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INTRODUCTION TO HEC AND THE ACCREDITATION FRAMEWORK
1. INTRODUCTION TO HEC AND THE ACCREDITATION FRAMEWORK

1.1 About HEC

All Higher Education Institutions, both private and public, are controlled by the Higher Education Council (HEC) which was established in 2005 according to law No.(3), in order to regulate, promote and monitor the higher education sector. The Council is chaired by the Minister of Education and it has no fewer than ten members with extensive expertise and high level academic qualifications. The Secretary General of the HEC is Professor Riyad Hamzah who was appointed to this position in May 2011.

The HEC’s mandate is three-fold: improving the performance of universities, monitoring and evaluating provision, and regulating new study programs. The HEC is concerned with various aspects of higher education – administrative, scientific, research and students – which include the preparation of the general policy for higher education and scientific research, creating regulations regarding the admission of students to institutions of higher education as well as proposing amendments to the laws and regulations of higher education in light of the development of the general policies in the Kingdom, issuing regulations and resolutions organizing the academic, financial and administrative affairs with respect to higher education.

Furthermore, it sets the terms and criteria for the licensing of different types of higher education institutions including private higher education institutions, prepares annual reports on higher education performance issued by higher education institutions and competent governmental authorities, recommends appropriate remedies for such performance and actions for its development, prepares annual reports for the Cabinet on higher education and scientific research status with relevant recommendations for promoting private investment in higher education.

Higher education in the Kingdom of Bahrain aims, through the National Higher Education Strategy and National Research Strategy to:

- strengthen the links between higher education and business and industrial sectors to drive innovation, foster collaboration, create and identify research needs and to close the gap between employment and higher education regarding curriculum and skills
- develop processes to monitor internal quality to ensure quality in all aspects of higher education institutions
- develop and manage the implementation plan of the higher education improvement strategy, guide higher education institutions in developing their strategic plans in line with the general plan for higher education strategy and work within the scope of its plan
- encourage cooperation between relevant government institutions of higher education for the benefit of the kingdom
- organize the higher education sector through a balanced approach so that in the long term all concerned institutions work towards awarding their own qualifications
- provide support for students by providing them with the best information, advice and guidance to enable them to make decisions about higher education and the most appropriate study programs.
The HEC was instructed by the Cabinet of the Kingdom of Bahrain in 2013 to introduce a mandatory system of accreditation for the higher education sector that meets international standards.

1.1.1 Directorate of Accreditation and Licensing

The Accreditation and Licensing Directorate is one of the directorates of the Office of Assistant Secretary-General for Evaluation and Follow-up in the Secretariat General of the Higher Education Council. The Directorate plays a role in supervising higher education institutions and in following up their affairs. Furthermore, it is responsible for monitoring academic programs and other support services provided by higher education institutions in order to achieve quality of performance and outcomes.

The directorate is subdivided into three departments:

1. Licensing Department
2. Academic Accreditation Department
3. Accreditation and Licensing Standards Department

The roles and responsibilities of the Accreditation and Licensing Directorate are as follows.

- Provide guidance to investors and to provide the requested information with respect to the field of investment in higher education.
- Provide information and statistical data, rules and regulations relevant to higher education.
- Scrutinize license applications for the establishment of new institutions of higher education.
- Scrutinize the applications to amend a license of higher education institutions.
- Scrutinize the applications for developing programs or new academic majors.
- Follow up financial matters relating to institutions of higher education.
- Follow up the recruitment process of all staff members (academic, administrative and technical) in higher education institutions.
- Consider the applications for advertising licenses for higher educational institutions of various kinds.
- Provide administrative support to the Academic Accreditation Committee, Engineering Committee, the Committee in charge of assessing applications to establish new private higher education institutions, Committees of scientific examination.
- Coordinate with the directorates and departments in the Secretariat General in order to accomplish the tasks assigned to it and providing effective channels of communication between departments and sections in other sectors.
1.1.2 Academic Accreditation Committee (AAC)

By Higher Education law, this committee is formed of members recommended by HEC and approved by the Prime Minister. The Academic Accreditation Committee reviews all inspection reports. All recommendations of this committee are presented to the HEC for approval.

1.2 The purpose of HEC accreditation

In implementing an accreditation framework, the HEC has six main purposes.

- To demonstrate the commitment of HEC Bahrain to providing high quality higher education which is rigorously inspected and continuously monitored so as to establish and maintain public confidence in Bahrain, locally, regionally and internationally
- To provide an ongoing monitoring system which supports the licensing process – accreditation will be mandatory for a license to remain in operation
- To provide assurance of the good standing of an institution to all stakeholders especially students, parents and employers assessed against international norms
- To enable an institution to state publicly that it has satisfied HEC that all relevant aspects of its operation are maintained at a satisfactory level
- To support and advise institutions of higher education in the maintenance and enhancement of the quality of their provision
- To provide independent guidance to students seeking to undertake higher education in an institution operating within the Kingdom

1.3 The benefits of HEC accreditation

Mark of quality

By achieving HEC accreditation, the institution will be able to demonstrate that it has submitted to a rigorous inspection process underpinned by internationally recognized standards. It shows a commitment to providing a quality learning experience which places the student at the heart of higher education in the Kingdom.

Listing in the HEC institutional directory

Accreditation by HEC means that the institution will be listed on the HEC website, providing an additional source of information for external agencies and prospective students about the institution and the courses it offers. Reports on the institution will be available on the HEC website so stakeholders can see the institution’s strengths.

International recruitment

HEC accreditation will assist institutions in their international recruitment operations. Being accredited by HEC will expose the institution to a wider international market as the system is based on standards which are accepted and applied globally.
Professional and institutional development

HEC accreditation provides an ongoing monitoring opportunity for institutions. Preparing for inspections and completing annual returns assist with action planning and strategic development of policies and systems which enhance the student experience.

Raising standards

HEC inspections are conducted by highly experienced inspectors with extensive knowledge of higher education and they can provide invaluable advice on quality assurance processes through the inspection process and share best international practice.

Providing assurance

Students and their families are provided with assurance that all areas of the institution’s provision meet the standards set out in this handbook and, if there is cause for complaint, that there is a rigorous and comprehensive policy in place to deal with it. The complainant also has recourse to the HEC’s own complaints procedures.

1.4 General requirements for accreditation

HEC accreditation is mandatory for any higher education institution wishing to operate in the Kingdom. Accreditation can only be awarded to an institution already in possession of a full or provisional operating license. A provisional license will be issued, if the application is successful, to new institutions which are applying for a license for the first time. It will be valid for twelve months. During this period the institution must apply for institutional accreditation.

The award of accreditation is subject to the institution meeting standards established and periodically reviewed by HEC. The accreditation process involves a rigorous on-site inspection focusing on the quality assurance processes of the institution in a number of distinct areas such as governance, academic management, research, student welfare and support, teaching and learning, and facilities. Details of the standards for each of the inspection areas are included in this document and can also be found on the HEC website.

Not only must an accredited institution meet the specific standards listed for each of the inspection areas at the time of the inspection but it must also demonstrate to the inspection team that it has effective policies and systems in place to ensure that the standards continue to be met throughout the accreditation period.

Once accredited, the institution must submit to a regular monitoring process involving annual data returns, financial analysis, and interim, supplementary and spot check inspections. The institution must also pay all applicable fees and maintain a transparent and constructive relationship with HEC by notifying them of any changes, responding to any requests for information and cooperating with HEC’s procedures for investigating student complaints (see section 10 of this handbook).

An essential requirement of HEC accreditation is that all institutions continue to meet their statutory obligations to comply with all relevant laws and regulations including licensing requirements.
1.5 The accreditation cycle

Successful applicants for institutional accreditation are usually awarded accreditation for four years. Once accredited, accredited institutions must apply for re-accreditation before the expiry of the stated accreditation period. All institutions applying for re-accreditation must undergo a full inspection. In considering a report on an accredited institution, the Academic Accreditation Committee may either recommend awarding re-accreditation for four years or a shorter period if appropriate, deferring a recommendation pending the resolution of identified issues, or withdrawing accreditation from the institution should it have failed to maintain the standards required.

Any institution which has been unsuccessful in either gaining or retaining accreditation may appeal against the decision of HEC (see section 9 of this handbook).
THE ACCREDITATION PROCESS
2. THE ACCREDITATION PROCESS

2.1 Introduction

Accreditation is based on an inspection of the full range of the institution’s provision, and evidence is required that the institution’s management maintains acceptable standards and complies with its legal obligations and HEC licensing regulations during the period of accreditation.

Prospective applicants for accreditation must hold a full or provisional license to operate awarded by HEC. The application undergoes a first level of scrutiny by HEC staff through the application review stage. Once this is completed, the institution will receive a rigorous inspection which assesses the institution’s provision against the standards set out in this handbook. A report of this inspection is then considered by the Academic Accreditation Committee, which can recommend the award, deferral or refusal of accreditation based on the evidence of whether all standards have been met. The recommendations of the Academic Accreditation Committee are considered and a decision on accreditation made by HEC.

2.2 Steps involved in the accreditation process

- Research and preparation by the institution
- Institutions without an operating license apply to HEC and, if successful, are issued with a provisional license. Institutions in possession of a full operating license must sign a declaration confirming that they are complying with all licensing requirements and HEC regulations
- The institution completes and submits its application for accreditation
- HEC reviews the application form and supporting documentation
- HEC arranges an inspection in consultation with the institution
- The institution submits its self-evaluation report using the defined criteria
- The inspection is conducted by a specialist inspection team
- The inspection report is submitted to HEC
- The report is reviewed and edited by the HEC accreditation team and sent to the institution for a factual accuracy check
- The inspection report is considered by the Academic Accreditation Committee which makes recommendations on the award of accreditation
- The decision on accreditation is made by the full Council
- HEC notifies the institution of the final decision

It can be seen from the above that HEC accreditation is a rigorous process, involving several stages before successful completion and therefore it is likely to be several months between the date of application and the award of accreditation. The time it takes to reach the inspection stage is dependent largely on the quality of the institution’s initial application and the response time to queries and requests for further information. If the application form is completed in full and all supporting documentation submitted at the time of application, it
may exceptionally be possible to complete the review of the institution’s application within four weeks, schedule an accreditation inspection within two months and for accreditation to be awarded, if the institution demonstrates that it meets all the accreditation standards, within six months. However, timescales are influenced by many factors and subject to constraints, some of which are outside of HEC’s control. HEC will endeavour to provide the applying institution with provisional dates throughout the accreditation application and inspection processes.

### 2.3 Fees associated with accreditation

Full details associated with institutional and program accreditation fees will be circulated to institutions by HEC and can be downloaded from the HEC website.
3. APPLICATION

3.1 Applying for accreditation (see Appendix 1 and Appendix 2)

All applicants who do not hold a license to operate in Bahrain issued by HEC must obtain a provisional license before applying for accreditation.

Those institutions which already hold a full license to operate are required to sign a declaration that they are complying fully with the licensing requirements and HEC regulations when applying for accreditation.

All applicants are required to complete and submit a formal application for accreditation to HEC within twelve months of the framework coming into operation. Along with a completed application form, all applicant institutions will be required to submit supporting documentation to evidence existing systems and processes linked to the accreditation standards and criteria. In addition, an assessment can be made of the institution’s compliance with relevant statutory and regulatory requirements, including HEC directives. HEC reviewers will consider the application in full, raise queries where material appears incomplete or inadequate and, only once the application is satisfactory, will it be signed off and the process of arranging a full inspection will begin. From the submission of the application, a timeframe will apply both with regard to the time taken by HEC staff to review the material and raise queries with the institution and the time allowed for the institution to submit any further satisfactory material. Applications will only be live for six months after submission. If the application is not considered complete by this time, the applicant will be required to re-submit the entire application.

Having read, understood and accepted the terms set out in the accreditation handbook and associated documentation, the institution should begin its preparations for making an application. The institution will need to gather a significant amount of documentation for making an application.

The application for accreditation comprises:

- completed application form for unaccredited institutions
- required supporting documentation
- payment of required fees.

The institution should follow closely the instructions on the application form, making use of the associated guidance notes where needed, in order to complete the form and its appendices with all necessary information, as well as gathering the required supporting documentation. The institution will need to complete all sections of the application form carefully. The institution should contact the HEC accreditation team if there are any queries about the completion of the application form.

Two hard copies of the completed application form and all supporting documentation should be submitted to the HEC office. One set of documentation must be in English and one in Arabic. The English version is required as the members of the inspection team will use English as their main medium of communication. In addition, institutions must submit an electronic copy of both the Arabic and English versions. All pages of the application and supporting documentation should be stamped and signed.
HEC will not begin scrutiny of the institution’s application until all the required documentation has been received along with the full payment of the institutional accreditation fees.

3.2 Application review

The institution will receive confirmation that its application has been received within five working days of submission, but the review of the institution’s application will take up to four weeks to allow for proper scrutiny. This formal evaluation process is undertaken by trained HEC staff and will begin with a review of the application form and accompanying documentation, in order to ensure that the form has been completed in full and supporting documentation has been provided. This will be followed by further investigation of public records, the taking up of bank references, credit checks where deemed appropriate, and a scrutiny of the institution’s website and other promotional material.

Each application will have a dedicated case manager who will be the first point of contact for the institution. This member of HEC staff will contact the institution to seek clarification or request additional documentation if the submission is incomplete, if there are discrepancies in the information or if elements of the institution’s provision do not meet HEC’s requirements. There will be no further progress until these matters have been satisfactorily resolved.

Once all the outstanding issues have been resolved, the complete application will be considered by the HEC accreditation team who will confirm whether or not the institution has provided the required information and evidence for the application to pass to the inspection stage.

Applications remain live for up to six months. Should the application not be considered complete before the end of this period, due to the failure of the institution to comply with the HEC accreditation team’s requests, the institution will need to submit a new application and pay the application fees again.

3.3 Re-accreditation applications

Accredited institutions wishing to remain in accreditation must submit an application for re-accreditation and undergo a full re-accreditation inspection every four years. HEC expects accredited institutions to develop and improve their quality assurance processes over the period of accreditation. HEC will also hold information about the institution from the institution’s annual returns and other data such as reports issued by the National Authority for Qualifications and Quality Assurance of Education and Training (NAQQAET) which will inform the re-accreditation inspection.

HEC will contact the institution six months before the institution’s accreditation is due to expire, setting out the application procedure for re-accreditation and the application deadline. The deadline will normally be three months before the expiry date of the institution’s current accreditation. To remain in accreditation, HEC must receive the institution’s application for re-accreditation by this deadline, comprising the following:

- re-accreditation application form
- data collection form
- required supporting documentation
• payment of required fees.

The re-accreditation application form and guidance notes can be downloaded from the HEC website. The institution will need to complete all sections of the application form carefully and submit two hard copies, one in English and one in Arabic, of the application form and all supporting documentation to the HEC office. Electronic copies in both languages must also be submitted. All pages of the application and supporting documentation should be stamped and signed.

A re-accreditation inspection will be organized only if HEC has received a completed application for re-accreditation along with full payment of the required fees by the deadline given. Should the institution fail to undergo a re-accreditation inspection before the institution’s current accreditation expiry date and without having been granted an extension by the Academic Accreditation Committee, the institution’s accreditation will be withdrawn.

3.4 Self-evaluation report

Institutions are required to complete and submit a self-evaluation report assessing their quality assurance mechanisms against HEC’s standards prior to the inspection being conducted.

Institutions are advised to complete the form in as much detail as possible and to be completely honest in their evaluation of their strengths, weaknesses and compliance with HEC standards. Self-evaluation is a very important tool in the quality assurance process and should be a built-in component of the institution’s regular reviewing system. This particular exercise will help the institution to prepare fully for the inspection and to ensure that evidence is available upon which the inspection team can base their judgements.

It is likely that in completing this exercise the institution will identify further evidence which is needed and should make an action plan for ensuring that by the time of the inspection, this evidence is available. The self-evaluation report template provides tables for the recording of the evidence and actions required. The self-evaluation report must be completed and sent to HEC at least two weeks before the start of the inspection.

3.5 Re-applications from institutions refused accreditation

While institutions which are refused accreditation or which have their accreditation withdrawn can re-apply, HEC reserves the right to set a minimum time period which must elapse before a re-application will be accepted.
INSPECTION
4. INSPECTION

4.1 The inspection process

The primary method for assessing whether an institution meets the standards required for accreditation is an on-site inspection carried out by a team of independent inspectors who are appointed and trained by HEC. No institution will be awarded accreditation or re-accreditation without a full inspection of its provision in all the inspection areas of the accreditation standards.

While HEC’s inspections are key to assessing whether or not the institution should be accredited or reaccredited, they are also intended to provide advice and support within the institution’s own framework of quality management. The inspectors used are all educational experts with extensive knowledge of the sector who are happy to share examples of good practice and to suggest ways in which the institution can continue to improve its provision beyond HEC’s standards.

Once an inspection has been authorized and the appropriate size and composition of the inspection team determined, the institution will be asked to suggest suitable inspection dates. Accreditation or re-accreditation inspections will be scheduled for days on which the institution is operating normally i.e. only in term time. HEC is required to give its inspectors at least two months’ notice of an inspection. As most members of the team will be international experts, the inspection logistics can be complex. The final decision on whether and on what dates an inspection will go ahead rests with HEC.

4.2 Selecting the inspection team

HEC has a large pool of international experts who it can call on to conduct institutional inspections. Inspection teams are selected on the basis of qualities which include sector experience (especially in quality assurance at a senior level in higher education provision) and subject specialism to ensure a level of knowledge appropriate to each particular institution. HEC’s inspectors are required to sign a declaration identifying any conflicts of interest. They are also required to observe confidentiality as to both the process and the outcome of an inspection.

The inspection team will be carefully selected by the HEC accreditation team, taking into account the experience, specialisms, location and availability of inspectors and the nature of the institution and its provision. The institution will be informed of the names of the inspectors before the inspection and can make representation to HEC if it is felt that there could be potential for a conflict of interest to arise.

The inspection team will usually comprise:

- A lead inspector responsible for liaison with the institution, arranging the inspection timetable, managing the inspection team, compiling the report and ensuring that the inspection is carried out according to published guidelines and covers all the standards. The HEC coordinator will be responsible for liaison with the institution and arranging the inspection timetable.
• A number of expert inspectors selected by the HEC accreditation team, based upon the student numbers, faculties or colleges and programs, and the overall size of the operation. Local and international experts will be in the team.

• A PhD student representative may participate in the work of the inspection team when reviewing student specific indicators.

• An administrator provided by HEC to facilitate the arrangements for the inspection at the institution (including dealing with any travel or accommodation needs during the inspection), ensure meetings take place as scheduled, notes of meetings are taken to be used by the lead inspector to inform the institutional report and refreshments are provided to the inspection team.

The size of the inspection team and the duration of the inspection are decided by HEC.

The inspection timetable will be devised prior to the inspection by the lead inspector and the HEC accreditation team, in consultation with the institution. The institution will be required to facilitate this with the provision of staff availability information and program timetables and to suggest times at which key personnel will be available to meet the inspectors.

The lead inspector will take these into account when allocating the inspection team’s time. The lead inspector is responsible for producing the inspection timetable to ensure it accords with other commitments and meets the needs of the inspection team.

The inspection will involve, in addition to a comprehensive documentation review,

• an introductory meeting with staff (at least members of the management team)
• a tour of the institution
• a meeting with the owner/s and Board of Trustees members
• a meeting with the President/Vice-President
• a meeting with senior management team (Chief Executive, Operations Director, Financial Director, Head of Student Services)
• a meeting with the academic management team (Deans, Vice Deans, Program Leaders)
• individual meetings with key academic and managerial staff
• a meeting with student support staff
• a study of a representative sample of marked student work
• a detailed survey of the library and other academic resources
• a meeting with a representative group of students
• a meeting with a representative group of teachers, tutors or lecturers
• a meeting with external stakeholders such as employers, community leaders
• observation of a representative sample of classes
• a final meeting with the President/Vice-Chancellor and senior managers.
4.3 Preparing for the inspection

Once an inspection has been organized, the institution will receive written confirmation of the dates, the names of the inspection team and details of the inspection including a list of premises to be visited. The institution should inform the institution’s staff that an inspection will be taking place and, if possible, arrange an initial meeting with all staff so that inspectors can introduce themselves and describe what will be taking place.

It is the inspectors’ intention to avoid disruption of the institution’s normal activities as far as possible during the inspection.

The self-evaluation report must be completed and submitted to HEC at least two weeks before the inspection.

All documentation which the inspectors will require will need to be gathered and collated before the inspection.

4.4 Facilities to be provided during the inspection

The inspection team will be accompanied by an HEC administrator who will be the liaison person between the institution and team for all administrative matters. The administrator will facilitate the inspection timetable and coordinate the meetings which the team will hold with all stakeholders.

A dedicated room must be made available throughout the inspection for the team to use. This should be located centrally in the institution within close reach of the administration and management offices of the institution. It should offer privacy for internal discussions between the team members and they should be able to leave personal belongings in complete safety during the inspection. The team may need the room to hold meetings with staff members. Internet access must be available in the inspectors’ room.

All documentation which needs to be reviewed by the inspection team must be placed in this room. This will include all the documentation sent in with the application form, all supplementary documentation providing evidence of the institution’s ability to meet the standards and samples of student work from programs across the curriculum.

4.5 Making changes to an inspection date

HEC reserves the right to change the date of inspection or inspectors prior to the commencement of the inspection. HEC would only make such changes once all other options had been exhausted and where it would be impossible or detrimental to go ahead with the inspection as planned.

4.6 Compliance with statutory regulations

All new applicants and those applying for re-accreditation are required to sign a declaration stating that the institution complies with all relevant statutory requirements in connection with health and safety, safeguarding, employment law, copyright, disability provision, equal
opportunities, planning consent, data protection and public liability. It is the institution’s responsibility and the personal responsibility of the head of the institution to ensure that all requirements are met. HEC inspectors will not inspect the above areas but will note any observed breach of regulations. Any breach will be conveyed to the Academic Accreditation Committee as a ‘no confidence’ judgement in the ability of the institution to self-assess in these matters and will call into question the integrity of the senior management who will have endorsed the declaration. Breaches in compliance with statutory regulations and resolutions relevant to higher education will have an adverse effect on accreditation decisions and status.
REPORTING ON THE INSPECTION
5. REPORTING ON THE INSPECTION

Towards the end of the final day of the inspection the team will meet to discuss findings and agree on judgements and action points. The lead inspector will be responsible for producing the final institutional report. A draft version will be sent to the inspection team members for comment prior to being sent to HEC. Completed reports will be sent to HEC staff for review no later than four weeks after the last day of the inspection.

5.1 The report format

The institutional report will include three sections.

Part A Introduction, including

- Details on the background to the institution
- A description of the current provision
- A description of the inspection process

Part B Meeting the Standards, including

- Commentary on how the institution performs against each of the accreditation standards
- Details of the evidence base for judgements of non-compliance with a standard
- An overall judgment on the institution’s compliance with each standard reported as ‘met’, ‘partially met’ and ‘not met’

Part C Grades and Action Points

This section will present the strengths of the institution and any action points arising from the failure to meet the standards fully. It is proposed that this list of action points form the basis of the institution’s action plan.

5.2 Action points

The concluding section of an inspection report normally contains a number of action points. These are categorized as being of high, medium or low priority.

- High priority - those which the inspectors consider it necessary to action as a matter of urgency and which will normally prevent the immediate award of accreditation
- Medium priority - those which the inspectors have concerns about but which can be actioned in a longer time-frame. These action points could result in a recommendation to defer the decision on the award of accreditation
- Low priority – those which the inspectors consider would benefit the institution and would enhance the quality of the provision and foster best practice. These action points will not, on their own, normally affect the decision of the award of accreditation

These action points will be taken into account by the Academic Accreditation Committee when making the recommendations regarding the award of accreditation or continued accreditation.
In summary, the report will contain a points-based assessment of the institution’s performance in the eight separate inspection areas. The points will be allocated according to the findings based on evidence presented at the inspection on a scale from 0 to 5.

Descriptors for these levels are provided below:

- **0** The institution does not meet any of the standards in the inspection area
- **1** The institution meets a few of the standards in the inspection area but most of the standards are judged as being partially met or not met
- **2** The institution meets some of the standards in the inspection area but many are only partially met and a few are not met
- **3** The institution meets almost all of the standards in the inspection area with one or two only being partially met due to some minor weaknesses which can be easily rectified
- **4** The institution meets all of the standards in the inspection area and provides evidence of best practice
- **5** The institution meets all of the standards in the inspection area and provides extensive evidence of best practice

Institutions must achieve at least an overall score of a minimum of 24 points out of a possible 40 for accreditation to be awarded. A score of 0 or 1 in any standard may result in the refusal of accreditation.

Institutions must achieve at least a score of 3 in the following inspection standards for the award of accreditation to be considered:

- Governance, Strategy and Financial Management
- Academic Management and Administration
- Teaching, Learning and Assessment

The reports once submitted by the lead inspector will be reviewed and edited, if necessary, by a member of the HEC accreditation team. Reviewers will consider a number of elements of the report including the following:

- The report has been completed according to established guidelines
- All sections have been completed fully and judgements made on all standards
- Action points are included for all standards which are judged to be ‘partially met’ or ‘not met’
- The consistency of reporting
- Appropriateness of the language used
- The presentation of a clear evidence base for the report judgements.
Following the review, which may involve the reviewer contacting the lead inspector for further information or clarification, the report is sent to the institution for a check of factual accuracy. Further amendments may need to be made and further consultation with the lead inspector required as a result of the feedback received from the institution. It should be noted that the institution will only be able to comment on the factual accuracy of the report and not on the judgements made.

Once the factual accuracy checking with the institution (and lead inspector, where necessary) is complete, the report is ready to be submitted to the Academic Accreditation Committee for consideration. The HEC administrative team will be responsible for making the arrangements for the Academic Accreditation Committee meetings, including making the reports and further paperwork available in a timely manner and taking minutes.

Upon completion of the Academic Accreditation Committee process, the Committee’s recommendations will be provided to the Higher Education Council for their final decision.
REPORTING ON THE INSPECTION
6. THE AWARD OF ACCREDITATION

6.1 Decisions on the award of accreditation (see Appendix 4)

Following inspections, the inspection report will be considered by the Academic Accreditation Committee, which will make one of the recommendations set out below. Once the recommendations have been considered by the Higher Education Council, a decision on accreditation will be sent to the institution.

The Academic Accreditation Committee can recommend the award, refusal or deferral of a decision on accreditation or re-accreditation, or, in exceptional circumstances, suspension or withdrawal of an institution’s accreditation.

The institution will be informed of the Higher Education Council decision within one calendar month of the decision being made. HEC will send the institution a copy of the inspection report, along with an accreditation certificate if accreditation or re-accreditation has been awarded.

6.2 Award of accreditation

- Accreditation can be awarded following the full accreditation inspection of an unaccredited institution
- Re-accreditation can be awarded following the full re-accreditation inspection of an accredited institution.

Accreditation or re-accreditation is awarded if the Academic Accreditation Committee is satisfied that the institution meets or exceeds HEC’s standards in all areas of its provision. Accreditation or re-accreditation is normally awarded for a period of four years. However, the Academic Accreditation Committee can recommend to vary the period of accreditation if it decides that a shorter period is more appropriate.

6.3 Deferral of a decision on accreditation

- The Academic Accreditation Committee may recommend a deferral to the HEC on accreditation or re-accreditation if the inspection report indicates that the institution has not met all the standards required but that the outstanding issues are such that they can be resolved easily within a short period of time.
- A decision can be deferred for up to six months, during which time the institution must address the action points identified in the inspection report and specifically raised by the Academic Accreditation Committee.
- The Academic Accreditation Committee will require that, before the end of the deferral period, the institution either undergoes a supplementary inspection at its own expense or submits documentary evidence that the outstanding requirements have been met or issues have been resolved.
• The supplementary inspection report or documentary submission will be considered by the Academic Accreditation Committee before the end of the deferral period, and a recommendation on accreditation or re-accreditation will then be made.
• If the supplementary inspection report indicates significant concerns other than those which led to the deferral, the Academic Accreditation Committee may require an additional full inspection at the institution’s expense before making a recommendation on accreditation or re-accreditation. If necessary, the deferral period may be extended to allow for this to take place.
• If the institution fails either to submit satisfactory documentary evidence or to undergo a supplementary inspection before the end of the deferral period, the Academic Accreditation Committee may recommend refusal or withdrawal accreditation. A new application will then be required should the institution wish to pursue accreditation further.

6.4 Refusal, suspension or withdrawal of accreditation

The Academic Accreditation Committee may recommend the refusal, suspension or withdrawal of accreditation if the inspection report indicates that the institution has failed to meet or maintain the standards required for accreditation. If accreditation is refused or withdrawn, the reasons will be clearly explained in the inspection report and the accompanying letter. The institution has the right to appeal against the HEC's decision (see section 9 of this handbook).
AFTER ACCREDITATION HAS BEEN AWARDED
7. AFTER ACCREDITATION HAS BEEN AWARDED

It is a condition of accreditation that certain basic information on accredited institutions be published in the website directory, details of which can be confirmed with the HEC office. The information to be published will be reviewed periodically and is subject to change, but will include the institution's name, head of institution, address, contact details and a list of subjects and programs offered.

Newly accredited institutions are added to the directory once the decision letter, inspection report and accreditation certificate have been dispatched. Institutions whose accreditation has been withdrawn will remain in the directory until the time allowed for lodging an appeal has expired and any subsequent appeal process has been exhausted.

7.1 Conditions of accreditation

In order to protect the quality and reputation of HEC accreditation the following conditions apply:

- Institutional accreditation covers all eligible provision which has been declared to HEC.
- Institutional accreditation applies to the institution as a whole and must not be construed as accreditation or validation of individual programs or awards.
- Accreditation applies only to the specific institution whose application HEC received and not to any partner, branch or otherwise connected institution.
- Any inaccurate or misleading statements concerning the institution’s accreditation must be avoided and if uncertain, HEC should be contacted to seek clarification on what is acceptable. Any breach of this condition may lead to the suspension or withdrawal of the institution’s accreditation.
- If accreditation is withdrawn, all statements or claims of accreditation by HEC must be removed from promotional and other material as soon as is reasonably practicable and institutions must immediately refrain from representing themselves as HEC accredited.
- Unaccredited institutions which have applied for accreditation must not make public reference to their application. Any breach of this condition may be taken into account in any subsequent decision on accreditation.

7.2 Maintaining accreditation

Gaining accreditation, although a major achievement for any institution, is not the end of the process. As an accredited institution, institutions have continuing responsibilities both to maintain the standards required for HEC accreditation and to cooperate fully with HEC in its monitoring of these standards. Specific duties arising from these responsibilities are listed below:

- Continue to comply with all relevant laws and regulations including those concerned with licensing
- Continue to maintain all the standards required for HEC accreditation
- Work to meet the requirements set out in previous HEC reports and consider the additional recommendations
- Submit to HEC’s regular monitoring procedures, including:
- Notifications to HEC of any significant changes
- Interim inspections
- Spot check inspections
- Annual returns
- Respond promptly to any requests from HEC for information
- Address to HEC’s satisfaction any concerns raised by awarding organisations or partner institutions with which HEC shares information
- Cooperate fully and promptly with HEC’s complaints procedure
- Pay promptly the required fees
- Submit an application for re-accreditation and undergo a full re-accreditation inspection before the expiry date of the institution’s current accreditation.

The failure of the institution to meet any of the above requirements may lead to the suspension or withdrawal of the institution’s accreditation.

### 7.3 Notification of changes

The institution must notify HEC immediately of any significant changes to the institution’s provision, premises, management or ownership. Examples of what constitutes a significant change include:

- Change of institution name
- Change of ownership or company registration
- Change of Head of Institution, academic manager or any other person responsible for the institution’s operation
- Relocation to new premises
- Use of additional premises
- Change in the academic program as seen at the previous inspection

It is the institution’s responsibility to inform HEC, in good time, when such changes occur. If such a change is planned in advance, the institution should notify HEC as soon as is reasonably practicable to allow a prompt decision to be taken on any course of action. In the case of unplanned changes, the institution should notify HEC as soon as is reasonably practicable and not later than one week after the change has occurred.

HEC reserves the right to review the institution’s accreditation in the light of such changes and to require either the submission of documentary evidence or a supplementary inspection, at the institution’s expense, depending on the nature of the change. Failure to cooperate with such a requirement from HEC will lead to the suspension or withdrawal of accreditation. A number of forms are available for notifying HEC of significant changes. These forms are available from the HEC office or can be downloaded from the HEC website.

Examples of additional documentary evidence which may be required include:

- a personal reference and CV for any newly appointed senior or academic manager
- a written statement explaining the reasons behind any change in the institution’s name
• details of any new program being introduced, including proof that the program is accredited or validated by a recognized body.

7.4 Interim inspections

All accredited institutions are required to undergo an interim inspection part of the way through each period of accreditation as part of HEC’s quality monitoring process. The interim inspection will typically be conducted by three inspectors over two days. The interim inspection report will be considered by the Academic Accreditation Committee which will recommend either that accreditation should continue or that there are areas of concern which require further action. The report will be sent to the institution with details of the recommendation and any further action required.

Where an interim inspection report identifies significant problems or evidence that the institution is not meeting HEC’s standards, the Academic Accreditation Committee may require further action, such as:

• a further full or supplementary inspection at the institution’s expense
• an unannounced spot check at the institution’s expense
• the submission of an action plan for addressing the issues identified
• the setting of a deadline for the submission of documentary evidence demonstrating that the issues identified have been resolved.

7.5 Spot check inspections

A spot check is an inspection removed from the normal accreditation process and which is not normally arranged with the institution in advance. HEC may or may not give the institution prior notification of an impending spot check inspection.

The spot check inspection report will be considered by the Academic Accreditation Committee, which will recommend either that accreditation should continue or that there are areas of concern which require further action. The institution will be sent details of any recommendations and any further action required.

Where a spot check inspection report identifies significant problems or evidence that the institution is not maintaining HEC’s accreditation standards or not complying with licensing requirements, the Academic Accreditation Committee may require further action, including:

• a further unannounced spot check inspection at the institution’s expense
• a further full or supplementary inspection at the institution’s expense
• the submission of an action plan for addressing the issues identified
• the setting of a deadline for the submission of documentary evidence demonstrating that the issues identified have been resolved.

Where a spot check inspection identifies evidence of a serious breach of the law or HEC directives, a significant risk to the welfare of students or an attempt to deceive HEC or its inspectors, the Academic Accreditation Committee may recommend withdrawing the institution’s accreditation with immediate effect.
Full cooperation with any action required by the Academic Accreditation Committee following an interim or a spot check inspection is a condition of continuing accreditation. In some cases, the Academic Accreditation Committee may recommend suspending the institution’s accreditation while such action is carried out. Any subsequent failure of the institution to cooperate fully may lead to the immediate withdrawal of accreditation.

### 7.6 Annual Return

Institutions are required to submit an annual return each year and, in doing so, alert HEC to any changes which may affect the standard of provision offered by the institution. The HEC accreditation team must be informed if there is a likelihood that the institution will not be able to submit the return by the due date.

Where significant changes have occurred or the information contained in the return raises concerns, a representative of HEC may inspect the institution and prepare a report for the Academic Accreditation Committee.

The annual return will include the following information and documentation:

- a declaration of financial viability by the Head of the Institution
- a copy of the institution’s most recent statutory accounts
- details of any significant changes in ownership, management, location or academic program
- details of courses and programs offered in the previous year, including numbers enrolled on each course, cohort progression, numbers completing and pass rates in any examinations
- a list of courses offered in the current academic year, including the level of the course in relation to the Bahrain Qualifications Framework and the name of the awarding or partner organisation
- destination information on the last cohort of graduates
- details of research activity to include details of expenditure
- details of professional development activities provided by the institution for staff to include details of expenditure
- community outreach activity
- details of any complaints received
- an outline of any planned developments.

#### 7.6.1 Annual Return declarations

The following will need to be provided:

- details of any litigation in which the institution is or has been involved
- a declaration that the institution meets all relevant statutory requirements. If, at a future stage, the Academic Accreditation Committee considers there to be convincing evidence that this was not the case, HEC may withdraw accreditation immediately
- a declaration that the institution is meeting all requirements with regard to its license.

N.B. The above lists are not exhaustive and are reviewed for possible amendment each year.
7.7 The re-accreditation process

Accreditation is usually awarded for four years. However, the Academic Accreditation Committee can recommend awarding accreditation for a shorter period if it believes there are grounds to do so. If the institution wishes to remain in accreditation, the institution must submit an application for re-accreditation and undergo a full re-accreditation inspection before the institution’s accreditation expires. Institutions will be notified by HEC six months in advance of the need to apply for re-accreditation. Should the institution fail to undergo a re-accreditation inspection before the institution’s current accreditation expiry date, the institution’s accreditation will be withdrawn. The procedure for application for re-accreditation is set out in section 3.3 of this handbook.

Accreditation may be extended for a period, normally of no more than one year, if the Academic Accreditation Committee considers there to be exceptional circumstances which make it necessary to delay the re-accreditation inspection. These would normally involve significant changes which are planned or which have recently taken place. Requests for an extension of full accreditation must be submitted to the HEC office at least six months before the expiry date of the current accreditation and using the appropriate form. This form is available from the HEC office or can be downloaded from the HEC website.

7.8 Withdrawal and suspension of accreditation

Occasionally HEC is required to suspend or withdraw accreditation from an institution because it has failed to meet the conditions for maintaining accreditation or because its provision no longer meets HEC’s standards. Suspension is a private arrangement between the institution and HEC, and is usually accompanied by a set of requirements to be met by a stated deadline. The length of time given to meet requirements will be stipulated by the Academic Accreditation Committee. Withdrawal of accreditation means that the organisation is removed from the directory of accredited institutions and this will have an adverse effect on the institution’s operating license.

There are a number of reasons why accreditation can be suspended or withdrawn.

- **Following an inspection**
  The Academic Accreditation Committee may recommend withdrawing accreditation if the inspection report shows that the institution is failing to meet the standards required for accreditation. Accreditation will be withdrawn immediately after the ratification of the decision by the Higher Education Council.

- **Following a complaint**
  The Academic Accreditation Committee may recommend suspending or withdrawing accreditation following a complaint under the procedures set out in section 10 of this handbook. Withdrawal will be recommended when the institution fails to cooperate with the requirements set out by the Academic Accreditation Committee.

- **Failure to meet the requirements for continuing accreditation**
  The Academic Accreditation Committee may recommend suspending or withdrawing accreditation if the institution fails to meet the requirements for continuing accreditation.
as set out in this handbook. Accreditation will be withdrawn immediately after the ratification of the decision by the Higher Education Council.

- **Additional grounds for immediate suspension or withdrawal**

  In addition to the above scenarios, the Academic Accreditation Committee may recommend suspending or withdrawing the accreditation of the institution with immediate effect for any serious breach of the regulations in this handbook, and on the following grounds:

  - Conviction of the owner(s), a company director or the head of the institution on either civil or criminal grounds relevant to the good management of the institution
  - Financial irregularity, where the institution is owned by individuals, or insolvency, where the institution is owned by a company
  - Failure to comply with all relevant laws and regulations of the HEC
  - Enrolling or offering to enrol students onto unauthorized degree programs in breach of the HEC directives or onto programs which lead to degrees awarded by an overseas body which is not itself accredited by a recognized accrediting agency
  - Failure to respond within reasonable time to a request from HEC in respect of a complaint from a student or external body
  - Non-payment of required fees
  - Failure to apply for re-accreditation by the deadline given
  - Failure to undergo a re-accreditation inspection by the accreditation expiry date
  - Failure to submit to a spot check, supplementary or early re-accreditation inspection required by HEC
  - Failure to submit a complete annual return by the deadline given
  - The making of any false or intentionally misleading statements on the forms or in associated documents of the application, annual return or any other submission to HEC
  - The making of any false or intentionally misleading statements or claims in respect of the nature or scope of the institution’s accreditation by HEC
  - Failure to notify HEC of a significant change within three months
  - Changes within the institution which render it no longer eligible for HEC accreditation.

  The above lists are not exhaustive. Although a breach of HEC’s regulations such as those listed above will usually lead to the Academic Accreditation Committee recommending suspension of accreditation while HEC carries out a thorough investigation, any failure by the institution to cooperate with the investigation promptly and to HEC’s full satisfaction will lead to the immediate withdrawal of the institution’s accreditation.

  The institution will continue to appear on the HEC directory of accredited institutions during any period of suspension, but will be removed if accreditation is subsequently withdrawn.
7.8.1 Appealing against the withdrawal of accreditation

If accreditation is withdrawn, the institution may appeal against the decision under the procedures set out in section 9 of this handbook.

7.9 Statement of accreditation

Following the award of accreditation, the institution is permitted to use the statement of accreditation, as well as being listed in the HEC directory of accredited institutions on the HEC website. The use of the statement in promotional materials is subject to certain conditions.

Acceptable forms of the statement are:

- “accredited by the Higher Education Council, Kingdom of Bahrain”
- “accredited by HEC”
- “HEC accredited”.

7.10 Website directory

An institution directory is published on the HEC website and represents the definitive, current list of HEC-accredited institutions. The institution should familiarize itself with the institution’s directory entry, check it on a regular basis and notify HEC if any obsolete or incorrect information is included.

In order to promote transparency and public accountability, engender trust in the accreditation system, and provide stakeholders with valuable information, all inspection reports will be published in full on the HEC website.
8. PROGRAMS AND AWARDS

8.1 Programs and awards

As part of its commitment to improving the quality of higher education provision in the Kingdom, HEC is designing a program accreditation framework. Once this framework is in place, all licensed institutions will be required to have all their programs accredited by HEC. Until this can be achieved, institutions will need to provide evidence that the qualifications they offer meet one of the following program approval requirements in that the award

- has been listed on the Bahrain Qualifications Framework and the level verified
- is accredited by a internationally recognized professional body (e.g. Association of Chartered Certified Accountants, Chartered Institute of Bankers)

Once the program accreditation framework has been implemented, institutions will be given a ‘grace period’ of two years to obtain HEC program accreditation.

8.2 Degrees

If an institution is offering an award which is “described as a degree”, it must have had degree-awarding powers officially bestowed upon it by the relevant regional or national educational agency. Before a private institution can offer courses leading to degrees, it must enter into a formal partnership agreement with a body which has accredited degree-awarding powers and is itself accredited by a recognized accrediting agency. This would normally be a national agency or, in the case of US degrees, a body recognized by the US Council for Higher Education Accreditation (CHEA). Institutions must clearly state the awarding university on all publicity material. Furthermore, institutions should not advertise pathways to a degree as a degree award.

If an institution is considering entering into a partnership enabling the offer of degree programs, it is strongly recommended that HEC is contacted to ensure that the awarding organisation meets HEC’s requirements. Institutions offering courses leading to degrees awarded by an overseas organisation should be aware that they need to show that they have taken reasonable steps to inform the person to whom the award was granted or any member of the public or particular individual to whom the offer or invitation was addressed that the award was not granted or to be granted by a national institution. Thus publicity material must state the location of the degree awarding organisation.
9. APPEALS

If a decision is made by HEC to refuse or withdraw accreditation, the institution may appeal against the decision under the following procedure. The decision to refuse or withdraw accreditation will have been confirmed in a letter to the institution, accompanied by sufficient details of the reasons why this decision was made.

The right of appeal is granted solely to provide an institution with the means of challenging either the assessment of the inspectors in the course of an inspection or the judgement of the Academic Accreditation Committee in coming to its recommendation.

An institution has no right within this appeals procedure to challenge either the criteria assessed and standards required for accreditation or the general regulations that accredited institutions must follow (as set out in this handbook and any addenda). The right of an institution within this procedure is rather to challenge the application of these criteria, standards and regulations in its individual case. For complaints about the criteria, standards and regulations of HEC’s accreditation scheme see section 10.3 of this handbook.

9.1 Lodging an appeal

If the institution wishes to appeal a decision, the institution must send to HEC written notice of its intention (by letter, by scanned letter via email or by fax). This written notice must be received by HEC within five working days of the date of the letter or email which confirms the refusal or withdrawal of accreditation. For this purpose, each working day is held to end at 14.00. Any letter confirming the refusal or withdrawal of accreditation will be delivered to the institution’s designated primary contact both by email and by recorded post. The institution must ensure that any correspondence addressed to the institution’s primary contact is opened and dealt with in their absence.

The notice of appeal must be accompanied by full payment of the appeal fee. This fee will be refunded if the Appeal Committee overturns the decision of the HEC.

9.2 Grounds for an appeal

The appeal submission must clearly state the grounds for the appeal, selecting one of the following arguments:

a) the Academic Accreditation Committee did not have all the relevant information available to it at the time, and/or

b) the decision was not made in accordance with the procedures or criteria set out in the Accreditation Handbook.

If the grounds for the appeal do not fall under either of these headings, an explanation must be provided.
9.3 Appeal submission

Within ten working days of its notice of appeal, the institution must submit a statement setting out the grounds for the appeal, selecting one of the arguments described above, together with any relevant supporting documentation.

9.4 The appeals process

An appeal will be heard by an Appeal Committee, which is an unbiased body made up of one independent Chair, one layperson and one member of the HEC Council who did not vote in the original recommendation of the Academic Accreditation Committee. The institution will have the right to request that the hearing be held in public.

9.5 Additional procedures for appeals

No appeal will be heard while the institution owes HEC any fees. If the institution fails to settle all outstanding debts within ten working days of its notice of appeal, its right to appeal will expire.

In the period between the notice of appeal and the outcome of the appeal, an accredited institution remains accredited and an unaccredited institution remains unaccredited.

When HEC receives the notice of appeal, it will send the institution a list of the individuals who may be asked to serve on the Appeal Committee. If the institution objects to any of these individuals serving, its objections and rationale should be submitted to the Chair of Council via the Secretary General within five working days of the list being sent. The decision of the Chair in this matter will be final.

Only material which was in existence at the time of the inspection or of the report's consideration by the Academic Accreditation Committee can be considered at an appeal. Any submission of material which was in existence at that time but was not supplied to HEC must be accompanied by an explanation of why it was not provided.

If the appeal is dismissed, the HEC decision will then be confirmed. A full new application will need to be submitted if the institution wishes to re-apply for HEC accreditation, but this will not be considered until HEC is first satisfied that all the requirements set out in the refusal/withdrawal letter have been or shortly will be met.

9.6 Appeal hearing

The appeal hearing will consider documentation comprising the following, where relevant:

- the most recent application form and supporting documentation submitted by the institution
- the relevant inspection report(s)
- written submissions from the inspectors who carried out the relevant inspection(s)
- the appeal submission described above
- any other material agreed by both HEC and the appellant to be relevant.

All parties to the appeal will receive the same documentary evidence.
The appeal hearing will normally take place within 25 working days of the notice of appeal. A representative of the institution and a representative (normally the Chair or Deputy Chair) of the Academic Accreditation Committee will have the right to appear at the hearing to give evidence to the Appeal Committee.

9.7 Decisions on appeals

At the end of the hearing, the Appeal Committee may make one of three decisions:

- To dismiss the appeal
- To order a new inspection at HEC’s expense
- To instruct the HEC to award or reinstate accreditation or re-accreditation.

The outcome of the appeal will be final and there will be no further recourse to the appeals process.

9.8 After the appeal hearing

- The Appeal Committee will inform the institution of its decision within five working days of the appeal hearing.
- The Chair of the Appeal Committee will make a written report to the Council, setting out the decision, its grounds and, if appropriate, recommending changes in the inspection or accreditation process, at which point the procedure will be deemed to be exhausted.
- The outcome of the appeal will also be reported to the next meeting of the Academic Accreditation Committee for its information.
- On completion, the appellant will have no further recourse to the appeals process.

9.9 Timeline for appeals (in working days)

- Day 1 - Notification of withdrawal or refusal of accreditation sent
- Day 5 - Deadline for notice of appeal and payment of the fee
- Day 10 - Deadline for submission of appellant’s grounds of appeal and supporting documentation
- Day 30 - Deadline for holding appeal hearing.
- Day 35 - Appellant receives official confirmation of the Appeal Committee’s decision
The appeal hearing will normally take place within 25 working days of the notice of appeal. A representative of the institution and a representative (normally the Chair or Deputy Chair) of the Academic Accreditation Committee will have the right to appear at the hearing to give evidence to the Appeal Committee.

9.7 Decisions on appeals
At the end of the hearing, the Appeal Committee may make one of three decisions:

- To dismiss the appeal
- To order a new inspection at HEC’s expense
- To instruct the HEC to award or reinstate accreditation or re-accreditation.

The outcome of the appeal will be final and there will be no further recourse to the appeals process.

9.8 After the appeal hearing

- The Appeal Committee will inform the institution of its decision within five working days of the appeal hearing.
- The Chair of the Appeal Committee will make a written report to the Council, setting out the decision, its grounds and, if appropriate, recommending changes in the inspection or accreditation process, at which point the procedure will be deemed to be exhausted.
- The outcome of the appeal will also be reported to the next meeting of the Academic Accreditation Committee for its information.
- On completion, the appellant will have no further recourse to the appeals process.

9.9 Timeline for appeals (in working days)

- Day 1 - Notification of withdrawal or refusal of accreditation sent
- Day 5 - Deadline for notice of appeal and payment of the fee
- Day 10 - Deadline for submission of appellant's grounds of appeal and supporting documentation
- Day 30 - Deadline for holding appeal hearing.
- Day 35 - Appellant receives official confirmation of the Appeal Committee's decision
10. COMPLAINTS

All accredited institutions must have in place an explicit and fair complaints procedure to which students, their parents/guardians or other representatives have access, and this procedure should be exhausted before a complaint is referred to HEC for mediation.

10.1 Complaints by students against an HEC-accredited institution

If a student or their representative has completed the institution’s own complaints procedure but has still not achieved a satisfactory resolution, the following should be submitted to HEC:

- a detailed letter of complaint, including a full description of the cause for complaint and the circumstances in which it arose
- a signed statement authorising HEC to investigate the complaint and to raise the matter with the institution on their behalf
- copies of all supporting documentation relating to the complaint. HEC staff will seek to resolve all complaints received against accredited institutions to the mutual satisfaction of the complainant and the institution, with the exception of complaints which appear to relate to offences more appropriately referred to a statutory authority.

What HEC will do

When HEC receives a complaint from a student or their representative against an accredited institution, HEC requests evidence to support the complaint and to show that the complainant has exhausted the institution’s complaints procedure.

Only if this evidence is received, will the procedure below be followed:

- the details of the complaint will be recorded by HEC staff
- HEC collates the relevant documentation
- the institution concerned will be informed of the nature of the complaint and asked to investigate its cause
- the institution will be required to submit a written response within ten working days, detailing the outcome of its investigation and, where appropriate, proposing a course of action to resolve the matter
- HEC will inform the complainant of the outcome of the institution’s investigation and any proposed course of action
- HEC will, with the agreement of both the complainant and the institution, make reasonable attempts to mediate between the two parties in order to resolve the matter
- as a result of its mediating role, HEC may make recommendations for resolving the matter but these will not be binding on either party.

If after HEC’s attempts at mediation the matter remains unresolved, a report on the complaint will be made to the Academic Accreditation Committee. A report will also be made to the Academic Accreditation Committee if more than three complaints against any one institution are received within one year.

The role of the Academic Accreditation Committee

If the Academic Accreditation Committee receives a report on a complaint against an accredited institution, it will assess whether or not there is evidence that the standards
required for accreditation are not being met, and it may make one of the following recommendations:

- To dismiss the complaint
- To require further investigation by HEC of the complaint, which may include an unannounced spot check at the institution’s expense
- To require the institution to undertake remedial or compensatory action where it is considered to have failed to meet its responsibilities or uphold the standards of accreditation; if the institution refuses to undertake such action, its accreditation may be suspended or withdrawn
- To require an immediate spot check, supplementary inspection or re-accreditation inspection at the institution’s expense where there is evidence that the standards required for accreditation are not being met; if the institution refuses to submit to the inspection, its accreditation may be suspended or withdrawn
- Recommend suspending or withdrawing accreditation; this recommendation is normally made only where the report of the complaint indicates that the institution has refused to cooperate with HEC’s investigation, that it has refused to take any required remedial or compensatory action, or that there is convincing evidence of illegal behavior by its senior management or any other serious breach of HEC’s regulations.

The Secretariat General of the Higher Education will notify the complainant and the institution in writing of the HEC decision.

**What HEC will not do**

HEC will not consider complaints under the following circumstances where:

- the complainant has failed, without good reason, to make use of the institution’s own complaints procedure
- the complainant fails to provide evidence to support the complaint
- the substance of the complaint is not relevant to HEC’s regulations or accreditation standards
- the complaint is made anonymously or solely by telephone or email; complaints must be made in writing and accompanied by the complainant’s name, address and signature
- the complaint relates to a refund claim but is not accompanied by legible proof of payment in the form of a receipt; copies of bank statements are not sufficient
- the complaint is already subject to a legal process
- the complaint relates to a contractual dispute between the institution and an employee or employees.

**10.2 Other complaints against accredited institutions**

HEC will carry out an investigation where a statutory body shares evidence or intelligence that a HEC-accredited institution is breaching legal requirements. Under these circumstances, the statutory body will be informed of the outcome of HEC’s investigation of the complaint.

No formal complaints procedure is available to any other complainant, but HEC may choose to carry out its own investigations of accredited institutions if it receives any evidence or intelligence of a failure to meet the standards required for accreditation or a breach of other HEC regulations.
10.3 Complaints against HEC

HEC is committed to working in an open, transparent and accountable way. This includes responding positively to complaints from institutions by investigating them thoroughly and, where appropriate and possible, correcting any mistakes identified.

Complaints about inspections

Complaints about the conduct of inspections should be addressed to the HEC accreditation team. No action will be taken if complaints of this nature are received more than five working days after the last day of the inspection.

Inspection feedback forms

An inspection evaluation questionnaire is emailed to the institution after every inspection. This should be used to submit any feedback (positive or negative) the institution may have about the inspectors or the conduct of the inspection. The formal complaints procedure is not a means for institutions to provide such feedback.

Complaints about inspectors or staff

The roles and responsibilities of HEC inspectors and staff are addressed fully in their training programs. Inspectors and staff are made aware of what is expected of them, both in the content of their work and in the way they carry it out. HEC takes seriously its duty to prepare inspectors and staff to do their work effectively, professionally and with due courtesy and regard to the institution and its staff. In turn, HEC expects that institutions will treat inspectors and staff with the respect, courtesy and professionalism necessary for a successful inspection.

HEC recognizes, however, that there might be occasions when institutions may wish to complain about the conduct, behavior and actions of HEC, its staff or its agents in relation to the published purposes, procedures, criteria, methods and protocols associated with its accreditation framework. Complaints such as these should be sent to the HEC accreditation team. Complaints about the HEC accreditation team should be sent instead to the Secretary General.

The HEC accreditation team may contact the institution to investigate any negative feedback. Feedback on an inspection is not passed to the inspector(s) concerned until after the inspection report has been considered by the Academic Accreditation Committee. Any relevant response from the inspector(s) will be passed to the institution.
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2. INTRODUCTION

Higher Education is vital to transforming Bahrain’s Economic Vision (2030) into a reality. Through the HEC’s recommendations and actions to reform the higher education sector, it is expected that the sector's quality, performance and outcomes will improve.

The role of academic accreditation is to keep pace with the comprehensive reform process in the higher education sector both nationally and internationally, in order to improve the quality of educational outcomes for graduates. In addition, the sector should provide educational opportunities for all citizens according to their needs, aspirations and abilities, which will ultimately help achieve the needs of the Kingdom of Bahrain and the prosperity of its economy.

Accreditation, as known in the international academic community, is a key policy instrument in upgrading the level of higher education institutions within Bahrain and ensuring the process of continuous development and improvement of the higher education sector. It ensures that a minimum level of standards has been met. This meeting of standards gives confidence to students, parents, employers and other countries that a robust system of accreditation is meeting the needs of all stakeholders.

Accreditation has two main components, namely institutional and program accreditation. Institutional accreditation is awarded to higher education institutions as one integrated entity, while program accreditation applies only to programs offered by higher education institutions.

This document sets out the standards for institutional accreditation which aim to ensure quality and continuous improvement of higher education to meet the needs of learners. The standards are presented in the following eight inspection areas:

Area 1: Governance, Strategy and Financial Management
Area 2: Academic Management and Administration
Area 3: Teaching, Learning and Assessment
Area 4: Research and Innovation
Area 5: Economy and Society Impact
Area 6: Student Recruitment, Support, Guidance and Progression
Area 7: Premises, Facilities and Learning Resources
Area 8: Quality Management, Assurance and Enhancement
Overall, there are 31 standards and 243 key indicators (KIs). A breakdown of these per standard is provided below:

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<td><strong>Total</strong></td>
<td><strong>31</strong></td>
<td><strong>243</strong></td>
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The following are the standards for institutional accreditation in Bahrain's higher education institutions and indicators adopted by the Council of Higher Education.
THE INSTITUTIONAL ACCREDITATION STANDARDS
3. THE INSTITUTIONAL ACCREDITATION STANDARDS

AREA 1: Governance, Strategy and Financial Management (3 Standards)

1. The institution must be effectively and responsibly governed (11 KIs)
   1.1. The organizational structure, including the role and extent of authority of any owners, directors or Board of Trustees, must be clearly defined, documented and understood by stakeholders including students.
   1.2. The President, Vice-President, directors, board members and other relevant persons must be suitably qualified and experienced, understand their specific responsibilities and be effective in carrying them out.
   1.3. Policies, procedures and systems linking governance and management must be well documented and effectively disseminated across the institution.
   1.4. The institution must engage in appropriate risk management planning, which is administered and monitored by named individuals.
   1.5. The governing body must conduct regular risk assessment exercises in all areas of the institution’s provision.
   1.6. The governing body must have systems for regularly reviewing its own performance.
   1.7. Any partnership or cross-border collaboration must contain a risk-management strategy to protect students should there be any dispute.
   1.8. There must be a clear separation of ownership and responsibility for financial matters from academic decision making.
   1.9. All relationships with other educational institutions and organizations must be defined formally and be fully transparent, with institutions compliant with partner or parent institutions’ requirements, where applicable.
   1.10. The institution must have a clear vision, mission and values which must be disseminated to all stakeholders.
   1.11. The vision, mission and values must underpin the institution’s strategy and be in line with national and global educational objectives.

2. The institution must have a clear and achievable strategy (5 KIs)
   2.1. The institution must have a clear strategy for the development of its higher education provision which must be supported by appropriate financial management and be in line with the HEC National Strategy for Higher Education in the Kingdom and the 2030 vision of a knowledge economy.
   2.2. There must be provision for stakeholder, including students and employers, input to inform the strategic direction of the institution.
   2.3. The strategy must be well communicated to all stakeholders including students, within and outside the institution.
   2.4. Accurate data must be collected and collated systematically in order to provide a reliable measure of success against key performance indicators.
   2.5. The governing body and senior management must conduct regular and systematic reviews of their own and the institution’s overall performance and measure this performance against strategic targets.
3. **Financial management must be open, honest and effective (5 KIs)**

   3.1. The institution must conduct its financial matters transparently and with appropriate probity.

   3.2. The institution’s finances must be subject to regular independent external audit.

   3.3. The institution must have robust and comprehensive budgetary procedures which ensure that its resources are sufficient and which demonstrate it is capable of utilizing its financial resources efficiently and responsibly.

   3.4. The institution must have a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of each department.

   3.5. Academic program managers must be given sufficient autonomy to allocate resources appropriately to achieve the program objectives and to maintain high standards.

**AREA 2: Academic Management and Administration (4 Standards)**

4. **The institution must be effectively managed (17 KIs)**

   4.1. The management structure must be clearly defined, documented and understood by all stakeholders including governors, management, staff and students.

   4.2. All senior managers must be suitably qualified and experienced, understand their specific responsibilities and be effective in carrying them out.

   4.3. There must be clear channels of communication between management, the Board of Trustees, staff, students and other stakeholders.

   4.4. There must be clearly delineated responsibilities and reporting arrangements at institutional, faculty, departmental, program and course levels. These must include provision for academic leadership at program and individual course level.

   4.5. There must be an effective committee structure with appropriate reporting lines which informs management decision-making and provides feedback to stakeholders including students.

   4.6. Committees and other meetings must have clear and appropriate terms of reference, must be scheduled to meet regularly and minuted accurately.

   4.7. There must be a set of comprehensive policies, regulations and procedures for staff and student conduct.

   4.8. There must be a published policy on complaints which includes a system for recording and monitoring complaints and the associated responses.

   4.9. Management must ensure that all information, internal and external, including publicity material, is accurate and fit-for-purpose.

   4.10. A policy must exist and be administered effectively regarding collection of and refund of student fees.

   4.11. Management must compile a report at least annually presenting the results of the institution’s reviews and incorporating action plans. Reports must include analysis of year-on-year student satisfaction, retention and achievement, staff performance (including research and other forms of scholarship) and a review of resourcing issues.

   4.12. Action plans must be implemented and reviewed regularly, with outcomes reported to management and subsequently to the governing body.

   4.13. Management must monitor and review academic and administrative staff performance through a clearly documented and transparent appraisal system.
4.14. There must be transparent and fair policies and procedures in place to recognize and reward staff through promotion or financial considerations.

4.15. Management must engage constructively with the wider community to promote mutual interests.

4.16. Management must ensure that the institution has the facilities and mechanisms in place to ensure capture of the most up-to-date facilities, resources, curricula and pedagogy in the international academic arena.

4.17. Management must demonstrate a willingness to forge national and international links which provide for the involvement of renowned academics and professionals.

5. Academic management must be effective (17 KIs)

5.1. Programs must be fully mapped to the Bahrain Qualifications Framework and have achieved or be in the process of achieving a ‘full confidence’ outcome from NAQQAET following a program review or have accreditation by recognized professional bodies or be subject to a formal articulation agreement with an internationally recognized HEI.

5.2. There must be appropriate procedures for the proposal, design and validation of programs of study which take cognizance of the mission of the institution, national imperatives, local, Gulf and international market demand and resource issues and reflect international norms.

5.3. The institution must have in place mechanisms to ensure and demonstrate that the content, design, approach and teaching methods of the curriculum are consistent and supportive of the learning outcomes.

5.4. Management must ensure that the stated curricula are delivered as stated in the prospectus and other related documentation and that HEC requirements and those from professional or other relevant bodies are met.

5.5. The institution must have clear policies, criteria and processes for academic appointments and promotions.

5.6. The institution must be able to demonstrate that the responsibility areas of the academic staff, as in teaching, research, consultancy, community outreach and academic administration, are clearly identified and show a balance in line with academic conventions.

5.7. The institution must ensure that there is a balance between the number of senior and junior academic staff.

5.8. The institution must ensure that there is a balance between the number of local and international academic staff.

5.9. There must be regular scheduled and minuted meetings of academic staff to review academic programs.

5.10. There must be an appropriate policy and effective procedures for the acquisition of academic resources to support programs.

5.11. The curriculum must reflect the interface between research and education.

5.12. Mechanisms must be in place to ensure a program of enhancement of teaching and learning is continuously developed, supported and evaluated.

5.13. Appraisal of teaching staff must include regular classroom observation, feedback and be followed up where necessary.

5.14. Academic managers must employ a system of mentoring and peer review to support faculty staff.
5.15. Newly appointed academic staff must have a thorough induction program and be offered ongoing support and guidance through a mentoring system.

5.16. Teachers must be supported in their continuing professional development and enabled to develop further pedagogic techniques to enhance student learning.

5.17. Teachers’ development must be supported by regular training and the provision of technology and tools to facilitate self-learning, access to information and communication.

6. The institution must be effectively administered (7 KIs)

6.1. Administrators must be suitably qualified and experienced and understand their specific responsibilities and duties.

6.2. The size of the administrative team must be sufficient to ensure the effective day-to-day running of the institution.

6.3. The administrative support available to the management must be clearly defined, documented and understood and appropriately focused to support its activities.

6.4. Policies, procedures and systems must be well documented and disseminated effectively across the institution.

6.5. Data collection and collation systems must be effective and accurate.

6.6. Classes must be timetabled and rooms allocated appropriately for the courses offered.

6.7. Comprehensive administrative records must be organized and stored efficiently, easily accessed and used effectively.

7. The institution must employ appropriately qualified and experienced managerial, administrative and technical staff (10 KIs)

7.1. There must be appropriate policies and effective procedures for the recruitment and continuing employment of suitably qualified and experienced staff.

7.2. The institution must ensure that there is a balance between the number of academic and non-academic staff.

7.3. Technical staff, including those working in laboratories, must be qualified, experienced and trained in their area of expertise.

7.4. The Human Resources team must be suitably qualified, experienced and have the necessary skills.

7.5. There must be effective procedures for the induction of all staff.

7.6. There must be a transparent and well-documented appraisal system for all staff.

7.7. There must be clear and appropriate job specifications for all staff.

7.8. All staff must be treated fairly and according to a published equality and diversity policy.

7.9. The institution must have a clear policy regarding the handling of legal issues relating to the employment of staff.

7.10. Staff must have access to a published complaints and appeals procedure.
AREA 3: Teaching, Learning and Assessment (2 Standards)

8. Teachers must be appropriately qualified and effective in facilitating student learning (12 KIs)

8.1. Teachers must be appropriately qualified in terms of subject knowledge, pedagogic and communicative skills, and experienced for the courses to which they are allocated.

8.2. The programs and their constituent courses must be delivered and assessed in ways that enable students to succeed, by developing the knowledge and skills which will be required for final examinations or assessments.

8.3. Learning outcomes for all programs must be articulated and be publicly available.

8.4. Teachers must be effective in recognizing individual learning needs and preferred learning styles and adapting their delivery to meet these.

8.5. Teachers must ensure that course delivery encourages the interactive participation of all students in classroom activities.

8.6. Teachers must use a mixture of large and small group, and individual activities to encourage and support students’ learning.

8.7. Teachers must provide students with access to any additional learning materials they deem necessary.

8.8. Teachers must produce schemes of work consistent with the syllabus and detailed lesson plans and deposit these with the administration.

8.9. Teachers must draw upon their own research and that of others in their teaching.

8.10. Students must be encouraged and enabled to develop independent learning skills and take responsibility for their own learning.

8.11. Students must have access to teaching staff outside classroom-based teaching and learning sessions.

8.12. The institution must provide students and teachers with access to appropriate resources and materials for study and encourage and support their use of these.

9. Assessment must be fair, well-organized and appropriate for the level and nature of the courses and students must receive timely and supportive feedback on their work (11 KIs)

9.1. Students must be provided with an assessment schedule in which required coursework and revision periods are detailed in advance with clear submission dates.

9.2. The principles, methods and practices of student assessment must be aligned with the curriculum of the courses and focused on measuring students’ achievement of the intended learning outcomes.

9.3. The link between assessment and learning outcomes must be reviewed periodically to ensure its effectiveness.

9.4. Assessment tasks must be clearly written indicating what the student needs to do to achieve stipulated levels of achievement.

9.5. Students must receive detailed and supportive oral and written feedback on their assessments and overall performance and progress, which must be effectively monitored.

9.6. There must be secure and efficient procedures for the administration of examinations and other means of assessment including the safe-keeping of assessment documents and records.
9.7. The institution must take appropriate steps to identify and discourage cheating, including plagiarism and other misdemeanours, and to penalize offenders.

9.8. There must be clear policies and procedures for students to claim mitigating circumstances and to appeal against marks awarded including an appropriate timeframe.

9.9. If final year projects are part of the program assessment, there must be a clear policy and systems for their assessment which are fair, transparent and relevant.

9.10. There must be effective procedures for internal and external moderation at pre- and post-assessment stages.

9.11. The institution must make student records and transcripts available to its students in a timely manner.

AREA 4: Research and Innovation (2 Standards)

10. The institution must demonstrate a commitment to research and provide adequate and appropriate facilities to promote research (4 KIs)

10.1. The promotion and facilitation of research must be a central feature of the institution’s overall strategic aims.

10.2. The interaction between research and education must be reflected in the curriculum, inform current teaching, and encourage and prepare students for engagement in research, scholarship and innovative development.

10.3. There must be policies which identify the priorities, facilities and development in research and commercialization.

10.4. Incentives must be provided for the academic staff and the departments to conduct research.

11. The institution must encourage and support its staff to undertake research and other forms of scholarship and to engage in other professional activities (10 KIs)

11.1. The institution must have well-defined policies and procedures for the undertaking of academic research and these are communicated effectively to all relevant stakeholders.

11.2. Institutions must include in their research policies a reference to the link between research development and commercialization.

11.3. The research strategy of the institution must be in line with national priorities.

11.4. Teachers must be encouraged and supported to undertake research in relevant fields and to publish their findings.

11.5. The institution must maintain a catalogue of up-to-date publications which are published on the website.

11.6. Academic staff contracts must require academic staff to engage in research and scholarship relevant to their teaching and other duties.

11.7. Appointment and promotion criteria and faculty performance evaluations must reflect the institution’s expectations for faculty research and scholarly activity.

11.8. Academic staff must be encouraged to seek out international universities or employers in order to develop collaborative relationships.

11.9. There must be a fair and transparent procedure for staff to seek financial support for their research and other professional development activities.

11.10. The institution must provide time for staff to meet regularly to share and discuss current research activities and, if appropriate, invite external speakers.
AREA 5: Economy and Society Impact (3 Standards)

12. The institution’s strategy must recognize the importance of promoting entrepreneurship and provide appropriate academic, physical and financial resources to support this (4 KIs)
12.1. The institution’s strategic plan must demonstrate a commitment to promoting entrepreneurship and enterprise across the institution.
12.2. The institution must have or be developing policies and mechanisms which will facilitate funding for graduate and staff enterprise and provide appropriate facilities such as incubator support.
12.3. The strategy must demonstrate an awareness of and commitment to the Kingdom’s employability agenda in that it encourages links with industry, encourages entrepreneurship and focuses on the knowledge economy.
12.4. The institution must ensure coverage in its curricula of the skills and competencies required by employers so as to prepare students for entry into the world of work. Views of employers must inform the review process.

13. The institution must proactively engage with the local and regional business community (5 KIs)
13.1. Employers must be encouraged to forge links with the institution so as to provide opportunities for internships and on-the-job training.
13.2. Students must be made aware of the current job market and provided with opportunities to engage with prospective employers.
13.3. The institution must engage with the wider community, such as employers and its alumni, in a formal and systematic manner in order to obtain feedback on the relevance of its curriculum and to identify areas for development and improvement.
13.4. The institution must collect data on the destination of its graduates to inform and improve its relationships with the world of work and its engagement with the Kingdom’s employability agenda.
13.5. Where appropriate, students must be given the opportunity to attain relevant workplace experience.

14. The institution must demonstrate its commitment to community service and engagement (5 KIs)
14.1. Institutional strategy must take into account the Kingdom’s national indicators and demonstrate a commitment to community and social outreach and lifelong learning.
14.2. The institution must demonstrate that it engages in community outreach and the provision of mutually beneficial services.
14.3. The institution must encourage its staff and students to engage with the local community around it through cultural, social and community service activities.
14.4. There must be a dedicated team which has responsibility for the institution’s work in community service.
14.5. The institution must produce an annual report detailing the community services it has been engaged in.
AREA 6: Student Recruitment, Support, Guidance and Progression (8 Standards)

15. Publicity material, both printed and electronic, including the website, must provide a comprehensive, up-to-date and accurate description of the institution and its curriculum (10 KIs)

15.1. Text and images in printed material and on the institution’s website must provide an accurate description of the institution’s location, premises, facilities and the range and nature of resources and services offered.

15.2. Information on the programs available must be comprehensive, accurate and up-to-date.

15.3. The institution’s website must provide content which is current and which provides support for existing and prospective students.

15.4. Information on staff qualifications and work experience must be made available to students.

15.5. There must be effective procedures to update information on a regular basis.

15.6. Students must be informed of the status of the qualifications offered, including the awarding body and level of award.

15.7. Students must be given some indication of the type of careers graduates may follow and any professional body exemptions that may be available.

15.8. Students must be informed of the full cost of all programs, including costs of examinations and any required materials.

15.9. Students must be informed as to the necessary English requirements for entry on to programs.

15.10. The institution must have a clear policy on the accreditation of prior learning and credit exemptions which is brought to the attention of prospective students.

16. The institution must take reasonable care to recruit and enroll suitable students for its courses (12 KIs)

16.1. Entry requirements for each program must be set at an appropriate level and clearly stated in the program descriptions seen by prospective students.

16.2. A formal application process must ensure that students meet the entry requirements and any claimed qualifications must be verified.

16.3. Prospective students must be properly briefed on the nature and requirements of the program(s) in which they are interested and provided with advice on choosing their program.

16.4. All application enquiries must be responded to promptly and appropriately.

16.5. Any recruitment agents must be properly selected, briefed, monitored and evaluated.

16.6. Students must receive a proper initial assessment, which includes language ability if appropriate, to confirm their capability to complete the programs on which they are enrolling.

16.7. Students with special needs must be identified in order that appropriate support mechanisms can be provided.

16.8. Entry on the basis of accreditation of prior learning and credit exemptions must be subject to a rigorous process and clearly documented.

16.9. The admissions policy must be reviewed regularly with relevant external stakeholders including employers.
16.10. The admissions policy must ensure that equal opportunities, anti-discriminatory and inclusion issues are demonstrably addressed.

16.11. Data on student performance must be used to inform the improvement of the student selection process.

16.12. All aspects of the application and recruitment process must be fair and transparent.

17. **Students must receive pastoral support appropriate to their age, background and circumstances (6 KIs)**

17.1. There must be a dedicated student support service which is provided by an adequate number of suitably qualified and trained staff, and which is accessible to all students and available to provide advice and counseling.

17.2. The support services must be evaluated regularly to ensure effectiveness and safety.

17.3. Students must receive an appropriate induction and information on the pastoral support available to them.

17.4. Students must be issued with a contact number for out-of-hours and emergency support.

17.5. The institution must have policies to avoid discrimination and a published procedure for dealing with any abusive behavior.

17.6. There must be effective systems to communicate with students out of class hours.

18. **Students must receive appropriate guidance (5 KIs)**

18.1. Students must be given an induction to the institution, their program of study and guidance on the use of facilities such as the library and IT.

18.2. Additional support or advice on alternative programs must be provided to students who are judged not to be making sufficient progress to succeed.

18.3. Students must have access to a fair complaints procedure of which they are informed in writing at the start of the course and offered guidance in submitting a complaint.

18.4. Students must have access to careers advice and guidance, including progression to further study, from a designated and suitably qualified and experienced member of staff.

18.5. Students must have access to careers information including prospectuses for further study.

19. **Student progress must be measured and recorded regularly on the basis of adequate and explicit data and effective remedial action taken where necessary (5 KIs)**

19.1. Assessment outcomes must be monitored to enable the identification of students who are not making satisfactory progress and there must be prompt intervention where appropriate.

19.2. There must be a clear and published policy on required student attendance and punctuality, and effective procedures and systems to enforce it.

19.3. Accurate and secure records of attendance and punctuality at each session must be kept for all students, collated centrally and reviewed at least weekly.

19.4. Student absences must be followed up promptly and appropriate action taken.
19.5. Students must be allocated an academic counsellor with whom meetings are held at least once per semester to review and discuss progress.

20. International students must be provided with specific advice and assistance (4 KIs)
   20.1. International students must receive appropriate advice before their arrival on travelling to and living in the Kingdom.
   20.2. International students must receive an appropriate induction upon arrival covering issues specific to the local area.
   20.3. Information and advice specific to international students must continue to be available throughout the course of study.
   20.4. Provision of support must take into account cultural and religious considerations. Where possible, students should have access to speakers of their first language.

21. Where residential accommodation is offered, it must be fit-for-purpose, well maintained and appropriately supervised (4 KIs)
   21.1. Any residential accommodation must be clean, safe and of a standard which is adequate to the needs of students.
   21.2. Any residential accommodation must be open to inspection by the appropriate authorities.
   21.3. A level of supervision must be provided appropriate to the needs of students.
   21.4. Students must be provided with advice on suitable private accommodation.

22. The institution must provide an appropriate social program for students and information on activities in the Kingdom (5 KIs)
   22.1. Students must be provided with appropriate information on opportunities for participation at events and other leisure activities which may be of interest.
   22.2. The social program must be responsive to the needs and wishes of students.
   22.3. Any activities within the social program must have been chosen with consideration for their affordability by the majority of students.
   22.4. Any activities organized by the institution must be supervised by a responsible representative with suitable qualifications and experience.
   22.5. Students must be encouraged to develop and participate in extra-mural activities.

AREA 7: Premises, Facilities and Learning Resources (6 Standards)

23. The institution must have secure possession of and access to its premises (3 KIs)
   23.1. The institution must have secure tenure on its premises.
   23.2. The institution must have the legal right to use these premises for the delivery of higher education.
   23.3. Where required, the institution must have access to suitable external premises for academic or non-academic purposes of a temporary or occasional nature.

24. The premises must provide a safe, secure and clean environment for students and staff (10 KIs)
   24.1. Access to the premises must be appropriately restricted and secured.
   24.2. The premises must be maintained in an adequate state of repair, decoration and cleanliness.
24.3. The institution must demonstrate an ongoing commitment to compliance with quantitative directives issued by HEC and included in the licensing requirements.

24.4. Current and projected student intake numbers must be directly related to the physical resources, capacity and capability of the institution to deliver its programs effectively.

24.5. There must be specific safety rules in areas of particular hazard (e.g. science laboratories) made readily available to students, staff and visitors.

24.6. General guidance on health and safety must be made available to students, staff and visitors.

24.7. There must be adequate signage inside and outside of the premises and notice boards for the display of general information.

24.8. There must be adequate circulation space for the number of students and staff accommodated, and a suitable area in which to receive visitors.

24.9. There must be toilet facilities of an appropriate number and level of cleanliness.

24.10. There must be adequate air conditioning, heating and ventilation in all rooms.

25. Classrooms and other learning areas must be appropriate for the programs offered (4 KIs)

25.1. Classrooms and other learning areas must provide adequate accommodation in size and number for the classes (e.g. lectures, seminars, tutorials) allocated to them.

25.2. Classrooms and any specialized learning areas (e.g. laboratories, clinics, workshops, studios) must be equipped to a level which allows for the effective delivery of each program.

25.3. There must be facilities suitable for conducting assessments such as examinations.

25.4. Teaching areas must be of an appropriate size and level of equipment for lectures, seminars and tutorials.

26. There must be appropriate additional facilities for students and staff (8 KIs)

26.1. Students must have access to sufficient space and suitable facilities for private individual study and group work.

26.2. Teaching staff must have access to sufficient personal space for preparing lessons, marking work and consultations with students.

26.3. Students and staff must have access to space and facilities suitable for relaxation and the consumption of food and drink where appropriate.

26.4. Students and staff must have access to secure storage for personal possessions where appropriate.

26.5. There must be individual offices or rooms in which academic staff and senior management can hold private meetings and a room of sufficient size to hold staff meetings.

26.6. Administrative offices must be adequate in size and suitably resourced for the effective administration of the institution.

26.7. Students must have access to medical facilities of a first aid nature and to a source of advice on general health and well-being issues.

26.8. Students must be provided with dedicated facilities which enable them to enjoy leisure activities such as sports and creative pursuits.
27. The library must be appropriately stocked and provide a fit-for-purpose learning resource for the student body (9 KIs)

27.1. The library must be adequately staffed with appropriately qualified and experienced staff.
27.2. The library must have sufficient space for independent student study and group working.
27.3. There must be sufficient provision of learning materials including books, journals and periodicals.
27.4. There must be a well-organized lending policy.
27.5. There must be clear, systematic and effective means of ensuring the adequacy and currency of library stock to reflect staff and student needs.
27.6. Library opening times must be sufficient to encourage and support student independent learning.
27.7. Students and staff must have access to e-library and e-learning facilities which are regularly updated.
27.8. Library facilities and resources must be accessible to students and staff with disabilities.
27.9. The library managers must produce a plan for improvement to the facilities and resources and ensure that these are included in their budgetary requirements.

28. The Information Technology resources must be well-managed and provide a fit-for-purpose learning resource (9 KIs)

28.1. IT staff must be suitably qualified, experienced and knowledgeable.
28.2. There must be sufficient computers of the necessary specification to meet student and staff needs.
28.3. There must be provision of appropriate, up-to-date software which reflects the needs of the programs and research projects.
28.4. The institution-wide IT systems must be fit-for-purpose and efficiently maintained and upgraded to ensure a reliable network is available to all stakeholders including students.
28.5. There must be an effective means of ensuring the renewal of hardware and software to ensure efficiency and currency which is supported by adequate financial resourcing.
28.6. IT facilities must be accessible to students and staff with disabilities.
28.7. Learning management systems and virtual learning environments must be available and effectively managed.
28.8. The institution must use social media effectively to engage with and improve student development.
28.9. The institution must proactively search out new IT resources which will enhance the learning experience and promote their use across the institution.

AREA 8: Quality Management, Assurance and Enhancement (3 Standards)

29. The institution must have effective systems to review its own standards and assess its own performance (13 KIs)

29.1. The institution must have dedicated accreditation and quality assurance teams which comprises staff with relevant qualifications, knowledge and experience.
29.2. The accreditation and quality assurance team must continuously monitor its own performance, referring to external quality assurance systems and international benchmarks.

29.3. The institution must ensure that it takes into account the views of all its stakeholders, to include employers, students and the wider community, when collecting data for accreditation and quality assurance purposes.

29.4. The institution must undertake regular and systematic monitoring of its operations.

29.5. The institution must conduct periodic reviews of all aspects of its performance against clearly specified and appropriate performance indicators.

29.6. The nominated leader for each course must produce an end-of-session (semester or year) report which includes measures of student satisfaction, completion rates and achievement levels.

29.7. The nominated program leader, drawing upon reports from its constituent courses, must produce an annual program report which includes analysis of year-on-year results on student satisfaction, achievement levels, completion rates and progression to further study or employment.

29.8. Reports which present the results of the institution’s reviews, evaluate its performance and incorporate action plans, must be compiled at least annually. These are considered by senior management and the board of trustees and, where appropriate, shared with all stakeholders including students.

29.9. All programs must be subject to annual review and to full revalidation every four years.

29.10. Annual review and revalidation of programs must involve external assessors.

29.11. The management of student assessment must be subject to independent external scrutiny which provides evaluation and suggestions for improvement.

29.12. All quality management policies and procedures must be clearly documented and brought to the attention of staff and, where appropriate, students and other stakeholders.

29.13. Particular attention must be paid to the quality of the student learning experience and to ensuring there is fair treatment of all students.

30. The institution must regularly obtain and record and analyze feedback from students and other stakeholders and take appropriate action where necessary (6 KIs)

30.1. Views of all stakeholders, including teachers and students, partner institutions and employers, must be canvassed and recorded regularly through various means including face-to-face meetings, feedback questionnaires and, where appropriate, formal student representation.

30.2. There must be well-defined policies for obtaining feedback from students on academic staff performance.

30.3. The views of stakeholders including students must be considered objectively, evaluated thoroughly and, where necessary, appropriate action taken.

30.4. There must be effective means of responding to stakeholder opinion and keeping them informed of any actions taken, through formal feedback mechanisms.

30.5. Key performance indicators must include analysis of student outcomes in terms of the current year and year-on-year performance and any significant variations in student achievement between different program components.
30.6. The institution must pro-actively engage with its alumni and encourage interaction with current students to provide support, mentoring and career advice.

31. The institution must have a strong commitment to, and procedures that facilitate, continuing enhancement of its provision (7 KIs)

31.1. All stakeholders including students must be invited and encouraged to make suggestions for enhancement.

31.2. In their annual appraisal all staff must be required to identify where they have facilitated enhancement and to identify further areas requiring enhancement.

31.3. End-of session course and annual program reports must include enhancements made and identify further areas requiring enhancement.

31.4. Action plans must be implemented and reviewed regularly within the institution’s committee structure.

31.5. Staff professional development needs must be identified through appraisal and other means and measures taken to support staff to address these.

31.6. The institution must keep research resources and facilities under review so as to find ways of enhancing its research capabilities.

31.7. The institution must have formal mechanisms in place to monitor the information gathered internally and externally, to make any enhancements deemed necessary and measure their impact.
NEW INSTITUTIONS

Institution informs HEC of license application

Institution is sent full application for licensing form to complete

Institution sends in completed form and application fee

HEC scrutinize and check all documentary evidence, legal and financial status, history and take up references

Application sent to NAQQAET for comment

Application meets all requirements

Yes

Outstanding documentation or further evidence requested

Institution provides satisfactory response

Yes

Provisional license is granted and institution advised it has 6 months to submit application for institutional accreditation

No

Application is rejected and institution has to resubmit
Appendix 2

The Accreditation Process

Application through to inspection

Pre-application advice

Accreditation Handbook

Online Information

Institution submits application

Yes

Receipt of form recorded and required fees paid

Yes

Initial scrutiny Check of license status of institution, application form and supporting documentary evidence All in order?

Yes

Initial scrutiny signed off by Accreditation Manager.
Duration of inspection and composition of team decided

Full inspection arranged
Dates agreed
Inspection team formed
Institution completes internal audit
Lead inspector, administration staff and HEI agree inspection timetable

Institutional inspection takes place
Covering 8 inspection areas:
- Governance, Strategy, Financial Management
- Academic Management and Administration
- Teaching, Learning and Assessment
- Research and Innovation
- Economy and Society Impact
- Student recruitment, Support, Guidance and Progression
- Premises, Facilities and Learning Resources
- Quality Management, Assurance and Enhancement

Inspection report submitted to HEC no later than 4 weeks after inspection
Inspection team send in claims for fees and expenses

Yes

Outstanding documentation or further evidence requested

Yes

No

Institution provides outstanding documentation

Appendix 1

The Accreditation Process

NEW INSTITUTIONS

Institution informs HEC of license application

HEC scrutinize and check all documentary evidence, legal and financial status, history and take up references

Application meets all requirements

No

Yes

Outstanding documentation or further evidence requested

Provisional license is granted and institution advised it has 6 months to submit application for institutional accreditation

Application is rejected and institution has to resubmit

Yes

Institution provides satisfactory response

Application sent to NAQQAET for comment

Institution sends in completed form and application fee

Institution is sent full application for licensing form to complete

Institution completes internal audit

Lead inspector, administration staff and HEI agree inspection timetable

Yes

No

Online Information

Accreditation Handbook

Pre-application advice

Yes

No

Outstanding documentation or further evidence requested
Appendix 3

The Accreditation Process

Report processing

If necessary, lead inspector contacted for clarification or further information

Lead inspector contacted - report requested and received

Yes

Report logged in

Yes

Accreditation team complete first edit of report

PDF version of report sent to institution for factual accuracy check

Yes

If necessary, lead inspector contacted for comments on institution's response

No

Report received no later than 4 weeks after inspection

No

Any further amendments made and report prepared for Academic Accreditation Committee

Report sent to AAC members 2 weeks before meeting

HEI informed within 10 days of issues which need addressing before accreditation can be awarded

Decision to award accreditation

Decision to defer award of accreditation

Decision to refuse accreditation

Academic Accreditation Committee meeting

All reports reviewed and recommendations made on accreditation

Decisions are made by the full HEC

Accreditation awarded for the full 4 years or shorter period if AAC has reservations

If documentary evidence only is required, institution is given a deadline for receipt

HEI is informed of non-compliance with standards and given deadline by which all action points must be addressed

Or

Yes

No

Report received no later than 4 weeks after inspection

Lead inspector contacted - report requested and received

Yes

Report logged in

Accreditation team complete first edit of report

PDF version of report sent to institution for factual accuracy check

HEI agree with facts

Lead inspector contacted for comments on institution's response

Yes

No

Any further amendments made and report prepared for Academic Accreditation Committee

Report sent to AAC members 2 weeks before meeting
Appendix 4

The Accreditation Process

Academic Accreditation Committee recommendations and actions

Academic Accreditation Committee meeting
All reports reviewed and recommendations made on accreditation
Decisions are made by the full HEC

Decision to award accreditation
Accreditation awarded for the full 4 years or shorter period if AAC has reservations

Decision to defer award of accreditation
HEI informed within 10 days of issues which need addressing before accreditation can be awarded

Decision to refuse accreditation
HEI informed within 10 days
HEI made aware of appeals procedure

If documentary evidence only is required, institution is given a deadline for receipt

Institution submits documentation which Accreditation Team reviews. If satisfactory the AAC can recommend that accreditation is awarded

HEI notified within 10 days
Any action points noted
Certificate issued

Report posted on HEC website

Interim inspection arranged within 12 months

HEI informed of non-compliance with standards and given deadline by which all action points must be addressed

HEI informs HEC that they are complying. A supplementary inspection is arranged. Dates agreed and inspection team formed

A supplementary inspection is conducted. Report produced and sent to AAC

AAC recommend the award of accreditation
HEC decide to award accreditation

AAC recommend NOT awarding accreditation
HEC decide not to award accreditation
Appendix 5

Documents to be submitted at the application stage

1. Documents authenticating the legal status of the institution, including list of directors, partners and/or legal owners.

2. Evidence of the ownership or tenure of the premises.

3. Copies of the last three years' audited annual accounts (if the institution is still in its early stages, please supply internal accounts, or some other documentation to prove the financial status e.g. bank statements).

4. Organogram or outline description of the management structure with names of post-holders.

5. Detailed CVs and job descriptions of all senior management and academic staff.

6. Staff handbook (including complaints, disciplinary and grievance procedures).

7. Student handbook (including complaints, appeals, complaints and grievance procedures).

8. Current prospectus, course brochures, and other marketing materials.

9. Student application form with details of fees and refund policy.

10. Outline curriculum for each academic programme, including assessment procedures.

11. Current class timetables.

12. Copies of partnership agreements with international higher education institutions or chartered bodies.

13. Evidence that the awards offered at the institution have been placed on the Bahrain Qualifications Framework.
Appendix 6

Documentation to be provided at the inspection

(N.B. The following list is not exhaustive and inspectors will ask for further documentation at the inspections).

Area 1: Governance, Strategy and Financial Management

1. Details of mission, vision, values, behaviors
2. List of members of Board of Trustees, all councils and committees
3. Minutes of relevant committee or board meetings
4. Minutes of staff meetings
5. Up-to-date organogram
6. Detailed job descriptions and CVs for all managerial and administrative staff
7. Staff Handbook
8. Up-to-date, signed contracts of employment for senior, academic and non-academic staff
9. Up-to-date prospectus and marketing material
10. Risk assessments for all aspects of provision to include academic partnerships, health and safety, SWOT analysis
11. Current Strategic Plan
12. Strategic Plan for next period
13. Audited accounts for the past three years or less if institution has not operated for that period
14. Policy for management of budget at faculty level
15. Any documents required by the inspection team as evidence of compliance with the standards in this area

Area 2: Academic Management and Administration

16. Whole course/academic year plans (schemes of work)
17. Timetables for all courses offered by the institution
18. Detailed CVs for all academic staff, including evidence of academic qualifications
19. Procedures for internal program approval, maintenance and change
20. Course descriptions
21. Staff files
22. Codes of conducts for faculty, administration and students
23. Complaints procedures
24. The annual reports for the last three years
25. The Evaluation System of Faculty and Administrative body
26. Recruitment and employment instructions
27. Any documents required by the inspection team as evidence of compliance with the standards in this area

Area 3: Teaching, Learning and Assessment

28. Sample of completed lesson plans
29. Samples of lecture notes
30. Samples of marked student work
31. Sample placement tests (if any)
32. Record of student year-on-year progression
33. Summaries of results/grades awarded for previous three years for each academic program (or from start date, if the course has not been available for that time)

34. In the case of degree programs, copies of formal agreements with degree-awarding bodies

35. Copies of external examiners’ reports for the previous three years for each academic program (or from start date, if the course has not been available for that time)

36. Copies of annual reports to the awarding bodies for the previous three years

37. Copies of any academic reviews carried out by or on behalf of the awarding organization

38. Completed classroom observation forms

39. Staff appraisal procedures and completed documentation

40. Evidence of teacher monitoring

41. Any documents required by the inspection team as evidence of compliance with the standards in this area

**Area 4: Research and Innovation**

42. Policy on research and details of how this fits into the strategic plan

43. List of recent publications in each faculty

44. List of active research projects in each faculty

45. List of organizations with which the institution engages in research

46. Incentives, rewards and financial support system for scientific research

47. Research guide for faculty and students

48. Research budget (according to the financial regulations)

49. Any documents required by the inspection team as evidence of compliance with the standards in this area

**Area 5: Economy and Society Impact**

50. Policy on entrepreneurship and examples of how this has been promoted and facilitated

51. Report on cooperative relationships with local employers

52. Report on current and past work placements

53. Details of community outreach policy

54. Report on community service and outreach projects conducted in the last three years

55. Any documents required by the inspection team as evidence of compliance with the standards in this area

**Area 6: Student Recruitment, Support, Guidance and Progression**

56. Student files with details of registration, enrolment, attendance and qualifications

57. Student induction packs both for home and international students

58. Student Handbook

59. Completed student application forms and any student contracts

60. Policy documents relating to discrimination, bullying and abusive behavior

61. Documents related to residential accommodation (if applicable)

62. Destination data of last cohort of graduates

63. Report on student complaints received in the past three years and their resolution

64. Sample of general correspondence with students

65. Briefing materials for agents if used

66. Evidence of attendance monitoring, including class registers for each course/program

67. Students’ social program – current and list of past activities

68. Details of sports and social facilities available to students
69. Any documents required by the inspection team as evidence of compliance with the standards in this area

**Area 7: Premises, Facilities and Learning resources**

70. Current lease agreement or proof of ownership  
71. Floor plan of each site being inspected  
72. Information for students on learning resources to include library and online resources available  
73. CVs of IT staff  
74. Report on IT facilities available to students for both academic and personal use  
75. Any documents required by the inspection team as evidence of compliance with the standards in this area

**Area 8: Quality Management, Assurance and Enhancement**

76. CVs of the Quality Assurance team  
77. Internal quality assurance documentation  
78. Report on the institution’s performance against its own key indicators  
79. Copies of any policies developed by the institution as a means of quality enhancement  
80. External quality assurance documentation (if any)  
81. Documents relating to external moderation (if any)  
82. Copies of annual reports to the awarding bodies for the previous three years (if any)  
83. Copies of any reviews carried out by or on behalf of the awarding organizations (if any)  
84. Staff appraisal procedures and completed documentation  
85. Stakeholder feedback forms  
86. Completed feedback forms last three years  
87. Action plans for dealing with stakeholder feedback  
88. Internal annual performance reviews at institution, faculty and department levels  
89. Copies of any policies developed by the institution as a means of quality management  
90. Copies of institutional and program reports produced by NAQQAET and HEC  
91. Any documents required by the inspection team as evidence of compliance with the standards in this area