

Title: Quality Assurance and Enhancement Policy Code: GU-PL11QAE Version: 1 Date of Issue: 2017 Effective Date: September 2017 Approval Authority: Board of Trustees Document Owner: Director of Quality Assurance and Development Center Review: The policy is subject to a periodic review every 4 years or in a shorter cycle as per amendments of regulations

1. Purpose

The purpose of this policy is to ensure Gulf University commitment towards quality culture and continuous improvement. The policy entails the Quality Assurance Development Framework of the University and underpins the governance and management of academic and administrative Departments and Units.

2. Scope

This policy applies to:

- All Colleges, Departments, Units, Offices (both Academic and Administrative), Councils, Committees and their functions at Gulf University.
- All internal and external stakeholders contributing to meet the strategic directions of the University

3. Abbreviations

BQA	Education and Training Quality Authority
DHR	Directorate of Higher Education Review
GDQ	General Directorate of Qualifications
HEC	Higher Education Council
NQF	National Qualifications Framework
QA	Quality Assurance
QADC	Quality Assurance and Development Center
U-QAC	University Quality Assurance Committee
C-QAC	College Quality Assurance Committee

4. **Definitions**

Quality: Quality is defined as 'fitness for purpose', and the purpose stems from University Vision and Mission statements.

Quality Assurance: Quality Assurance refers to the process of monitoring and evaluating the extent to which the University and its Colleges, Departments, Units, and individuals are performing as per the desired standards.

Continuous Improvement: Continuous improvement refers to ongoing process of change to enhance performance and practices at functional level.

5. Policy Statement

Gulf University's endeavor to disseminate culture of quality is demonstrated through Quality Assurance and Development Framework which adheres to the standards and regulations of regulatory bodies: HEC, BQA (DHR and GDQ). The policy has external reference points to well recognized international standards of accreditation bodies across developed countries. Quality Assurance Policy depicts the quality assurance system in order to achieve excellence in academics and research, and to monitor the effectiveness of its implementation.

6. Policy Details

- 6.1 Gulf University ensures governance and management of all Academic and Administrative Departments, Units, Councils and Committees across the University.
- 6.2 Gulf University ensures full compliance with the HEC regulations and Institutional Accreditation standards, GDQ regulations and NQF standards, and DHR standards for Programs within College review.
- 6.3 Gulf University is committed for consistent implementation of Quality Assurance and Development Framework across the University with focus on continuous improvement.
- 6.4 Gulf University commits to support and monitor implementation of best quality practices through wide range of policies and procedures in key areas of admission and enrollment, program design, review and development, certification and authentication, teaching and learning, assessment design, moderation and verification.

- 6.5 Gulf University ensures provision feedback, through regular and ad -hock audits, to Colleges and Administrative Units on their performance and compliance with University policies and procedures.
- 6.6 Gulf University ensures comprehensive internal quality audit to serve preparations for Institutional Listing and Qualifications Placement on NQF.
- 6.7 Gulf University ensures that both U-QAC and C-QAC play vital role to promote the quality culture and support the University and College leaderships in its adherence and application of internal and external quality standards.

7. **Responsibilities**

Faculty members are responsible for:

• Following and implementing this policy appropriately.

Heads of Departments are responsible for:

- Ensuring that all faculty members and students are fully informed of this policy.
- Implementing this policy appropriately.

Deans are responsible for:

- Ensuring that all faculty members follow this policy.
- Implementing this policy appropriately.

QADC is responsible for:

- Ensuring that all academic and administrative staff members and students are fully informed of this policy.
- Implementing this policy appropriately.

U-QAC and C-QAC are responsible for:

• Following and implementing this policy appropriately.

Director of QADC is responsible for:

• Systematic review of the effectiveness of this policy as custodian.

6. Related Policies

- Program Review and Development Policy
- Program Design, Development and Approval Policy
- Policy of Mapping Programs to National Qualifications Framework
- Quality Assurance and Development Framework

7. Related Procedures

• Quality Audit Procedures

8. Related References and Standards

BQA	National Qualifications Framework Handbook
BQA	Programs-within-College Reviews Handbook
HEC	Institutional Accreditation Handbook



Title: Quality Assurance Audit Procedures

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Review: The procedures are subject to periodic reviews in accordance with amendments of Quality Assurance and Development Framework

1. Purpose

This document describes how Gulf University's Quality Assurance Audit will be implemented. The Procedures document aims to ensure that implementation of the quality assurance audit process is standardized across the University.

2. Scope

These procedures apply to quality assurance audit of all Colleges, Departments, Units, Offices (Academic and administrative) and Committees at Gulf University.

3. Acronyms

A-QAC	Administrative Quality Assurance Coordinator
BQA	Education and Training Quality Authority
C-QAC	College Quality Assurance Committee
HEC	Higher Education Council
NQF	National Qualification Framework
QA	Quality assurance
QADC	Quality Assurance and Development Center
U-QAC	University Quality Assurance Committee

4. Definitions

Course Portfolio: Course portfolio is an exhibition of a course on what faculty member do as instructor and what students do as learners. It includes documents and materials, which collectively, are collections of teaching artifacts (i.e., syllabi, assignments, reports, evidence of student learning and achievements) that reflect the scope and quality of instructor's teaching performance, strength and accomplishments.

Administrative Quality Assurance Coordinator: A-QAC is a staff member at one of Supportive Units, Offices and Administrative Departments, appointed annually as a member of U-QAC to monitor and follow up Quality Standards relevant to administrative procedures, processes and services which support the academic process at Gulf University, and to find out whether these standards and related University requirements are met or not.

5. Procedure Details

- QADC shall identify the following areas for quality assurance audit: College and department Governance; Admission & Registration; Transfer and Progression of students; Program design and development, Program review and development; Mapping of academic programs to NQF level descriptor; Teaching and learning; Assessment design; Implementation of Assessment verification and moderation procedures; Implementation of Plagiarism policy and Procedure; Academic advising; Research and community engagement, Process of certification, authentication and retention; Internal and external stakeholder feedback analysis; Advisory Board; External Reviewer; Continuous improvement of all quality assurance process related to institutional listing standards etc.
- Internal Audit Checklist comprises of all the relevant areas and associated details of the documents to be audited in a comprehensive and rigorous manner. This ensures quality assurance audit procedure complying with University Policies, Procedures and NQF institutional listing standards.
- Quality Assurance Audit process shall be conducted for academic constituents of the University through 2 cycles during each academic year (as detailed in this document).
- Quality Assurance Audit process shall be conducted annually for administrative departments at the University. The audit process also shall include how risk and business continuity assessment exercises are implemented to identify the level of risk with the proper recovery plan and how the compliance with HEC regulations is met and documented at each administrative department of the University.

A. Quality Assurance Audit (First Cycle)

5.1 Notification of QA Audit

Quality Assurance Center shall notify (in May every academic year) all academic constituents of the University (Colleges, Departments, Units, Offices and Committees) with the quality assurance audit schedule (first cycle). The audit shall be conducted in October in the following academic year.

5.2 Preparation for QA Audit

5.2.1 Once notified, Colleges and Departments shall prepare the following:

- Course Portfolios for Spring and Summer semesters,
- Minutes of meetings for College and Department Councils, and for College Committees,
- Program review and development files

- Files of Development in Teaching and learning
- Files of Assessment Verification and Moderation
- Files of Academic Advising
- Files of Research
- Files of Community Engagement and extra-curricular activities
- File of College operational plan and improvement plans
- File of budget plans and allocations
- Files of utilization and development of staff, physical and learning resources
- File of National and International relations
- File of Plagiarism Policy, Procedure and implementation
- File of Department Advisory Board
- File of External Reviewers
- File of Internal and External Stakeholders Feedback analysis
- File of Mapping of Program Courses to NQF level
- List of additional required files shall be sent.
- 5.2.2 Once notified, Academic Committees shall prepare the following:
 - Minutes of meetings,
 - File (with evidences) of executed Committee duties,
 - File (with evidences) of communications,
 - Annual or semester report of the Committees at College and University levels.

List of additional required files shall be sent.

5.2.3 Once notified, Supportive Units and Offices shall prepare the following:

- Minutes of meetings
- File of Admission and Registration along with implemented forms,
- File of Certification and Authentication,
- File (with evidences) of executed Scope of Work,
- File of budget plan and allocations,
- File (with evidences) of operational and improvements plans,
- File of e-Learning Unit,
- File of Library,
- File of Student Services Unit,

List of additional required files shall be sent to each Unit according to the type and Scope of Work of the unit.

- 5.2.4 College Quality Assurance Committee (C-QAC) shall collaborate with Deans, Heads of Departments, Committees Chairpersons and Staff to prepare the required documents and evidences. C-QAC shall also provide advice on the QA Audit.
- 5.2.5 QADC shall conduct an initial visit to Colleges, Departments, academic committees, Supportive Units and Offices in June-July to oversee preparation for the scheduled audit of September/October, shall provide with the additional required files and evidences.
- 5.2.7 Colleges, Departments, Academic Committees, Supportive Units and Offices shall prepare and send brief reports on the prepared files and evidences, to QADC, preferably within $1^{st} 2^{nd}$ week of September.

5.3 Conducting QA Audit (First Cycle)

- 5.3.1 Director of QADC shall appoint the Audit Team, in 3rd week of September, which is headed by the Director of QADC and includes QADC Staff (Coordinators) with Colleges' Quality Assurance Committees (C-QACs).
- 5.3.2 Audit Team shall send the comprehensive internal audit checklist to the HODs, Deans, Chairpersons of the Committees at University and College levels, Head of Units and Offices to prepare the relevant documents at least 15 days prior to audit.
- 5.3.3 Audit Team shall conduct the audit visit in $1^{st} 2^{nd}$ weeks of October. The audit shall include the following:
 - checking files and evidences,
 - meetings with the management, staff, and students. (Form GU-PR14QAA-F01)

Audit Team shall note the observations, may ask for additional files and evidences, may collect some file and evidences, and may conduct additional meetings with relevant personnel. Audit Team shall report to Director of QADC.

- 5.3.4 Director of QADC shall send an audit report (Form GU-PR14QAA-F02) to relevant Colleges, Departments, Academic Committees, Supportive Units and Offices in $3^{rd} 4^{th}$ week of October. The report shall address the outcomes of the audit visit including observations, remarks and recommendations.
- 5.3.5 Director of QADC shall submit a brief report on first-cycle audit to University President and U-QAC, for review and approval of recommendations.
- 5.3.6 U-QAC shall collaborate with C-QACs to clarify the observations and recommended actions for enhancement.
- 5.3.7 Colleges, Departments, Academic Committees, Supportive Units and Offices shall prepare and send to QADC their improvement plans, within 4 weeks after receiving the audit report.
- 5.3.8 Audit Team shall conduct follow-up visits to audit implementation of improvement plans and shall report to U-QAC.
- 5.3.9 Director of QADC shall send the final report on first-cycle quality assurance audit to University President, University Council and U-QAC, at the end of the fall semester.

B. Quality Assurance Audit (Second Cycle)

5.4 Notification of QA Audit

QADC shall notify (in January every academic year) all academic constituents of the University (Colleges, Departments, Units, Offices and Committees) with the quality assurance audit schedule (second cycle). The audit shall be conducted in March same academic year.

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5.5.1 Once notified, Colleges and Departments shall prepare the following:

- Course Portfolios for Spring and Summer semesters,
- Minutes of meetings for College and Department Councils, and for College Committees,
- Program review and development files,
- Files of Development in Teaching and learning,
- Files of Assessment Verification and Moderation,
- Files of Academic Advising.
- Files of research,
- Files of community engagement and extra-curricular activities,
- File of College operational plan and improvement plans,
- File of budget plans and allocations,
- Files of utilization and development of staff, physical and learning resources,
- File of national and international relations,
- File of Plagiarism Policy, Procedure and implementation
- File of Advisory Board
- File of External Reviewers
- File of Internal and External stakeholders Feedback analysis
- File of Mapping of Program Courses to NQF level
- List of additional required files shall be sent.
- 5.5.2 Once notified, Academic Committees shall prepare the following:
 - Minutes of meetings,
 - File (with evidences) of executed committee duties,
 - File (with evidences) of communications,
 - Annual or semester report of the Committees at College and University levels

List of additional required files shall be sent.

- 5.5.3 Once notified, Supportive Units and Offices shall prepare the following:
 - Minutes of meetings
 - File of Admission and Registration along with implemented forms
 - File of Certification and Authentication
 - File (with evidences) of executed Scope of Work,
 - File of budget plan and allocations,
 - File (with evidences) of operational and improvements plans
 - File of e-Learning Unit
 - File of Library
 - File of Student Services Unit

List of additional required files shall be sent to each Unit according to the type and scope of work of the unit.

5.5.4 College Quality Assurance Committee (C-QAC) shall collaborate with Deans, Heads of Departments, Committees Chairpersons and Staff to

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prepare the required documents and evidences. C-QAC shall also provide advice on the QA Audit.

- 5.5.5 QADC shall conduct an initial visit to Colleges, Departments, academic committees, Supportive Units and Offices within 1st week of February to oversee preparation for the scheduled audit in March, shall provide with the additional required files and evidences.
- 5.5.7 Colleges, Departments, Academic Committees, Supportive Units and Offices shall prepare and send brief reports on the prepared files and evidences, to QADC, within $3^{rd} 4^{th}$ week of February.

5.6 Conducting QA Audit (Second Cycle)

- 5.6.1 Director of QADC shall appoint Audit Team, in 3rd week of semester, which is headed by the Director of QADC and includes QADC Staff (Coordinators) with College Quality Assurance Committees (C-QACs).
- 5.6.2 Audit Team shall send the comprehensive internal audit checklist to the HODs, Deans, Chairpersons of the Committees at University and College level, Head of Units and Offices to prepare the relevant documents at least 15 days prior to audit.
- 5.6.3 Audit Team shall conduct the audit visit in 2nd 3rd week of March. The audit shall include the following:
 - checking files and evidences,
 - meetings with the management, staff, and students.

Audit Team shall note the observations, may ask for additional files and evidences, may collect some file and evidences, and may conduct additional meetings with relevant personnel, (Form GU-PR14QAA-F01).

- 5.6.4 Director of QADC shall send an audit report (Form GU-PR14QAA-F02) to relevant Colleges, Departments, Academic Committees, Supportive Units and Offices within 1-2 weeks after the audit. The report shall address the outcomes of the audit visit including observations, remarks and recommendations.
- 5.6.5 Director of QADC shall submit a brief report on second-cycle audit to University President and U-QAC, for review and approval of recommendations.
- 5.6.6 U-QAC shall collaborate with C-QACs to clarify the observations and recommended actions for enhancement.
- 5.6.7 Colleges, Departments, Academic Committees, Supportive Units and Offices shall prepare and send to QADC their improvement plans, within 4 weeks after receiving the QADC audit report (second cycle).
- 5.6.8 Audit Team shall conduct follow-up visits to audit implementation of improvement plans and shall report to U-QAC.
- 5.6.9 Director of QADC shall send the final (annual) report on quality assurance audit based on first and second-cycle audits, to University President, University Council and U-QAC at 3rd Week of June.

C. Quality Assurance Audit (Administrative Departments)

5.7 Notification of QA Audit

QADC shall notify (at the beginning of May every academic year) all administrative departments at the University with the annual quality assurance audit schedule. The audit shall be conducted before end of June same academic year.

5.8 Preparation for QA Audit

- 5.8.1 Once notified, the administrative departments shall prepare the following:
 - Minutes of meetings,
 - File (with evidences) of executed Scope of Work,
 - File of budget plan and allocations,
 - File (with evidences) of operational and improvements plans.

List of additional required files shall be sent to each department according to relevant Scope of Work.

- 5.8.2 Administrative Quality Assurance Coordinator (A-QAC) shall collaborate with the Managers of administrative departments and staff to prepare the required documents and evidences. The Coordinator shall also provide advice on the QA Audit.
- 5.8.3 QADC shall conduct an initial visit to administrative departments within 2nd week of May to oversee preparation for the scheduled audit in June, shall provide with the additional required files and evidences.
- 5.8.4 Administrative departments shall prepare and send brief reports on the prepared files and evidences, to QADC, within $3^{rd} 4^{th}$ week of May.

5.9 Conducting QA Audit

- 5.9.1 Director of QADC shall appoint Audit Team, which is headed by the Director of QADC and includes QADC Staff (Coordinators) with Administrative Quality Assurance Coordinator (A-QAC).
- 5.9.2 Audit Team shall send the comprehensive internal audit checklist to the managers to prepare the relevant documents at least 15 days prior to audit.
- 5.9.3 Audit Team shall conduct the audit visit in 2^{nd} 3^{rd} week of June. The audit shall include the following:
 - checking files and evidences,
 - meetings with the management and staff.

Audit Team shall note the observations, may ask for additional files and evidences, may collect some file and evidences, and may conduct additional meetings with relevant personnel.

- 5.9.4 Director of QADC shall send an audit report (Form GU-PR14QAA-F02) to relevant Managers within 1-2 weeks after the audit. The report shall address the outcomes of the audit visit including observations, remarks and recommendations.
- 5.9.5 Director of QADC shall submit a brief report on the audit to University President and U-QAC, for review and approval of recommendations.
- 5.9.6 U-QAC shall collaborate with A-QAC to clarify the observations and recommended actions for enhancement.
- 5.9.7 Administrative department shall prepare and send to QADC their improvement plans, within 3 weeks after receiving the QADC audit report.
- 5.9.8 Audit Team shall conduct follow-up visits to audit implementation of improvement plans and shall report to U-QAC.
- 5.9.9 Director of QADC shall send the final (annual) report on quality assurance audit to University President, University Council and U-QAC before end the academic year.

D. Ad hoc Quality Assurance Audit

- 5.10 QADC shall conduct ad hoc audits during the academic year with focus on particular issues according to the University's internal and external obligations.
 - 5.10.1 QADC shall send short notice to the concerned College, Department, Academic Committee, Supportive Unit, Office or Administrative Department along with the audit schedule.
 - 5.10.2 The concerned constituent shall prepare the required files and evidences according to the schedule.
 - 5.10.3 QADC shall conduct the ad hoc audit (Form GU-PR14QAA-F01), and shall send the audit report, (Form GU-PR14QAA-F02) to the concerned constituent and to U-QAC within one week after the audit. The report shall address the outcomes of the audit visit including observations, remarks and recommendations.
 - 5.10.4 U-QAC shall collaborate with C-QACs (for academic audit) or with A-QAC (for administrative audit) to clarify the observations and recommended actions for enhancement.
 - 5.10.5 The concerned constituent shall prepare and send to QADC an improvement plan for the audited issue/s within 1-2 weeks after receiving the QADC report (ad hoc audit).
 - 5.10.6 QADC shall conduct follow-up visit to audit implementation of the plan within 2-3 weeks after receiving the improvement plan.
 - 5.10.7 Director of QADC shall send a report on the ad hoc audit to University President, University Council and U-QAC after the follow up visit.

6. **Responsibilities**

Faculty members are responsible for:

• following this document appropriately.

QADC Staff members, A-QAC and C-QACs are responsible for:

• appropriate implementation of this document.

Heads of Academic Departments and Units, Directors of Centers, and Managers of Administrative Departments are responsible for:

• appropriate implementation of this document.

Deans are responsible for:

- ensuring that all faculty members follow this document.
- ensuring that this document is appropriately implemented.

U-QAC are responsible for:

• appropriate implementation of this document.

Director of QADC is responsible for:

• appropriate implementation of this document.

University Policy Development and Review Committee is responsible for

• systematic review of the effectiveness of this document as custodian.

7. Related Policies

- Quality Assurance Policy
- Quality Assurance and Development Framework

8. Related Procedures

• No related procedures

9. Related References and Standards

NQF	National Qualifications Framework Handbook
BQA	Programs-within-College Reviews Handbook
HEC	Institutional Accreditation Standards Handbook