



# **Doctor of Optometry Program Quality System Manual**

Qassim University, College of Applied Medical Sciences

Prepared by: Quality Assurance Unit

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## **Introduction**

### **Overview of the Program**

The department was established in the academic year 1428/1429 AH. The Department of Optometry is the first in the Middle East to offer the Doctor of Optometry (OD) degree, a professional doctorate in the field. This degree is distinguished from a bachelor's degree by its rigorous educational content and clinical training. It is awarded by numerous universities worldwide and is the only fundamental qualification required to practice optometry in North America. The OD degree is recognized by American organizations such as the Association of Regulatory Boards of Optometry (ARBO) and the American Optometry Association (AOA).

In Saudi Arabia, the Doctor of Optometry degree was officially recognized by the Saudi Commission for Health Specialties under decision No. 3/20264 dated 10/11/1429 AH, as well as by the Saudi Ministry of Civil Service. Graduates holding this degree are classified as Senior Optometry Specialists within the healthcare cadre. With the skills and clinical expertise gained through the program, graduates are equipped to provide comprehensive and independent eye and vision care. They also contribute effectively to innovation, advanced optometric research, and raising public health awareness in the community.

Specializations and Programs Offered by the Department:

The department offers a single program:

Doctor of Optometry (OD) Program

Degree Awarded by the Department:

The department awards the Doctor of Optometry (OD) degree, which is the essential qualification for practicing optometry. To obtain this degree, students must successfully complete six academic years. Graduates of this program become eligible to receive a license to practice as a Doctor of Optometry from the Saudi Commission for Health Specialties. This license authorizes the graduate to perform all duties and responsibilities of a Doctor of Optometry.

## **Purpose and Objectives of the Manual**

The Doctor of Optometry Program at Qassim University's College of Applied Medical Sciences (CAMS) is committed to providing high-quality education and clinical training. To preserve this commitment, the program has established a strong Quality System and Quality Assurance Manual. This guidebook provides a thorough roadmap for maintaining and improving the program's academic and operational excellence.

The quality system is intended to guarantee that all program activities correspond with Qassim University's strategic goal, meet national and international accreditation criteria, and successfully respond to the changing needs of healthcare education and service delivery. It stresses transparency, continuous improvement, and accountability across the program, from curriculum development to student results.

## **Alignment with Institutional Goals**

Doctor of optometry (OD) program has been prepared with the guidance and review of the College Quality Assurance Unit. The contents were made to be in abidance with the new developments in the kingdom. The current manual is also prepared in accordance with the new National Center of Academic Accreditation and Evaluation systems. The manual is designed to allow the faculty to be fully aware of his responsibilities and his rights. It contains an overview of the services offered by the College as regarding the quality aspects. It also has the important roles of the faculty concerning the quality assurance and academic accreditation processes.

## 1.1 Quality Glossary

To help achieve a common understanding of the important concepts and terms used in the accreditation and quality assurance system, we introduce a definition of some commonly used terms.

<b>Term</b>	<b>Definition</b>
Accreditation	It is a recognized certificate issued from an approved organization that approves that the educational program or the institution is following a specific required set of standards and criteria.
Programmatic Accreditation	Accrediting a program by providing the program a certificate that explains that it applies the proper standards of being acceptable as a valid educational program in a certain area with the required level.
Assessment	A diagnostic formula for reviewing quality and evaluating the learning and the teaching process and programs by examining the course curriculums, the organization and infrastructure and the mechanisms of assessing the internal quality in the university.
Academic Program	A set of correlated courses spread over a specified period which qualify the candidate in a specific specialization according to a predefined rules.
Benchmarking	The comparison points or the performance levels used to determine the goals and evaluate the outcomes.
Evaluation	Measuring the performance according to set of standards and predefined criteria.
Institutional Accreditation	Assessing the quality of the educational level of the institution according to a specific set of standards and criteria from an external authority.
Goals	Specific statements that apply missions or desires of the institution/program in specific subjects.
Internal Quality Assurance	The processes done by the educational system to ensure quality in all the activities.

International Accreditation	Accrediting an institution or its programs through an accreditation agency created in a different country.
KPI(s)	Selected principle performance indicators used in assessing the performance.
Learning Outcomes	Knowledge and skills gained from participating in a specific program or taking a specific course.
Mission	It is a general short clear statement describing the work purpose of a certain body
Objectives	General statements that describe and provide a guide on putting goals and detailed plans
Outcomes	The results of the learning, teaching and research in the institution.
Quality	There is a lot of definitions for academic quality: It is summarized in achieving the accuracy and high standards with continuous improvement.
Comprehensive Quality	It is a philosophy with tools and techniques that aims to achieve the culture of continuous improvement which is achieved by all the institution workers in order to make the clients happy.
External Quality Assurance	The processes of assessing and evaluating the institutions, activities and its programs by an external authority.
Quality Management	The management job is to specify and implement the quality strategy and dedicate the recourses and activities towards achieving quality.
Quality Control	Includes the process of controlling the quality, the mechanisms, operational activities that aims to control the system.
Standards	A diagnostic formula for reviewing quality and evaluating the learning and the teaching process and programs by examining the course curriculums, the organization and infrastructure and the mechanisms of assessing the internal quality in the university.

## 1.2 Quality Assurance Cycle

The quality assurance cycle takes specific years (five years to cope with the NCAAA accreditation period). The course begins with the preparation of the Course Specifications and the course report for each academic program courses each semester taking into account the relevance of the course to the mission and objectives of the program. Improvements to course specifications from feedback can be made from the course report each semester. In parallel with the course specification and report that are prepared each semester, the program specification and program report are prepared annually. Improvements can be made to the Courses' Specifications and Program Specifications due to feedback from the annual Program Report.

At the end of the fifth year, the quality assurance cycle ends. Figure 1 shows the quality assurance course for academic programs.

The quality assurance process should be applied at the level of courses. Quality assurance and improvement must be integrated into an ongoing cycle of strategic planning, following-up, evaluation and review. While following-up should be continuous, there are usually two time periods for more formal calendars: an annual period where performance is monitored and adjusted where necessary, and a longer cycle where major adjustments are made periodically. These periodic evaluations should be planned to conform to the external audits performed by the NCAAA every five years.

Although this planning and review cycle is presented as a set of steps in a linear sequence at specific times, steps can be repeated or changed in a flexible manner in practice in response to feedback and changing circumstances. For example, a performance review can lead to the conclusion that targets need to be modified, and then a new development plan is prepared.

## 1.3 Missions and Strategic Goals of Doctor of Optometry Program:

The program mission should be consistent with the institution's mission. Moreover, the program's strategic goals should be consistent with its mission, the institution mission, and institution strategic goals and employers' needs.



### OD Program Mission:

Prepares qualified and competent primary eye care graduates who support national and global efforts to overcome blindness and visual impairment, provide comprehensive eye care to the community, and conduct innovative applied research to boost sustainable national development

### Goals of the Doctor of Optometry Program:

The strategic goals of the OD Program are as follows:

1	Provide high-quality optometric education which will prepare graduates to provide excellent optometric services in an ethical and professional manner.
2	Engage actively in community services in collaboration with governmental and non-profit organizations to prevent blindness and raise awareness about eye health and vision care.
3	Conduct scientific research and train students to be vision science researchers and innovators to promote eye health care.

### Graduate attributes:

The attributes of OD program graduated identified according to its nature and the market needs. These attributes should agree with the general attributes of the graduates of Qassim University, which are as follows:

Attribute No.	Qassim University Graduate Attribute
<b>Knowledge and Understanding:</b>	
1.1	Possession of facts, information, ideas, issues, trends, theories and knowledge relevant to the field of specialization or field of work
1.2	The ability to analyze and critically evaluate information, concepts, methods and theories related to the discipline
1.3	The ability to develop new knowledge gained through innovative scientific research that generally contributes to the field of specialization

<b>Skills:</b>	
2.1	Possess the cognitive and technical skills to analyze and process data and information
2.2	Possess effective communication and information technology skills
2.3	The ability to independently create, design and implement research operations
<b>Values:</b>	
3.1	The ability to take appropriate decisions and assume the role of leadership, and address problems
3.2	The ability to work in a team and solve real problems in the field by linking knowledge and its applications
3.3	Awareness of professional ethics, ethics of scientific research, and ethics of dealing with technology and its tools

### **Program Educational Objectives:**

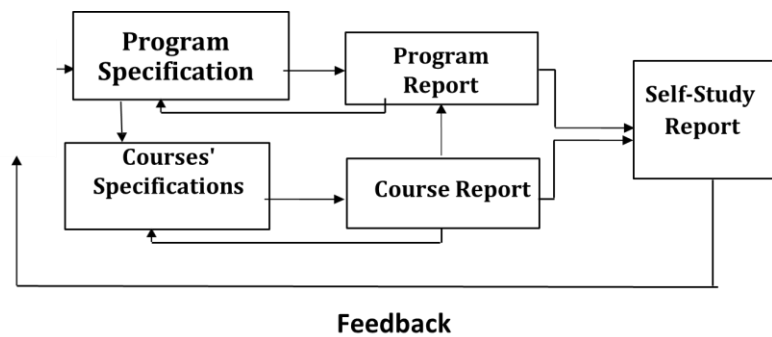
These broad statement about what the student can attain in a few years after graduation are to be set. These should satisfy the employers and alumni.

### **Program Learning Outcomes/Student Outcomes:**

The program learning outcomes; PLOs/SOs, that indicate what the student will gain as a result of learning in the academic program should be identified. These outcomes should directly express the knowledge, understanding, skills, abilities, competencies, values, and ethics that the student will gain by the time of graduation from the academic program. It is important to make sure that the graduate attributes and PLOs are consistent with the frame of qualifications approved by the Saudi Arabia Ministry of Higher Education and accreditation agencies. The curriculum, assessment methods and criteria used to evaluate the performance must be consistent with the learning outcomes.

## 2. Quality Assurance Cycle

The quality assurance cycle takes specific years (five years to cope with the NCAAA accreditation period). The course begins with the preparation of the Course Specifications and the course report for each academic program courses each semester taking into account the relevance of the course to the mission and objectives of the program. Improvements to course specifications from feedback can be made from the course report each semester. In parallel with the course specification and report that are prepared each semester, the program report is prepared annually. Improvements can be made to the Courses' Specifications and Program Specifications due to feedback from the annual Program Report. At the end of the fifth year, the quality assurance cycle ends. Figure 1. shows the quality assurance course for academic programs.



\*When describing the course, the outcomes that the course will achieve should be specified.

\*\*When describing the program, the program goals of the

Figure 1: Quality Assurance Cycle for OD program

## 1. Continuous Improvement Process

The OD program has implemented the quality assurance cycle and improved it to be more detailed and suitable for both national and international accreditation systems through the shown continuous improvement process in Figure 2.

The decisions of the improving actions are taken at the Program, Department and College according and following specific steps as illustrated in Figure 3.

## 2. Documents of the NCAAA Accreditation Process

The contents of the specifications and reports required for the NCAAA accreditation process are described below:

### First: Program Specification

The [program specification](#) includes the following:

#### A- Program identification and general information

1. The reason for the need for the program
2. Program hours
3. Occupations / jobs for which students are qualified
4. Program paths and exit points if any

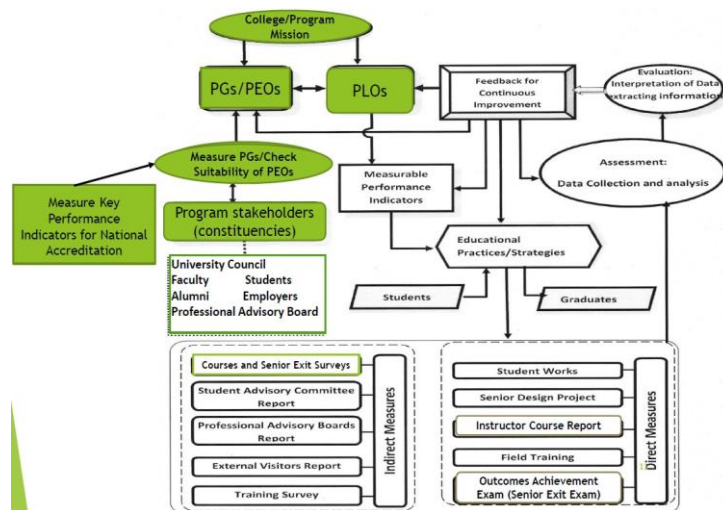


Figure 2: Continuous improvement process

## **B. Mission, goals and learning outcomes**

1. The mission
2. Goals
3. Relationship between program mission and goals of the institution/college
4. Graduate Attributes
5. Learning Outcomes

### **2. Curriculum**

1. Curriculum structure: Includes the requirements of the university, college and program
2. Program study plan: Basic and elective courses, as well as a statement of credit hours' requirements, in addition to full details about the courses to be taught in each semester or academic year.
3. [Course specification](#).
4. Program learning outcomes mapping matrix: The program learning outcomes are linked to the three levels (x = foundation level, t = practice level, c = mastery level).
5. Teaching and learning strategies to achieve the learning outcomes of the program: Describe the teaching and learning policies and strategies, experiences and different educational attitudes, including classroom and extra-curricular activities appropriate to achieve the targeted learning outcomes in each of its areas.
6. Methods of assessment of learning outcomes of the program: Describe the policies, methods and methods of evaluation used (direct and indirect) to verify students' acquisition of the targeted learning outcomes in each of its areas.

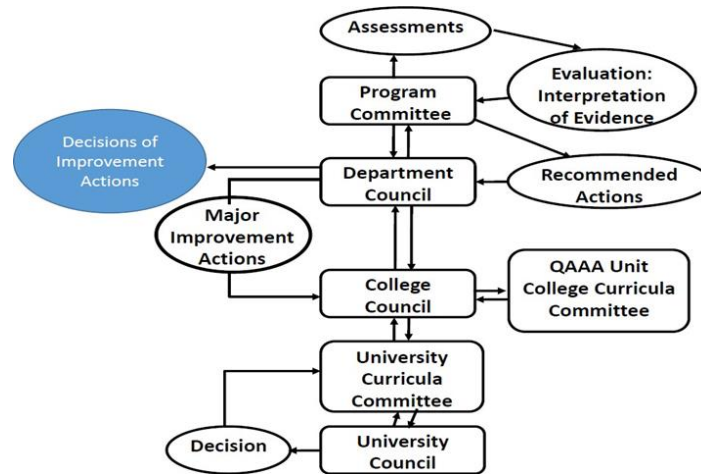


Figure 3: Decision Making Tree of Continuous Improvement Process.

### 3. Student admission and support

1. Admission requirements
2. Orientation and preparation programs for new students
3. Counseling services: (academic, vocational, psychological, social)

### 4. Teaching and administrative staff

1. Requirements of faculty, administrators and technicians.
2. Professional development
  - 1- Preparation of newly appointed faculty: briefly describe the procedures for qualifying newly appointed faculty (including part-time or visiting)
  - 2- Professional development of the faculty: briefly outlines the plan and procedures for the professional and academic development of the faculty (such as: the field of learning and teaching strategies, student assessment, professional aspects etc.)

### 5. Learning resources, faculties and equipment

1. Learning resources: mechanism for providing and quality assurance of learning resources (textbooks, references and other resource materials, including electronic and web-based resources, etc.)
2. Facilities and equipment (Library, laboratories, medical facilities, classrooms, etc.).

3. Arrangements to maintain a healthy and safe environment (According to the nature of the program)

## **6. Program management and regulations**

1. Program management
  1. Program structure: including department council, standing committees, etc.
  2. Stakeholders Involvement: describe the mechanism of representation and participation of beneficiaries in the planning and development of the program (students, professional bodies, scientific societies, employers, etc.)
  3. Program Regulations: provide a list of the relevant program regulations and their electronic link: admission and registration list, study and examination, recruitment, appeals and complaint regulations, e t c .

## **7. Program quality assurance**

1. Quality assurance system in the program: Put the link to the quality assurance system manual
2. Program quality control procedures.
3. Procedures for applying the institutional controls of the educational and research partnership (if any)
4. Program plan in measuring learning outcomes at the level of the program and mechanisms to take advantage of its results in the development process.

## **8. Program Quality Evaluation Matrix**

- 1- Evaluation areas (program leadership, teaching and evaluation effectiveness, learning resources, services, partnerships, etc.)
- 2- Evaluation source (students, alumni, faculty, program leaders, administrators, staff, independent references, etc.)
- 3- Evaluation method (polls, interviews, visits, etc.)
- 4- Timing of the evaluation (beginning of semester, end of academic year ..... etc)

## **9. [Program Performance Indicators](#)**

The period to achieve the targeted performance indicators is determined. The performance indicators including the key indicators from the National Center for Academic Accreditation and Evaluation are determined. The method of measurement, targeted value and time of evaluation are to be determined.

## **10. Specification approval data**

### **Second: Annual Program Report**

[The program report](#) is prepared annually, which includes the following information:

#### **A. Implementation of previous action plan**

#### **B. Program Statistics**

1. Student statistics (in the year of the report)
2. Cohort Analysis of Current Graduate Batch
3. Analysis of Program Statistics

#### **C. Program learning outcomes assessment**

1. Program Learning Outcomes Assessment Results
2. Analysis of Program Learning Outcomes Assessment

#### **D. Summary of [course report](#)**

1. Teaching planned courses
2. Courses with variations
3. Result Analysis of Course Reports

#### **E. Program activities**

1. Student Counseling and Support
2. Development activities of the teaching staff and the supporting body
3. Scientific research and innovation
4. Community partnership
5. Analysis of the results of the evaluation of program activities



## **F. Program Evaluation**

1. [Evaluation of Courses](#)
2. [Students Evaluation of Program Quality](#)
3. Other Evaluations
4. [Key Performance Indicators \(KPIs\)](#)
5. Analysis of Program Evaluation

## **G. Difficulties and challenges faced program management**

## **H. Program improvement plan**

## **I. Report approving authority**

## **J. attachments**

### **Third: [Course Specifications](#)**

2. The specifications of the course include the following:

#### **A – Course Identification**

#### **B - Course objectives learning outcomes**

1. General description of the course
2. The main objective of the course
3. Learning outcomes of the course

#### **C – Course content**

#### **D - Teaching and assessment**

1. Linking the learning outcomes of the course with both teaching strategies and assessment methods
2. Student assessment activities

#### **E – Student academic counseling and support**

#### **F - Learning resources and facilities**

1. List of learning resources
2. Facilities and equipment required

## **H- Course quality evaluation**

### **Specification approval data**

#### **Fourth: Course Report**

The report of the course includes:

#### **A – Course identification**

#### **B – Course delivery**

1. Course hours (at semester level)
2. Subjects not covered
3. Teaching strategies
4. Evaluation activities / methods
5. Verifying the credibility of the students' results
6. Recommendations

#### **C - Student results**

1. Distribution of estimates
2. Comment on the results of students
3. Recommendations

#### **D – Course learning outcomes**

1. The results of measuring the learning outcomes of the course
2. Recommendations

#### **E - Course quality evaluation**

1. [Evaluation of students for the quality of the course](#)
2. Other calendars
3. Recommendations

#### **F - Difficulties and challenges**

#### **G - Course improvement plan**

- 1- Course development procedures

2- The development plan of the course

**Fifth: Field Experience Specification**

The specification of field experience includes:

**Field experience identification**

It includes the name, number of credit hours (if any), level or year in which it is offered, times of submission, location of field experience sites and information about them.

**B - Learning outcomes, and training and assessment methods**

It contains the following points:

- Measurable learning outcomes in the field allocated to each area.
- Supportive teaching strategies that are compatible with the targeted learning outcomes and methods of evaluation.
- Appropriate assessment methods that accurately measure and evaluate learning outcomes. Learning outcomes, teaching strategies and assessment methods should be consistent and work together as an integrated teaching and learning process.

**C. Field experience administration**

It includes the following:

1. Field Experience Locations
2. Supervisory Staff
3. Responsibilities
4. Field Experience Implementation
5. Safety and Risk Management Safety and Risk Management

**D. Training quality evaluation**

Describe the procedures for evaluating field experience activities and recommendations for improvement by:

- Students: Describe assessment procedures
- Field Supervisory Staff: Describe the evaluation procedures

- Supervisory staff of the teaching staff in the educational institution:
- Others (alumni, collaborators, independent evaluator, etc.): Describe assessment procedures

### **E. Specification approval data**

#### **Sixth: [Field Experience Report](#)**

The Field Experience Report includes:

#### **A. Field experience identification**

3. It includes the name, number of credit hours (if applicable), the person responsible for the course, the level or year in which it is offered, the time of submission, and the place of the locations of field experience.

#### **B. Training delivery and assessment**

This includes the following:

1. Training Methods and Activities
2. Assessment Methods
3. Differences in evaluation
4. Verification of Credibility of Students' Results
5. Recommendations

#### **C. Student results**

This includes the following:

1. Distribution of Grades
2. Comment on Student Results
3. Recommendations

#### **D. Field experience learning outcomes:**

1. Learning Outcomes Assessment Results
2. Recommendations

#### **E. Field experience quality evaluation**

1. Students Evaluation of the Quality of Field Experience

2. Supervisory Staff
3. Other Evaluations
4. Recommendations

## **F. Difficulties and challenges**

## **G. Field experience improvement plan**

1. Field Experience Improvement Actions
2. Action Plan for Next Semester/Year

### **Seventh: Self-Evaluation Scales Report**

This report documents the self-evaluation of the various stakeholders focusing groups. The evaluation is carried out for several elements suggested by the NCAAA to cover its established standards and sub-standards. The report indicates- according to the different elements evaluation level the strength points and area of improvements, and address the improvement priorities.

### **Eighth: Surveys Report**

This report documents the results of the various stakeholders' surveys (students, graduates, staff, employers, etc.). The evaluation is carried out for several items suggested by NCAAA proposed surveys. The report indicates- according to the different items evaluation level the strength points and areas of improvement, and addresses the improvement priorities.

### **Ninth: KPIs Report**

This report documents the measured Key Performance Indicators suggested by the NCAAA for the programmatic accreditation level, and other suggested PIs by the programs. The evaluation is then carried out in light of targets which are set by the programs, and external and internal benchmarking. The report indicates- according to the different KPIs evaluation levels, the strength points and areas of improvement, and addresses the improvement priorities.

## **Tenth: Students' works Course Folders**

This includes:

- First Day Material
- [Course specifications](#)
- Course quizzes and their model solutions
- Samples of student answers of the quizzes
- Course assignments and their model solutions
- Samples of student answers of the assignments
- Course mid-term Exams and their model solutions
- Samples of student answers of the mid-term Exams
- Course final Exam and its model solution
- Samples of student answers of the final Exam
- Other course works

## **4. Measurement and Evaluation of Academic Programs Outcomes**

### **5.1 Introduction**

Learning outcomes are stated by specific sentences showing what the student can demonstrate at the end of the program of knowledge, set of thinking and problem-solving skills, abilities such as the ability to work effectively in groups, the ability to lead, the ability to communicate with different types of audience, and the ability to investigate new and unexpected problems using diverse sources of information, and a commitment to lifelong learning. The goal is to make graduates be able to keep up with the rapid developments of knowledge in their fields, personality traits such as honesty and reliability, and competencies such as proficiency in specific areas.

Measuring and evaluating outputs is an ongoing process, and does not end with the end of the cycle. At the end of the session, an evaluation shall be made to make any amendments to it by examining its previous session. Thereafter, a new cycle shall commence including the suggested modifications.

## **5.2 Program and Course Outcomes Measurement tools**

Program learning outcomes measurement tools include:

- (1) The self-assessment scale report for program evaluation in Higher Education, which should be early completed by focus groups including students, faculty, employers, alumni and other stakeholder when preparing the self-study report.
- (2) Benchmarking comparison which are used to compare program outcomes and some benchmarks with benchmarking outputs for similar programs (see benchmarking table).
- (3) Independent evaluation of external auditors.
- (4) Surveys (Surveys) completed by students, graduates staff, and employers
  - Course survey
  - Student experience survey
  - Program survey
  - Alumni survey
  - Employers survey
- (5) Performance Indicators
- (6) Use of Rubrics (a clear, gradual set of criteria to assess the achievement of learning outcomes) at the program level.

## **5.3 Student Outcomes Measurements**

### **5.3.1 Student Outcomes Measurement tools**

The applied measuring instruments which are used for assessing the SOs are classified into two main categories:

#### **A) Direct assessment measures which include:**

- 1- Students course works assessment
- 2- Senior Design Project (SDP) assessment
- 3- Coop/Summer training assessment

4- Outcomes Achievement Exam

**B) Indirect assessment measures which include:**

1- Student Surveys (course surveys and senior exit surveys).

2- Professional Advisory Board feedbacks and comments.  
3 External Visitor feedbacks and comments.

4- Student Advisory Committee feedbacks and comments.

**5.3.2 Types of Assessments**

The SOs are assessed and evaluated by linking the program courses to the SOs. Two cycles of evaluation will be carried out over the 5 years NCAAA accreditation period. SOs are assessed and evaluated using two types; formative assessment and summative assessment. The formative assessment for each outcome is done over consequent levels for selected courses that serve and build this outcome. The assessment is performed for the selected courses at the time these courses are taken by the assessed batch (Scheduled Time). The summative assessment is carried out by the time of graduation and is applied to selected senior courses, the SDP, Coop./Summer training, and the OAE. Thus, this summative evaluation will be done every three years.

**5.3.3 Assessment of Student Outcomes of the Courses**

**Assessment Procedure:**

1- An assessment cycle starts each 3 years

2- The instructors shall relate their courses to the Students' Outcomes precisely and logically.

3- As regarding the formative assessment, every semester there will be few chosen courses which should be assessed.

4- The instructor should design the Exams, quizzes, reports, etc. such that their parts measure certain outcome of the student outcomes to which their course is highly



related.

5- For the compulsory courses, the results of the Exams, Quizzes and Reports are to be assessed to evaluate the level of achievement of the highly related outcomes.

6- It is required to analyze students' work such as; the Final Exam., the mid-term Exams, quizzes, home-works, assignments and similar works and any other works such as mini projects.

7- Then, the instructors should calculate the percentage of students acquired these outcomes and the average percentage grade.

## **6. National Academic Accreditation by NCAAA**

### **6.1 Requirements for Program Accreditation**

**For a program to submit for an evaluation leading to academic accreditation by the NCAAA, the followings are required:**

<b>N</b>	<b>Eligibility Requirements</b>	<b>Notes</b>
1	Final Licensing of the program	<ul style="list-style-type: none"><li>• Decision of opening the program (for governmental Universities).</li><li>• Final licencing Decision (for Private colleges programs).</li></ul>
2	Compliance with the Saudi qualifications framework	<ul style="list-style-type: none"><li>• A report confirming the compliance of the programs with the Saudi qualifications framework.</li></ul>
3	The availability of the institutional accreditation requirements	<ul style="list-style-type: none"><li>• Receiving institutional accreditation by the University or its eligibility for accreditation.</li></ul>

4	Introductory guides for students and faculty members	Introductory guides available for students and faculty members: <ul style="list-style-type: none"> <li>• Introductory guide for a program.</li> <li>• Acceptance and registration.</li> <li>• Regulations of study and tests.</li> <li>• Academic orientation and advising services</li> <li>• Rights and duties.</li> <li>• Complaints and grievances.</li> </ul>
5	The program's quality assurance system and its performance reports.	<ul style="list-style-type: none"> <li>• Program quality system guide.</li> <li>• Manual of policies and procedures for approving and modifying the program and courses (includes a matrix of authorities in all levels).</li> <li>• <a href="#">The annual report</a> of the program for the last two years according to the template of the National Center.</li> <li>• <a href="#">Course reports</a> for the last two years (one report per course annually).</li> <li>• Reporting the results of opinion polls of stakeholders (<a href="#">students</a>, <a href="#">graduates</a>, <a href="#">employers</a>, <a href="#">faculty members</a>, <a href="#">employees</a>) for the last two years.</li> </ul>
6	Program and course specifications	<ul style="list-style-type: none"> <li>• <a href="#">Program specification</a> according to the national center template.</li> </ul>

## 6.1 Program Accreditation Standards

In 2023, the National Center for Academic Assessment and Accreditation (NACAA) developed the standards for baccalaureate accreditation to be five rather than the six old standards, and their details are as shown below.

### Standard 1: Program Management and Quality Assurance

Program leadership is the responsibility of the head of the department, and academic leadership is the responsibility of the head of the department and the quality

coordinator (program manager for quality). Program management must demonstrate effective leadership, and must reflect an appropriate balance between responsibility to senior management, the institution providing the program, and the flexibility to meet the specific requirements of the program in question. Stakeholders (such as students, professional bodies, employers, and faculty) should be involved in planning procedures, setting goals and objectives, and reviewing and responding to results achieved.

If there are separate female student departments, the resources provided to them should be identical to the male students' departments, and there should be an effective communication mechanism between the two bodies. As a whole and continuously make adjustments quickly in response to feedback and according to developments in the external environment affecting the academic program.

The first standard includes the following sub-criteria:

### **Program Management**

#### **Quality assurance of the program**

#### **Standard 2: Teaching and Learning**

The learning outcomes of the program are formulated to indicate the student's knowledge, information, abilities, skills and values upon graduation, and the learning outcomes of the course are formulated to show the knowledge, information, abilities, skills and values gained by the end of the course.

Students' learning outcomes should be clearly defined and in line with the Saudi Qualifications Framework (formerly the National Qualifications Framework) and the requirements of work or professional practice. The quality of education and the effectiveness of programs are assessed by assessing student performance, surveying [graduates](#), [employers](#), and using feedback from those parties as a basis for future development plans.

If the program has a male and female section, the quality standards and learning resources should be the same, and calendars should include separate data for each department. Provide a description of the quality assurance response procedures used

to verify that the regulatory framework and arrangements for verifying that teaching and learning are working properly (for example, if measures are taken to verify student achievement levels against appropriate external references, state what were the results of these actions?)

The teaching and learning standard includes the following sub-criteria:

### **Designing the graduates' attributes and learning outcomes**

Procedures to ensure that the target learning outcomes are consistent with the Saudi Qualifications Framework (formerly the National Qualifications Framework), and the requirements for career or vocational work as defined by the experts' recommendations or the requirements of the relevant professional bodies or accreditation bodies include:

- Careful review of the National Qualifications Framework.
- [Periodic survey](#) of the knowledge, skills, abilities and values needed by the labor market.
- Quoting from the output determined by some accreditation bodies.

### **Curriculum**

Components of the curriculum of university requirements, college requirements, program requirements, graduation project and [field training](#) /year of excellence with the identification of mandatory and optional parts.

### **Quality of teaching and assessment of students**

This sub-standard includes information on the teaching strategy plans for the development of targeted learning outcomes of the program, assessment of teaching quality, procedures for the preparation of [course reports](#) and [program reports](#), and how to utilize them. This part should include a table showing the proportion of faculty members whose teaching is regularly assessed through student feedback (or through other mechanisms).

It also includes teaching aids for students such as office hours, peer education, and educational courses.

The conclusions reached on the quality of the program as a result of the use of program evaluation and review procedures are presented and, where appropriate, reference to information on indicators and survey results should be noted.

Students are also evaluated and their outputs are evaluated by means of direct and indirect measurement ([course survey](#)).

### **Standard 3: Students**

Admission procedures should be effective, fair and responsive to the needs of students enrolling in the academic program. Dispute resolution and appeals mechanisms are clearly set out and published, fairly administered, and career guidance should be provided to students regarding jobs related to the areas of study that the program deals with.

Much of the responsibility for achieving this standard lies with the institution's management rather than program management, while the program is responsible for evaluating the quality of this standard.

### **Standard 4: Faculty**

Faculty should be optimally qualified and have the appropriate expertise to carry out the teaching responsibilities assigned to them, to use appropriate teaching strategies for different types of learning outcomes, and to participate in activities to improve the effectiveness of education.

The Qualifications and experience of faculty members associated with program requirements should be indicated. The qualifications and experience of faculty members should be highlighted and a report with a list of strengths, recommendations for improvement and implementation priorities should be provided.

### **Standard 5: Learning Resources, Facilities and Equipment**

Educational resource materials and associated services should be sufficient to meet the program requirements and courses offered, accessible to students when needed, and information on academic program requirements should be provided by faculty in time to provide the required resources. Teachers and [students in evaluating the](#)

[resources](#) provided, and the requirements for references and data sources on the internet and computer rooms and assistance in the use of these equipment will vary depending on the nature of the academic program and methodology of teaching.

Facilities should be appropriate, create an atmosphere for the smooth running of the learning process and facilitate program activities.

Procedures for securing the necessary learning resources for the program should be clarified, including opportunities for staff or program administrators to provide the necessary resources, as well as information on the services provided and when they are available. The extent to which the learning resources are equally available. The suitability of facilities and services (classrooms, laboratories, study places, international network equipment, libraries, etc.) available for program activities should be clarified.

## **7. Orientation and Academic Advising of the Students**

Academic counseling is a pillar of university education in the Kingdom, as it aims to guide students to get the best results and adapt to the university environment and seize the opportunities, by providing them with academic skills that raise their level of educational attainment. Given the importance of academic guidance in the colleges and program, it is necessary to have a reliable system for academic advising and guidance.

### **7.1 Fresh Students Orientation**

The fresh students receive orientation once they join the College of CAMS and OD program through

- i- Orientation presentation arranged by the Student Club and given by senior faculty members. In this presentation, the students are informed about the OD program offered by the Optometry Department regarding its requirements, academic plan and job opportunities.
- ii- Student hand book and related brochures
- iii- Guides and instructions presented the College and the program sites.

## **7.2 Academic Advising**

At the beginning of the students first semester of the program, they are assigned to faculty members as academic advisors. The assignment is random and based on balancing the load among faculty members. This assignment lasts throughout the student's academic program to provide continuity and consistent advising for the student.

### **- Objectives of the Academic Advising**

- Preparing students to know and adapt to university life.
- Provide students with correct information about the college, OD program educational policies, resources and study program.
- Enhancing the academic achievement of students, raising their abilities and overcoming obstacles encountered during their academic achievement. Reduced chances of academic failure (preventive counseling).
- Provide advice and assistance to students with academic problems of program students.
- Taking care of students of low academic attainment and following them up to their academic level.
- Care and help students socially, physically, healthy, psychologically and functionally if necessary.
- Give attention to outstanding and talented students, and provide what will enhance their abilities and support their creativity.

### **- Tasks of the Academic Advisor**

- Knowledge of the dates of registration, deletion and addition announced by the Deanship of Admission and Registration.
- Knowledge of the program study plan and graduation requirements for students. Ensure that the student's schedule is in line with the program study plan.
- Preparing and updating the file of the academic guidance record for each student,

where the counselor opens a special file for each student or group in the group includes the registered material and the level of the student's grades, It includes the cumulative average as well as the minutes of the periodic meetings between the student and the student in addition to any reports or warnings sent by the course decision through which the level of the student can be assessed.

- Organize periodic interviews (at least once at the beginning of each semester) with each student that he supervises in order to:
  - Identify the performance of students in the last semester.
  - Encouraging the student to encourage more praise if he is distinguished in some courses.
- Discuss the difficulties, if any, and seek appropriate solutions.
- Discuss the appropriate options for the student in the next semester (recording or deleting courses, raising the rate, choosing a specialization etc.).
- Helping the student in case of difficulty in registering or opposing some materials.
- Strict follow-up of the achievement of the student or scientific student in the materials recorded in it and write periodic reports and attach them in the file of the student.
- Addressing staff members if the student's level is low.
- In case the student is not attending or his achievement level is weak, the advisor will intensify the regular meetings and discuss the student or the student accurately about the reasons and try to resolve or raise them to the Committee of Academic Guidance.
- Discover and develop students' talents.
- Helping students to make the most of the e-learning site at the college.
- Urge students to participate in academic and extra-curricular activities.
- It is necessary to build a relationship of academic friendship between the advisor and the student and defrost differences between them.



- Perform the role of the counselor as a social and functional counselor for the student to know his social conditions. Helping to stabilize the student's future career, and contribute to opening up prospects for his job opportunities, training or continuing higher education.
- Allocate office hours to meet students in his office to discuss problems encountered during the study.
- Introducing students to the objectives and mission of the college, its educational programs, and the fields of work of its graduates; and the care and services they provide to their students.
- Submit periodic reports on the performance of students to the chairman. The report includes the academic performance of the student (better or worse than before) and the measures taken to cure the bad performance.
- Urge and encourage students to take advantage of the library and manage time effectively.
- Encourage students to study as groups and benefit from their peers.

It is preferable not to change the student's advisor from enrollment until graduation so that follow-up and coexistence will continue.

Each semester during periods of pre-registration or registration, the student is asked to meet his advisor to review his progress and develop a schedule of courses to be taken during the next semester.

During the advising appointment, the student and advisor use the student's file, transcript, a variety of reports available to faculty through an online information system, departmental students' records, etc. to develop a schedule of classes. This process provides the best progress toward meeting the requirements in all areas, and assures that all prerequisite and other preliminary restrictions have been satisfied. Thereafter, the student registers for his courses through the University web-site.

The students are fully responsible for complementing their credits for graduation; however, the academic advisor has mandatory duties for verifying the student goals and consequently the faculty objectives. So that the academic advisors during the

time saved for registering student courses, they must review the following:

- Ensure that the student is listed in your supervision list,
- Ensure that the student is coming within the time specified by the student affairs unit, e.g., the last year students have the priority for registering courses,
- Ensure that the student has his university ID,
- Ensure that the student has the last updated transcript, i.e., that of the recent semester,
- Ensure that the fully prepared lecture table respects the time slots; i.e., there is no time contradiction between the chosen courses.
- It is not allowed to register any course without fulfilling the course prerequisite and/or the co-requisite courses (can be figured out from the departmental web-page that located at the course description part),
- It is highly recommended to use your experience to advise the student about the subject that must be studied first,
- It is highly recommended to advise the student to print out his final table from the Student Affairs Directorate.
- Please inform the student that his attendance will be considered from the first day of the semester regardless of his registration time.

The senior students usually seek for advice and proper guide for their future career from their advisors. The advisors are urged to play this important role and provide the students with the valuable information they have regarding career planning.

### **7.3 On-Line Academic Advising**

This is performed through the College Site using the instructor account. Through the site, the instructor submits 3 reports over the semester about the performance of each student of the group under his advising. This should be done immediately after the first mid-term Exam, the second mid-term Exam and the final Exam. The reports are sent to the department chairman for follow-up.

The on-line advising allows the advisor to send e-mails, or call the student for meetings to discuss his performance and the social circumstances affecting his study

so that solution may be suggested. Fig. 7.1 shows the screen of the on-line page of advising.

#### **7.4 Student Responsibility and Role**

- Take full responsibility for his academic performance as academic guidance is a mechanism of assistance.
- Undertake the college directory and website to learn about all the requirements of the department, college and university.
- Familiarity with the details of the academic calendar and critical dates related to registration, withdrawal, apology, etc .
  - Knowledge of his academic advisor and office hours.
- Meet the mentor to consult on academic and professional goals, program and schedule, and inquire about all aspects of ambiguity.
- Implementation of the guide's recommendations and attendance of the guide as scheduled.
- Notify the advisor of any variables that may affect his program or academic performance.

#### **7.5 Guidance and Counseling Services**

Guidance and counseling are important processes that a university student needs in all stages of his university studies. The undergraduate level is quite different from what a student is used to in general education. It is an important stage in building the student's scientific and social personality it is considered a different paradigm shift from general education. The university student manages his scientific, personal, and social affairs, and makes his own decisions, it may be a stage of excellence or distinction or may be otherwise. To help the student adapt to a new university life that needs some support and guidance. The Department of Guidance and Counseling at the Deanship of Student Affairs works hard to stabilize students and adapt them to the new university environment.

The administration is keen to follow up the students' scientific, psychological and

material issues, especially in this age where there are many sources of knowledge so it is important to lighten the path for them, protect them and help them solve any problems and obstacles that stand in their way of success.

**a. Reception of New Students**

The Department of Guidance and Counseling at the Deanship of Student Affairs recognizes the importance of the quality of the definition of newly admitted students to the University). The new program for receiving new students since their admission to the university will be arranged and arranged for the new students since their admission to the University, the student will be given an invitation to attend the reception and the venue with notice of admission to the University in addition to some important and necessary instructions that the student needs to understand before starting their studies. The program aims to prepare the student for a new university life, introducing the support systems for the students of the university, as well as introducing the students to the faculties they attended and what they offer them. The university's essential facilities, such as the library, restaurants, gyms, photographic centers, bookstores, laboratories, etc.

The reception was organized over two days. The reception program started on the first day of each semester and was graciously sponsored by the University Rector.

**8. Quality System in the Doctor of Optometry Program**

**Structure of the Quality Committee of the program:**

Head of Department	Chairman
Administrator	Secretary
Representative from the Quality and Academic Accreditation Unit	Member
Chairmen of Subcommittees	Members

**8.1 Tasks of the Quality Committee in the program:**

Tasks of the Quality Committees in Departments:

Review Educational Objectives and Learning Outcomes:

1. Evaluate the program's educational objectives and learning outcomes in light of the requirements of the benchmarking report, the academic plan, labor market needs, professional bodies, and guidelines issued by the university, the Education Evaluation Commission, and the National Center for Academic Accreditation and Evaluation, in coordination with the (Department Council/Program Reference Committee) and the program's planning committee.
2. Approve Assessment Methods and Tools:  
Approve both direct and indirect assessment tools for courses and program.
3. Participate in Preparing Rubrics for Student Work:  
Contribute to the development of evaluation rubrics for various program courses, present them to the (Department Council/Reference Committee) for review and approval, and distribute them to the faculty members of the department.
4. Participate in Preparing Program and Course Descriptions:  
Assist in preparing program and course specifications, as well as field experience specifications, in accordance with the templates provided by the National Center for Academic Accreditation and Evaluation, and submit them to the (Department Council/Reference Committee) for review and approval.
5. Contribute to Annual Program Report Preparation:  
Assist in preparing and reviewing the annual program report, obtain its approval from the (Department Council/Program Reference Committee), and follow up on the preparation of the unified program report.
6. Work on Performance Indicators (KPIs):  
Participate in preparing and reviewing program-specific Key Performance Indicators (KPIs), obtain their approval from the (Department Council/Reference Committee), and prepare the performance indicator report along with improvement recommendations.
7. Benchmarking:  
Assist in preparing and reviewing program-specific benchmarking reports and obtain their approval from the (Department Council/Reference Committee).

8. **Develop Improvement Recommendations:**  
Create a list of improvement recommendations based on course and program reports, submit them to the (Department Council/Reference Committee) for approval, and inform the department of these recommendations.
9. **Self-Study Report (SSR):**  
Contribute to the preparation of the program's Self-Study Report (SSR) in accordance with the templates provided by the National Center for Academic Accreditation and Evaluation.
10. **Perform Additional Assigned Tasks:**  
Carry out any other tasks within the scope of work.

## **8.2 Program Professional Advisory Committee**

### **Objectives of the Professional Advisory Committee of the Program:**

1. Contribute to the development of program and study plans in accordance with the latest standards, professional developments and labor market requirements in a way that contributes to achieving the Kingdom's Vision 2030
2. Encourage collaboration and communication between academic programs and appropriate graduate employers.
3. Facilitating links between the program, possible employers, professional organizations, and clinical settings to improve students' training and career prospects.
4. Directing the research interests of academic programs to what meets the needs and aspirations of the professional community.
5. Bridging the gap between academic programs and the professional community and building bridges to deepen partnership and find solutions to problems in an integrated manner.
6. Assisting the program in meeting and exceeding the professional and ethical standards established by regulatory and accreditation organizations.
7. Offering strategies to help students with their professional development, license preparation, and post-graduate employment options.

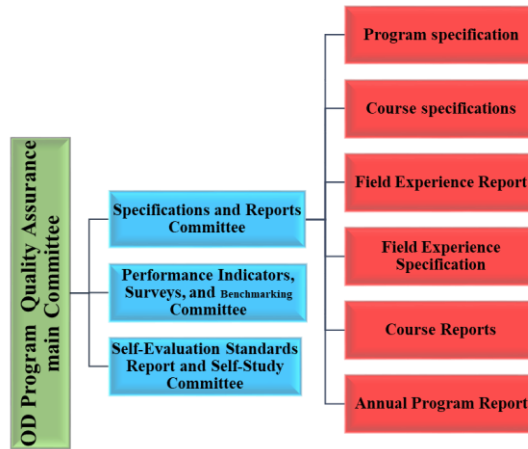


Figure 4: **Quality Subcommittees within the Program**

### 1. **Specifications and Reports Committee**

#### **Tasks of the Committee:**

1. Preparing, reviewing and auditing the program description according to the model of the National Center for Academic Accreditation and Assessment in order to be approved by the Department Council.
2. Preparing, reviewing and checking course descriptions and field experience and their consistency with the program description in terms of:
  - A. Educational Objectives
  - B. Learning Outcomes
  - C. Direct and indirect measuring instruments until approved by the Department Council
3. Study and analyze the reports of the courses that are approved by the Department Council in order to
4. Prepare the program report once a year.
5. Issuing a separate report on any improvement recommendation that is being implemented, and the report includes all documents and minutes accompanying the implementation of the recommendation

6. Collecting documents related to quality assurance and accreditation and sending a copy of them through the program's representative to the Quality Assurance Unit at the college.
7. Submit a report to the Quality Assurance Committee regarding descriptions and reports.

## **2. Benchmarking, Questionnaires and Performance Indicators Committee:**

### **Tasks of the Committee:**

1. Determine the performance indicators of the program, distribute and follow up questionnaires, issue their reports with improvement recommendations, and follow up the implementation of these recommendations.
2. Make a report on performance indicators and show weaknesses with improvement recommendations.
3. Making a reference comparison with two similar programs preferably in two universities outside the Kingdom that include the criteria stipulated by the National Center for Academic Accreditation and Assessment (NCAAA)
4. Prepare a report on benchmarking with improvement recommendations.

## **3. Self-Evaluation Standards Committee and Self-Study Report:**

### **Tasks of the Committee:**

1. Fill out the self-evaluation criteria form of the National Center for Academic Accreditation and Assessment.
2. Provide all evidence to prove the validity of the claim contained in the self-assessment criteria form.
3. Determine the work plan to achieve the recommendations resulting from the self-evaluation standards model and submit it to the program's Quality Assurance Committee.
4. Preparing the self-study report for the program.
5. Determine the work plan to achieve the recommendations resulting from the self-study report and submit it to the program's quality assurance committee.
6. Receiving independent auditors and obtaining a report from them containing the following:



- A. Pros
- B. vulnerabilities
- C. Improvement recommendations
- D. Preparing a report responding to the observations of the independent auditor

#### **4. Field Experience Specification and Report Committee**

##### **Tasks of the Committee:**

1. Review the mechanisms adopted to assess the adequacy and quality of services provided to students and measure their satisfaction with them; and use the results to make improvements
2. Identify problems and shortcomings related to field education
3. Ensure that the specifications of the field experience followed are consistent with the program outputs
4. Submit field experience reports to the program's quality committee

##### **Tasks of the Program Manager and Quality Representative in the OD Program:**

1. **Overseeing the Preparation and Review of the Program Specification:**  
Supervise the preparation, review, and auditing of the program Specification based on the template provided by the National Center for Academic Accreditation and Evaluation, and obtain approval from the Department Council.
2. **Supervising Course and Field Experience Specifications:**  
Oversee the preparation, review, and auditing of course and field experience specifications, ensuring their alignment with the program description, and obtain approval from the Department Council.
3. **Follow-Up on Improvement Recommendations:**  
Monitor the implementation of improvement recommendations outlined in the annual program report through the Department Council.
4. **Supervising the Annual Program Report:**  
Oversee the issuance of the annual program report after the course reports are approved by the Department Council.

5. **Monitoring the Implementation of Approved Recommendations:**  
Track the execution of approved recommendations and provide proposals and reports on their progress.
6. **Following Up on Course Reports:**  
Ensure the receipt of course reports by the Specifications and Reports Committee at the end of each semester according to established procedures.
7. **Performance Indicators Report:**  
Supervise the issuance of the performance indicators report, highlighting weaknesses and including recommendations for improvement.
8. **Benchmarking Report:**  
Oversee the issuance of a benchmarking report with recommendations for improvement.
9. **Quality Assurance Committee Benchmarking Report:**  
Supervise the preparation of a report for the Quality Assurance Committee regarding benchmarking, including improvement recommendations.
10. **Self-Evaluation Standards:**  
Monitor the completion of the self-evaluation standards template provided by the National Center for Academic Accreditation and Evaluation, and ensure the availability of all evidence supporting the claims made in the template.
11. **Action Plan for Self-Evaluation Recommendations:**  
Follow up on the action plan to implement the recommendations derived from the self-evaluation standards template.
12. **Program Self-Study Report:**  
Supervise the preparation and issuance of the program's self-study report.
13. **Action Plan for Self-Study Report Recommendations:**  
Monitor the implementation of the action plan to address the recommendations resulting from the self-study report.
14. **Coordination with Reviewers:**  
Collaborate with the department head and members to prepare for independent reviewers, aiming to receive a detailed report on strengths, areas for improvement,

and recommendations. This includes preparing responses to the reviewers' comments.

**Tasks of the Department Council:**

**Approval and Quality Assurance Tasks:**

1. Approve the formation of quality committees from its members or others they deem suitable.
2. Approve separate reports that include all documents and minutes related to the implementation of improvement recommendations.
3. Approve the templates for program specification, course specifications, and field experience specifications, as well as their reports.
4. Approve the performance indicators specific to the program.
5. Approve the performance indicators report, highlighting weaknesses and providing improvement recommendations.
6. Approve the program's self-study report.
7. Approve benchmarking reports with improvement recommendations.
8. Discuss improvement recommendations and establish mechanisms for follow-up and implementation.
9. Propose and recommend the engagement of specialists, as visiting consultants (both Saudi and non-Saudi), for a specific period to support development, quality, and review processes.

**Authorities of the Department Head:**

1. Nominate the program manager.
2. Form quality committees and monitor their tasks.
3. Oversee the enhancement of quality and the development of educational outcomes.
4. Supervise the implementation of quality standards and academic accreditation requirements.
5. Apply quality, evaluation, and academic accreditation systems and regulations.

## **Tasks of the Optometry Clinic Manager:**

1. **Supervision of Training Activities:**  
Oversee all clinical training activities to ensure students receive practical, hands-on experience in alignment with the academic program's learning outcomes.
2. **Coordination with Faculty:**  
Work closely with faculty members to align clinical activities with theoretical coursework and ensure consistency in training objectives.
3. **Scheduling and Rotation Management:**  
Develop and manage student schedules and rotations within the clinic to ensure equitable distribution of cases and exposure to diverse clinical scenarios.
4. **Patient Case Management:**  
Monitor and facilitate patient case assignments, ensuring students gain experience in various optometric services, including refraction, contact lenses, ocular disease management, and low vision care.
5. **Quality Assurance:**  
Ensure the clinic operates in accordance with healthcare regulations, ethical standards, and quality assurance guidelines. This includes maintaining proper patient care documentation and adherence to infection control measures.
6. **Performance Monitoring:**  
Evaluate student performance in the clinic by observing their skills, professionalism, and ability to apply theoretical knowledge in clinical practice. Provide feedback and guidance to improve competencies.
7. **Clinical Equipment Maintenance:**  
Oversee the maintenance and calibration of clinical equipment, ensuring it remains functional, safe, and up to date for both patient care and student training.
8. **Patient Interaction Supervision:**  
Supervise and guide students in patient interactions to enhance communication skills, professionalism, and the application of clinical procedures.
9. **Coordination with External Clinics:**  
Collaborate with external optometry clinics and hospitals to arrange extended training opportunities or internships for students.

**10. Documentation and Reporting:**

Prepare and maintain clinical records, training logs, and student evaluations. Submit periodic reports to the department on the clinic's performance, training outcomes, and areas for improvement.

**11. Policy Development:**

Develop and implement clinic policies, including safety protocols, patient care standards, and student conduct regulations, in coordination with the department.

**12. Staff Management:**

Supervise and manage clinic staff, including optometrists, technicians, and administrative personnel, to ensure efficient operation and support for the students.

**13. Professional Development:**

Organize workshops or training sessions for students and staff to keep them updated on the latest practices, technologies, and advancements in optometry.

**14. Patient Feedback Management:**

Collect and review patient feedback to assess the quality of care provided by students and identify opportunities for improvement in training.

**15. Resource Management:**

Ensure the availability of clinical supplies, educational materials, and other resources required for training and patient care.

**16. Conflict Resolution:**

Address and resolve any conflicts or issues arising between students, patients, or clinic staff.

**9-Quality assurance process in the program**

**The quality assurance process is carried out through four stages:**

**1. Planning and documentation:**

- Determine the program's development plans – its mission and educational objectives, the courses it covers, the main learning outcomes in the form of targeted learning outcomes, what instructional strategies should be used to develop this learning, how the teaching and learning evaluation will occur, and the quality of the course must be evaluated. Once developed, these

specifications are followed continuously, although they may be modified from time to time as a result of experience or changing circumstances.

- For each course, certain specifications are prepared so that it is clear to the course instructors what they will teach, what their contribution to the whole program, and how their effectiveness should be measured. Course specifications are also applied continuously according to the changes necessary as a result of the experiment. In programs with field experience components (e.g., cooperative training), field experience profiles are prepared to determine planning, organizational arrangements and processes for evaluation.
- At the end of each year (or each time the course is taught repeatedly), reports are prepared by the professor who taught each course that determine what happened during the course and provide a summary of the students' results. These reports must be handed over to the programme coordinator.
- When the programme coordinator receives the rapporteur's reports, he or she prepares the programme report recording the main information on the progress of the program in the year concerned, with notes on any recommendations for improvement that need to be made to the specifications.
- Record any modifications in the program or courses made in both the program and course specifications, and record the reasons for these changes.
- Identify the performance indicators to be calculated, as will be explained later in this document.

## **2. Implementation:**

- Collect data from course reports
- Collection of data from performance indicators
- Annual Report of the Program
- Making the operational plan of the program

## **3. Monitoring results**

- Extracting recommendations from course reports
- Calculation and analysis of performance indicators
- Calculation of the percentage of completion in the operational plan

#### **4. Performance Appraisal**

- Compare the annual report with the previous year
- Comparison of performance indicators for the current year with the previous year and with equivalent external program.
- Evaluation of achievement in the operational plan
- Identify strengths and weaknesses
- Review weaknesses identified in performance appraisal.
- Prioritize areas that require immediate attention.
- Set clear goals for each area of improvement.

#### **5. Improvement Plan**

##### **1. Identify areas for improvement**

- Review weaknesses identified in performance appraisal.
- Prioritize areas that require immediate attention.
- Set clear goals for each area of improvement.

##### **2. Business Plan Development**

- Define SMART goals for each area (specific, measurable, achievable, relevant, and time-bound)
- Establish clear steps to achieve these goals.
- Define responsibilities for each team member.
- Set deadlines for each step.

##### **3. resource allocation**

- Identify the resources needed to implement improvement actions.
- Ensure the availability of these resources.
- Allocate the budget and other necessary resources in accordance with the plan.

##### **4. Implementation**

- Implement optimization actions as planned.
- Monitor progress regularly.
- Make adjustments to the plan as needed based on feedback and challenges you face.

## 5. Monitoring and evaluation

- Identify key performance indicators (KPIs) to measure the success of improvement actions.
- Conduct regular reviews of progress and provide updates to the team.
- Modify the plan as needed based on the evaluation of performance indicators.

## 6. Feedback and continuous improvement

- Gather feedback from stakeholders on the improvement process.
- Identify any additional areas that require improvement.
- Ensure that improvement is an ongoing process by regularly reviewing the plan and making the necessary adjustments.



Figure 5 Quality Assurance Cycle

## 10. Program Learning Outcomes Assessment Plan

### Overview

Program Learning Outcomes Assessment focuses on how and to what extent learning outcomes contribute to the overall learning, growth, and development of students. This evaluation plan outlines strategies and methods for assessing the learning outcomes of the program and ensuring continuous improvement.

- Program Learning Outcomes:



- The program has defined a set of learning outcomes as outlined in the program specifications, which are aligned with the Saudi National Qualifications Framework (NQF), including:
  - 6 Learning outcomes in the field of knowledge and understanding
  - 6 Skills learning outcomes
  - 2 Learning outcomes in the field of values
  - Methods of Assessing Program Learning Outcomes: To assess the achievement of the learning outcomes of the program, the following assessment methods will be used:

**1. Live Ratings:**

- Each student's achievement of curriculum outcomes should be assessed by:
  - Course exams (final exams, midterm exams, continuous assessments, laboratory practical examinations, clinical assessments).
  - A comprehensive written and oral exam after completing the final year of the exit exam.

**2. Indirect assessments:**

- Performance in any national licensing examination
- Graduation completion rates.
- Graduate employment rates.
- Other sources of information tracked such as: annual alumni surveys, employer surveys, alumni surveys, student experience surveys.
- Self-assessment report reviewed by external experts.

**Evaluation Timeline:**

Learning outcomes are assessed at different points throughout the program:

- Written exams at the end of the relevant coursework.
- Group projects and evaluations by colleagues in customized courses.
- Comprehensive exams at the end of the last year of study.
- Analysis of assessments from questionnaires and surveys.

**Data collection and analysis:**

Data is evaluated using a combination of two types of assessment methods. Descriptive statistics will be used to evaluate quantitative data such as exam scores and rubric-based assessments. Objective analysis is applied to qualitative data such as written reports, case studies, questionnaires, and recommendations in the operational plan

**Report and continuous improvement:**

The results of the assessment are reported and shared with faculty, program directors, and other relevant stakeholders. The results are used to guide curriculum adjustments, teaching strategies, and program improvements. The evaluation plan is reviewed regularly to ensure its success and alignment with the program objectives.

**References:**

1. [Guide to Quality System in Academic Programs at Qassim University](#)
2. [Guide to periodic opinion polls and unified performance indicators for academic programs](#)
3. [Quality Policy and System Guide at Qassim University](#)
4. [Report of the results of periodic questionnaires to evaluate the quality of the academic program](#)
5. [Report of the results of the annual performance indicators of the academic program](#)

This KPI policy is designed to ensure accountability, foster improvement, and enhance the quality of education to align with Saudi Arabia's strategic goals for higher education.

**Key Performance Indicators (KPI) Policy for the OD Program****1. Purpose of the KPI Policy**

The purpose of this KPI policy is to establish a framework for measuring, evaluating, and improving the performance and quality of academic programs at our institution in line with national and international standards. This policy also aligns with Saudi Arabia's Vision 2030 goals for education, emphasizing excellence, innovation, and student-centered learning.

## 2. Scope

This policy applies to all academic programs offered by the institution and is designed to ensure consistent, transparent, and effective monitoring of program outcomes.

## 3. Objectives

- To track the performance and effectiveness of academic programs.
- To ensure alignment with the institution's strategic goals and Saudi Arabia's Vision 2030 objectives.
- To foster continuous improvement through data-driven decision-making.

## 4. Key Performance Indicator Categories

The KPIs are grouped into key areas to cover multiple facets of academic program performance:

### 1. Student Outcomes

- **Graduation Rate:** Percentage of students who graduate within the expected time frame.
- **Retention Rate:** Percentage of students who continue in the program each academic year.
- **Employment Rate:** Percentage of graduates employed in their field within six months after graduation.
- **Student Satisfaction:** Average rating from student satisfaction surveys related to teaching, curriculum, and resources.
- **Alumni Success:** Percentage of alumni who achieve career advancement or professional certifications.

### 2. Teaching and Learning Quality

- **Faculty Qualification and Development:** Percentage of faculty members with doctoral qualifications and completion of continuous professional development activities.
- **Student-Teacher Ratio:** Average number of students per teacher in the program.
- **Course Completion Rate:** Percentage of students who complete courses on time each semester.

- **Program Accreditation:** Status of program accreditation by national and international accreditation bodies.

### 3. Research and Innovation

- **Research Publications:** Number of research publications authored by faculty members annually.
- **Student Research Participation:** Percentage of students participating in research or innovation activities.
- **Research Funding:** Amount of research funding acquired from external sources.
- **Industry Collaboration:** Number of collaborations or partnerships with industry for research, internships, and projects.

### 4. Administrative Efficiency

- **Resource Allocation:** Percentage of allocated resources utilized within the program budget.
- **Academic Advising Efficiency:** Average student satisfaction score for academic advising services.
- **Time to Resolution for Student Concerns:** Average time to resolve student complaints and concerns.

### 5. Community Engagement and Societal Impact

- **Community Service Participation:** Percentage of students and faculty engaged in community service or outreach activities.
- **Program Visibility and Reputation:** Number of media or community engagements that highlight program achievements.
- **Graduate Contributions:** Number of graduate-led initiatives contributing to local or national development.

### 5. Data Collection and Reporting

- **Frequency:** Data for KPIs should be collected, reviewed, and reported annually to allow for trend analysis and timely adjustments to the program.
- **Data Sources:** KPI data should be gathered from student records, alumni surveys, faculty reports, research publications, and institutional databases.

- **Reporting Responsibility:** Program heads and administrative staff are responsible for compiling and analyzing KPI data, and reporting to the Academic Quality Assurance Committee.

## **6. Review and Action Planning**

- **Annual Review:** The KPI results will undergo an annual review by the Academic Quality Assurance Committee to assess performance against targets.
- **Improvement Plan:** Where KPIs do not meet established benchmarks, a specific action plan should be developed and implemented.
- **Continuous Feedback:** Stakeholder feedback will be integrated into the review process to ensure relevance and improvement of KPIs over time.

## **7. KPI Benchmarking**

KPI benchmarks will be set based on past performance, comparable academic programs, and goals aligned with Vision 2030. Benchmarking will also take into account standards from regional and global institutions.

## **8. Policy Review Cycle**

This KPI policy will be reviewed every three years to ensure alignment with evolving institutional goals and national educational objectives.

## **9. Accountability and Compliance**

- **Compliance Monitoring:** The Office of Institutional Effectiveness will monitor compliance with the KPI policy.
- **Reporting to Stakeholders:** Annual KPI reports will be shared with internal stakeholders and submitted to relevant national accreditation authorities

## **10-Key Performance Indicators (KPIs):**

### **1. Purpose**

The purpose of this policy is to define the standards and procedures for ensuring the accuracy, reliability, and effectiveness of Key Performance Indicators (KPIs) used within the Development (OD) program. This policy ensures that KPIs are properly defined, monitored, and evaluated to support strategic objectives, performance improvement, and continuous development.

### **2. Scope**

This policy applies to all KPIs related to the Development (OD) program. It includes the definition, measurement, monitoring, and reporting of KPIs to evaluate the effectiveness and efficiency of OD initiatives, ensuring alignment with overall goals.

### **3. Policy Statement**

The OD Program Quality Assurance (QA) aims to ensure the integrity of all KPIs utilized to measure the success and impact of development efforts. This includes the establishment of clear, reliable, and actionable KPIs, accurate data collection, continuous monitoring, regular reviews, and prompt corrective actions to ensure the program's KPIs reflect the desired outcomes and are consistently met.

### **4. KPI Definition and Alignment**

- a. **Alignment with Organizational Goals:** All KPIs must be directly aligned with the strategic objectives and goals of the organization.
- b. **SMART Criteria:** KPIs must be SMART (Specific, Measurable, Achievable, Relevant, Time-bound) to ensure clarity and actionable insights.
- c. **Clear Methodologies:** KPIs should have clearly defined measurement methodologies, including formulas, data sources, and calculation procedures to ensure consistency.

## **5. Data Collection and Integrity**

- a. **Data Sources:** Data used to calculate KPIs must come from reliable and validated sources. These could include internal databases, surveys, financial systems, and operational logs.
- b. **Automation:** Where possible, data collection and processing should be automated to minimize errors and inconsistencies.
- c. **Data Validation:** All data used for KPI calculations must undergo validation checks to ensure its accuracy, completeness, and consistency. This includes data cleaning, handling missing data, and resolving discrepancies.

## **6. Monitoring and Reporting**

- a. **Real-time Monitoring:** KPIs will be monitored in real time (if applicable) using automated dashboards and tools to ensure immediate access to performance data.
- b. **Frequency of Reporting:** KPI performance should be reported regularly, based on the specific needs of the OD program. This could be daily, weekly, monthly, or quarterly, depending on the nature of the KPI.
- c. **Stakeholder Communication:** KPI results and analysis will be communicated to relevant stakeholders, including senior leadership, OD teams, and departments involved in achieving the KPIs.

## **7. Review and Analysis**

- a. **Regular Reviews:** KPIs should be reviewed at regular intervals (monthly, quarterly) to ensure they remain relevant and accurately reflect performance.
- b. **Trend Analysis:** Historical trends should be analyzed to detect patterns, predict future performance, and identify areas for improvement.
- c. **Anomaly Detection:** Any significant deviations from expected KPI values should trigger an immediate investigation to identify causes and implement corrective measures.

## **8. Continuous Improvement**

- a. **Corrective Actions:** In case of underperformance, root cause analysis will be conducted to understand the reasons behind deviations from targets. Corrective actions will be put in place to address gaps or inefficiencies.

- b. Feedback Mechanism: Continuous feedback from stakeholders, including employees, team leaders, and external partners, will be solicited to improve the KPI system and adapt to changing organizational needs.
- c. KPI Adjustments: KPIs should be updated or refined as necessary to better align with organizational goals, respond to feedback, or reflect changes in operational strategies.

## **9. Training and Capacity Building**

- a. Staff Training: All staff involved in the OD program will receive training on the significance of KPIs, their role in data collection and monitoring, and the tools used for KPI management.
- b. KPI Awareness: Teams will be educated on how KPIs impact decision-making, performance, and the continuous improvement process.

## **10. Accountability and Ownership**

- a. KPI Ownership: Each KPI will have a designated owner responsible for its accuracy, monitoring, and reporting.
- b. Accountability: The KPI owners are accountable for ensuring the correct data is collected, the KPI is calculated accurately, and deviations are promptly addressed.
- c. Documentation: Detailed records of KPI calculations, reviews, and corrective actions will be maintained to ensure transparency and auditability.

## **11. Compliance**

- a. Adherence to Standards: All KPI-related processes and procedures must comply with relevant internal standards, policies, and regulatory requirements.
- b. Audit Process: Regular internal audits will be conducted to ensure that KPI processes are being followed, and any discrepancies or issues are identified and resolved.

## **12. Roles and Responsibilities**

- a. OD Program Leadership: Responsible for the overall strategic alignment of KPIs with organizational goals, approving new KPIs, and ensuring resources for monitoring.
- b. KPI Owners: Responsible for the accurate calculation, monitoring, and reporting of assigned KPIs.



- c. Data Analysts: Ensure that the data used for KPI reporting is accurate, complete, and validated.
- d. Stakeholders: Provide feedback and insights to help refine KPIs and ensure they remain aligned with organizational needs.

### **13. Policy Review and Updates**

This policy will be reviewed annually, or as needed, to ensure it reflects changes in organizational priorities, operational strategies, or industry best practices.

Updates to the policy will be communicated to all relevant stakeholders to ensure ongoing alignment and effectiveness.

## **Quality Assurance Policy for Program and Course Learning Outcomes**

### **1. Purpose**

The purpose of this policy is to establish a framework for ensuring the quality, consistency, and alignment of Program and Course Learning Outcomes (PLOs and CLOs) within the Organizational Development (OD) program. This policy aims to ensure that all learning outcomes effectively reflect the program's strategic goals, meet academic standards, and foster student success through continuous improvement.

### **2. Scope**

This policy applies to all aspects of learning outcomes within the OD program, including the development, alignment, assessment, and review of both Program Learning Outcomes (PLOs) and Course Learning Outcomes (CLOs). It encompasses the entire curriculum, teaching methods, assessments, and evaluation processes to ensure that learning outcomes are achieved.

### **3. Policy Statement**

The Quality Assurance (QA) for Learning Outcomes Policy is committed to the continuous monitoring and improvement of learning outcomes at both the program and course levels. The OD program ensures that learning outcomes are clearly defined, measurable, and aligned with the program's objectives, industry standards, and best

practices. Regular reviews, assessments, and feedback mechanisms will be implemented to guarantee that learning outcomes meet educational goals and foster student development.

## **Quality Assurance Policy for Program and Course Learning Outcomes**

### **2. Learning Outcome Definition and Alignment**

- a. Program Learning Outcomes (PLOs): PLOs define the knowledge, skills, and competencies that students are expected to demonstrate upon completion of the OD program. These outcomes should be aligned with the program's mission and goals, as well as industry standards and professional requirements.
- b. Course Learning Outcomes (CLOs): CLOs define the specific knowledge, skills, and competencies that students should acquire by the end of each course within the program. CLOs must align with the corresponding PLOs to ensure coherence and progressive learning throughout the curriculum.
- c. Alignment with QU Goals: Both PLOs and CLOs must align with the overarching goals and values of the QU and the OD program. This ensures that the curriculum is relevant to both the academic community and the workforce.

### **3. Learning Outcome Development and Review**

- a. Clear and Measurable Outcomes: Learning outcomes must be clearly defined and measurable, using verbs that demonstrate the intended level of knowledge or skills (e.g., analyze, create, evaluate). This ensures clarity and facilitates assessment.
- b. Regular Review and Revision: Learning outcomes should be reviewed and revised regularly (e.g., annually or as needed) to ensure they remain relevant, accurate, and aligned with current industry practices, academic standards, and the evolving needs of the OD program.
- c. Stakeholder Involvement: The development and review of learning outcomes should involve faculty, industry experts, and other stakeholders to ensure that the program and course content are aligned with current trends and demands.

### **4. Assessment of Learning Outcomes**

- a. Direct and Indirect Assessments: Learning outcomes should be assessed through both direct (e.g., exams, projects, assignments) and indirect (e.g., surveys, self-assessment) measures to gather comprehensive data on student performance.
- b. 6.2. Rubrics and Grading Criteria: Rubrics should be developed for each assessment task to ensure consistent evaluation of student performance against specific learning outcomes.
- c. 6.3. Continuous Assessment: Assessment of learning outcomes should occur throughout the course and program, not just at the end, to provide ongoing feedback to students and faculty.
- d. 6.4. Thresholds for Achievement: Clear thresholds for what constitutes acceptable performance for each learning outcome should be defined. These thresholds should be used to assess whether students have met the required standards.

## **5. Monitoring and Reporting**

- a. Regular Monitoring of Student Progress: Student performance in relation to learning outcomes should be monitored regularly using both formative and summative assessments.
- b. Data Collection and Analysis: Data related to the achievement of learning outcomes should be collected systematically, analyzed for trends, and used to identify areas for improvement.
- c. Reporting Mechanisms: Reports on the achievement of learning outcomes should be shared with relevant stakeholders, including faculty, program administrators, and accreditation bodies, to maintain transparency and accountability.

## **6. Feedback and Continuous Improvement**

- a. Student Feedback: Student feedback on course content, teaching methods, and learning outcomes should be gathered through surveys, focus groups, or course evaluations. This feedback helps identify strengths and areas for improvement.
- b. Faculty and Stakeholder Feedback: Feedback from faculty members, industry experts, and other relevant stakeholders should be solicited to ensure learning outcomes reflect both academic standards and practical, industry-relevant skills.
- c. Curriculum Review and Adjustment: Based on feedback and assessment results, curriculum adjustments may be made to enhance the alignment of learning

outcomes with program goals, improve teaching methods, and enhance student success.

## **7. Accountability and Ownership**

- a. Ownership of Learning Outcomes: Each course and program learning outcome will have a designated owner, typically the course instructor or program coordinator, who is responsible for ensuring that the outcome is met, assessed, and reported.
- b. Accountability for Meeting Learning Outcomes: Faculty members are accountable for designing, delivering, and assessing learning activities that align with the established learning outcomes. Faculty should also ensure timely feedback is provided to students.
- c. Transparency: The process for developing, assessing, and reviewing learning outcomes will be transparent, and relevant stakeholders will be informed of any changes or updates.

## **8. Professional Development and Training**

- a. Faculty Training: Faculty members will receive regular training on best practices for developing, assessing, and improving learning outcomes. This includes workshops on effective assessment techniques, alignment of CLOs with PLOs, and methods for continuous improvement.
- b. Ongoing Development: Faculty will be encouraged to engage in continuous professional development to stay updated on new methodologies, technologies, and trends in higher education and the OD field.

## **9. Compliance**

- a. Adherence to Accreditation Standards: The development and assessment of learning outcomes will comply with relevant accreditation standards, national and international academic standards, and professional certification requirements.
- b. Regular Internal Audits: Regular internal audits will be conducted to ensure compliance with this policy, including an examination of the alignment of learning outcomes with program goals, the effectiveness of assessments, and the use of data for improvement.

## **10. Policy Review and Updates**

This policy will be reviewed on an annual basis or as needed to ensure it reflects changes in educational practices, industry needs, and the strategic direction of the OD program.

Any updates to the policy will be communicated to faculty, administrators, and other stakeholders to ensure consistency and adherence to the revised standards.

## References

1. Development and Quality Deanship, Qassim University, “Quality System of Academic Programs at Qassim University”, On-Line: <https://qa.qu.edu.sa/files/shares/handbooks/Quality%20System%20of%20Academic%20Programs.pdf>
2. NCAAA, National Programmatic Accreditation Forms, On-Line: <https://www.etc.gov.sa/en/productsandservices/NCAAA/AccreditationProgrammatic/Pages/Forms.aspx>