this point, the Draft Review Report becomes a report of the BQA. A copy of the Draft Review Report will be sent to the Institution inviting it to check it for factual accuracy and comment on the findings if needed or/and appeal against the overall review judgement. The Institution will respond to the DHR within two weeks. The Institution's comments will be dealt with according to BQA procedures, as described below, and changes, if needed, will be made to the Draft Review Report before it is presented to the Academic Committee of the BQA. After getting the approval of this committee, the Review Report is finalized. The final Review Report is sent to the Board of the BQA for approval and to the concerned entities for endorsement, after which it is published.

Review Reports will be published on the BQA website (www.bqa.gov.bh) in the language of production with a summary in Arabic or English.

4.8 FACTUAL ACCURACY AND APPEALS

An opportunity will be given for HEIs to check the definitive Draft Review Report for factual accuracy and to make comments on findings, if needed. Factual inaccuracies, if any, will be adjusted accordingly.

The Institution's comments will be sent to the panel members of the relevant programme, who will convey, in writing, their reply in this regard. The DHR will study both the Institution's comments and the Panel's reply and send formal feedback on the submitted comments to the Institution. This process will be in accordance with BQA policies and procedures.

The Institution may submit an appeal if it does not agree with the overall judgement of the programme review, as per the BQA policies and procedures. The grounds of the appeal are:

(1) There is lack of adherence to the APRs published Framework/Handbook in reaching its decisions and this led to unfair judgement(s), and/or

(2) The judgement(s) is/are not justified based on the evidence available before or at the time of the Virtual Site Visit.

The appeal is to be submitted by the Institution to BQA in a formal letter addressed to the DHR Director within two weeks from receiving the Draft Review Report. The letter should be attached to a filled Stage I Appeal Form (Appendix VI) and supported by relevant evidence. The receipt of the appeal letter, appeal form and supporting evidence will be acknowledged, in writing, by the DHR Director within two working days of receiving these documents. This process will be in accordance with BQA policies and procedures.

An Institution is eligible for a Stage II appeal if the Institution is dissatisfied with the outcome(s) of the Stage I appeal. A Stage II appeal is to be submitted, by the Institution filling the Appeal Form of Stage II appeal (Appendix VII), to the BQA's Chief Executive in writing, within five working days from the date of the Institution receiving Stage I appeal decision and must clearly state the grounds for the appeal and all related evidence. This process will be in accordance with BQA policies and procedures.

5. FOLLOW-UP OF THE REVIEWS

Programmes that have been subjected to APRs need to submit improvement plans to the DHR. However, only programmes receiving '**Limited Confidence**' or '**No Confidence**' will be subject to Extension or Follow-up Visits.

5.1 IMPROVEMENT PLANS

Irrespective of the outcomes of the Review Reports, institutions will be expected to submit to the DHR/BQA an improvement plan three months after publication of the reports, which shows for each programme how the recommendations will be addressed. Guidelines on how to develop and submit improvement plans are given in Appendix V. The improvement plan should lead to further enhancement of the programmes. This process will be in accordance with BQA policies and procedures.

5.2 THE VIRTUAL EXTENSION VISIT

In cases where a programme receives a '**Limited Confidence'** judgement, the Institution will receive within three months from the Virtual Site Visit a list of critical recommendations for the Standards that were not satisfied. The full Review Report in this case will be deferred.

Within six months of receiving the recommendations, the Institution will need to submit to the BQA/DHR a progress report and evidence of addressing the critical recommendations in the Standards that were not satisfied. At least three months after receiving the submission, the Institution will be subject to an Extension Visit. The output of this will be a Review Report, which is a composite of the results of the findings of the original Virtual Site Visit and the findings of the Extension Visit.

Based on the Institution's performance in addressing the critical recommendations, the findings can lead to either an overall judgement of **'Confidence'** or to an overall judgement of '**Limited Confidence**'. The resulting Review Report will be published as per BQA procedures, and any programme receiving a '**Limited Confidence**' judgement will be lined up for review early in the third APRs cycle.

There will be two phases for the Extension Visit:

Phase 1: Desktop analysis of evidence by the DHR. The evidence base comprises the programme Review Report, the progress report and SMs submitted by the Institution, to present an account of its progress in addressing the recommendations in the Standards that were not satisfied. The Institution will be informed of the details, procedures and timing of the Extension Visit.

Phase 2: An Extension Visit to the programme, normally for one to two days that may include an actual tour of the HEI facilities and physical resources. The Virtual Site Visit will

be conducted by a member of the DHR and a subject expert. The Review Report will be amended based on the progress achieved by the Institution against the critical recommendations in the Standards that were not satisfied.

5.3 THE VIRTUAL FOLLOW-UP VISIT

In the case when a '**No Confidence'** judgement is given, the Institution will submit, after 18 months from the publication of the Report, a progress report and evidence of addressing the recommendations in all the four Standards. This will be succeeded after 24 months from the publication of the report by a Follow-up Visit from the BQA/DHR to measure the progress made against the recommendations. This process will be in accordance with the BQA's policies and procedures.

The output of this Follow-up Visit will be a Follow-up Review Report documenting the results of the findings of the visit. Based on the Institution's performance in addressing the recommendations, the findings can lead to either an overall judgement of **'Good Progress'** or '**Adequate Progress'** or '**Inadequate Progress'**. The resulting Follow-up Review Report will be published as per BQA procedures, and any programme receiving a judgement of '**Good Progress'** or '**Adequate Progress'** in the Follow-up Review Report will be lined up for review early in the upcoming APRs cycle. As for programmes receiving a judgement of '**Inadequate Progress'**, they will not undergo any more reviews in the current cycle and will be reviewed afresh in the succeeding APRs cycle. This is also applicable for the programmes reviewed in the first APRs cycle that did not undergo a second Follow-up Visit.

There will be two phases for the follow-up:

Phase 1: Desktop analysis of evidence by the DHR. The evidence base comprises the programme Review Report, the programme improvement plan submitted by the Institution, a progress report and SMs generated by the Institution to report on its progress to-date in addressing the recommendations stated in the programme Review Report. The Institution will be informed of the details, procedures and timing of the Follow-up Visit.

Phase 2: A Follow-up Visit to the programme, normally for one to two days, leading to a brief written report. It may include an actual tour of the HEI facilities and physical resources. The Virtual Site Visit will be conducted by a member of the DHR and a subject expert. The report will indicate the level of progress achieved by the Institution against recommendations identified in the original Review Report. The Institution is expected to use the report to support continuous improvement in the programme.

6. ROLES AND RESPONSIBILITIES

The APRs Framework is based on the panel members being peer reviewers of the programmes under review. Peer review is an essential part of these reviews. This section sets out the role of the College's Contact Person, Review Directors, panel members and the Chairpersons of the Panel. It includes the criteria for the selection of panel members and Chairpersons and for the composition of Review Panels.

Review by peers means that the Institution has a reasonable expectation that the panel members should hold, or have held, equivalent professional positions to those with whom they conduct their enquiries, or senior management positions in HEIs. The peers should have the confidence of the Institution and, when offering professional opinions in their areas of expertise, they should be credible in the eyes of the Institution.

6.1 THE COLLEGE'S CONTACT PERSON

The DHR will invite each College participating in APRs to nominate a Contact Person for the review process. This should be a senior member of the programme management team. His/her role is to coordinate the process and optimize the internal and external review as part of the cycle of review and continuing improvement. The Contact Person is expected to be available throughout the Virtual Site Visit.

The Contact Person should be well placed in the College, to ensure that it benefits from the programme review(s) as part of its development of an internal quality assurance system. The DHR expects the Institution, guided by the DHR *Institutional Review Handbook* and the DHR *APRs Handbook*, to be able to develop appropriate policies, plans and procedures, to establish a sustainable system for continuing review and continuing improvement.

In preparation for, during, and after the Virtual Site Visit, the Contact Person will ensure that:

- The scope of the programme(s) to be reviewed is clearly defined.
- All relevant information is collated and accessible by faculty members and the Review Panel.
- The SER(s) together with any supplementary documentation meet the requirements of the *APRs Handbook* and are submitted on time to the DHR.
- The external reviewers and DHR representatives are provided with a suitable room(s) for Panel meetings with access to documentation and facilities to be checked during the tour of the HEI facilities.
- The Institution responds promptly and accurately to requests by the Review Panel for additional information and/or clarification of information provided.
- The draft Programme Review Report(s), when sent to the Institution for checking on matters of factual accuracy, are checked and returned promptly to DHR.

- The Institution considers and responds constructively to the Programme Review Report(s), including preparing an improvement plan or modifying an existing improvement plan in the light of the outcomes of the review.
- Arrangements for follow-up are made in cooperation with the DHR.

6.2 APPOINTMENT OF PANEL MEMBERS

All candidates for the role of peer reviewer will be invited to submit their CVs. The DHR will acknowledge all submissions and subsequently notify candidates of the outcomes. The panel members will be recruited and briefed in line with published criteria, to ensure that they contribute effectively to the process.

The criteria for appointment are:

- All panel members should meet the specified criteria.
- Panel members will be allocated to reviews that are within their competence.
- Panel members will not be assigned to a review where there is a valid conflict of interest raised by them, or the Institution.
- Panel members will make themselves available for the whole of the scheduled review.

6.3 ROLES OF PANEL MEMBERS

The peer reviewers will work as members of a Review Panel. The DHR will invite one reviewer to be the Chairperson of the Panel. For diversified Colleges with a large number of programme offerings, the DHR may form more than one Panel to review these programmes at the same time.

The Chairpersons' roles are to:

- take a lead in the application of the *APRs Handbook* in the review
- coordinate the assembly of evidence and verify that there is a sound evidence base
- guide emerging and definitive conclusions made by the Panel
- ensure that DHR receives on time a Draft Review Report of the assigned programme, which meets the requirements set out in the *APRs Handbook*
- prepare a written document in response to the College comments on the Draft Review Report.

For each review, the panel members will:

- provide a written preliminary report from their reading of the Institution's documentation
- attend Panel meetings arranged by DHR
- attend the Virtual Site Visit for the full schedule of events
- take a lead in areas of responsibility designated by the Chairperson of the Panel with regard to: gathering evidence; chairing scheduled meetings with HEI representatives as directed by the Chairperson; preparing and building upon initial commentaries; sharing

evidence and formative opinions within the Review Panel; drafting sets of tentative conclusions on strengths and areas that require improvement; and assisting the Chairperson with revisions to the Draft Review Report(s) after the Virtual Site Visit

- for each part of the APRs Framework designated by the Chairperson: identify sources of evidence, including any gaps; evaluate the information and supporting evidence available; identify the main strengths and weaknesses or issues that deserve further attention; and record their evidence and findings, cross-referenced to the sources

- contribute to the Panel's considerations of the whole evidence base and judgements towards a collective Panel decision on the extent to which the Standards are met

- complete evaluations of the APRs process, as per the DHR requirements.

6.4 SELECTION CRITERIA OF PANEL MEMBERS

Reviewers need to have sufficient status and reputation for their views to be respected in the academic community. They also need to bring to the process higher-order skills in communication and evaluation.

6.4.1. GENERAL REQUIREMENTS

The following points are considered in the selection of panel members:

- academic expertise in one or more disciplines that relate to the programme(s) scheduled for review

- academic experience, including successful teaching practice and/or quality assurance, accreditation, audit or review, within the last five years

- those in professional practice in a relevant discipline with recent experience of academic activity may also be considered

- current or recent experience in quality management and improvement projects or systems which have made an impact

- proven abilities in communication in Arabic and/or English including: listening; joining in group discussions; respecting the views of others; leading (chairing) group discussions; rapid reading with understanding; and concise clear writing to tight deadlines

- competence in using and interpreting numbers including: the accurate analysis of data sets; verification and reconciliation techniques; presentation of valid data in support of a judgement

- proven ability in evaluation, including: appraisal of the context; identifying logical and irrational arguments; making sound judgements based on facts; adjusting judgements in the light of additional information or well-argued alternative views in a professional context; and a willingness to justify judgements

The following points are desirable in the selection of panel members:

- IT skills, including the use of laptops or notebooks, internet and intranet, in MS Word and audio and visual communication programmes such as Zoom.

- current or recent experience in moderation of marking, external evaluation and/or formal validation of graduate attainment
- effective practice in curricular development, including writing outcome-related curricular documents, action plans for programmes and courses improvements or strategies for learning, teaching and assessment.
- acknowledged track record in research or other scholarly activities
- recognized contributions to society or the community within the normal range of academic activities (e.g. projects, consultancy, teaching, coaching or mentoring)
- advisory or interventionist functions as an internal or external consultant or change agent in higher education or related professional fields.

6.4.2. THE PANEL CHAIRPERSON

In addition to the above requirements, the Panel Chairperson will demonstrate:

- proven qualities of leadership and the management of people and information in task groups or projects
- ability to implement procedures and protocols consistently yet fairly to accommodate local circumstances
- effective chairing of reviews and meetings including thorough planning, collaboration with other key participants and time management
- ability to assess the evidence available and the validity of emerging judgements
- ability to write cogently to deadlines and edit the writing of reviewers to meet the specifications for the Review Report
- ability to evaluate the review and make constructive suggestions for the continuing improvement of the process.
- on request by the DHR, the ability to make additional contributions to the process through, for example, contributions in conferences, editing and checking the Draft Review Report(s) generated by others, trawling reports in order to draft overview or summary reports.

6.5 ROLES OF REVIEW DIRECTORS

The Review Directors' roles are to:

- analyse SERs and other documents submitted by the Institution
- arrange and conduct the portfolio meeting (conference call)
- ensure that panel members are informed about the Bahraini context of the review
- co-ordinate with the panel members and other Review Director(s), when applicable, in identifying extra evidence needed and developing a Virtual Site Visit schedule
- conduct the preparatory visit(s) on behalf of the Review Panel
- ensure the application of the *APRs Handbook* in the review
- ensure that the DHR receives Draft Review Report(s) on time, which meet the requirements set out in the *APRs Handbook*

- prepare definitive Draft Review Report(s) to be presented to the DHR Academic Committee
- discuss issues raised by the DHR Academic Committee with the Panel
- review and discuss the Institution's comments on the definitive Draft Review Report(s) with the Panel as needed
- edit the Review Report(s) after receiving the Institution's reply on the Draft Review Report(s)
- present the definitive Draft Review Report(s) to the BQA Academic Committee for approval
- discuss issues raised by the BQA Academic Committee with the Panel as needed
- ensure that the translated summary of the Review Report is a correct translation of the original.

7. APPENDICES

APPENDIX I: RUBRIC FOR JUDGING INDICATORS

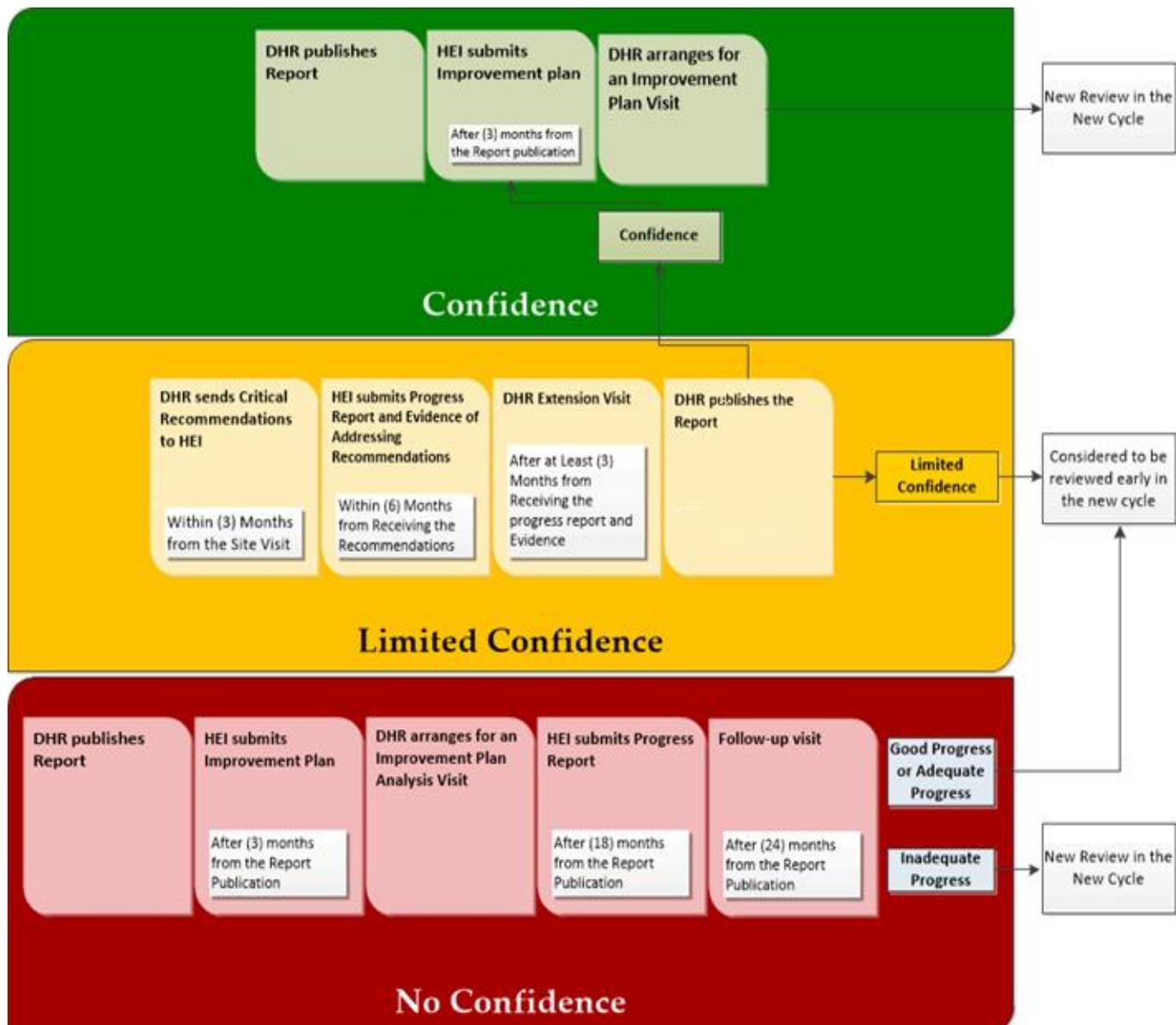| Judgement	Description
Addressed	**All the applicable expectations and requirements** of the Indicator are addressed.
Partially Addressed	**Most of the applicable expectations and requirements** of the Indicator are addressed, especially those that have the greatest impact on the quality of the programme, its delivery and academic standards.
Not Addressed	**Most of the applicable expectations and requirements** of the Indicator are not addressed, including those that have the greatest impact on the quality of the programme, its delivery and academic standards.

APPENDIX II: ACADEMIC PROGRAMME REVIEWS FRAMEWORK (CYCLE 2) - JUDGMENTS

	Standard 1					Standard 2					Standard 3						Standard 4				
	Limiting Standard																				
	Indicator 1.1	Indicator 1.2	Indicator 1.3	Indicator 1.4	Indicator 1.5	Indicator 2.1	Indicator 2.2	Indicator 2.3	Indicator 2.4	Indicator 2.5	Indicator 3.1	Indicator 3.2	Indicator 3.3	Indicator 3.4	Indicator 3.5	Indicator 3.6	Indicator 4.1	Indicator 4.2	Indicator 4.3	Indicator 4.4	Indicator 4.5
	The Academic Planning Framework	Graduate Attributes & Intended Learning Outcomes	The Curriculum Content	Teaching and Learning	Assessment Arrangements	Admitted Students	Academic Staff	Physical and Material Resources	Management Information Systems	Student Support	Efficiency of the Assessment	Academic Integrity	Internal and External Moderation of Assessment	Work based Learning	Capstone Project or Thesis/Dissertation Component	Achievements of the Graduates	Quality Assurance Management	Programme Management and Leadership	Annual and Periodic Review of the Programme	Benchmarking and Surveys	Relevance to Labour market and Societal Needs
Satisfied	(3) Indicators or more are 'Addressed' and the rest are 'Partially Addressed'					(3) Indicators or more are 'Addressed' and the rest are 'Partially Addressed'					(3) Indicators or more are 'Addressed' and the rest are 'Partially Addressed'						(3) Indicators or more are 'Addressed' and the rest are 'Partially Addressed'				
Not Satisfied	- One or more Indicators are 'Not Addressed' OR - Less than (3) Indicators are 'Addressed'					- One or more Indicators are 'Not Addressed' OR - Less than (3) Indicators are 'Addressed'					- One or more Indicators are 'Not Addressed' OR - Less than (3) Indicators are 'Addressed'						- One or more Indicators are 'Not Addressed' OR - Less than (3) Indicators are 'Addressed'				

The Overall Judgment

"Confidence" in meeting minimum QA requirements	"Limited Confidence" in meeting minimum QA requirements	"No Confidence" in meeting minimum QA requirements
All four Standards are 'Satisfied'	Two or three Standards are 'Satisfied', including **Standard 1**	One or no Standard is 'Satisfied' and all cases where **Standard 1** is 'Not Satisfied'

APPENDIX III: ACADEMIC PROGRAMME REVIEWS FRAMEWORK (CYCLE 2) – PROCESS

Confidence

DHR publishes Report	HEI submits Improvement plan	DHR arranges for an Improvement Plan Visit
	After (3) months from the Report publication	

Confidence → New Review in the New Cycle

Limited Confidence

DHR sends Critical Recommendations to HEI	HEI submits Progress Report and Evidence of Addressing Recommendations	DHR Extension Visit	DHR publishes the Report
Within (3) Months from the Site Visit	Within (6) Months from Receiving the Recommendations	After at Least (3) Months from Receiving the progress report and Evidence	

Limited Confidence → Considered to be reviewed early in the new cycle

No Confidence

DHR publishes Report	HEI submits Improvement Plan	DHR arranges for an Improvement Plan Analysis Visit	HEI submits Progress Report	Follow-up visit
	After (3) months from the Report Publication		After (18) months from the Report Publication	After (24) months from the Report Publication

Good Progress or Adequate Progress → Considered to be reviewed early in the new cycle

Inadequate Progress → New Review in the New Cycle

APPENDIX IV: GUIDANCE AND TEMPLATES 1 AND 2 FOR PROGRAMME SELF-EVALUATION REPORTS

Guidance on Self-Evaluation

Self-evaluation is a central part of any programme review. The guidance concerning self-evaluation offered in the BQA's *Institutional Review Handbook* applies to the self-evaluation for APRs. The self-evaluation should be regarded in the College as a sustainable process rather than a one-off project for DHR. It offers benefits to the programmes and the College, if it is approached as a team effort. These benefits include the clarification of programme aims; the sharing of insights into the programmes and how they achieve the desired aims; enhanced engagements with a range of stakeholders; and more effective organisation of information. If the self-evaluation process generates a plan for improvement, this may be included as an appendix.

The report(s) should be evidence-based, analytical and self-critical, and give highlights of good practice and any identified challenges or weaknesses that are being, or need to be, addressed. The structure should be in line with template 2.

Template 1: Summary of the programme and data set

Part 1: Administrative information

1. Programme title:
2. Award/degree:
3. Department(s) responsible:
4. Programme co-ordinator:
5. External evaluator:
6. Year of operation being reported:
7. Date this report is submitted:
8. Date this report is approved:
9. Approved by:

Part 2: Statistical information

1. Number of students admitted to the programme in the last **five years** (by year)
     i. Admitted in orientation/foundation
    ii. Admitted in Year 1
   iii. Admitted direct entry to Year 2 or 3 (transferred students)
    iv. Part-time/full-time
     v. Male/female
    vi. Nationality (Kingdom of Bahrain, GCC, Arab countries, others)

2. Number of students registered in the programme in the last **five years** (by year)
    i. Part-time/full-time
    ii. Male/female
    iii. Nationality (Kingdom of Bahrain, GCC, Arab countries, others)

3. Number of graduates in the last **five years** (by year) and the number of students expected to complete the programme this year

    i. Graded Point Average (GPA)
    ii. Length of study period for each year's graduates (Mean, Range (max- min))
    iii. Grading: no. and percentage in each grade
    Excellent …………   ………%
    Very Good……… .   ………%
    Good……..............   ………%
    Pass……................   ……….%
    Fail ………............   ……….%

4. Discussion of statistical information
    Do the results produce a normal distribution or is there a skew? Discuss reasons:

5. First destinations of graduates
    Give percentages of the graduates of the last **five years** who have (by year):
    i. proceeded to appropriate/relevant employment:
    ii. proceeded to other employment:
    iii. undertaken postgraduate study:
    iv. engaged in other types of activity:
    v. unknown first destination:

Part 3: Programme aims and intended learning outcomes
(This information may be attached as a programme specification)
1. Programme aims
2. Specific intended learning outcomes grouped by knowledge, skills and competence
3. List of courses which contribute to the programme.

Part 4: Academic and Administrative Staff (this is submitted for the whole College)
1. Number of academic staff in the College in the last **five years** as well as current academic years (by year)
    i. Rank (professor, associate professor, assistant professor, senior lecturer, lecturer, graduate assistant, etc.)
    ii. Nationality
    iii. Gender
    iv. Academic and professional qualifications
    v. Part-time/full-time

vi. % time serving the programme

2. Details of academic staff currently contributing to each specific programme
    i. Rank (professor, associate professor, assistant professor, senior lecturer, lecturer, graduate assistant, etc.)
    ii. Nationality
    iii. Gender
    iv. College
    v. Department
    vi. Specialisation (major and minor)
    vii. % of time contributing to the programme

3. Details of administrative staff in the College in the last **five years** as well as current academic years (by year)
    i. Nationality
    ii. Gender
    iii. Job title
    iv. Academic and professional qualifications
    v. Part-time/full-time

4. Other (please specify):

Template 2: Outline of the Self-Evaluation Report

For each programme under review, the Self-Evaluation Report (SER) needs to be submitted in a template that follows the Programme Review Standards and Indicators. The SER may attach appendices to provide greater detail on the programme and its contributing courses and on the infrastructure that supports the programme. It will also be accompanied by an improvement plan. The structure set out below is:

- Background
- Evaluation
- Conclusions
- Improvement plan

Background

A brief summary of how long the programme has been offered, any substantial revisions, the context in which the programme is offered (labour market, collaboration with other organisations and the outcomes of any recent reviews and/or accreditation). The mission statements of the Institution and College should be included.

Evaluation

A summary describing how each of the applicable expectations set out in the Academic Programme Reviews Standards and Indicators are addressed. The Institution should avoid long descriptions and highlight good practices, current developments and any gaps, weaknesses and other matters being addressed or requiring improvement. Evidence, examples and references of supporting documentation, should be given where appropriate.

Conclusions

The conclusion should include:

- identified good practice
- gaps and matters to be addressed.

Improvement Plan

Attach a current improvement plan and indicate its status (e.g. draft for further discussion, or adopted by Faculty Council, or already implemented). (See Appendix V for a suggested layout.)

APPENDIX V: GUIDANCE AND TEMPLATE FOR IMPROVEMENT PLAN

All Colleges that have undergone a Review by the DHR are required to prepare subsequent to the publication of the Review Report, and in line with the guidelines outlined in the *Academic Programme Reviews Handbook,* an improvement plan for each programme reviewed. Upon receiving the final Review Report from the DHR, Colleges are expected to reflect on what actions will be undertaken to address the Review Report's recommendations and plan for enhancing the overall quality of their provision; they are required to link proposed actions explicitly to the Review Report's findings, particularly in regard to:

- rectifying areas of weakness
- sustaining areas of strength

The College is responsible for identifying and prioritizing areas for improvement as well as implementing the planned enhancements; it is imperative to demonstrate to the DHR that these plans are robust and are achievable.

The improvement plan needs to be viewed as an integral part of a College's strategic plan. Once implemented, it will serve as a valuable strategic tool that assists the College in outlining the activities required to achieve its quality improvement goals. The improvement plan should also be considered as a 'living' document, with new improvement priorities determined as previous improvement goals are accomplished.

Developing the Improvement Action Plan

Prior to the development of the improvement plan, it is advisable that the College first discusses the DHR Review Report with all stakeholders, in order to ascertain a common understanding of the Report's findings and gain multiple perspectives on how the improvement process will proceed. To maximize the benefit of this process, a senior staff member should be designated for the coordination between various stakeholders as well as for the development and implementation of the improvement plan.

The improvement plan is a summary document that presents the various components of the planned improvement process in a succinct and concise SMART format (Specific, Measurable, Achievable, Realistic, and Timed). It is recommended that a tabulated action plan is presented according to the following steps:

- Based on the feedback of all stakeholders on the Review Report findings, improvement goals are set and arranged in order of priority.
- The strategies for achieving each improvement goals are subsequently identified with the corresponding activities clearly outlined.
- For each activity, the persons to be responsible and/or accountable for implementation are listed.

- The resources required to accomplish each activity are detailed.
- The timescale expected to achieve each activity is indicated.
- Targets and criteria to evidence successful implementation of each activity are set.
- Expected costs for implementing each activity are estimated.
- A date for completion of each activity is assigned.

In addition to the above-mentioned components, the improvement plan should also include a brief overview that addresses:
- the impact of the report findings on the Institution's day-to-day operation
- how the College plans to integrate the recommendations into its strategic plan with a reference to whether the current mission, vision and strategic goals would need to be revised
- justifications for the prioritization order of the improvement goals
- major implications of implementing the Review Report's recommendations on the Institution's budgeting and resourcing
- assignment of responsibility with regards to the overall follow-up and monitoring of the improvement plan.

Improvement process

1. Upon receiving the Review Report(s) from the DHR, Colleges should discuss the Report's findings with all stakeholders and designate a senior staff member to be responsible for the development and implementation of the improvement plan(s).

2. The finalized improvement plan(s) should be submitted to DHR three months after the publication of the Review Report(s).

3. The submitted improvement plan(s) will be analysed by the assigned Review Director(s) in consultation with the DHR Director. The aim of this analysis is to determine the extent to which the College has successfully planned to address the Review Report(s) findings.

4. A meeting at the College will be scheduled one month following the receipt of the improvement plan(s). The focus of this meeting is to discuss the plan with regard to whether it is sufficiently detailed and adequately addresses the Review Report findings. If the DHR is not satisfied with the proposed improvement strategies and activities, the College will be required to revise its plan in light of these discussions.

A suggested template for presentation of the improvement plan components

Improvement Goals (in order of priority)	Proposed action(s)	Responsibility for action	Required resources	Timeline	Evidence of successful implementation	Estimated costs	Completion Date

APPENDIX VI: STAGE I APPEAL FORM

Appeal Details	
Institution Name	
Date of Receiving the Draft Review Report	DD Month YYYY
Date of Appeal Stage I	
Grounds for Appeal Stage I	

Claim No.	Institution's Claim	Judgment	Main Aspect/Standard	Institution's Remarks	Institution's Evidence
1.					

Appeal submitted by:			
Institution Representative		Position	
Contact Number		Signature	
Email			

APPENDIX VII: STAGE II APPEAL FORM

Appeal Details	
Institution Name	
Date of Receiving Stage I Appeal Response	DD Month YYYY
Date of Appeal Stage II	
Grounds for Appeal Stage II	

Claim No.	Institution's Claim	Judgment	Main Aspect/Standard	Institution's Remarks	Institution's Evidence
1.					

Appeal submitted by:			
Institution Representative		Position	
Contact Number		Signature	
Email			