

# Arab AASTMT for Science, Technology and Maritime Transport

# Quality Assurance Manual 2019-2020

**AASTMT Branch in Sharjah** 

Pre	face2
1	Quality Assurance History at AASTMT
1.1	AASTMT Vision4
1.2	AASTMT Branch in Sharjah, Mission4
1.3	AASTMT Branch in Sharjah Goals4
1.4	AASTMT Branch in Sharjah Objectives4
1.5	Governance and Organization Structure5
2	AASTMT Quality Assurance Framework9
3	Quality Assurance Infrastructure
3.1	Head of Quality Assurance Unit13
3.2	Institutional Research14
3.3	Objective15
3.4	Data Policy for Institutional Research15
3.5	Institutional Effectiveness Framework15
3.6	Planning and Assessment16
3.7	Assessment Cycle17
3.8	Strategic Planning18
4	Academic Quality Assurance
4.1	Approval of New Degree Programs20
4.2	Quality Assurance of Existing Degree Program21
4.3	Review of an Existing Program21
4.4	Amendments to an Existing Study Program22
4.5	Development and Approval of New Courses22
4.6	Amendment to an Existing Course22
4.7	Performance Indicators for a Course23
4.8	Review an Existing Course23
4.9	Learning Outcomes Assessment23
4.10	
5	Quality of Faculty
6	Administrative Support Services Quality Assurance
6.1	Administrative Unit Assessment Process28
Apr	pendix A: Unified Quality Management System30
	pendix B: Example PLO for a Bachelor in Maritime Transport
	pendix C: Examples Outcomes of Adminstrative Units31
Anr	pandiy D. Assassment Time Plan

# **PREFACE**

This manual is intended as a reference for the principles, procedures and administrative practices upon which the quality assurance mechanisms at AASTMT are based. The Manual is concerned primarily with educational programs leading to bachelor degree from colleges of AASTMT. As a manual of good practice, the processes and procedures outlined will be reviewed and updated regularly and in response to changing circumstances and experiences. Advice and information on all policies and procedures in this handbook can be obtained from the Quality Assurance and Accreditation Center at headquarter in Alexandria.

# 1 QUALITY ASSURANCE HISTORY AT AASTMT

The Quality Assurance Center (QAC) was established by H.E. Prof. Dr. Ismail Abdelghafar in 2012 under the name "Central Unit for Accreditation & Quality Assurance" to satisfy the requirements of the NAQAAE Accreditation. It was developed into the "Quality Assurance Center" to monitor the quality of the educational processes by AASTMT Colleges and Institutes in all related aspects to ensure continuous improvement and achievement of excellence and uniqueness.

The center is presided by the AASTMT President to ensure the independence of work and to avoid any conflict of interest with the Educational Affairs, to comply with the rule No. 307 of Executive Procedure of Universities Law No. 49 for the year 1973, and to fulfill the requirements of the Accreditation requirements of AASTMT Colleges and Institutes.

Accordingly, a Quality Unit was established in each College/Institute, to ensure the integrity and the effectiveness of the Quality Coordinator in each supporting unit is under the technical supervision of the QAC director.

QAC is committed to spreading the concepts of quality and its implementations to support the AASTMT competitiveness locally, regionally and internationally. QAC continuously improves work procedures to ensure integrity and effectiveness that leads to ensure excellence in services provided regarding education, training and consultation.

QAC as an independent unit that works under the direct supervision of the President, its mission is to establish plans and strategies that ensure the improvement of the outcomes in cooperation with all central units in the AASTMT. It develops and monitors the performance indicators to identify the gaps and assist in recommending and monitoring the required corrective actions.

In this regard, the AASTMT was the leading educational institute in Egypt to obtain the Certificate of compliance of the ISO standard ISO 9001:1994 for its colleges since 1999 till now. A management system is established, implemented, maintained, and continuously improved to comply with any updates of the standard. Since 1999, the AASTMT management system was re-certified every three years; the latest update was in 2015 according to the ISO standard ISO 9001:2008, and in April 2018 re-certification of all branches according to ISO 9001: 2015. The scope of certification was extended to include the College of Language & Communication in Alexandria and Cairo campuses. In November 2018, the scope has been extended to include Smart Village and South Valley campuses.

Since its establishment, QAC supported the Colleges in obtaining local and international accreditations. Locally, all its programs are accredited from the Egyptian High Supreme Council of Universities and The National Authority for Quality Assurance & Accreditation of Education (NAQAAE). International accreditations were obtained by its Colleges: ABET for Engineering and Computer Sciences programs, RIBA for Architecture programs, ZEvA for Maritime programs, FIBAA for Logistics programs. The AACSB for business programs is currently in progress.

The mission of QAC, to comply with the AASTMT"s strategic goals for achieving excellence, assists and sustains a high level of satisfaction to its students, employees, members of staff, and all other stakeholders

With the opening of its newly established branch in Sharjah, the College of Maritime Transport and Technology two degree programs are being accredited by the Commission for Academic Accreditation (CAA) from the Ministry of Education, UAE. This adds a new dimension to the quality assurance framework of QAC.

The success achieved by QAC in national, regional, or international accreditation has determined AASTMT presidential office to issue another administrative decree in April 2020 to change the name of Quality Assurance Center to reflect its new encompassing role to the "Quality Assurance and Accreditation Center".

#### 1.1 AASTMT Vision

To be a world class university in Maritime Transport and Higher Education in compliance with the international standards of Education, Scientific Research, Innovation and Training while fulfilling its Social Responsibilities in order to maintain its position as the distinguished Arab Expertise House and to be the first choice of the students in the region.

# 1.2 AASTMT Branch in Sharjah, Mission

Contributing to the social and economic development of the Arab Region by offering distinguished Change Agents in the fields of Maritime Transport and International Transport and Logistics who have been qualified through high caliber faculty and comprehensive educational programs while strictly committed to the highest levels of Quality.

# 1.3 AASTMT Branch in Sharjah Goals

- 1. Introduce and develop educational programs in Science, Technology and Maritime Transport in order to achieve institutional excellence in accordance with the policies and plans of AASTMT Branch in Sharjah that are emanated from AASTMT General Plan.
- 2. Support and develop the maritime transport sector and prepare qualified cadres to work with it in various fields according to the latest scientific systems.
- 3. Supporting scientific and research activity in the fields of science, technology and maritime transport.
- 4. Consolidating scientific links and connections, and exchanging expertise and technical and cultural information with local and international institutions in accordance with the goals and competences of the Academy and the branch.

# 1.4 AASTMT Branch in Sharjah Objectives

- 1. Applying AASTMT accredited educational, training and scientific research programs approved in the fields of science, technology and maritime transport.
- 2. Introducing and developing educational and training programs in line with the goals of the Academy and branch, in light of the obtained accreditations in the corresponding educational entities at the headquarters of AASTMT in Alexandria.

- 3. Providing professional training programs in the field of science, technology and maritime transport.
- 4. Preparing a high-level scientific research and projects in science, technology and maritime transport in partnership with specialized national and international institutions.
- 5. Organizing and participating in exhibitions, conferences and scientific and cultural activities related to science, technology and maritime transport.
- 6. Establishing strategic partnerships and cooperation agreements with local and international academies, universities, organizations and institutes for the purpose of supporting the branch's programs in the fields of science, technology and maritime transport.
- 7. Promoting AASTMT Branch in Sharjah to be a scientific, cultural, National, Arab and International center for science, technology and maritime transport.
- 8. Preparing and qualifying Academic cadres in the field of science, technology and maritime transport.
- 9. Developing the infrastructure needed for the social research, education, training and orientation in the branch in accordance with the best internationally accredited applied practices and standards.
- 10. Any other objectives decreed by the Board of trustees in coordination with AASTMT.

# 1.5 Governance and Organization Structure

# **Branch Governance**

**Board of Trustees:** The Board represents the supreme authority in the AASTMT Branch in Sharjah. It consists of a Chairman and no less than six of the members who are equally nominated by the government of the Emirate and AASTMT. Their nomination is issued by a decision decree from His Highness the Ruler of the Emirate of Sharjah, the Board includes in its formation the AAASTMT President as per his office.

**Executive Committee:** The committee will be chaired by the AASTMT President and the membership of Senior Top Management Academic and Non-Academic representatives from the parent sectors in the main campus in Alexandria, in addition of two UAE members, who are well-experienced and hold high qualifications in Higher Education, whom shall be assigned by the Board of Trustees. The Branch Director shall be a member of the Executive Committee as per his office. Major recommendations or decisions made by the Executive Committee must be raised to the AASTMT Executive Council for approval and then to the General Assembly for adoption.

More details about the governances of the branch in Sharjah are given in the Policies and Procedures Manual 2019-2020.

#### **Branch Organization Structure**

The recent Organization Chart of the AASTMT branch in Sharjah is reinforced with all of its publications and had been approved through a substantive change request for an old

organization chart submitted earlier during the initial accreditation process and was accepted by CAA on 21<sup>st</sup> of April 2020. This organization chart had been referred to by the CAA as (SC: Revised Organization Chart). The revised Organization Chart is depicted in Figure 1 and explains clearly the Branch Governance rules, as well as the relations and co-relations between its departments and the central departments in AASMT Main Campus in Alexandria being a branch of a parent institution based outside the UAE.

The AASTMT Organization Chart that highlights the parent sectors which the departments at the AASTMT Branch in Sharjah are derivatives of is depicted in Figure 2.

This derivative principle and line of authority depicted in the two organization charts might be explained by the following examples:

- 1. "Assistant Dean for Marine Educational Programs" technically follows the Dean of the parent college of Maritime Transport & Technology in Alexandria. A fact that it is to be restated that the offered programs by CMTT in AASTMT branch in Sharjah are an extended classes.
- 2. "Head of Human Resources" technically follows the parent Human Resource Affairs Director in Alexandria.
- 3. "Head of Admission & Registration" technically follows the Dean of the Admission & Registration in Alexandria.
- 4. "Head of Quality Assurance Unit" technically follows the Director of the Quality Assurance and Accreditation Center in Alexandria, ....etc.

A Coordination Manual has been developed and communicated to the CAA that details all the relations and co-relations between the parent departments and their derivative departments at the AASTMT Branch in Sharjah. AASTMT follows up on its Organization Chart that is approved by both the **General Assembly** and the **Executive Board** of the Academy.

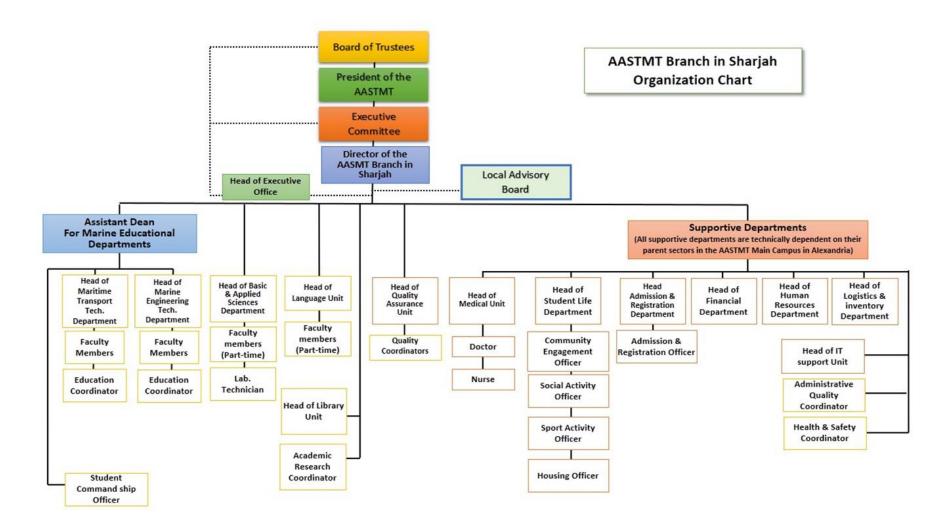
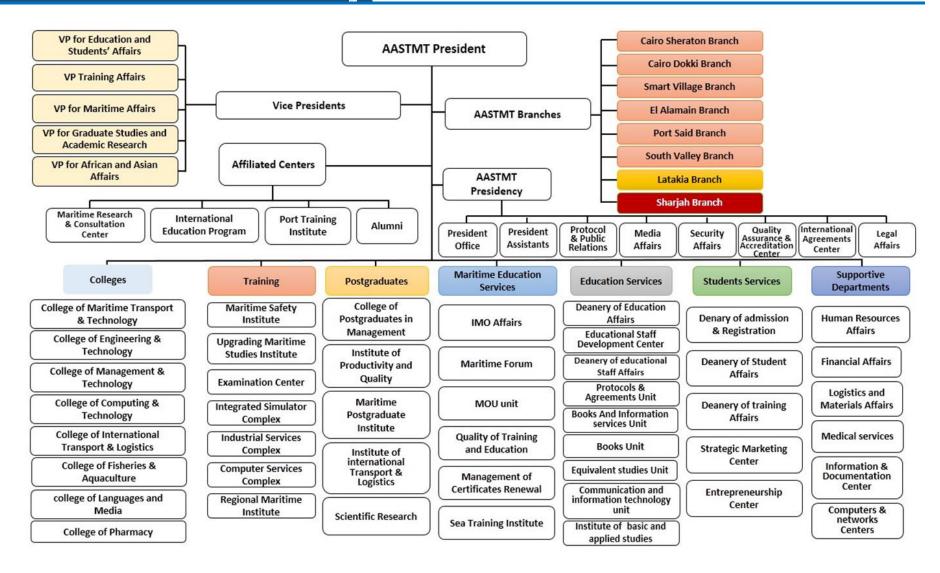


Figure 1: Revised Organization Chart of AASTMT Branch in Sharjah



**Figure 2: AASTMT Organization Chart** 

# 2 AASTMT QUALITY ASSURANCE FRAMEWORK

AASTMT continue its positive contribution to the advancement of UAE national by delivering undergraduate education that meets international standards, engaging effectively with the community and the world to foster knowledge creation and dissemination, and enhancing the research capacity of the country.

AASTMT official policies, procedures, rules and regulations, manuals and strategic planning guide the achievement of high-quality outcomes; while the assurance of quality requires the commitment of all individuals in all colleges within and among AASTMT branches. Those individuals represented by administrators, faculty, staff, students and partner organizations are the corner stone of the Quality Assurance Framework. AASTMT branch in Sharjah adopts the following set of values which will be implanted and exercised throughout the campus and presumably will shape its quality culture. The first initials of the core values form the word 1<sup>st</sup> choice as follows:

1	One Team, One Goal.
С	Continuous Improvement
Н	Human Capital Development
O	Originality
I	Integrity
С	Creativity and Innovation.
Е	Excellent Performance

One Team, One Goal: Asserting the importance of organizational integration which realizes the principles of efficiency and effectiveness through the implementation of the most appropriate ways of organizational alignment.

**Continuous Improvement:** Emphasizing the importance of holding seminars and scientific conferences that target the continuous development of both Academic and Administrative staff.

**Human Capital Development:** Institutional programs for the development of Human potential on all administrative levels.

**Originality:** AASTMT top Management emphasizes that all regulatory practices have to comply with the ethical values that have been formulated since its inception and along its varied stages of development.

**Integrity:** Consistently adhering to the Code of Ethics agreed upon within AASTMT organizational practices.

**Creativity and Innovation:** Innovation and Creativity should form part and parcel of the academic content of all subjects taught at AASTMT.

**Excellent Performance:** Implementing the principle of: "Paying for Performance".

**Vision of QAAC:** is "to provide an outstanding contribution in the monitoring and consistency of performance of educational, training and consultation services to maximize the competitive advantage of the Academy locally, regionally and internationally".

**Mission of QAAC:** is "to spread and share the quality culture within the AASTMT entities that ensures the continuous improvement of the academic and administrative performance by developing systems that ensures compliance with the local and international requirements of accreditation bodies in Colleges, institutes and supporting units within AASTMT.

### **Strategic Goals of QAAC**

# **G1.** Quality Assurance of Educational Services

This strategic goal includes activities and initiatives for planning, monitoring and enhancing the quality activities related to the educational services regarding developing of programs, increasing the competency of faculty staff and ensuring the providence of adequate educational environment, enhancing the organizational capability of Colleges and institutes in providing the educational services by adopting and implementing management systems that assures the quality of the learning outcomes. This goal comprises the following objectives:

G101: Supporting and developing AASTMT units for adopting the quality standards

**G102:** Enhancing the competency of the faculty staff

G103: Developing the programs, education and teaching tools

**G104:** Supporting Accreditation of programs by local and international bodies

# **G2. Spreading and Sharing Quality Culture in the Academy**

This strategic goal includes activities and initiatives for planning, monitoring and spreading quality culture among the employees and staff to strengthen quality concepts which help in creating a conscious and cultural environment that supports the continuous improvement, as well as ensuring consistency of performance and increases the competency of the faculty staff, administrative staff and technicians. This helps in ensuring the providence of the adequate environment and development of the organizational capability of Colleges and institutes in providing the educational services through the implementation of quality concepts to ensure the quality of the learning outcomes. This goal comprises the following objectives:

**G201:** Establishing a quality unit in each organizational entity

**G2O2:** Supporting the quality units to provide seminars and workshops for its students, staff and employees

**G2O3:** Organizing seminars and workshops to spread and share the quality culture

**G2O4:** Designing booklets and quality magazines to be distributed among the employees and students.

### **G3.** Quality Assurance of Student Services

This strategic goal includes developing the student activities in the academy for the improvement and development of the processes of integration of the students in the educational process as it helps in supporting it and maintains its continuous improvement. Moreover it provides consistent manners in dealing with the students" complaints and ensures the providence of adequate environment and improvement of the organizational capabilities of the Colleges and institutes in providing the educational services by adopting and implementing quality systems to ensure the quality of the learning outcomes. This goal comprises the following objectives:

G3O1: Developing and ensuring the integration of students in the educational processes

**G3O2:** Developing the educational supporting system

G3O3: Developing and monitoring students' complaints policies and procedure

To define the quality assurance framework that manage all processes whether academic or non-academic, a reference has to be made to the ISO 9000 family of standards, relating the Unified Quality Management System (referred to as QMS) that runs in AASTMT. This QMS is decomposed of four subsystems and described as follows:

- 1. Quality Assurance Management System (QA)
- 2. Educational Quality Management System (EDQMS)
- 3. Admission and Registration Quality Management System (ARQMS)
- 4. Student Affairs Quality Management System (SAQMS)
- 5. Human Resource Quality Management System (HRQMS)
- 6. Information Technology Quality Management System (ITQMS)

The Unified QMS system is based on the new standard ISO 9001:2015 and includes the principle of Risk Management and Change Management, (For more details about all subsystem, see Appendix A). This unified QMS defines the quality assurance processes that are applicable in all AASTMT branches, colleges offering academic programs, and support units. It also explains the processes that are used for measurement, assessment, evaluation, and accreditation.

Quality Assurance processes encompass all programs and services provided by the University. It is based on regular cycle of planning and evaluation of teaching, research, service, administration, and educational support. As these programs and services are provided by a wide array of different organizational units, the Quality Assurance Framework is a roadmap for how strategic planning, program assessment and review, learning outcomes assessment and accreditation are integrated across the institution.

To meet the expectations of the QMS to deliver excellence in education and services, it was developed based on the traditional models of continuous improvement cycle which consists of four stages. These models referred to as "Deming Cycle" and the "EFQM" and widely referred to as:

PDCA: Plan -> Do -> Check -> Act (Deming Cycle)

RADAR: Results -> Approaches -> Deploy -> Assess -> Refine (EFQM model)

Three main types of internal review help AASTMT to make regular assessment of the effectiveness of its QMS in various areas of quality assurance:

- 1. Internal audit performed by the head of QAU of compliance against each procedure of the EDQMS to ensure effective implementation and conformance of the Academy Quality Management System. This audit is referred to as Level 1 audit (L1) and is based on the Internal Audit Procedure (QA2) and should be conducted in Fall and Spring Semesters before the full audit by the QAAC. The audit report of L1 should be communicated to the Director of QAAC. More detail about this procedure is given in Appendix 1.
- 2. Internal audit performed by competent auditors from the QAAC according to a yearly audit plan. This internal audit is referred to as Level 2 audit (L2). The scope of this audit covers the whole AASTMT branches and is based on random selection of sites, colleges and support units. This audit often runs in Fall, Spring and Summer Semesters. The comprehensive bi-annual internal audit report for the whole AASTMT is produced and submitted to AASTMT President. This report summarizes AASTMT's performance against its plans, the impact of implementation, and recommendations for future. The report also indicates focus area that need corrective action and follow up based on the identified level of risk.
- 3. In addition to scheduled Academy Internal Audits, additional assessment and evaluation may be performed on a per request basis (e.g. Unscheduled Audit), at the discretion of the Academy President. This audit is often conducted by the Director of QAAC.

# Three main types of external review help AASTMT to make regular assessment of its effectiveness in various areas of quality assurance:

- 1. Institutional accreditation reviews by the UAE Commission for Academic Accreditation (CAA).
- 2. Specific programmatic accreditations by the CAA and international accrediting agencies (such as AACSB, ABET, RIBA1, RIBA2, FIBAA, AACSB, and ZEvA)
- 3. ISO 9001:2015 external audits performed by the Certification body DNV.GL and conducted twice in Fall and Spring Semesters.

#### The Quality Assurance System at AASTMT is realized in three main areas:

- 1. The Quality Assurance system and QA infrastructure
- 2. Academic activities; and
- 3. Administrative support functions.

Details of the QA systems and processes that operate at AASTMT in each of the following sections provide these areas.

# 3 QUALITY ASSURANCE INFRASTRUCTURE

Quality assurance at AASTMT branch in Sharjah is represented by a central unit that oversees all quality assurance activities at the branch. The branch has only one college being identified as the crown in the field of Maritime Transport. This college is the College of Maritime Transport and Technology (CMTT). CMTT offers two educational programs being the Bachelor in Maritime Transport and Technology (BMTT) with two concentrations and the Bachelor in Marine Engineering Technology. These two programs are subjects to being accredited from the CAA according to Standard 2011. AASTMT proposes to open a new college being the College of International Transport and Logistics (CITL). The introduction of the proposed new college would necessitate the expansion of the quality assurance infrastructure. The current quality assurance infrastructure has been mimicked by a similar infrastructure in AASTMT in Smart Village and South Valley campuses.

The Quality Assurance Unit (QAU) currently manages activities related to institutional developments, academic and administrative quality assurance, strategy alignment, and risk management implementation with under the direction of the branch directors. These activities are managed with quality coordinators for both academic and administrative areas. The unit had been depicted in Figure 1. What follows constitute the responsibility of the unit head.

# 3.1 Head of Quality Assurance Unit

The head of the Quality Assurance unit (QAU) is considered part of the senior management at AASTMT branch in Sharjah. Therefore, the head of the QAU should reports directly to the Director of the Branch and technically follow the director of the Quality Assurance and Accreditation Center (QAAC) on any matter related to either quality or institutional research.

# Responsibilities

- 1. Participates in preparing and reviewing the branch's vision, mission, strategic goals and performance indicators with colleges, institutes, and support centers.
- 2. Adopts the annual training agenda for quality cadres from colleges, department heads and workers in the branch to spread the culture of quality and qualifying heads of units and coordinators.
- 3. Participates in the review and development of regulations for quality systems and academic accreditation after adoption from the QAAC at headquarter.
- 4. Prepares assessment visits plans and periodic reviews of colleges and supportive centers internally. Coordinate with the competent authorities to implement the visits of local and international external accreditation bodies after the approval of the director of QAAC.
- 5. Follows up the commitment of the colleges and support centers on the branch level, to implement the unified system of quality assurance and academic accreditation, and overseeing qualifying staff programs to professionally use the policies and procedures included.
- 6. Issues periodic reports and bulletins on quality activities and adopt them from the QAAC, deals with the resulting situations of non-conformity, and recommends necessary corrective measures for their treatment, and then follows with the executive committee later to ensure their application.

- 7. Studies the indicators of achievement and outputs indicating the quality of educational activities and supportive administrative services. Holding periodic and exceptional meetings with different organizational entities and coordinators to discuss their members in different perceptions of the proposed solutions. Discusses performance reports issued by each of them before approval, and present them to the branch director to be prepared for presentation to the Executive Committee.
- 8. Follows up on the decisions and recommendations of the Executive Committee, related to development of strategies for quality assurance activities in the branch.
- 9. Represents the Academy branch in the work of local and international committees and conferences, related to quality assurance, in accordance with the laws and procedures in force in the Academy.
- 10. Concludes and follows up accreditation agreements and protocols with donors, through the QAAC, and saves them after reviewing them legally and financially, and then obtain approval from the Executive Committee.

#### 3.2 Institutional Research

A key factor in institutional development is to establish institutional research (IR) section that directs all the institutional effectiveness. This section is managed under the supervision of the Head of QAU who conducts research and appraises institution's accomplishments and effectiveness on an extensive range of quality procedures such as: programs quality and learning outcomes, opinion investigations and feedback, student characteristics and enrollment patterns... etc.

The intuitional research department at the QAAC in AASTMT is recognized as a direct contributor to the evaluation plan of all branches/colleges. This department uses varieties of processes and documentation to help implements the IR model at the levels including colleges/programs. This model would include research on student demographics and enrollment patterns, which are required to evaluate the achievement of the operation of the colleges.

AASTMT branch in Sharjah proposes to include office for the IR with the following mission and objectives. The office would serve as an information source and warehouse for operational statistics pertaining to the campus and colleges. Institutional Research is the planning, coordination, collection, organization, compiling and dissemination of information concerning the performance of the institution. The primary purpose is to perform systematic data collection, analysis and reporting of institutional information, as well as comparisons of this information with other educational institutions, and to support the planning and decision-making processes. The IR office would report directly to the Campus Director throughout the head of Quality Assurance.

The purposed IR office is to provide members of the campus community with accurate and relevant information. Members of the campus community include; students, staff, programs managers and operations. The data delivered by the office assists institutional leaders in their planning and decision making.

In order to meet the national standards for licensure and accreditation, this section must also achieve the following operational objectives:

### 3.3 Objective

- Coordinates effectively an appraisal plan to assess the accomplishment of institutional and unit/department goals and objectives;
- Facilitates the use of a diversity of evaluation methods.
- Documents the use of assessment results for institutional development.
- Ensures that the educational programs learning outcomes of CMTT are assessed and that the assessment results are used for program improvement.
- Documents that all administrative and support services do evaluate their effectiveness and improve their operations.
- Conducts vital institutional research to CMTT's planning and evaluation activities.
- Satisfies the stakeholders' needs according to statistical reports and information.
- Data collection, analysis, and compilation of assessment results
- Assessment of units' key performance indicators (KPIs).
- Distribution of assessment results
- Setting a plan for implementing improvement and remedial actions
- Monitoring the implementation of the action plans
- Staff and faculty satisfaction surveys
- Students' satisfaction surveys.

# 3.4 Data Policy for Institutional Research

IR coordinates the efforts of the college to evaluate progress toward the achievement of institutional goals and objectives. It documents and reports the effectiveness of the college in both academic and administrative support areas. This office serves as an advisory resource, guide and facilitator to the responsible for evaluating progress towards achieving unit goals and objectives and documenting its effectiveness as follows:

- 1. Institutional research is an entity within the campus, and is authorized to use its data.
- 2. Access to data for the purposes of institutional research is provided by a permission of use from the respective data owner.
- 3. Guarantee of the integrity of institutional information.
- 4. All Colleges must meet legal obligations concerning the use, disclosure, gathering, and storage, of information.

Institutional information must be protected from accidental or intentional unauthorized usage.

#### 3.5 Institutional Effectiveness Framework

Institutional Effectiveness is defined as the degree to which an institution or department within the institution is meeting its mission. This definition implies that the institutional effectiveness process is associated with the degree to which a university is meeting its stated mission. Consequently, the effectiveness of an institution is not captured in what is taught and how, but rather it is impact-oriented and related to what students have learned. It is not captured in how much time and money is spent in doing research, but how much new knowledge is generated through research. It is not captured in the number of hours spent in

community outreach, but in the impact of those activities on the community. The institution discovers how effective it is by assessing those outcomes. As a conclusion, AASTMT branch in Sharjah effectiveness is demonstrated through improvements in its outcomes.

CAA expects accredited institutions to demonstrate commitment to continuous quality assurance and enhancement by systematically evaluating the effectiveness of all aspects of its operations and academic programs, (SLA 2011, Standard 2.1: Quality Assurance, p. 8). The institutional effectiveness plan at AASTMT branch in Sharjah is aligned with the CAA standards. This plan consists of:

- A. Strategic Planning (Institutional level)
- B. Outcomes Assessment (Program/Unit level)
- C. Budget Process

AASTMT branch in Sharjah has its overall long-range plan and each academic and administrative unit has its own plan as well. Organizational units' plans should be in synergy with the overall strategic plan of AASTMT. This implies that they are in match with the same strategic direction and the performance of these units collectively provides data on the performance of the overall plan of AASTMT. Every unit develops an annual assessment plan to measure its performance during the academic year, and accordingly, develop a plan for continuous improvement.

Assessment results, for both academic and non-academic units, are analyzed and used by the respective units to develop their strategic plans. At the institutional level, this information as well as institutional outcomes assessment information is used in the strategic planning of AASTMT. The information gathered is used to set priorities and allocate resources for long-term planning.

# 3.6 Planning and Assessment

The institutional effectiveness planning and assessment section is responsible for:

- 1. Coordinating all aspects related to the institution's planning and effectiveness activities.
- 2. Developing policies, standards and indicators for the assessment of the institution and unit's effectiveness in compliance with the institutional goals and objectives.

#### **Self-Assessment**

A documented analysis of the strength and weaknesses of the educational quality and institutional effectiveness based on the institution's continuous evaluation and quality improvement activities which have been conducted within a certain time-frame.

#### **Planning Procedures**

Institutional effectiveness planning is initiated by the purpose of the institution as approved by the Supreme Council of Education Affairs of AASTMT in terms of an institutional statement of vision, mission, goals and objectives.

#### **Evaluation**

Institution is committed to the self-evaluation of progress towards its overall goals and objectives along with those of its educational and administrative units/ departments. These goals and objectives emanate from the College vision and mission statements. Moreover, all the academic and administrative units' goals and objectives within the institution are resulting from this source as well.

### 3.7 Assessment Cycle

The process of institutional effectiveness assessment is cyclical and ongoing. The cycle begins with the:

- 1. Identifying the expected outcomes
- 2. Measuring the actual outcomes
- 3. Analyzing the results
- 4. Plan/Take Actions

Then the cycle repeats. In subsequent cycles, the expected outcomes (and measures) are reviewed to see if changes are needed based on the information collected during the previous cycle. AASTMT QA system had been based on common models of a continuous improvement cycle such as PDCA (Deming cycle) and RADAR (The EFQM model).

#### It is worth noting that for both models:

- 1. Clear identification of goals is the essential starting point. Plans of all organizational units must be aligned with the overall strategic plan. Each unit's operational plan is an annual plan mapping what will be done to achieve the unit's goals over the upcoming year, how the proposed actions will be done, who will be responsible, and what will be measured to assess progress (KPIs).
- 2. The next step is the implementation of the planned actions.
- 3. Effective quality management depends on regular assessment, or checking, of progress, identifying anything that is not going according to plan or to the timetable, and exploring why there has been delay or inaction.
- 4. Effort focuses on the issues identified in the checking/assessment step, either removing the roadblocks to progress or refining the expectations, in the lead-up to the next iteration of the cycle, with a revised operational plan for the following year.

AASTMT branch in Sharjah shall be subjected for institutional accreditation reviews by the CAA as an external reviewer.

#### **Institutional Effectiveness Assessment Cycle**

1. All units whether academic or non-academic shall develop outcomes assessment plans that have to be produced and presented to the head of QAU.

- 2. Results of the outcome assessment and the recommendations are compiled and annually reported to the QAU.
- 3. All annual assessment reports shall be reported to the QAAC director for further follow-up.

The director of QAAC shares these reports with the executive committee of the branch to generate approved action plans with the required allocated budget and resources.

# 3.8 Strategic Planning

Strategic Planning focuses on the actions taken by AASTMT branch in Sharjah to implement its mission by continuously improve the academic and non-academic processes on campus. The long term strategic plan is done every 5 years. The planning uses a review of the mission and evaluation of the institution strengths and weaknesses as a basis for the five-year plan. With reference to this strategic plan, the different units develop their own five year plans.

The current strategic plan consists of a vision statement, mission statement, and 5 strategic goals extended from the main strategic plan of AASTMT headquarter to enable its branch in Sharjah to achieve its vision. This strategic plan establishes the overall direction for the branch in Sharjah and serves as the foundation for planning at all levels of the institution over the 5-year period. Each of these strategic goals requires multiple organizational units for completion, and thus requires that cross-functional teams facilitate the continuous improvement process. AASTMT branch in Sharjah drafted strategic plan. The strategic plan will be subjected for approval from the Board of Trustees once it is formulated.

- The planning process begins with long-term strategic plan, followed by institutional and units' annual operations plan.
- The strategic planning takes place each 5 years.
- To place the foundation for the five years, cycle of planning, implementation, monitoring
  and evaluation. A review of the college's mission, an environmental scan, and a campus
  and community-wide evaluation of the institution's strengths and weaknesses come
  together.
- The strategic plan in turn pushes specialized plans for various units of the college.
- Annual operations planning keep the college on target headed for its strategic goals.
- Each of the units/departments/deaneries of finance, academic affairs, student affairs, technology, admissions and marketing shall evaluate the previous year's activities and plans for the next.
- The executive committee in collaboration with IP section shall draw data and information from annual planning process, in order to carry out institutional effectiveness studies, annual program evaluation and assessment

AASTMT branch in Sharjah will be conducting periodic reviews of its plan and bi-annually evaluates each unit's performance level according to the plan.

#### **Outcomes Assessment**

Assessment is a continuous process of systematic collection and analysis of information to determine the level of fulfillment of the institutional mission. Assessment is carried out by measuring the effectiveness of academic and non-academic. This is carried out by defining a mission, expected outcomes, continuously monitoring progress, analyzing assessment results, communicating results among all levels of the institution, and using those results in continuous improvement.

# 4 ACADEMIC QUALITY ASSURANCE

# 4.1 Approval of New Degree Programs

- 1. A new program is initiated at the request of one of the educational departments as a result of studying the labor market, monitoring the needs of local community institutions, or achieving other scientific requirements.
- 2. The concerned department fulfills a feasibility study for creating a new program based on the market study and the needs of the local community, and in line with AASTMT educational policy, taking into account the following:
  - a. The program is in line with AASTMT strategic plan.
  - b. The financial resources requirements of the program are satisfactory and acceptable.
  - c. The number of students is expected to comply with the new program and achieve its target.
  - d. The program is compatible with the requirements of accreditation bodies.
- 3. The head of the department presents the feasibility study to the college council and approves it from the dean of the college and then sends it to the Vice President for education and student affairs.
- 4. The Vice President for education and student affairs reviews the feasibility study for the new program and makes the necessary recommendations.
- 5. On approval of the new program, the program coordinator develops the detailed plan for the program. The plan identifies faculty members of the department to start designing and describing the program to be presented to the college council for review and approval by the dean the college.
- 6. After the approval of the detailed plan, the program coordinator completes the program description and its objectives, as well as a program matrix to show the learning outcomes of the program and courses. The faculty members shall ensure that all academic requirements and accreditation bodies are fulfilled when developing the details of the academic programs and the corresponding courses.
- 7. The opinion survey of the beneficiaries of the proposed program (graduates community institutions) should be taken into consideration during the design, by involving these bodies in the semi-periodic meetings.
- 8. While working on the new program, the program coordinator, in cooperation with faculty members assigned to work with the beneficiaries of the proposed program, will hold semi-periodic meetings to ensure that the mentioned requirements are met and issue a report on the meeting.
- 9. After completing the program description form, the head of the concerned department submits it to the College Council for review and then submits it to the Education Affairs attached with a letter of recommendation for review and approval.
- 10. The program must include field training for students in the relevant fields.
- 11. The committee reviews the description of the new program and approves it.
- 12. In the event of disapproval and the existence of amendments, the committee prepares a report of the required observations and sends it to the Vice President for Education and Student Affairs for review.
- 13. After approval, the Vice President for Education and Student Affairs with the Quality Assurance director coordinates accreditation procedures from external stakeholders

- according to the regulations and coordinates implementation with the Deanery of Admission and Registration.
- 14. After approval of the program and before the start of the academic year, the head of the department concerned shall hold meetings to familiarize students with the program and the curricula that it includes in terms of its nature, the targeted educational outputs, the academic subject, teaching methods, available educational resources, and assessment methods in addition to the tasks required of the student.
- 15. The department head updates the new/developed program data (program description documents and courses) on the website of the college and department in cooperation with the information center no later than a month after the program is approved.

More details about the processes and documentation required can be found in EDQMS 1.

# 4.2 Quality Assurance of Existing Degree Program

The quality assurance of an existing program involves a number of processes. This subsection covers the processes for program/course performance indicators, review, and update. The next subsection covers the assessment of learning outcomes.

### **Performance indicators for an Existing Program**

- 1. After the end of each academic year (two consecutive semesters), the program coordinator fulfills a Performance Indicators Form to measure the program's level of presentation and effectiveness and present it to the department council for review and then discuss it in the college council.
- 2. The program coordinator in the department sends the Performance Indicators Form to the data analysis unit of the quality unit in the college to analyze the performance results and prepare a report to be submitted to the concerned program coordinator and send a copy to the Education Affairs and another to the quality assurance center for discussion.
- 3. In case of recommendations, the Vice President for Education and Student Affairs will take corrective actions.
- 4. Based on an analysis of performance indicators for programs at the college/institute, the Vice Dean for Education Affairs at the college, studies the extent of students' enrollment, identifies programs that students do not accept to enroll in, and studies the reasons. The Vice Dean also tracks patterns of change in success rates in different study programs and the ratio of graduates to a number those enrolled in the program, in order to identify problems and take the necessary measures towards them, and develop appropriate solutions issued in a report to the dean of the college.

#### 4.3 Review of an Existing Program

- 1. The concerned section head fulfills a program review plan, provided that the timing of the review is determined so that all programs are reviewed every 3 years at most.
- 2. After determining the general plan for program revision, the dean of the college assigns heads of educational departments to do the revision of the programs, provided that the academic standards set for revising an existing program are adhered to.
- 3. The heads of the educational departments use the number of a minimum of two faculty members, verifying that the selection of the reviewers has been made in terms of

- competency standards, experience in the field, and neutrality to conduct the audit on the program.
- 4. After conducting the program review, the program coordinator will complete a program review form, to be sent to the Vice President for Education and Student Affairs for review and approval.
- 5. In the event of any modifications in the audit report on the program, the program coordinator, in cooperation with the work team in charge of the audit, will meet to solve any areas of concern and report to the dean. After approval of the dean, a copy is sent to the Vice President for Education and Student Affairs.

# 4.4 Amendments to an Existing Study Program

- 1. In the event of any modifications (add / delete) on an existing program as a result of local/international changes and developments, the head of the concerned department shall fill in an amendment form and approve it from the dean of the college and send it to the Vice President for Education and Student Affairs to review and approve the amendments.
- 2. In the event of approval, the department head will implement the amendments.
- 3. In the event of disapproval, a report is submitted to the Vice President for Education and Student Affairs. The amendment file is closed and work continues on the existing program.
- 4. In the event that the amendments result in the necessity of taking measures to re-accredit external parties, the Vice President for Education and Student Affairs will take accreditation procedures from external stakeholders.
- 5. When the amendment is approved, all concerned parties within the program are informed of the results of the amendment so that the new development can be dealt with after taking documentation and control procedures from the QAAC.

#### 4.5 Development and Approval of New Courses

- 1. The program coordinator reviews the detailed program plan and sends the detailed plan to the head of the department who forms a team for designing the course. Course design includes the names of the courses, determining the extent of fulfillment of these courses with the targeted learning outcomes, taking into account the use of non-traditional learning patterns and conforming to the detailed plan for the new program.
- 2. The team designs the curricula so that the learning outcomes of the course are derived from the matrix for the program. The team also defines methods of teaching, learning, and assessment, to ensure the learning outcomes are achieved.
- 3. Once the course description and the curriculum matrix are prepared, the course coordinator sends them to the department head for approval and sends them to the vice president for Education and Student Affairs.
- 4. In the event of disapproval, a report with the required observations is sent to the head of the department to take the required amendments.
- 5. After approval, the department head will send the descriptions to all interested parties.

#### 4.6 Amendment to an Existing Course

1. In the event of any modifications to an existing course, the head of department shall fill in an application form to amend the program / courses and approve it from the

- dean of the college, then send it to the Vice President for Education and Student Affairs for review and approval.
- 2. In the event of approval, the department head will implement the amendments.
- 3. In the event of disapproval, a report is submitted to the Vice President for Education and Student Affairs. The amendment file is closed and work continues on the existing course.

#### 4.7 Performance Indicators for a Course

- 1. After the end of each academic year, the course coordinator fills a Performance Indicators Form to measure the level of performance and effectiveness of the course.
- 2. The course coordinator in the department sends a Performance Indicators Form to the QAU to analyze data and prepare a performance indicators measurement report to be submitted to the concerned department head for discussion with department board and college council.
- **3.** In the event of recommendations, a copy is sent to the Vice President for Education and Student Affairs with corrective actions.

# 4.8 Review an Existing Course

- 1. The concerned department head prepares a review plan for the courses in the department, provided that the timing of the review for all the courses is every year or when there is a need for that based on scientific developments in the fields of specialization, local and global variables, or the results of alumni or employers survey.
- 2. The head of the department uses the help of a minimum of two faculty members, verifying that the selection of the reviewers has been made in terms of competency standards and experience in the field.
- 3. A course review report is sent it to the department head for review and approval.
- 4. The head of the department reviews, and when there are any amendments, holds a meeting with the auditors to clarify the matter and amendment and then approve.
- 5. The department head sends the report to the Vice President for Education and Students Affairs for review/approval/disapproval.

#### 4.9 Learning Outcomes Assessment

Outcomes assessment is a continuous process of systematic collection and analysis of information to measure the level of achievement of the institution's mission and goals. Each college identifies its goals and objectives consistent with the institution mission and goals. The program learning outcomes are developed in alignment with college goals and objectives. Course learning outcomes are developed according to program outcomes. All goals and outcomes are in alignment with the institutional strategic goals.

#### The assessment process is cyclical and ongoing. The cycle begins with the:

- 1. Identifying the expected outcomes
- 2. Measuring the outcomes
- 3. Analyzing the results
- 4. Planning/Taking actions for continuous improvement

Then the cycle repeats. In subsequent cycles, the expected outcomes (and measures) are reviewed to see if changes are needed based on the information collected during the previous cycle.

# 4.9.1 Academic Program Mission and Goals

Academic programs' mission statement should reflect the College mission statement and demonstrate how it supports or complements the College goals. It should be a concise and focused statement of the purpose of the program and the general values and principles which guide the curriculum. Thereby, it should serve as the foundation for assessment planning.

The program goals are broad statements reflecting the long-term program targets. They should focus on activities in which faculty members engage and describe what the program intends to deliver in the areas of teaching, research, and community services. The main function of program goals is to provide a bridge between the program learning outcomes and the program mission statement.

In Addition, College's mission and goals should ultimately support the AASTMT branch Sharjah's mission and goals.

#### 4.9.2 Assessment Processes

An assessment cycle is planned to cover all of the program's PLOs. The assessment cycle plan guides faculty members through the process by indicating how each PLO will be assessed, in which courses, using which assessment methods and instruments, what data will be collected, how the data will be disseminated and to whom, and how the recommendations will be implemented and monitored.

#### 4.9.2.1 Assessment of Program Learning Outcomes

#### **Program Learning Outcomes (PLOs)**

The goals and objectives of the program are used to derive program learning outcomes in alignment with the mission. Program learning outcomes are specific, clear and measurable, where objectives are long term goals. PLOs should include expectations about different skills that the student acquires. The PLOs have to be aligned to EQFramework.

#### **Assessment Methods**

Assessment methods and instruments should be carefully prepared to measure students' achievement of the program learning outcomes. Data collected about students' achievement is used in the continuous improvement process. Assessment tools should be carefully selected to reflect the attainment of learning outcomes. Course grades are insufficient measures, alternatively, two basic ways can be used to assess student learning; direct and indirect methods. Effective assessment plans must include both direct and indirect methods, and more than one assessment method to measure the same outcome. The assessment is about the whole program rather than one course, faculty member, or student. Faculty members should be aware of the assessment process and should be involved in developing

the mission statement, objectives, and learning outcomes. Assessment plans and results are to be communicated to faculty, deans and senior management.

# 4.9.2.2 Key Performance Indicators and Achievement Targets

Once the assessment method is determined, the criteria for success or achievement targets for each learning outcome should be established. An achievement target specifies quantitatively the acceptable level of student work for the learning outcome. This achievement target may be a passing score on an exam or another indicator of the quality of student work. Therefore, setting achievement targets allows the program faculty to determine exactly what the expectations for students should be and thus determine what constitutes student success.

#### **Steps for Assessment**

- 1. The assessment process can be illustrated through the following steps:
- 2. Approve an assessment plan.
- 3. Identify assessment methods for each PLO performance indicator.
- 4. Collect assessment data.
- 5. Analyze assessment data.
- 6. Identify recommendations for continuous improvement.
- 7. Report the continuous improvement results and recommendations.
- 8. Follow up the implementation of the recommendations.

#### 4.9.2.3 Assessment of Course Learning Outcomes

Each course CLOs are continuously reviewed and aligned with PLOs. Appropriate assessment tools are identified to measure each CLOs, following the same process outlined above for assessment of PLOs.

#### 4.10 Risk Management

The quality assurance system at AASTMT has addressed the risk management principle at the institutional/program/administrative level. Through a risk procedure, opportunities for improvement affecting the processes of AASTMT quality management system which can be controlled in their effects, all internal and external issues, interested parties can be monitored and controlled (Details about risk and opportunities procedure QA5, is given as a separate attachment).

This procedure applies to all risk and to manage the risk / opportunity; internal and external interested parties' needs and expectations should be identified, in a way that identify the parties concerned with the work of the institution that affect the organization's ability to provide services continuously and meet customer needs and any applicable requirements are identified by determining the needs and expectations of each of the parties concerned, and study their effects and how to deal with them.

- Top management deal with the risks and opportunities by the following team of management:
  - Deans / Manager of College / Institute / Supporting Units
  - o QAU Head
  - Head of Departments
- Actions taken to address the risks and opportunities shall be proportionate to the potential impact on the conformity of services.
- Risk/opportunity sources are classified as Business Risk, Financial Risks, Operational Risk, and Legal Risks.
- A detailed risk plan with risk evaluation has to be produced and communicated to the branch director who approves it through the executive committee and the BOT.
- Documentation of all risk plan and risk evaluation should be kept in the quality assurance unit for later review. All issues whether internal or external identified as a potential risk should be sent to the director of QAAC. These issues should be discussed either in the supreme council of education or the management review meeting of the QAAC chaired by AASTMT president.

# **5 QUALITY OF FACULTY**

AASTMT follows a number of processes to assure the quality of faculty members across all their areas of responsibility: teaching, research, and service. The processes involve faculty recruitment, faculty performance review, faculty promotion. The detailed procedures are detailed in the policies and procedures manual.

- The faculty recruitment process is initiated by a submitted written application and CV. The submitted information is used to check the suitability of the applicant with the criteria for a position.
- Faculty performance is based on evidence submitted annually by the faculty member, covering teaching, research, and service. The submitted evidence is approved by the appropriate levels of responsibilities of department head, dean, Vice President for education and student affairs, HR, etc.
- The process of faculty promotion is a result of all the faculty member activities. The faculty member submits all evidence required for promotion, as outlined in the policies and procedures manual.
- Faculty reviews are expected to be communicated with faculty members. The department head is expected to give constructive and motivational feedback to the faculty member to help the continuous improvement of the department.

# 6 ADMINISTRATIVE SUPPORT SERVICES QUALITY ASSURANCE

The administrative support services at AASTMT branch in Sharjah are delivered by the departments and other units that are depicted in the organizational chart in Figure 1, under the director of the branch and the executive committee.

The administrative support units under the branch director and technically follow the parents department in the main Headquarter are:

- 1. Human Resources Department;
- 2. Financial Department;
- 3. Admission and Registration Department;
- 4. Student Life Department
- 5. Medical Unit

#### Quality assurance for administrative units is ensured through:

- 1. Assessment of unit outcomes
- 2. Internal audit process

Additional administrative units require further external review every 5 years to be in compliance with international standards. These units are HR and finance (subject to audit compliance).

#### 6.1 Administrative Unit Assessment Process

- All units at AASTMT shall identify clear goals and outcomes in accordance with the parent unit in AASTMT.
- Both goals and outcomes should be aligned to AASTMT strategic plan.
- Each unit's operational plan must clearly indicate proposed actions, responsible for the action and the KPI that will be measured.
- This process is managed by a local strategic committee affiliated from the main strategic committee of AASTMT.
- The frequency of assessing the operational plan is twice a year, in which case all review process and the outcomes has to be fed back to the SPC at the main campus to produce and disseminate the report.
- Varieties of outcomes assessment measures are used in the assessment process. These are
  direct such as averages, percentages, and count while the indirect measures include
  perception or attitude of the service been offered.
- Institutional research department at the headquarter with the support of QAU often publish and administers a series of student, faculty, staff, alumni, and employer surveys in

- cooperation with academic and administrative units all over AASTMT branches for purposes of benchmark, assessment and review.
- For examples outcomes of administrative unit assessment, see Appendix C for more details.

# **APPENDIX A: UNIFIED QUALITY MANAGEMENT SYSTEM**

	1. Quality Assurance Management System (QA)
Code	Procedure Name
QA1	Documented Information
QA2	Internal Audit
QA3	Nonconformities and Corrective Action
QA4	Management Review
QA5	Risk Management
QA6	Management of Change
QA7	Monitoring, Measurement, Analysis and Evaluation
COP11	Executive Procedure QAC
QM	Quality Manual
Ų.i.i	Quality Francis
2.	<b>Educational Quality Management System (EDQMS)</b>
EDQMS1	Programs Development and Review
EDQMS2	Student Assessment
EDQMS3	Courses Development and Review
EDQMS4	Intended Learning Outcomes (ILO's)
EDQMS5	Student Field Training
EDQMS6	Delivery of Courses
EDQMS7	Accreditation of Study Programs
EDQMS8	Academic Advising
EDQMS9	Lecturers Loading
EDQMS10	Purchasing of Books
EDQMS11	Student Appeals
EDQMS12	External Lecturers
EDQMS13	Summer Course
EDQMS14	Strategic Planning
3. Admis	ssion and Registrant Quality Management System (ARQMS)
ARQMS1	Students Complaint
ARQMS2	Client Complain
ARQMS3	Student Discipline
ARQMS4	Student Questionnaires
4. H	uman Resource Quality Management System (HRQMS)
HRQMS1	Organizational Structure and Leadership
HRQMS2	Recruitments
HRQMS3	Vacations and Secondments
HRQMS4	Penalties and disciplinary actions
HRQMS5	Promotions
HRQMS6	Induction of Staff
HRQMS7	Training for Employees and Staff members
HRQMS8	Appraisal for Employees and Staff members
5.	Information Technology Quality Management System
ITQMS1	Software System Development
ITQMS2	Software Systems and Data Control

All procedures can be accessed through staff portal; <a href="https://staffportal.aast.edu/">https://staffportal.aast.edu/</a>

# APPENDIX B: EXAMPLE PLO FOR BACHELOR OF MARITIME TRANSPORT

### **Program Learning Outcomes (PLOs)**

Upon completion of their course, students will be capable graduate to contribute to the maritime transport industry, and able to:

- a. Apply knowledge of mathematics, science, and information technology to support marine operations and navigation techniques.
- b. Explain the scientific, legal and regulatory framework to maintain a safe sound manner for the marine operations safety and environment protection.
- c. Demonstrate understanding of relevant information for building professionalism, capacity and work ethics.
- d. Apply the principles and theories of ship and marine operations and develop appropriate navigation methodology in different situations.
- e. Utilize data to insure optimum safe port and shipping operations.
- f. Recognize the importance of planning before carrying out a task.
- g. Show proficiency as a team member and take leadership responsibility in ship operations.
- h. Demonstrate an ability to articulate and interpret qualitative and quantitative data to develop lines of argument and make sound judgments.
- i. Utilize the appropriate resources, to assimilate new knowledge and skills in offshore operations.
- j. Demonstrate the ability to comprehend maritime multiple tasks and solve unfamiliar problems.
- k. Set team objectives and take responsibility for team performance in the workplace and be able to function on multidisciplinary teams.

# APPENDIX C: EXAMPLES OUTCOMES OF ADMINSTRATIVE UNITS

Administrative Unit Goals (Initiative)	Administrative Unit Outcomes (Activity)	Assessment Measures (KPI)
<b>Human Recourses</b>		
Personnel selection and placement & recruitment	Development of employee recruitment implementation.  Evaluation of employee recruitment.  Selection of employee recruitment.	Assess the quality of employees Employee Turnover Rate Dismissal Rate Average Time Stay
Development & training of employees	Develop employee orientation, training, and development programs.	employees stay Training Costs
	Implement employee orientation, training, and development programs.  Evaluate employee orientation, training, and development programs.	Training hours per employee
Employees performance appraisal	Evaluate employee performance.  Identifies the employee needs of improvement areas.	Employee Productivity  Absenteeism Rate
Planning of manpower	Facilitate and support effective employee and labors' relations.	Overall effectiveness of workforce Overtime Hours. Employees' workload in detail Percentage of part-time employees over time
Employees remuneration	Research and support the development and communication of the organization's total	Percentage satisfaction: of employees
Setting policies for the organization	Compensation plan. Collaborate in the development, of organizational policies.	Recruitment method Percentage of employees involved in policies development
Motivation development through incentives	Develop, implement, and evaluate organizational development strategies aimed at promoting organizational effectiveness  Present and evaluate	How long it takes to find a new employee

Administrative Unit Goals	Administrative Unit Outcomes (Activity)	Assessment Measures (KPI)
(Initiative)	· · · · · · · · · · · · · · · · · · ·	(=== =)
	communication messages and	
	processes related to the human	
	resources function of the	
	organization.  Provide leadership in the	Gender diversity as a
	achievement of ongoing	percentage
	competence in human resources	percentage
	professional practice	
	Facilitate and communicate the	
	human resources component of	
	the organization's business plan	
	Produce reports, and recommend	
	changes in human resources	
	practices	
Admission and Registration	on	
Technology usage in	Admitting and registering	Enrollment count in a
recruiting and	students	course for a specific
communicating with		term.
prospective students as		Enrollment limit with
well as admitted students		maximum number of
		students that can be
	Duan anima a fila fan ayanya stydant	enrolled in a class.
	Preparing a file for every student,	Percent class filled.
	including his academic record  Checking and auditing files of	Average class size.
	admitted students	Count of classes with
	admitted students	student enrollments
		exceeded limit.
		Count of classes that
		have one or more
		students enrolled.
		Rejected Student Count
	Preparing timetable, final-	Number of credits
	examinations, academic calendar	earned by students
	for students.	enrolled in a class.
		Number of students on
		the waitlist for a class
Address Staffing Needs	Arrangements for students'	Average number of
Enhance the presence of	registrations, and monitoring	hours per week the
graduate admissions both	students' loads.	instructor is teaching.
internally and externally		Percent of instructor
	Following up transformed students	Hours Taught Percentage student
	Following up transferred students from other universities.	Percentage student transferred internally
	mom onici universides.	transferred internally

Administrative Unit Goals (Initiative)	Administrative Unit Outcomes (Activity)	Assessment Measures (KPI)
	Preparing distinguished students lists	List of distinguished students per college/branch
	Lists of Expected graduates and checking their academic records and study plans.	Number of graduates per degree
	Following up on execution of curricula in the electronic system.	Percentage of curricula transferred to e-curricula
	Preparing reports needed inside and outside the University.	Percentage reports completed on time
	Issuing graduation certificates and transcripts.	Number of certificates and transcripts issued by semester
	Preparing pamphlets, brochures and forms related to admission and registration.	Impact of marking administration campaign on students admission
	Following up transferred students from other universities.	Percentage students transferred externally
Financial Department		
Efficient and effective management of the financial resources	Effective budgeting process that meet best practices	Accuracy of financial planning Commitments to budget limits
		Accuracy of budget preparation Percentage of completing external
	D11	audit reports
	Payroll	Percentage of commitments to paying salaries within due time
	Payable and dues	Percentage of completion of annual inventory
<b>Quality Assurance Unit</b>		
The effectiveness of the management system	Internal audit	Percentage of implementing audit plan on time Percentage of organization units that
		have issues common to

Administrative Unit Goals (Initiative)	Administrative Unit Outcomes (Activity)	Assessment Measures (KPI)
		AASTMT and risk
		register
		Number of corrective
		action reports issued
		Percentage of
		corrective action report
		college/branch/degree
		program
		Percentage of internal
		audit follow up reports
		that were close on time
		Percentage of MR
		outputs that were
		followed on time

# **APPENDIX D: ASSESSMENT TIME PLAN**

	Week	Administration <sup>1</sup>	Program <sup>2</sup>	College <sup>3</sup>	Internal <sup>4</sup> Audit – L1	Internal <sup>5</sup> Audit – L2	External <sup>6</sup> Audit – L3	Institutional <sup>7</sup> Effectiveness
	WP0	Preparation of Cour	rse Files Summaries					
	W1		Academic Affairs – L2	Aggregate all programs reports to be				
	W2							
	W3			sent to QAAC	QAU			
	W4	HR – L2				QAAC		OP - HR
er	W5	AR – L2						OP - AR
Fall Semester	W6						DNV.GL	
III Se	W7	SA – L2						OP - SA
Fa	W8	Log. – L2						OP – Log.
	W9							
	W10					Random L2		
	W11							
	W12					M. Review		
	W13							

	W15										
	W16				Final Exa	n					
			s after final exam (one week collecting assessment CLO and PLO and recommendations) and the other week QAU analyze re continuous report. Department council discusses and approves assessment report for endorsement by college council.								
	WP0	Preparation of Cour	reparation of Course Files Summaries								
	W1		Academic A	affairs L2	Aggregate						
	W2				all programs reports to be						
	W3				sent to QAAC	QAU					
	W4	HR – L2					QAAC		OP - HR		
ster	W5	AR – L2							OP - AR		
Spring Semester	W6							DNV.GL			
ring S	W7	SA – L2							OP - SA		
Spi	W8	Log. – L2							OP – Log.		
	W9										
	W10						Random L2				
	W11										
	W12						M. Review				

	W13						
	W14						
	W15						
	W16			Final Exa	m		
		eks after final exam (or continuous report. Dep					llyze and
	WH1						
	WH2						
ster	W1						
Summer Semester	W2						
mer 5	W3						
Sum	W4						
	W5						
	W6			Final Exa	m		

- 1: Outcome assessment for administration units through internal and external audits (L1, L2, L3 by DNV.GL)
- 2: Program assessment
- 3: College assessment
- 4: Internal audit L1 level conducted by quality assurance unit in college/branch)

- 5: Internal audit L2 level conducted by quality assurance and accreditation center
- 6: External audit L3 level conducted by DNV.GL (External audit will be extended to AASTMT branch in Sharjah)
- 7: Intuitional effectiveness conducted jointly with QAAC (Audit on the operational plans of each unit in relation to strategic)