

**King Saud University-College of Medicine
Vice Deanship for Quality & Development**

Academic Quality Unit

Academic Quality Unit Manual



1435/2014

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Introduction

AQU establishment:

The university has created a designated Vice Dean in each college for quality and development. In the College of Medicine this has been created in July 2008. The Vice Dean is responsible for all quality assurance and management activities whether in the College or the Hospital. A full academic quality unit has been created and is running by a director, a consultant, two coordinators and 7 secretaries.

Principles

Quality

Quality in education and training means a commitment to identifying and meeting the needs and expectations of learners.

Improvement

Improvement, arising from regular monitoring of the service offered, should be at the heart of any quality assurance process.

Transparency

Transparency will ensure that those involved on all sides of the learning process are aware of their roles and what they are entitled to expect. Making explicit that which had previously been assumed, and possibly misunderstood, is one of the key functions of quality assurance.

Consistency

Consistency and fairness are key constituents of any process from the perspective of the consumer. They have a particular relevance for learners seeking awards.

Equality

Equality, integrated in quality assurance procedures, will facilitate greater access to a diverse range of learners.

These guidelines will assist the quality assurance member to develop a quality assurance system which makes clear:

- The principles and values underpinning the provider's education and training programmes and related services. These will be set out in the Mission and Policies which should inform:
 - Management and staff as to the general approaches to follow in their work.
 - Learners and other stakeholders as to what they can expect of the provider.
- The procedures designed to implement the policies.
- An internal monitoring system which will regularly measure the effectiveness of the procedures
- A self evaluation system which will examine and report on the quality of programmes and services. This evaluation will include the views of learners and of an external evaluator who can make comparisons with other similar provision.
- A system of responding to the findings of monitoring and evaluation which will address areas for improvement and build on areas of strength.



Definitions in Quality

Quality

It is about satisfying the *requirements* of the customer who bought the product or service and it is about being fit for the *purpose* for which the product or service was bought.

Academic quality

Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate and effective teaching, support, assessment and learning opportunities are provided for them.

Academic standards

Academic standards are a way of describing the level of achievement that a student has to reach to gain an academic award (for example, a degree). It should be at a similar level across the Kingdom.

Quality assurance (QA)

Quality assurance refers to a range of review procedures designed to safeguard academic standards and promote learning opportunities for students of acceptable quality.

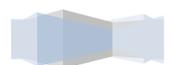
Quality system

A quality system, also known as a Quality Assurance (QA) system or a Quality Management System (QMS), is a management system that helps to ensure the consistency of quality of the goods or services (education) that are supplied. Compliance with Quality System Standards is demonstrated by completion of a successful quality system audit conducted by a certification organization acceptable to the Government which is in our case: The National Commission for Academic Accreditation & Assessment (NCAAA)

What is meant by National Qualification Framework

A Qualifications Framework is an instrument for the development, classification and recognition of skills, knowledge and competencies along a continuum of agreed levels. It is a way of structuring existing and new qualifications, which are defined by learning outcomes, i.e. clear statements of what the learner must know or be able to do whether learned in a classroom, on-the-job, or less formally. The Qualifications Framework indicates the comparability of different qualifications and how one can progress from one level to another, within and across occupations or industrial sectors (and even across vocational and academic fields if the NQF is designed to include both vocational and academic qualifications in a single framework.

The system for accreditation and quality assurance in the Kingdom of Saudi Arabia is designed to ensure that the quality of higher education is equivalent to high international standards, and is widely recognized as such in the international academic and professional communities. The National Qualifications Framework is an important element in this system. It is intended to ensure consistency within the Kingdom in the standards of student learning outcomes



regardless of institution attended, and to make clear the equivalence of those standards with those for equivalent awards granted by higher education institutions in other parts of the world. The Framework will help to provide appropriate points of comparison in academic standards for institutions in their planning and self review processes, for external reviewers involved in program accreditation processes and institutional reviews, and for employers, in understanding the skills and capabilities of graduates they may employ.

The framework describes the expected increasing levels of knowledge and skill in these areas for each qualification. Developing these attributes will require use of methods of instruction that take students well beyond the acquisition of knowledge and skills and emphasize their use in practical situations on a continuing basis.

The mission of the undergraduate program is: *To prepare physicians who would be able to meet and respond to the changing health care needs and expectations of the Saudi Arabian community.*

The identified **values** are:

- Creativity
- Excellence
- Teamwork
- Honesty
- Accountability
- Lifelong learning

Main Strategic objectives of the program:

- To prepare doctors who possess knowledge, skills and attitudes that will insure that they are competent to practice medicine safely and effectively.
- To ensure that graduates have appropriate foundation for lifelong learning and further training in any branch of medicine.
- To help graduates develop to be critical thinkers and problem solvers when managing health problems in the community of Saudi Arabia.



Academic Quality Unit Vision, Mission and Objectives

Academic Quality Unit Vision

Leading the institution to international levels of quality and excellence

Academic Quality Unit Mission

Create a culture of quality and excellence in The College of Medicine by monitoring and improving all activities related to Medical Education, Research, and Health Care

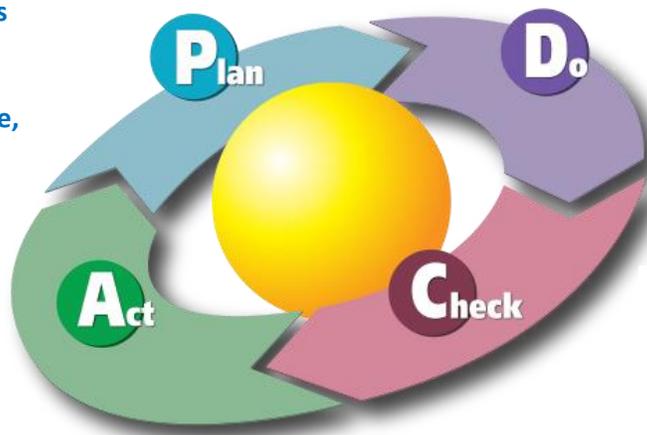
Academic Quality Unit General Objectives

1. Monitor and support the implementation of the Strategic Plan for The College of Medicine
2. Promote the culture of quality in The College of Medicine among staff, employees, and students.
3. Monitor and improve the quality of governance and administration of The College of Medicine.
4. Monitor and improve the quality of teaching and learning and all related matters in The College of Medicine both at Undergraduate and Postgraduate levels.
5. Monitor and improve the quality of Medical Research in The College of Medicine and assuring that it is conducted in accordance to the International Ethical Guidelines.
6. Lead, support, and follow the accreditation of The College of Medicine in a spirit of using accreditation as a quality improvement tool.
7. Suggest, support, organize, and evaluate all new quality improvement initiatives in The College of Medicine.



How do the AQU work ? The quality cycle is:

- Objectives
- Questions & Predictions (Why)
- Plan to carry out the cycle (who, what, where, when)



- Carry out the plan
- Document problems
- Begin analysis of data

- What changes are to be made?
- Begin next cycle

- Complete the data analysis
- Compare data to predictions
- Summarize what was learned

- ✚ *Plan:* Plan what you want to change and make measurements (using the dimensions of quality as a guide) to confirm the problem. Diagnose what can be improved and decide on the best way to make the change.
- ✚ *Do:* Implement the change.
- ✚ *Check:* Using the indicators in the “Plan” step of the cycle, measure the impact of the change. Look for positive, negative and unexpected impacts, because changes in complex systems can have negative side effects and unintended consequences.
- ✚ *Act:* Act on the results of the study. The net result should be more modifications and changes. Depending on the results, you then re-enter the “Plan” step again.

What is the role of the Academic Quality Unit (AQU)?

Our main role is to ensure that high standards within teaching and learning processes for undergraduate and postgraduate programs are recognized and awarded, and problems can be identified and addressed.

What the AQU do?

- 1- Overseeing the overall program planning, delivery and evaluation by following up with:
 - The preparation of academic course specifications, learning objectives and plans.
 - All course and program reports and implementing improvement steps depending on results.
 - The Design and conduct of academic quality educational programs and activities.
 - The assessment and examination methods and results in collaboration with departments and Medical Education Department.

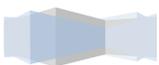


- 2- Dealing with the administrative processes including:
 - Preparing and updating of job descriptions of main academic positions and “Terms of Reference” of all college committees
- 3- Creating policies and procedures related to academic functions of the College and monitoring compliance with policies and procedure.
- 4- Monitoring academic staff performance, this is implemented by:
 - Preparing the annual academic activities self report and producing detailed comparative reports between Departments/Units and staff for academic loads and performance. This self reported form includes all teaching, research, community services, continuance medical education, and clinical work. The report is sent to each faculty member in the beginning of each year. His/her performance is compared to the average of the department and the college. The chairman of the department discusses each faculty report with the faculty member in details. Comments are documented and a plan is set and documented for the upcoming year.
 - Preparing, analyzing and reporting students satisfaction about the staff performance
5. Ensuring the effective implementation of College systems for the comparability of the standards of programs of study - with reference to standards across and within disciplines.
6. Preparing forms and surveys for data entities.
7. Advising on any other matters which may from time to time be determined by the Academic Board.

All quality planning, reports and surveys were discussed and approved by the College Board. These evaluations and reports provide an overview of performance for the program as a whole to guide planning for improvements. The AQU establishes a plan for evaluation for each academic year to ensure regular monitoring of courses and continuous improvement of both the program and courses. VDQD sends the survey reports to the corresponding department, in which the report is discussed at various levels including the department board. Based on these discussions a quality improvement plan is set for the course. This is followed up by the AQU.



What the AQU do?



Academic Policies & Procedures.

Definitions

Policies

A policy is a documented statement of principle and approach to a particular area of education/training. It is also a tool which QA team can use to inform current and prospective learners of what they can expect from program.

Policies will usually be quite concise and not contain much detail regarding implementation. However, each policy should implicitly or explicitly state the QA team's commitment to address the issues listed in each of the policy areas in these guidelines. To be effective, a policy must be disseminated to all those that it is intended to inform.

Procedures

To be translated into practice, a policy must be broken down into one or more clear and coherent processes. The statements of how these processes are carried out are the procedures, and their development will be informed by the relevant policy.

A procedure covering any process will generally specify;

- the title of the procedure relates to the task(s) which it is designed to perform.
- the method(s) used to fulfill the purpose of the procedure.
- who applies this method(s).
- the evidence that will be generated when the procedure is carried out.
- how the effectiveness of the procedure will be monitored by whom, how often, in what way, etc.

What is termed a procedure can take many forms. e.g. a staff handbook may be 'the procedures covering aspects of staff recruitment and development.

Internal Monitoring

Once policies and procedures are developed and implemented, the next phase of the quality assurance process is to monitor the learning effectiveness on an ongoing basis. Internal monitoring can be done in various ways, some formal, others less so; Internal monitoring must be systematic and consistent.

Internal monitoring should identify areas of provision which are successfully implementing policy and those which are not. To recognize what is successful implementation, a provider will need to identify a tangible form of evidence. Where the evidence is not present, then remedial action needs to be identified and taken. This might mean the relevant procedure needs to be applied more consistently or that the procedure or policy needs to be updated. In this way continuous improvement becomes a reality.

It should be clear for each procedure that:

- The responsibility for monitoring its effectiveness has been assigned to a specific job role.
- It will be monitored at a specified frequency.
- It will be monitored in a particular way.



Policies and procedures established by the academic quality unit

- 1- **Students with poor academic performance (AQ IPP 001).**
- 2- **Students with psychological illnesses (AQ IPP 002).**
- 3- **Students survey system (AQ IPP 003).**
- 4- **Undergraduate examination (AQ IPP 004).**
- 5- **Undergraduate Plagiarism (AQ IPP 005).**
- 6- **Staff dispute against student evaluation (AQ IPP 006).**

Students with poor academic performance (AQ IPP 001)

1.0 Conditions:

This General Internal Policy and Procedure applies on, Academic Guidance Committee, Course organizers, Heads of Departments and Academic Quality Unit (AQU),

2.0 Purpose:

To provide opportunity for students with poor academic performance to improve their academic achievement in accordance with the college and program missions.

3.0 Definitions:

College mission:

- To **educate and train** future health professionals in an innovative learning environment.
- To **explore** new areas of **research** and produce significant scientific contributions to the world.
- To **provide** high quality compassionate healthcare to the Saudi society.
- To **integrate** education, research, and healthcare in an inclusive environment.

Program mission:

To prepare physicians to meet and respond to the changing health care needs and expectations of the Saudi Arabian Community.

Poor academic performance:

Students who obtained grade D in more than 50% of courses or with cumulative grade-point averages below 2 and students who received grade F in any number of courses.

4.0 Policy:

Poor performance and failing students should be helped to overcome their academic weakness and to improve their grade.



Students with psychological illnesses (AQ IPP 002).**1.0 Conditions:**

This General Internal Policy and Procedure applies on, Academic Guidance Committee, Psychiatry Department, Course Organizers, and Academic Quality Unit (AQU).

2.0 Purpose:

To provide an opportunity for psychologically ill students to overcome their sufferings and improve their performance.

3.0 Definition:

Psychologically ill students: Students with psychological diseases diagnosed by a psychologist or psychiatrist.

4.0 Policy:

Psychologically ill students should be helped to overcome their sufferings and to improve their performance.

Students survey system (AQ IPP 003).**1.0 Conditions:**

This General Internal Policy and Procedure applies on Academic Quality Unit (AQU), Course organizers and Heads of Departments

2.0 Purpose:

To provide opportunity to students to express their opinion about and expectations from, the learning outcomes, resources, teaching staff and assessment to share in program improvement

3.0 Definitions:

Intended Learning Outcomes: what the student is expected to know and be able to do at the end of a course or programme according to a given standard of performance.

4.0 Policy:

- 4.1 The students should be involved in evaluation of courses content and implementation
- 4.2 The students should be involved in evaluation of their teaching staff members

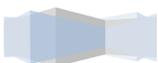
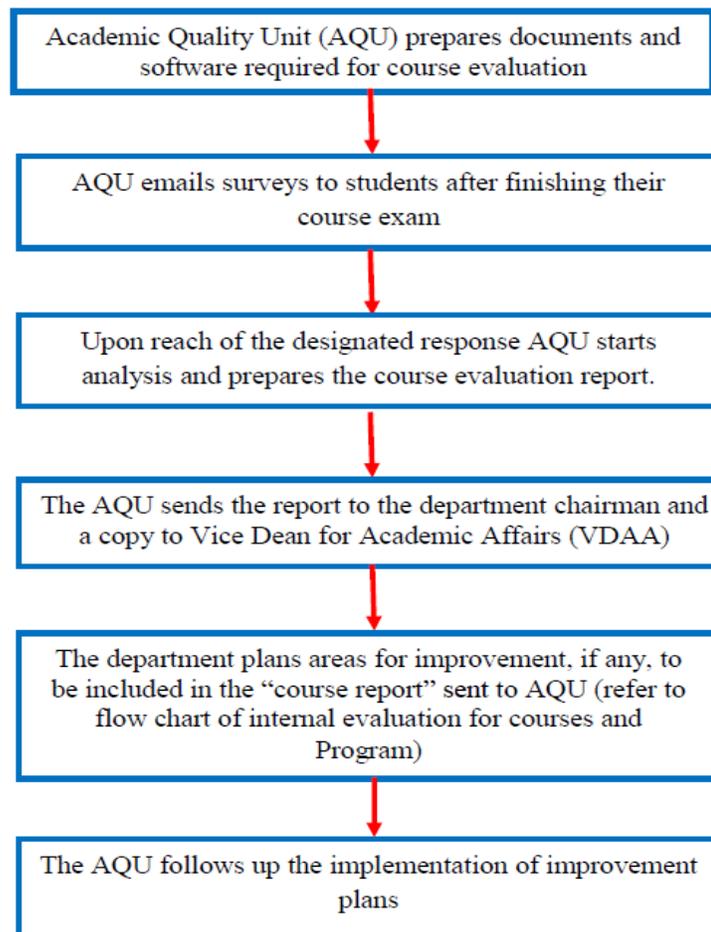


Academic Quality Unit
(AQU)



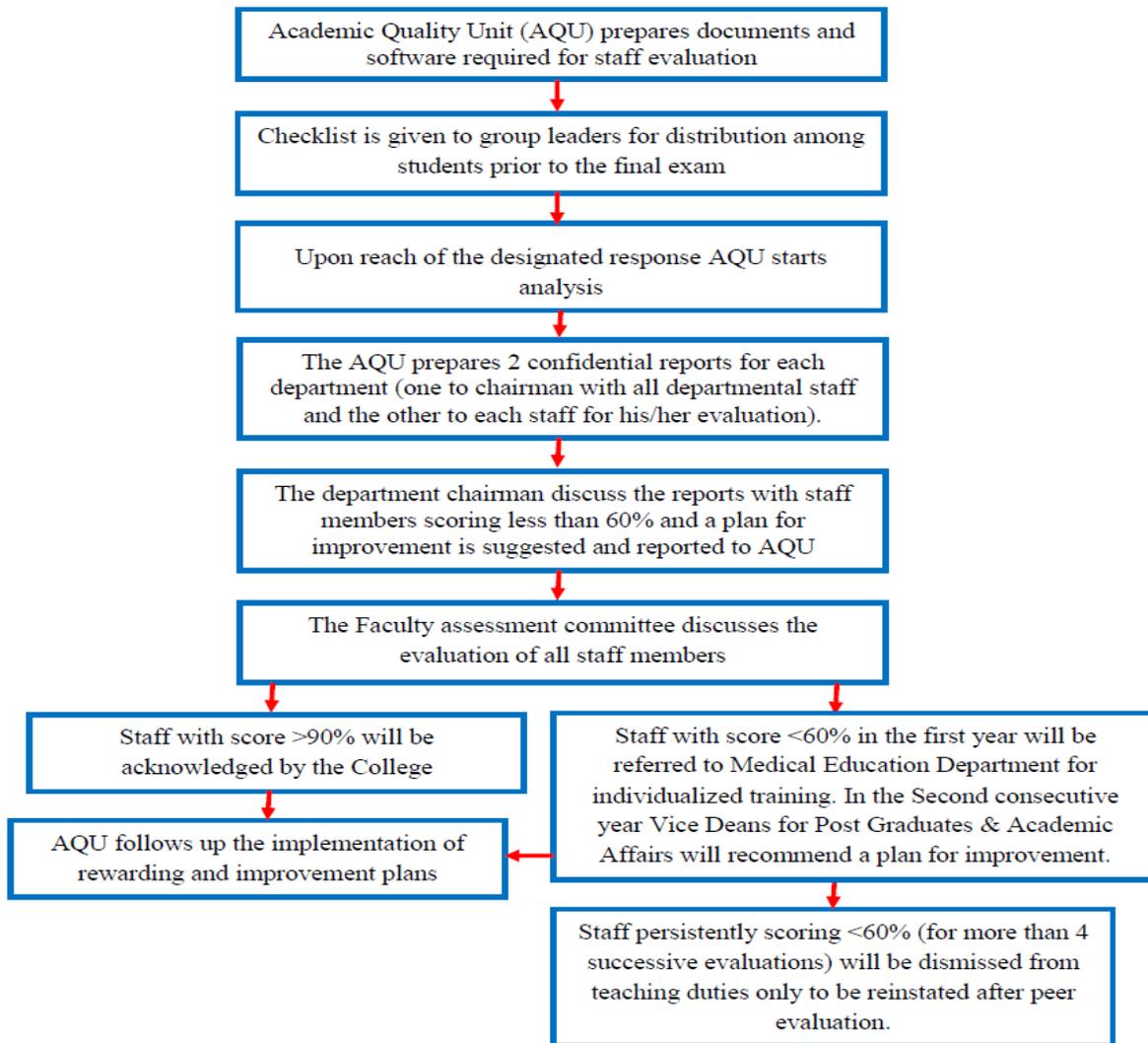
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College of Medicine

**High level flow diagram for
The student' surveys system for course evaluation**





**High level flow diagram for
The student' surveys system for staff evaluation**



Undergraduate examination (AQ IPP 004).**1.0 Conditions:**

This General Internal Policy and Procedure applies on Examination committee, Course organizers and Department' Heads.

2.0 Purpose:

The regulations outlined in this document are intended to define the policy and procedures for assessment of students enrolled in the College of Medicine at King Saud University. These regulations have been developed in accordance with the rules and regulations of the Ministry of Higher Education and King Saud University (KSU) to explain the details, to suit the Medical College.

3.0 Definitions:**Block Chair**

A block chair is a faculty member in charge of planning and conducting a particular specialty block or course.

Continuous assessment:

Continuous assessment is the assessment of a students' progress throughout a course of study

DOPS

Direct Observation of Procedural Skills (DOPS) is a workplace-based assessment of clinical procedural task performed by trainees on patients evaluating a particular skill.

End of the year examination

A summative assessment administered in the end of an academic term.

Formative assessment

Formative assessment is the part of the assessment process which evaluates on-going teaching/learning process throughout the course. it also includes feedback to the students.

MCQs

Multiple Choice Questions (MCQ's) is an assessment tool to assess knowledge consisting of stem, that directly or indirectly possess a question and a set of distracters from which the answer is selected

Midterm examination

A summative assessment administered in the middle of an academic term/course.

Mini- CEX

Mini Clinical Evaluation Exercise (mini – CEX) is a workplace based assessment of clinical skills of trainees which can be used in both formative and summative assessment.

OSCE

Objective structured Clinical Examination (OSCE) is an assessment tool to assess clinical competencies on clinical models and standardized patients or simulated patients. It consists of a series of 'stations' where candidates performed a standardized task in a specified time.

OSPE

Objective Structured Practical Examination (OSPE) is an assessment tool to assess laboratory exercises in pre-clinical sciences. It consists of a series of 'stations' where candidates perform a standardized task in a specified time.

Summative assessment

A summative assessment (or final examination) is the part of assessment process which evaluates student learning/teaching process at the end of a block/course

4.0 Policy:

The examination policy must be developed in accordance with the rules and regulations of the Ministry of Higher Education and King Saud University (KSU) to explain the details and to suit the Medical College.

Undergraduate Plagiarism (AQ IPP 005).

1.0 Conditions:

This policy applies to all undergraduate medical students and their written assignments.

2.0 Purpose:

The policy aim to:

- 2.1 Aid students to understand the importance of avoiding plagiarism
- 2.2 Inform the students about methods of avoiding plagiarism
- 2.3 Disclose the possible penalties a student could face if he/she commits plagiarism

3.0 Definitions:

- 3.1 **Plagiarism:** Is an unethical, dishonest act whereby an individual uses the work of another, commit literacy theft, or present work as an original idea without crediting the source or stating that it is derived from an existing source.
- 3.2 **Citation:** The way of informing the reader that certain information within your work comes from another source

4.0 Policy:

The college is dedicated to preventing plagiarism among undergraduate students by enforcing that all written assignments must abide by this policy and students are required to apply the rule of acknowledging all the authors and sources of their work. This reflects good professional conduct.

For more details about policies and procedures check our website:
<http://medicinequality.ksu.edu.sa/>



Staff dispute against student evaluation (AQ IPP 006)

1.0 Conditions:

This policy applies to all student evaluation of teaching staff perceived by the evaluated staff member as being inappropriately-based or inaccurate.

2.0 Purpose:

The policy aim to:

- 2.1 Inform teaching staff about dispute methods against student evaluations perceived as inappropriately-based/inaccurate.
- 2.2 Disclose the possible outcomes of dispute.

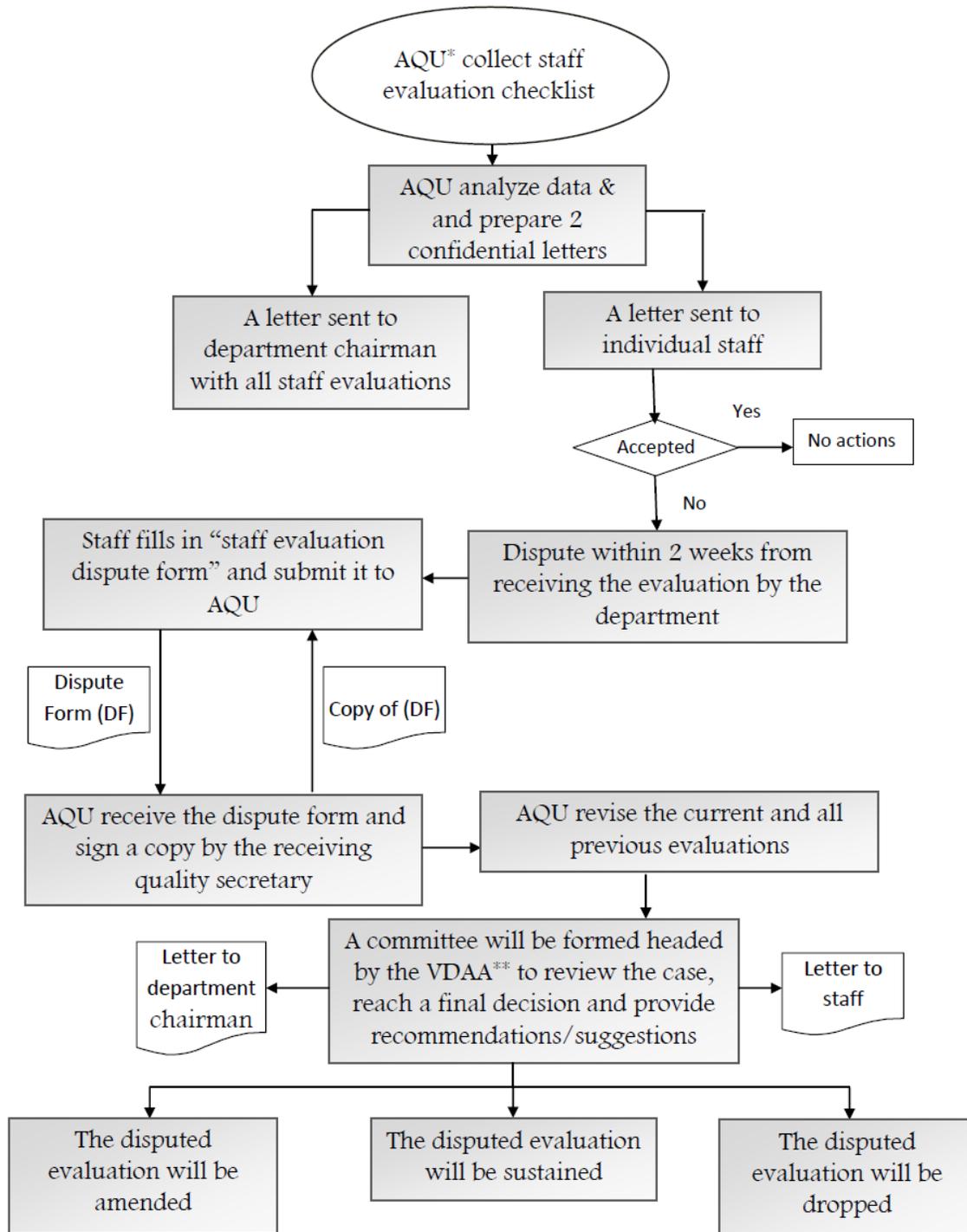
3.0 Policy:

- 3.1 The college is dedicated to safeguard against inappropriately-based or inaccurate feedback from students on teaching staff by enforcing that all teaching staff have the right to dispute any student feedback perceived as inappropriately-based/inaccurate via a designated form.

4.0 Procedure:

See the following flow chart and dispute form

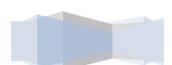




*AQU: Academic Quality Unit

**VDAA: Vice Dean for Academic Affairs

Attached: High level flow diagram for the students surveys system for staff evaluation





King Saud University College
of Medicine
Vice Deanship for Quality and
Development
Academic Quality Unit

Dispute Form against Student Evaluation

Name:	Position:
Course:	Academic Year:
Date of Evaluation:	

I disagree with the student evaluation.

Reasons:

.....
.....
.....
.....

Department Chairman	
Signature:	Signature:
Date:	Date:

Received by: **Date:**



Academic Job Descriptions

A job description is a written statement of the content of any particular job and derived from the analysis of that job. It can be distinguished from a person specification, which describes not the content of the job, but the attributes required of an employee to do that job to the required standard.

Job descriptions can serve a number of useful purposes:

- Human resource planning
- Recruitment and selection
- Job evaluation
- Training and development
- Job redesign
- Performance management
- Organization change

Limitations of job descriptions

- Job descriptions describe the requirements of the job but take no account of how the individual carries out that job.
- In modern organizations, especially those using project teams, individuals may be used very flexibly and more in accordance with their abilities than in terms of the specific job they were originally employed to do.
- If job descriptions are applied too rigidly they may become inappropriate for an organization that is rapidly changing.
- Job descriptions require frequent updating because over time the work actually carried out by the job holder may become significantly different from the responsibilities set out in the job description.

The best way of combating these problems is to try to ensure that job descriptions are written flexibly by focusing on the overall objectives, rather than on the tasks to be carried out to meet those objectives, and to update them regularly.

Academic Job Descriptions

Dean.	Professor.
Vice Dean for Quality and Development.	Associate Professor.
Vice Dean for Academic Affairs.	Assistant Professor.
Vice Dean for Post Graduates.	Lecturer.
Head of Department.	Demonstrator.
Director of a Unit.	Course Organizer. (attached)
Director of Academic Quality.	Social Worker.
Consultant of Academic Quality.	Clinical Skills and Simulation Centre Staff.
Departmental quality coordinator	

For more details check our website: <http://medicinequality.ksu.edu.sa/>



 College of Medicine	Department :	Unit:	Job Description Number:
Job Title: Departmental Coordinator for Academic Quality & Accreditation (head of department academic quality committee)		Issue Date: March 2014 Revision Date: March 2016	
Prepared by Dr. Nervana Bayoumy Director of academic quality unit Date: <i>Nov 2014</i>		Authorized by: <i>6-4-014</i> Date: <i>6-4-014</i>	
Approved by: Dr. Khalid A Alswat Vice Dean for Quality and Development Date: <i>05.04.2014</i>		Prof. Fahad Abdullah Al Zamil Dean of the College of Medicine <i>[Signature]</i>	

1.0 Organizational Relationship:

- 1.1 Reports to: Head of Academic Quality & Accreditation Unit
- 1.2 Liaises with:
 - 1.2.1 Chairman of his/her Department
 - 1.2.2 Course organizers
- 1.3 Receives reporting from:
 - 1.3.1 Course Organizers
 - 1.3.2 Members of the Academic Quality Unit

2.0 Position Related Duties and Responsibilities:

- 2.1 Promote the culture of quality among staff & students
- 2.2 Provide the Academic Quality & Accreditation Unit (AQU) with the updated list of Staff names and their academic schedules (lectures, tutorials, and clinical teaching) and the examination schedule and changes introduced.
- 2.3 Help in monitoring & improving the quality of teaching & learning.
- 2.4 Promote & encourage staff on the importance of the “Annual Activities Self Report”.
- 2.5 Follow up the “AQU” requirements within the department.
- 2.6 Support student and staff evaluation of the courses.
- 2.7 Provide AQU with the annual Key Performance indicators (KPI) of the department.
- 2.8 Coordinate and provide support for the department annual academic activities.
- 2.9 Provide the AQU with any relevant matter it may require.
- 2.10 Suggest any programs/ policies/ plans to improve performance in areas related to him/her after appropriate approval.
- 2.11 Prepare report every year on his/her quality committee achievement.



3.0 Qualifications:

3.1 Assistant Professor or higher.

4.0 Professional Development:

4.1 Minimum of 1 training program in Total Quality Management.

5.0 Appointment:

5.1 Appointment by the head of the department and approved by the Vice Dean for Quality & Development.

6.0 Evaluation:

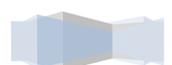
6.1 Evaluated by the head of Academic Quality & Accreditation Unit in this job's related matters and by his/her chairman of department in all other academic and clinical matters

7.0 Conditions:

7.1 This job description will become effective the date signed by the dean

7.2 This job description is subject to periodic review and should not be changed without the dean's approval

Signature of coordinator:



 College of Medicine	Department :	Unit:	Job Description Number:
Job Title: Course Organizer		Issue Date: March 2010 Revision Date: March 2012	
Approved by:	Date:	Authorized by:	Date:
Dr. Ayman A. Abdo Vice Dean for Quality and Development	2/13/10	Prof. Mussaad M. Al-Salman Dean of the College of Medicine	2/13/2010

1.0 Organizational Relationship:

- 1.1 **Reports to:** Chairman of the Department
- 1.2 **Liaises with:**
 - 1.2.1 Academic Quality Unit
 - 1.2.2 Medical Education Department
- 1.3 **Receives reporting from:**
 - 1.3.1 Teaching staff with regards to a course-related teaching and academic issues.

2.0 Position Related Duties and Responsibilities:

- 2.1 **General:**
 - 2.1.1 Suggest any programs/ policies/ plans to improve teaching and learning of the course.
 - 2.1.2 Complete the academic quality report of the course at the end of the semester.
- 2.2 **Specific:**
 - 2.2.1 Creation and update of the course specifications, objectives and plan.
 - 2.2.2 Overall supervision of the conduction of the course on a daily basis.
 - 2.2.3 Monitoring of student's attendance and performance.
 - 2.2.4 Monitoring of teaching staff punctuality and performance.
 - 2.2.5 Supervision and monitoring of assessment and examination.
 - 2.2.6 Report on scores and marks of overall assessment and examination at the end of semester to the Chairman of the Department.
 - 2.2.7 Obtain regular feedback from students and teaching staff regarding conduction of the course.
 - 2.2.8 Help resolve difficulties faced by students or teaching staff during the course.
 - 2.2.9 Continuous improvement of the course materials and teaching methods in accordance to new knowledge and new methods in medical education.

JOB DESCRIPTION



3.0 Position Unrelated Duties and Responsibilities

3.1 Academic

3.1.1 Maximum of 3 teaching credit hours.

4.0 Qualifications:

4.1 Assistant Professor or higher.

5.0 Professional Development:

5.1 Minimum of 1 training program in Medical Education per year.

5.2 Minimum of 1 training program in Leadership and Administration per year.

6.0 Appointment:

6.1 By Chairman of the Department.

7.0 Evaluation:

7.1 Evaluated by the Chairman of the Department.

8.0 Conditions:

8.1 This job description will become effective the date signed by the dean

8.2 This job description is subject to periodic review and should not be changed without the dean's approval

Signature of Employee: _____

Approval by Dean of the College of Medicine: _____

JOB DESCRIPTION



Terms of References

Terms of reference are used to describe the purpose roles and structures of projects, working groups, reference groups and committees. They are guidelines for the way group members will work with each other and are usually the first task undertaken by a group.

Terms of reference provide a written basis for making decisions, confirming a common understanding between members how they will make decisions and work together.

Often the following headings are used in Terms of reference documentation:

- Purpose
- Membership
- Meeting Frequency
- Authority
- Roles and Responsibilities

Terms of References:

Institutional Review Board (IRB).
Academic Accreditation Committee.
Curriculum Committee
Demonstrator's selection committee
Internship Committee.
Postgraduate Training Committee
Departmental Academic Quality Committee <i>under revision</i> (attached)

For more details check our website: <http://medicinequality.ksu.edu.sa/>



 College of Medicine KING SAUD UNIVERSITY HOSPITAL's King Khalid University Hospital	Committee Name: Departmental Academic Quality & Accreditation Committee	Issue Date: March 2014 Revision Date: Effective Date: April 2014 Due for Revision on: April 2016
	Authorized by: <i>Nawalee</i> Date: Dr. Nervana Bayoumy Director of Academic Quality Unit	Authorized by: <i>Khalid Aljwani</i> Date: <i>03-04-14</i> Dr. Khalid Aljwani Vice Dean for Quality & Development Affairs

1.0 Purpose:

To monitor and support all activities related to academic quality in the department

2.0 Authority:

This committee has all the authority to run an effective accreditation preparedness program, monitor quality related issues in the department and represents the department in that.

3.0 Deliverables and Functions:

The quality & accreditation committee deliverables and functions are as follows:

- 3.1 To make recommendations to the main accreditation committee regarding academic performance in the department
- 3.2 To oversee and facilitate all aspects related to academic accreditation
- 3.3 To ensure adequate education to all staff about accreditation issues
- 3.4 To monitor all academic quality related activities
- 3.5 To suggest initiatives for academic quality
- 3.6 To report to the director of academic quality unit all obstacles and challenges faced in the way to accreditation

4.0 Reporting Relationship:

- 4.1 The Departmental Academic Quality Committee reports directly to the director of the academic quality and accreditation unit.

5.0 Membership:

The membership of The Departmental Academic Quality Committee are assigned by the head of the department and approved by the Vice Dean for Quality & Development

6.0 Meeting Schedule, Quorum & Others:

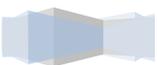
- 6.1 The committee will meet every month or more if called by the Chairman but not less than 10 times yearly. Attendance is mandatory.
- 6.2 The quorum is defined as the Chairman plus fifty percent (50%) of the members.
- 6.3 Manner of action is defined as a simple majority vote.



6.4 Minutes of the meeting will be distributed to the members of the Committee and any involved party. It will be kept by the Committee Secretary and will be maintained in the records of the Committee in the Academic Quality and Accreditation Unit.

7.0 Progress Report:

7.1 A progress report should be submitted quarterly by the end of each year detailing, accomplishments, obstacles, planned activities and recommendations to the Academic Quality Unit



Key Performance Indicators

For providing evidence of achievement of objectives the faculty has prepared a set of key performance indicators that are considered as a part of the whole quality management system indicators driven from the Quality Management System of KSU (QMS-KSU) and the NCAAA.

Standard/Broad Area	Domain	Key Performance Indicator
Mission, Goals and Objectives	Awareness of the vision, mission and objectives among the college	The average ratings of staff to the question <i>I know the vision, mission, and objectives of the college</i> in the staff satisfaction survey
		The average ratings of graduate to the question <i>I know the vision, mission, and objectives of the college</i> in the graduate satisfaction survey
	Sharing of staff in setting the vision and mission	The average ratings of staff to the question <i>I am involved in setting the college's mission and vision</i> in the staff satisfaction survey
	Mission guiding daily activities	The average ratings of staff to the question <i>The mission guide/influence my daily activities</i> in the staff satisfaction survey
Program Administration	Staff satisfaction	The average ratings of staff to the questions (in staff satisfaction survey) a) <i>The administration is understanding and cooperative</i> b) <i>I can easily reach the administration</i> c) <i>The head of my department is understanding and cooperative</i> d) <i>I can easily reach the head of my department</i>
Management of Quality Assurance and Improvement	Overall students satisfaction with the quality of learning	The average rating of the overall quality of their program from answering the question in graduate evaluation survey
	Students involvement in program evaluation	Proportion of courses in which student evaluations were conducted during the year.
	Ensuring courses and program improvement	Proportion of course reports conducted by the departments
Learning and Teaching	Appropriateness of students/staff ratio	Ratio of students to teaching staff.
	Students satisfaction	The overall rating on the quality of their courses from answering the question <i>I am happy with this course in general</i> in the course evaluation survey
	Quality of teaching staff	Proportion of teaching staff with verified doctoral qualifications.



		Proportion of teaching staff trained in medical education
	Students progress in the program	Percentage of students entering programs who successfully complete first year.
		Proportion of students entering undergraduate programs who complete those programs in minimum time.
		KSU students pass rates of Saudi Licensing Exam
		KSU first time takers pass rates of the Medical Council of Canada Evaluation Exam in comparison with non KSU students
	Postgraduate performance	Proportion of students entering post graduate programs who complete those programs in specified time.
Student Administration and Support Services	Appropriateness of students/ administrative staff ratio	Ratio of students to administrative staff
	Overall students satisfaction with the academic guidance and supporting services	The average rating on the adequacy of academic and career counselling from answering the question <i>I received appropriate Academic guidance when I needed it</i> in graduate evaluation survey
		The average rating by students to the question: <i>Students supporting services are adequate</i> in graduate evaluation survey
Learning Resources	Students satisfaction with the adequacy and appropriateness of learning resources	The average rating by the students to the question: <i>The learning resources are adequate</i> in course evaluation survey
		The average rating by the graduates to the question: <i>Learning sources were known to me and available</i> in graduate evaluation survey
		The average rating by the students to the question: <i>The learning resources were appropriate and useful</i> in course evaluation survey
	Students and staff satisfaction with the library services	The average rating by graduates to the question: <i>The library facilities were adequate</i> in graduate and intern evaluation surveys
		The average rating by staff to the question: <i>The library services are appropriate</i> in staff evaluation survey
Facilities and Equipment	Staff and graduate satisfactions	The average overall rating by the staff to the questions:



		<p><i>a) I am satisfied with the available student services</i></p> <p><i>b) The audiovisual aids in the lecture halls are appropriate</i></p> <p><i>c) The lecture halls are appropriate</i></p> <p>in staff evaluation survey</p>
		<p>The average overall rating by the students to the questions:</p> <p><i>a) The Audiovisual educational aids were suitable</i></p> <p><i>b) Lecture halls were suitable and comfortable</i></p> <p>in graduate evaluation survey</p>
Faculty and Staff Employment Processes		Proportion of teaching staff leaving the institution in the past year for reasons other than age retirement.
		Proportion of teaching staff participating in professional development activities during the past year.
		Proportion of Academic staff participating in professional development activities during the past year.
Research	Quality of research	Number of publications in reviewed journals in the previous year per full time member of teaching staff.
		Proportion of full time member of teaching staff with at least one publication in reviewed journals during the previous year.
		Number of papers or reports presented at academic conferences during the past year per full time members of teaching staff
	Research support	Research income from external sources in the past year as a proportion of the number of full time teaching staff members.
Community Service	Level of community services	Proportion of full time teaching and other staff actively engaged in community service activities.
		Number of community education programs provided as a proportion of the number of departments.
		Percentage of students involved in awareness campaigns/research directed to community health



The National Commission for Academic Accreditation & Assessment (NCAAA)

The National Commission for Academic Accreditation & Assessment has been established by the Higher Council of Education in Saudi Arabia with responsibility to establish standards and accredit institutions and programs in post secondary education.

The system for quality assurance and accreditation is designed to support continuing quality improvement and to publicly recognize programs and institutions that meet required quality standards. The objective is to ensure good international standards in all post secondary institutions and in all programs offered in Saudi Arabia.

Students, employers, parents and members of the community should be able to have complete confidence that what has been learned by students, the research conducted, and the services provided are equivalent to good international practice. Accreditation of a program will give public recognition that these standards have been achieved. Saudi Arabian qualifications should be accepted without question anywhere in the world.

There is considerable variation in the amount of experience that higher education institutions have had with quality assurance processes and the system of higher education is expanding rapidly. In recognition of this the system for accreditation will be introduced progressively over a transition period of several years. During this time programs may be considered for accreditation in institutions that are well advanced with the introduction of quality assurance systems, and others will be evaluated and accredited as their internal quality assurance systems are put in place.

The National Commission for Academic Accreditation & Assessment in Saudi Arabia has developed a set of standards for quality assurance and accreditation of higher education institutions and programs in eleven general areas of activity.

1. Mission Goals and Objectives	6. Learning Resources
2. Program Administration	7. Facilities and Equipment
3. Management of Program Quality Assurance	8. Financial Planning and Management
4. Learning and Teaching	9. Faculty & Employment Processes
5. Student Administration and Support Services	10. Research
	11. Relationships With the Community

These standards are based on what is generally considered good practice in higher education throughout the world and adapted to meet the particular circumstances of higher education in the Kingdom of Saudi Arabia.

College of Medicine – King Saud University is accredited for the period 2010-2017



Evaluation Checklists

Schedule for regular evaluation and feedback through surveys for different courses

Survey	Group	Timing
Course Evaluation Survey Staff evaluation survey	Year One and Two Students	After each block
	Year Three Students	After each Exam
	Year Four and Five Students	After course exam for each group
Program Evaluation Survey	Graduates	End of academic year
Interns, staff and stakeholders Evaluation Survey	Interns, staff and stakeholders	End of academic year
Annual academic activities self report	Staff	End of academic year



Course Evaluation Survey (CES) by students

Course:

Year:

Group:

	Strongly agree	Agree	True sometimes	Disagree	Strongly disagree
The curriculum objectives are clear to the student from the start of the course					
The conduct of the course was consistent with the course outline					
I was told about the things I should do to pass this course					
The learning sources has been clarified at the beginning of the course					
The learning resources were appropriate and useful					
The learning resources were available					
Practical sessions were complementary to the course and very useful					
The teachers are punctual In terms of the educational activities dates and times					
Teaching staff of this course are excellent					
I can find the teaching staff outside lecture times for questions and discussions					
Faculty staff respect the students and we have good relation with them					
Faculty staff encourage the students to ask questions and to start discussions					
The assessment methods has been clarified at the beginning of the course					
The assessment method of this course is appropriate					
Exam questions are reasonable and from the curriculum					
The effort and time I spent in this course was reasonable					
I feel that this course will make me a better doctor					
I am happy with this course in general					

What did you like most about this course?

What did you dislike most about this course?

What suggestions do you have to improve this course?



Course Evaluation Survey (CES) by staff

Dear Colleagues,

To ensure the effective participation all parties involved in the educational process, the “Academic Quality Unit” is keen to get feedback from the faculty staff on their teaching activates in each course/block.

Therefore, you are, kindly, requested to objectively participate in the following evaluation survey:

Name:

Post:

Courses/block:

Academic Year:

Please evaluate how far you agree with the following:

	Strongly agree	Agree	Do not agree	Strongly disagree
I am consulted in the subjects that I teach.				
I participate periodically in developing the course content.				
I am always asked to teach lectures that are within the scope of my experiences and interests.				
The course content achieves the targeted learning objectives.				
The leaning objectives/course specification are made available to me prior to commencing the course/block.				
The lectures schedule was appropriate.				
The allocated time for my lecture\session was sufficient to cover the assigned learning objectives.				
I provided students the learning objectives at the start of my lecture/session.				
Practical/clinical sessions were complementary to the course.				
The learning resources were appropriate and useful				
The learning resources were available to the students.				
The lecture hall is provided with the necessary technology to deliver the course effectively.				
Students respect the faculty staff and have good relation with them.				
I was involved in exam preparation.				
I can conduct the objective assessment of the students throughout the different lectures/small group sessions/practical sessions.				



Assessment methods are appropriate and adequate.				
Exam questions are always clear and from the curriculum.				
I received feedback on student’s performance in the exams.				
Communication with course organizer/Medieval education department was effective.				
I got enough training/support from the “Medical Education Department”				
I got enough training in Assessment methods.				
The time allotted to the courses is sufficient.				
The effort and time I spent in this course was reasonable				
I am happy with this course in general				

If your answer is “I don’t agree” OR “strongly disagree”, kindly, justify:

What suggestions do you have to improve the course/block?

Thank You



Intern Experience Survey (IES)

Rotation:

Location:

		Strongly agree	Agree	Sometimes	Disagree	Strongly disagree
1	I get enough orientation before the internship					
2	I get enough orientation before each rotation					
3	The internship regulations are clear to me					
4	I get adequate help when there is a problem					
5	Faculty staff care about and respect the Interns					
6	I can reach staff for questions and discussions					
7	Faculty staff encourage us to ask questions and to start discussions					
8	Specialist and residents care about and respect the Interns					
9	The general training environment is suitable					
10	There are special educational activities for interns in most rotations					
11	Work load and number of patients is ok in general					
12	The number of on calls is ok					
13	On call rooms are comfortable and suitable					
14	The library facilities are adequate					
15	I feel that the training I am getting is adequate and it will make me a better doctor					
16	Internship helped me think and solve problems					
17	Internship helped me be a better communicator and team player					
18	I am satisfied with my experience in Internship					



What do you like most about this rotation?

What do you dislike most about rotation?

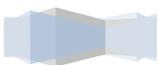
What suggestions do you have to improve this rotation?

Comments:

.....

.....

.....



Program Evaluation Survey (PES)

		strongly agree	agree	true sometimes	disagree	strongly disagree
1	I know the college mission, objectives and its academic plans					
2	I got enough orientation before each semester					
3	Course registration was organized and easy					
4	I got adequate help when there was a problem					
5	I received appropriate Academic guidance when I needed it					
6	Lecture halls were suitable and comfortable					
7	The Audiovisual educational aids were suitable					
8	Learning sources were known to me and available					
9	Faculty staff cared about and respect the students					
10	I was able to reach faculty staff for questions and discussions					
11	Faculty staff encouraged the students to ask questions and to start discussions					
12	Faculty staff were punctual in lectures and sessions					
13	Students supporting services were adequate					
14	The library facilities were adequate					
15	I feel the courses I studied will make me a better doctor					
16	Studying here helped me think and solve problems					
17	Studying here helped me be a better communicators and team player					
18	I am satisfied with my experience in this college					

What do you like most about the program?

What do you dislike most about the program?

What suggestions do you have to improve the program?



Students evaluation of skills lab Tutor

Tutor name:
Year:

Block:

Group:

Date:

Number of students attended:

The session started at:

	Excellent	Good	Fair	Needs Improvement	Not applicable
1- The tutor managed the time properly					
2- The tutor explained the skill to be taught to the students in understandable manner					
3- The tutor discussed the scientific basis of the studied skill					
4- The tutor performed the skill as a demonstration					
5- The tutor observe and give constructive feedback to the students					
6- The tutor responded appropriately to student questions and comments					
7- The tutor treated all students in a fair and equitable manner					

How many students performed the skill in the lab:

Add Comments on the tutor





**KING SAUD UNIVERSITY
COLLEGE OF MEDICINE
ACADEMIC QUALITY UNIT**

SMALL GROUP TUTOR EVALUATION FORM

BLOCK : _____

Date : _____

Tutor's Name: _____ **Group No:** _____ **Year** _____

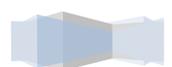
How well did the tutor facilitate group process in the following regards? Please put a check (✓) in the box.

- | | | | | | | | | | | |
|--|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|
| 1. Appropriately facilitated the brainstorming sessions. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 2. Appropriately facilitated the hypothesis recognition sessions. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 3. Appropriately facilitated the reporting sessions. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 4. Appropriately manage the time flow. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 5. Help to keep the group focused on its task | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 6. Provided a well balanced intervention within the group process, but avoided dominating. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 7. Helped to create an environment to support group work | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 8. Encouraged logical and critical thinking. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |
| 9. Overall rating of the tutor. | 1 | <input type="checkbox"/> | 2 | <input type="checkbox"/> | 3 | <input type="checkbox"/> | 4 | <input type="checkbox"/> | 5 | <input type="checkbox"/> |

Comments:

Number Code Values:

5- EXCELLENT 4- VERY GOOD 3-GOOD 2- FAIR 1- NEEDS IMPROVEMENT



تقييم المؤسسات الصحية لخريجي كلية الطب بجامعة الملك سعود

اسم المؤسسة الصحية:

اسم المقيم:

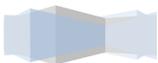
الوظيفة:

التاريخ: / / 14هـ

فضلا ضع علامة في الخانة التي تعبر عن شعورك تجاه النقاط التالية فيما يخص خريجي كلية الطب بجامعة الملك سعود من خلال

الجدول التالي:

لا أستطيع الحكم I can't judge	لا أوافق أبدا Strongly disagree	لا أوافق Disagree	صحيح بعض الأحيان True sometimes	أوافق Agree	أوافق بشدة Strongly agree		
						مستواهم النظري ممتاز Their theoretical knowledge is excellent	1
						لديهم القدرة على أخذ التاريخ المرضي بشكل جيد They are able to take a medical history in a professional way	2
						لديهم القدرة على فحص المريض بشكل جيد They are able to examine the patient in a professional way	3
						لديهم القدرة على اختيار الفحوصات والتحاليل المناسبة They are able to order appropriate investigations	4
						قدرتهم على الوصول إلى التشخيص جيدة They are able to reach a reasonable differential diagnosis	5
						يجيدون التعامل مع الحالات الطارئة والحرية They are able to deal with emergency situations	6
						تعاملهم مع المرضى وذويهم جيد They deal well with patients and relatives	7
						يحافظون على سرية المعلومات الطبية They respect patient confidentiality	8
						مستواهم الأخلاقي ممتاز	9



						They have excellent ethical standards	
						منضبطون في مواعيدهم والتزاماتهم They are punctual and committed	10
						لديهم القدرة على التحليل والتفكير السليم They have the ability to think and analyze	11
						لديهم القدرة على التعلم بسرعة ومهارة They have the ability to skillfully learn fast	12
						مهارتهم في التواصل مع الآخرين جيدة They have the ability to communicate with others in a good manner	13
						يستطيعون العمل بشكل جيد ضمن فريق They perform well within a group	14
						لديهم القدرة على تطوير أنفسهم They have the ability to self develop	15
						يمكن الاعتماد عليهم They are reliable	16
						لديهم القدرة على الوصول إلى المعلومة من مصادرها They have the ability to reach medical information from its sources	17
						مستواهم مقارنة بخريجي كليات الطب الأخرى متميز In comparison to graduates of other schools, they are distinguished	18
						أنا راض بشكل عام عن مستوى الخريجين I am generally satisfied with the level of your graduates	19

19. ما هي أكثر الأشياء التي تعجبك في الخريجين؟
What do you like most about the graduates?

20. ما هي أكثر الأشياء التي لا تعجبك في الخريجين؟
What do you dislike most about the graduates?

21. هل لديك أي اقتراحات لتطوير مستوى الخريجين؟
What suggestions do you have to improve this college?

THANK YOU

