

**20|20 KSU INTERNAL AUDIT &
ASSESSMENT AND BOARD OF ASSESSORS: A SYNOPSIS
(2ND EDITION, JUNE 2023)**



**20|20 KSU-QPMS
KING SAUD UNIVERSITY
QUALITY PERFORMANCE MANAGEMENT SYSTEM**



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Foreword

The KSU journey and new chapters have been guided by its commitment to continuous improvements, innovations, renewals, and recommitment. They are underpinned by the continued strengthening of its education, social and cultural foundations through its ever-evolving IQA (Internal Quality Assurance) System. We are pleased and proud to say that we have used the KSA Vision 2030, KSU Vision 2030, the ETEC-NCAAA, and national aspirations to strive beyond meeting requirements to excel through Performance Excellence, which has been and will always be the beacon of KSU's "Towards Excellence."

In KSU's ever-evolving IQA (Internal Quality Assurance) System, we are proud to introduce our PIQ (Planning-Information-Quality) Troika pillars. They underscore KSU's holistic approach to "Performance Excellence Management." In these aspects, the IQA journey toward accreditation has been a very challenging but not hopeless nor inhibiting

exercise. On the contrary, these "Learning Experiences" have challenged KSU to higher heights on its "Towards Excellence" journey. One is the 20|20 KSU IAA Internal Audit and Assessment System.

Though there are changes in ETEC-NCAA, KSU's IQA System has continuously evolved into the Performance Excellence Framework enshrined in the 20|20 KSU-QPMS (Quality and Performance Management System) Handbooks 1 & 2 (5th Edition, June 2023) and its Programmatic 20|20 KSU-QPMS. The mainstay of the KSU IQA is the 20|20 KSU-IAA, and the BOA (Board of Assessors) synopsis in this small booklet of the rubrics and Performance Excellence approach that KSU has used since 2010.

We hope this 20|20 KSU-QPMS IAA and BOA Synopsis will provide a snapshot of the KSU Internal Audit and Assessment mechanisms and rubrics for ease of understanding and practice perusals.



Executive Summary

Since 2010, the hallmark of continuous improvements and innovations in KSU has been enshrined in the KSU-QMS Handbooks 1 and 2 (4th Edition, May 2017) to the 20|20 KSU-QPMS (Quality and Performance Management System) (5th Edition, June 2023). The system has weathered KSU's resilience to withstand changes but steadfastly adhering and adjusting to the changing environment and requirements. A crucial part of this is the ubiquitous Internal Audit and Assessment by the KSU-BOA (Board of Assessors), which plays a central and fundamental role in the progress and performance assessment of KSU programs.

KSU went beyond regular assessment as its assessors are fully trained and equipped with the performance excellence assessment approach. The university-appointed assessors are the stalwart of performance excellence. It is executed through their QPAR (Quality Performance Assessment Report), meeting the 4 "A" s of Actionable, Aligned, Accurate, and Appropriate requirements of an internationally practiced Performance Excellence framework that is the basis of the programs' action-oriented developmental planning.

The KSU 3 stages Performance Management System of Stage 1: Self-Study, Stage 2: Audit & Assessment, and Stage 3: Developmental Planning has been commended by the international assessors in the KSU 2016 Institutional re-accreditation. KSU, the premier university in KSA, is proud to continue its quality assurance strives to create and deliver on its commitments to society and drive KSA towards higher academic recognition and performance achievements.

Once again, we thank the KSU community for their continued support and work towards KSU's commitment to going to higher lengths and heights of academic achievement.

Thank you.

Deanship Of Development and Quality

King Saud University

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20|20 KSU-QPMS (Quality Performance Management System) Internal Audit & Assessment and Board of Assessors: A Synopsis

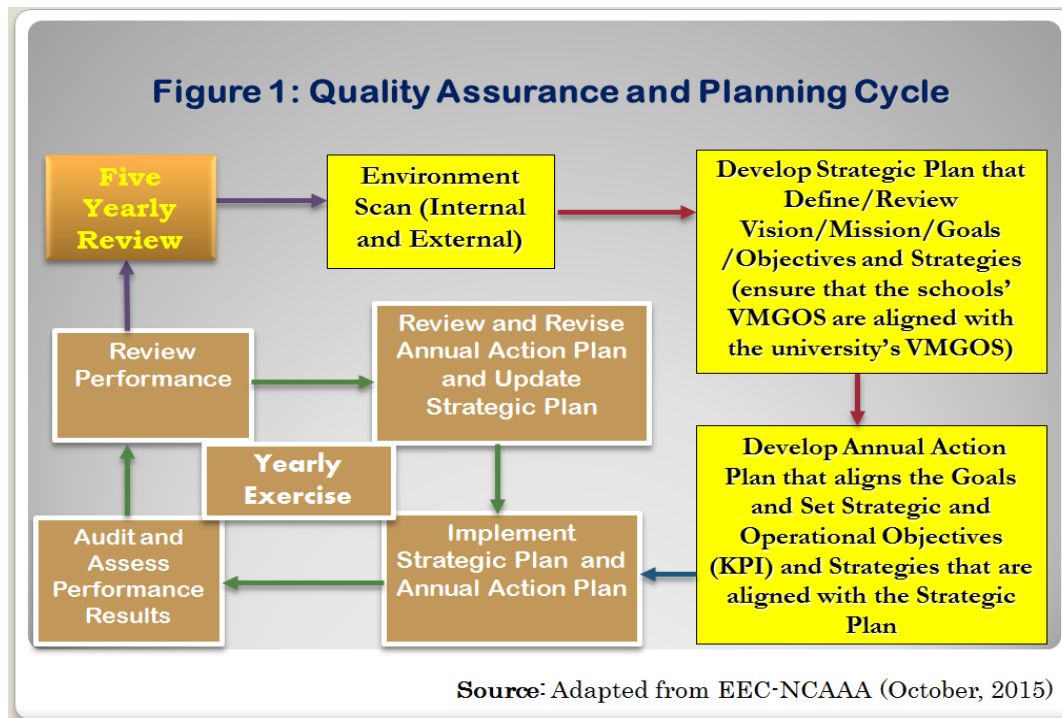
(1) Rationale of the 20|20 KSU-QPMS IAA (Internal Audit and Assessment)

The primary rationale for continuous improvements and innovations is for KSU to demonstrate and achieve high-performance excellence in its IQA (Internal Quality Assurance) system. It is in assuring its graduates meet the minimum present ETEC-NCAAA and future ETEC-SAQF requirements through its bi-annual IAA (Internal Audit and Assessment) system. KSU's internal performance audit and assessment are based on the internationally accepted performance excellence model of MBNQA (Malcolm Baldrige National Quality Award).

The bi-annual IAA is the central performance excellence sustenance system hosted by the DoDQ (Deanship of Development and Quality) and executed by the institution-appointed members of the KSU-BOA (Board of Assessors).

It should be noted that the IAA is part of IQA (Internal Quality Assurance System) as mandated by the ETEC-NCAAA and is enshrined as part of the 20|20 KSU-QPMS Handbooks 1 and 2 (5th edition, June 2023). It means that the IAA will be implemented across all academic programs at KSU in compliance with ETEC-NCAAA requirements.

(2) Overview of the 20|20 KSU-QPMS Internal Audit and Assessment



The process of improving quality and continuous improvements and innovations involves (a) assessing current levels of performance, (b) the environment in which the institution is operating, (c) identifying strategic priorities for

improvement and setting objectives, (d) developing plans, implementing those plans, (e) monitoring what happens and making adjustments if necessary, and finally (f) assessing the results achieved. These steps involve a repeating cycle of planning and review that involves the critical internal performance audit and assessment (Figure 1). Major plans may include a sequence of activities over several years, with several steps to be taken and the results of each step assessed at stages within that longer-term plan.

Although this planning and review cycle is presented as a set of steps in a linear sequence with set timelines, in practice, steps may be repeated or changed flexibly in response to feedback and changing circumstances. For example, a performance review may lead to a conclusion that goals or objectives need to be redefined and a new plan for development prepared, as shown in the adapted version from ETEC-NCAAA (Figure 1) above.

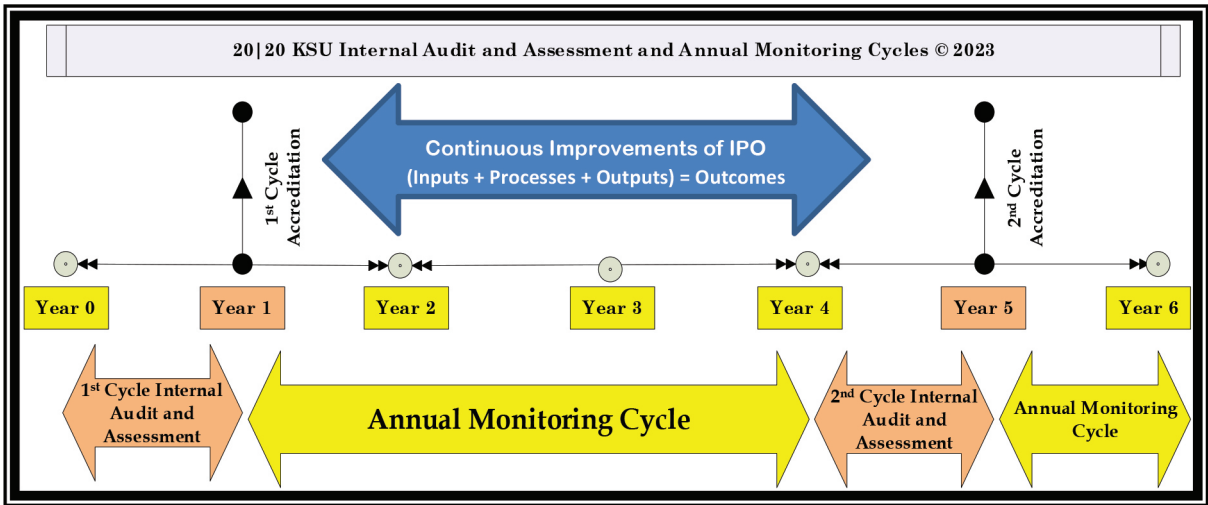


Figure 2: 20|20 KSU-QPMS Internal Audit and Assessment Cycle

The 20|20 KSU-QPMS main cyclic continuous improvements processes for quality practices accomplishments and achievements are the **Bi-Annual Internal Audit and Assessment Cycle**. The 20|20 KSU-QPMS provides the fundamentals of an IQA and the requisite external review. It is done through the IAA (Internal Audit and Assessment) process whereby an independent university-appointed KSU Board of Assessors assesses the program’s performance. This Internal Audit and Assessment is a bi-annual exercise to ensure continuous improvements of the college or programs. It inherently means that a college or a program undergoes a minimum of 2 cycles of IAA in a five years mandatory ETEC-NCAAA accreditation interspersed with an annual monitoring cycle (Figure 2).

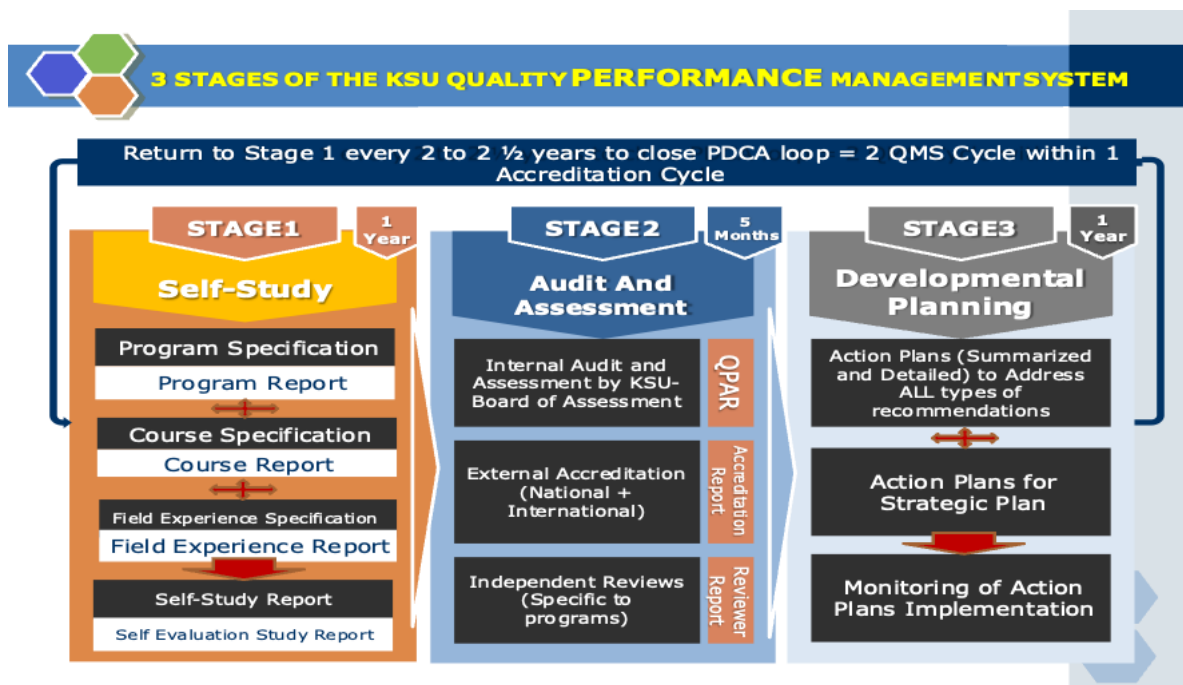


Figure 3: 3 Stages of the 20|20 KSU-QPMS Quality Assurance System

The critical mechanisms for the continuous improvements and innovations of the bi-Annual Internal Audit & Assessment as part of the three staged 20|20 KSU-QPMS (June 2023) (Figure 3). The 20|20 KSU-QPMS is the central integrated component of the strategic PIQ (Planning -Information-Quality) Troika that underscores the quality and accreditation management of KSU, colleges, and programs. The basic principles of the 20|20 KSU-QPMS are that the basic ETEC-NCAAA fundamentals and standards & best practices requirements, templates and tables, KPIs (Key Performance Indicators), and statistics are maintained and used “as is” without modifications.

This fundamental principle has led KSU to identify a three-staged 20|20 KSU-QPMS IAA approach (Figure 1) as follows:

1. **Stage 1 “Self-Study”** – This stage is typically started by the programs to apply for ETEC-NCAAA accreditation, where the program develops the SSRP (Self-Study Report for Program). These are supported by the required CS (Course Specifications) and CR (Course Report). They are prepared on a semester basis for each course section with an aggregated CR, PS (Program Specifications), and APR (Annual Program Report) on an annual basis. They aim to record and assess the program’s yearly performance. The FES (Field Experience Specifications) and FER (Field Experience Report) manage the three credit field experience. All these are vital evidence in support of the 5-year cycle of ETEC-NCAAA accreditation and the IAA (Internal Audit and Assessment). These include the statistical tables, KPIs, and other supporting documentary evidence as part of the total self-study package. The main templates used for quality management are based on the same templates provided by ETEC-NCAAA (Table 1).

Table 1: Key ETEC-NCAAA Templates used for accreditation

Document # and Name (as per ETEC-NCAAA)
Standards for Institution Accreditation NCAAA December 2022
Standards for Undergraduate Programs Accreditation NCAAA December 2022
Standards for Postgraduate Programs Accreditation NCAAA December 2022
NQF-KSA (National Qualification Framework for Kingdom of Saudi Arabia 2020)
D4. ETEC-NCAAA Key Performance Indicators V2019
T103. Program Specifications December 2022
T006. Annual Program Report December 2022
T104. Course Specifications December 2022
T107. Course Report December 2022
T7. Field Experience Report 2019
T8. Field Experience Specifications 2019
T112. Self-Study Report for Programs (SSRP) December 2022
T111. Self-Study Report for Institutions (SSRI) December 2022

Source: ETEC-NCAAA Templates requirements for Quality Assurance and Accreditation 2022-2023

- 2. Stage 2 “Audit and Assessment”** – Once the Self-study is completed, it is submitted to ETEC-NCAAA for accreditation or re-accreditation purposes. The same SSRP and SESR are used for the mandatory IAA (Internal Audit & Assessment) (Figure 3) exercise by the university-appointed KSU-BOAs (Board of Assessors). The IAA provides both the fundamentals of an IQA and requisite continuous improvement cycles done through the IAA processes. This IAA is conducted before the college or programs go for their every five years mandatory NCAAA accreditation and is interspersed with the IAA cycle. Stage 2 can also be performed by independent reviewers external to the units and as appointed by the academic departments for external reviews. The key outputs are the accreditation reports from accreditation agencies, the QPAR (Quality Performance Assessment Report) from IAA, and the reviewer’s report from independent reviewers.
- 3. Stage 3 “Developmental Planning”** – After the accreditation (national or international), the IAA, or the internal reviews by external experts, the critical reports outputs are used as a consolidated set of strengths and improvement opportunities as the basis to prepare the developmental plan. This developmental plan is part of the overall action plans supporting the academic units’ strategic plans. It ensures that all action plans are synchronized and synthesized to accomplish the unit’s mission, goals, and objectives. An annual monitoring process to capture the quality feedback loop ensures that the quality drives are maintained and sustained through continuous improvements from one accreditation cycle to another.

(3) Aims of 20|20 KSU – IAA

Based on the mandated internal Audit and assessment, the three key aims of the 20|20 KSU–IAA System in assuring the internal and external stakeholders of highly competent and qualified KSU graduates are:

- **ETEC-NCAAA accreditation and other international accreditation bodies** – To attain the mandated National accreditation of ETEC-NCAAA and additional international accreditation or certification bodies specific to the specialized collegial field of studies.

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- **2020 ETEC-NQF** – Compliance with the 2020 ETEC-NQF requirements of Baccalaureate, Master, and Doctoral graduates from KSU.
 - **Robust Sustainable system for continuous improvements and innovation** – To accomplish and achieve the above-mandated ETEC-NCAAA accreditation, the internal quality assurance system is underscored by the 20|20 KSU Performance Management System for total and holistic quality-planning-information management in KSU. It is the sustainable integrated electronic platform for continuous improvements and innovations on a bi-annual basis of the quality audit and assessment based on the 20|20 KSU-QPMS performance excellence system subscribing to the KSU 2030 “Towards Excellence” and KSA Vision 2030 agenda.

(4) **20|20 KSU Internal Audit and Assessment Process**

The 20|20 KSU Internal Audit and Assessment follows the Accreditation Cycle as it is meant to provide the following:

- Complete preparation of the college or programs in developing the ETEC-NCAAA Self-Study Report is required for accreditation.
- To ensure that the IQA of the College or programs, represented by the 20|20 KSU-QPMS (Programmatic), provides a set of formative and summative periodic evaluations of the college or programs’ performance over the time leading up to its application for ETEC-NCAAA accreditation.
- To ensure that the IQA of the College or programs, as represented by the 20|20 KSU-QPMS, provides evidence or data set showing continuous improvements over the time leading up to the application for ETEC-NCAAA accreditation.
- To ensure that the IQA of the College or programs, as represented by the 20|20 KSU-QPMS, provides a systematic approach to quality management with a feedback control system that serves as the base for continuous improvements and innovations period leading up to the application for ETEC-NCAAA accreditation.

As noted in Figure 2, the internal Audit and assessment are generally conducted before the college or programs decide to go for the ETEC-NCAAA accreditation on a 5-year cyclical basis. It must be noted that the ETEC-NCAAA requires the following:

- That all colleges and programs have an IQA to ensure a systematic approach to the quality management of their education offers. These are headed by the College Quality Team (CQT) of the College and at the Programs level by the Program Quality Teams (PQT).
- That the college and programs have an external review of their educational offering, which the Board of Assessors achieves in the Internal Audit and Assessment, it covers all aspects of the 5 or 6 ETEC-NCAAA Standards for undergraduate and postgraduate programs.

- That continuous improvements and evidence substantiate these improvements meeting the vision, mission, and goals as committed to the stakeholders and as planned in the college’s strategic plan or programs.
- That there is an annual report on the progress made or achieved based on the yearly performance review.

The 20|20 KSU Internal Audit and Assessment play a critical role in ensuring that the college and its programs achieve the above based on its cyclical Audit and assessment before applying for its 5-years accreditation. The primary process flow and supporting activities for the 20|20 KSU Internal Audit and Assessment are shown in Figure 4.

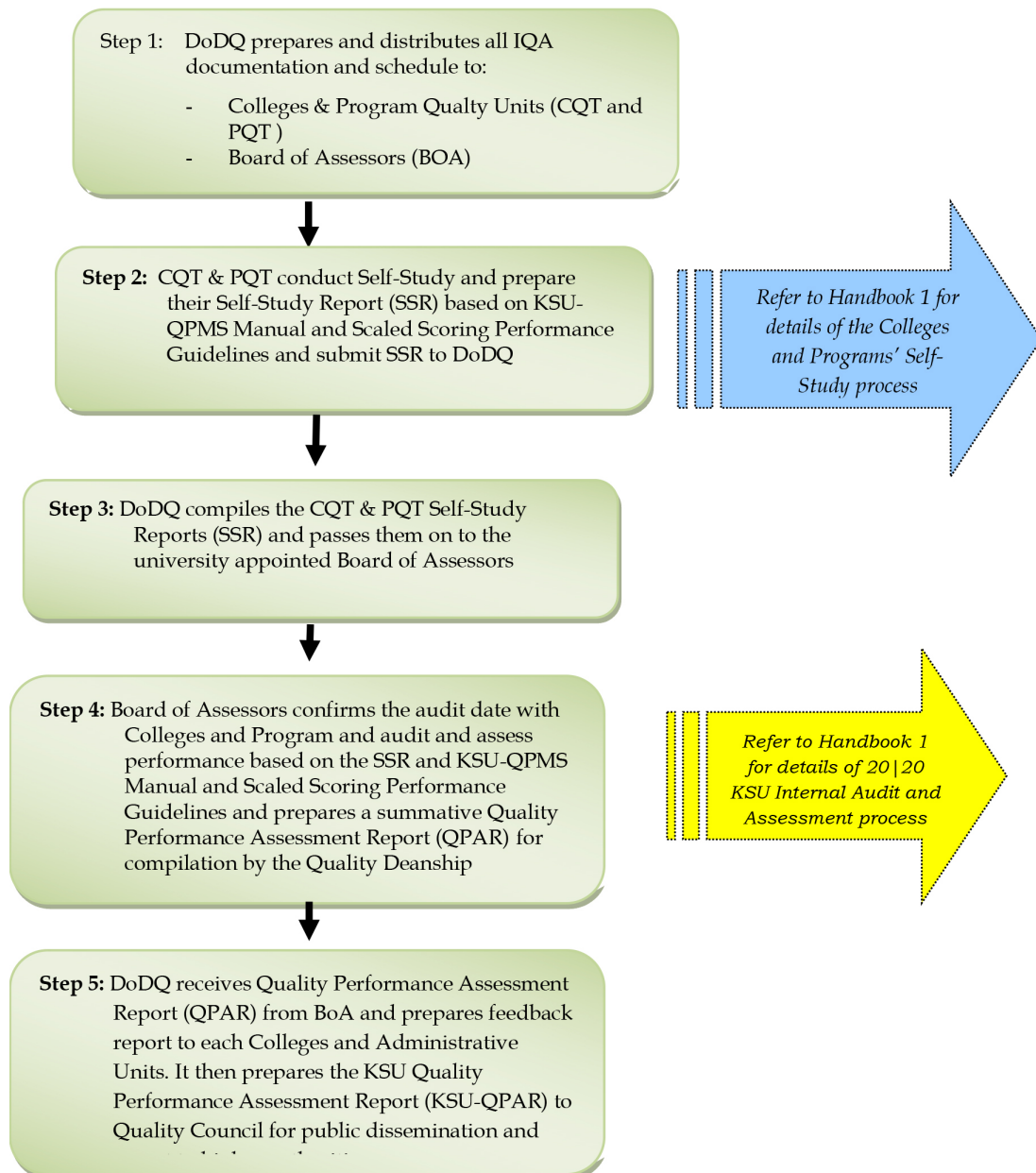


Figure 4: 20|20 KSU-IQA Audit and Assessment Process (Master Flow)

(5) Annual Monitoring Process

As the 20|20 KSU Internal Audit and Assessment are used for the conduct of a complete internal audit and assessment of the college programs before they go for the 5-year cyclical accreditation, the periods between the 1st and 2nd 5-year cyclical is considered the “monitoring period” (Figure 2). This section describes the annual monitoring procedures for the college and its programs. As such, it includes:

- Definition of monitoring;
- Aims of monitoring;
- Responsibilities in monitoring;
- Use of evidence to support monitoring and Checklist of Supporting evidence;
- Stages in the Monitoring Process;
- Reporting arrangements.

(a) Definition

Monitoring is the year-on-year process conducted during the 5-year cyclical Internal Audit and Assessment and the accreditation of the College or Programs. It is a crucial mechanism by which the college or program staff responsible for program delivery continues the annual check and balance. It aims to continuously evaluate and improve the program’s effectiveness in achieving and sustaining its stated aims and the student’s success in attaining its learning outcomes. Monitoring, based on the use of qualitative and quantitative evidence, is conducted by the college or program team of staff responsible for the delivery of the program in partnership with the relevant monitoring committee as established by the College or Program. The monitoring outcomes are reported to the Vice Rectorate for Planning and Development via the DoDQ. After that, to appropriate management authorities.

(b) Aims of Monitoring

As the annual monitoring does not carry a full-fledged internal audit and assessment that is more stringent and strenuous but still maintains continued improvements yearly, the broad aims of monitoring are to:

- Ensure that the College or Program remains current and valid in the light of developing knowledge in the discipline and educational practices, identifies and disseminates good practices;
- Seek the views of students concerning the quality of the student’s experience by identifying issues, shortcomings, and problems in the content or delivery of a program and take timely action to resolve those problems;
- Encourage reflection and evaluation on student performance in individual modules and the program and seek improvements. The examination centers on the extent to which the students are attaining the intended learning outcomes;
- Ensure that issues raised by visiting examiners are acted upon and draw the institution’s attention to matters beyond the influence of the teaching team, provide feedback on action taken in response to these matters, and contribute to strategic, academic, and resource planning.

(c) Responsibilities in monitoring

The Vice Rectorate for Planning and Development and its executive DoDQ is responsible for quality and standards oversight and implementation at King Saud University. The College and Program Quality Committees (the CQT and PQT) have complete responsibility for the development, maintenance, and implementation of the KSU-QPMS Annual monitoring procedures based on policies of the University Quality Committee related to those procedures. The College or Programs monitoring committees are responsible for the local implementation of those procedures in their respective colleges and programs. As part of this responsibility, the monitoring committees will ensure that programs and modules are monitored effectively by the teams delivering those programs and modules. Thus:

- monitoring is the responsibility of program and module teaching teams (and the staff within those teams) and assumes that crucial individuals will be appointed to take responsibility for the day-to-day management of a program and to maintain an ongoing record of monitoring activities and to prepare (or contribute to the preparation of) the College or Program annual report;
- it is for programs to determine how information and evidence about modules are collected and used to support program monitoring within the KSU-QPMS requirements;
- in the context of monitoring, program, and module teaching teams are accountable to the relevant monitoring committee through, *inter alia*, the production of an annual performance report;
- the monitoring committees are expected to produce an annual performance report (the SSR – Internal Quality Audit and Assessment Performance report) as part of its Annual Program report required by ETEC-NCAAA. It is to be reported to the College and Program Councils and the Vice Rectorate for Planning and Development and the DoDQ of summaries of the performance outcomes of the committee’s monitoring activity for the preceding year;
- DoDQ prepares an overview report to Vice Rectorate for Planning and Development summarizing the consequences of all monitoring activity for the prior year.

(d) Use of evidence to support monitoring

Monitoring depends on collecting evidence that confirms a program’s effectiveness. Evidence is collected from a variety of sources that may include:

- data on applications and enrolment;
- feedback from students (in staff-student consultation groups, from evaluation questionnaires, and through the College or Program or Courses, Student Survey, and the Student Experience Survey);
- student performance (in modules, in any one year, and throughout a program);
- visiting examiners’ reports;

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- reports from professional bodies;
 - feedback from placements and employers;
 - the professional, educational, and research activities of staff (including staff development) can contribute to the development of a program.

(6) Critical Actors and Responsibilities in the 20|20 KSU IAA Cycle

The four main vital actors and defined duties in the 20|20 KSU IAA Cycle are:

- IAA teams of appointed KSU–BOA** – Their primary responsibility is to execute and complete their duties as institutional assessors in auditing and assessing the programs impartially, independently, and professionally according to the 20|20 KSU-QPMS protocols. Their Audit and assessment are recorded in the Actionable, Aligned, Accurate, and Appropriate QPAR on the 20|20 KSU-QPMS System.
- DoDQ (Deanship of Quality and Development) Consultants** – Their leading roles and responsibilities are to provide well-planned and executed administrative and organizational management of IAA on behalf of the institution and support & facilitate the IAA teams of assessors to seamlessly and successfully complete their responsibilities as institutional assessors in liaison with the programs.
- Consultant for 20|20 KSU-QPMS**– The Consultant’s primary role is to train the new batches of assessors. It also provides oversight and assurance that the IAA protocols are adhered to by the above two key actors. It will result in the final program QPAR that leads to the developmental planning, which is ongoing annually on the IAA System.
- Supervisors of programs** – The action plans from the developmental planning will be the direct responsibility of the Vice Rectorate of Academic Affairs and Vice Rectorate of Graduate Studies and Research to follow up, monitor, and manage actions as part of the College Strategic Plan.

(7) BOA’s workflow within the annual 20|20 KSU-QPMS Internal Audit and Assessment (IAA) Cycle

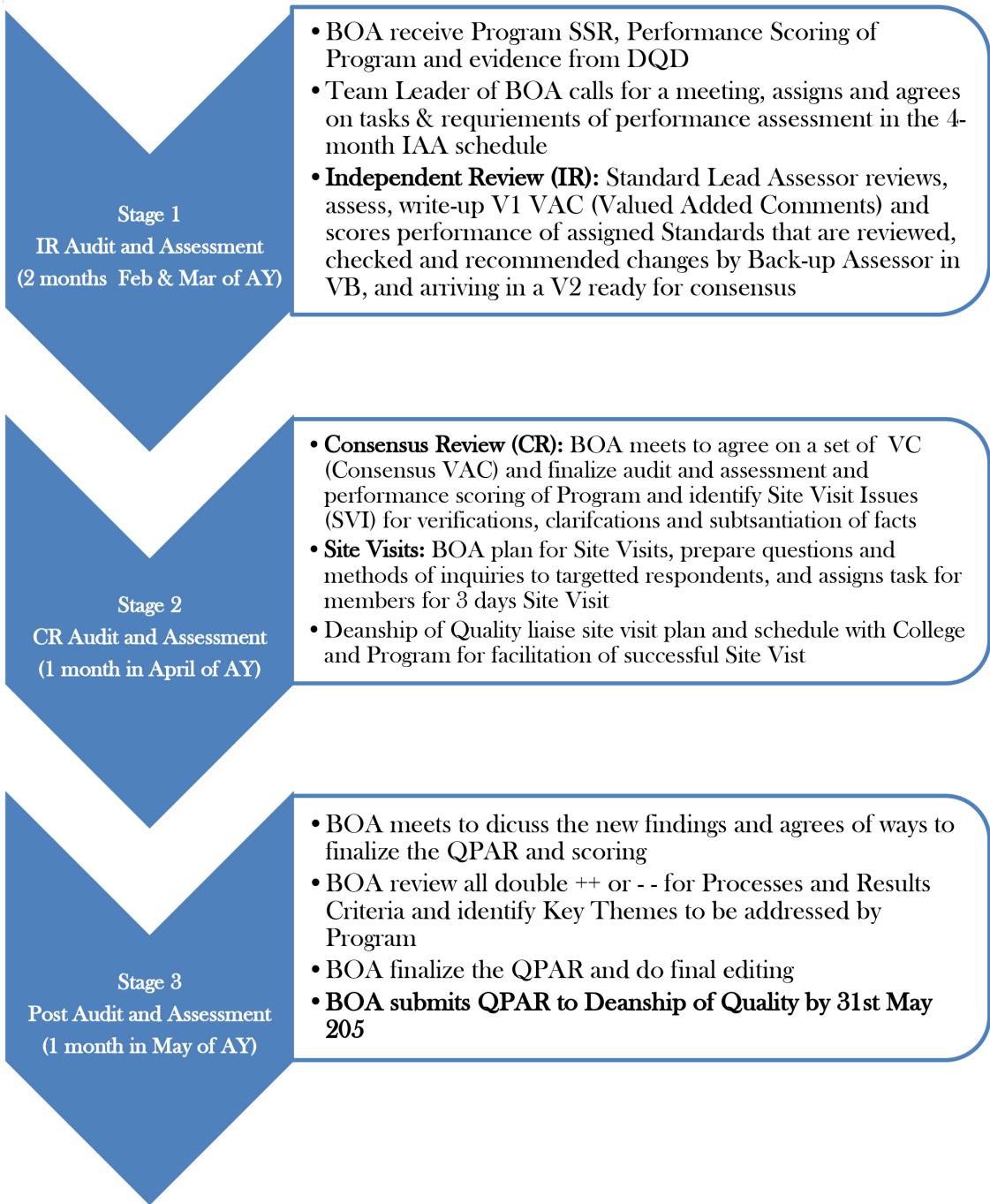


Figure 5: 4-month workflow of Board of Assessors February to May of AY

(8) Organizing aspects for 20|20 KSU Internal Audit and Assessment

The success of the 20|20 KSU Internal Audit and Assessment of the Program is based on the following factors:

- **Team management** – The team is managed by a University-appointed senior assessor as Team Leader to ensure that the complete Program Internal Audit and Assessment is done professionally within the system protocols. The KSU Board of Assessors Standard Operation Procedures Handbook (June 2023) defines the assessor’s protocols, roles, responsibilities, and cod
- **Audit and assessment** – This should be done within the system requirements & protocols of the KSU-QPMS Handbooks 1 and 2 (5th edition, June 2023) to provide an objective audit and assessment of the program performance.
- **Team rapport** – The professional & competent support and camaraderie of the whole team are very critical to the success of the Internal Audit and Assessment process in an efficient, effective, and friendly nature. It includes mutual respect for others and listening to the opinions of others, demonstrating professionalism, rationale, and logical reasoning to arrive at a high-impact valued QPAR. The overall proposed assignment of work is shown in Table 2.

Table 2: Proposed assignment of task responsibilities for team members

Team Members	Main Task	Support Task
Team Lead	<ul style="list-style-type: none"> · Management of the team · Coordination and communication with the DoDQ · Finalization of QPAR and Performance Scoring · Evaluate the performance of team members · Implement the mechanisms as shown in Figures 2 and 3 · Standard Lead for 1 and 2 	
Assessor 1	Standard Lead for Standards 4 and 10	Back-up Lead for Standards 1, 3, 9 and 11
Assessor 2	Standard Lead for Standards 3, 9 and 11	Back-up Lead for Standards 5, 6, 7 and 8
Assessor 3	Standard Lead for Standards 5, 6, 7, and 8	Back-up Lead for Standards 2, 4 and 10

□ Role of the Team Lead (TL)

- A Team Lead is responsible for leading the team in maintaining KSU standards for Internal Audit and Assessment of the Program as per the 20|20 KSU-QPMS. All tasks associated with the quality assurance of an independent and externally assessed Program must be carried out within the conditions, timeframes, and arrangements as per 20|20 KSU-QPMS.
- The primary role is to support the team members to ensure that 20|20 KSU-QPMS standards are being consistently applied and maintained to ensure and assure quality performance audit & assessment of the program.
- All IAA activities are under the jurisdiction of the Team Leader as supported by the DODQ as appropriate. They may be required to undertake duties during weekends and holidays in their own time.

□ **Duties of Team Lead**

- Support the quality assurance processes per 20|20 KSU-QPMS policies and protocols.
- Lead all activities to ensure they are concluded within agreed time frames and that resources are used effectively and efficiently to achieve the best value.
- Support fellow team members before and during the internal Audit and assessment period.
- Support in the performance assessment and management activity of team members as per the 20|20 KSU-QPMS Standards and Key Performance Measures.
- Team Leaders may be asked to undertake additional activities. These activities could include the following:
 - o Prepare performance reports
 - o Undertake in-service training
 - o Participate in workshops/seminars/networking events
 - o Contribute to developmental planning guides for programs

□ **Duties of Standard Lead (SL)**

- Take charge of the Standard as assigned as the vital assessor for this Standard to produce Value Added Comments (VAC) that meet the 4 “A” s requirements of being aligned, actionable, accurate & appropriate
- Support the Team Lead to ensure a successful internal audit and assessment
- Act as Standard Backs for other Standards as assigned to arrive at a set of VB (Version Back of SB) and V2 (Version 2 of SL) that are constructive to come at a VC (Consensus Version ready for the QPAR)

□ **Duties of Standard Back (SB)**

- Review and ensure that the Standard Lead output conforms to good practices per 20|20 KSU-QPMS Audit and Assessment
- To suggest constructive changes and agree upon a set of final Strengths/OFIs Assessments of the Process and Results Criteria in the VB version for the SL to settle on the V2 version ready for the Consensus agreement

(9) General Schedule for Site Visits to be used by all BOA teams for AY

After arriving at an initial set of VAC (Value Added Comments) is the performance analysis. Due to a lack of evidential performance or lack of clarity, there is a need to organize a site visit. The main aims are (a) clarification for areas for improvements which are recorded as OFI (opportunities for improvements), and (b) verifications of strengths to ensure that they are constituted as critical areas where the program is performing well relative to internal and external benchmarks. A typical schedule for a three days site visit to address SVI (Site Visit Issues) is shown in Table 3.

Table 3: Typical Schedule of Site Visit

Schedule	Activities	Required Presence
DAY 1 08.30 – 09.30	KSU – BOA Panel arrives at the college and meets briefly before an official full meeting with the program	KSU – BOA Panel
09.30 – 10.00	Welcome by Dean Meeting with Dean, Vice Deans of College and Head of Programs, College and Program Quality Committees	Dean, Vice Deans of College and Head of Program, College and Program Quality Committees
10.30 – 12.00	Overview of Governance and Administration of Program concerning college with short briefings covering Standards 1, 2, and 3 (Team Lead and all assessors).	Vice Deans, Head of Program and College and Program Quality Committees
12.00 – 13.00	Prayer and Lunch	
13.00 – 15.00	Site Visit to review documents for ALL Standards: · Standards 1, 2, and 3 (Team Lead) · Standard 4 and 10 (Assessor 1 and Assessor 3) · Standards 5, 6, 7, 8, and 9 (Assessor 4 and Team Lead)	Head of Program and Program Quality Committee (different rooms)
15.00 – 17.00	KSU – BOA Panel prepares Day 1 review and recommendations for Standards 1 to 3	KSU – BOA Panel
DAY 2 09.00 – 12.00	Discussion of Standards 4 and 10 with Program representatives (Assessor 1 and Assessor 3) Discussion of Standards 5, 6, 7, 8, and 9 (Assessor 4 and Team Lead)	Program Quality Committees and Program or Administration representatives (different rooms)
12.00 – 13.00	Prayer and Lunch	
13.00 – 15.00	Interviews with: · Program Faculty Members · Program Students · Program Staffs · Alumni · Employment Market (by telephone)	Program Faculty Members Program Students Program Staffs Alumni Employment Market (different rooms)
15.00 – 17.00	KSU – BOA Panel prepares Day 2 reviews and recommendations for Standards 4 to 11	KSU – BOA Panel
DAY 3 09.00 – 12.00	KSU – BOA Panel prepares an Oral report on findings of assessment (closure of any additional missing or incomplete issues)	KSU – BOA Panel
13.00 – 14.30	Briefing to Dean, Vice Deans of College, and relevant Head of Programs, College and Program Quality Committees	Dean, Vice Deans of College and relevant Head of Programs, College and Program Quality Committees
14.30 – 15.00	Closing remarks by the Dean of College or Representative	Dean or Representative

(10) Details of roles, responsibilities, and time frame of annual 20|20 KSU Internal Audit and Assessment cycle

Table 4: Typical activities in the annual IAA Cycle

	Academic Year Month & Week	Activities	Responsible Party	Man-hours
Internal Audit and Assessment Cycle (by Months of AY (for each Academic Year)	AY September to November Months 1, 2 & 3	<ul style="list-style-type: none"> Workshop 1 – September Workshop 2 – September Workshop 3 – September 	Consultant for 20 20 KSU-QPMS or a future certified trainer	45 in class & 50 hours of external preparation
	AY December & January Months 4 & 5	<ul style="list-style-type: none"> Identifying and Inviting Programs for IAA Submission of SSR (with evidence) & Performance Scoring to DODQ Organizing the IAA and teams based on submissions 	DODQ as supported by Consultant for 20 20 KSU-QPMS	40 hours
		<ul style="list-style-type: none"> 2 Days Refresher workshop in January - (1) appointment & contractual agreement with members of BOAs (2) Refresher course and developing QPAR 	Consultant for 20 20 KSU-QPMS or a future certified trainer	10 hours
	AY February Month 6 – Weeks 1 & 2	<ul style="list-style-type: none"> Organization of work by Team of 4 Members by Team Leader (TL) Team members start Stage 1 IR (Independent Review) 	IAA Team	20 hours
		Month 6 – Weeks 3 & 4	<ul style="list-style-type: none"> SL (Standard Lead) prepares V1 of analysis and assessment leading to V1 VAC (Value Added Comments) Each SL is assigned 3 Standards as SL and reviews at least 3 Standards as SB(Standard Back) 	IAA Team
	AY March Month 7 – Weeks 1 & 2	<ul style="list-style-type: none"> SB (Standard Back) review V1 prepare VB of analysis and assessment leading to VB VAC (Value Added Comments) 	IAA Team	20 hours
		Month 7 – Weeks 3 & 4	<ul style="list-style-type: none"> SB (Standard Back) review and confirms V2 of analysis and assessment leading to V2 VAC (Value Added Comments) 	IAA Team
	AY April Month 8 – Weeks 1, 2 & 3	<ul style="list-style-type: none"> TL calls for the team’s consensus meeting to arrive at 90% QPAR (Quality Performance Assessment Report) Readiness The team prepares SVI (Site Visit Issues) 	IAA Team	30 hours
		Month 8 – Week 4	<ul style="list-style-type: none"> Three days Site Visits (5 Days) 	IAA Team, as supported by DODQ
	AY May Month 9 – Weeks 1, 2 & 3	<ul style="list-style-type: none"> IAA Team prepares final closure for QPAR 	IAA Team	20 hours
		Month 9 – Week 4		
	AY April - May Month 8s & 9	<ul style="list-style-type: none"> Initiating next Academic Year IAA by planning for (1) Invitation & Selection of qualified candidates as per criteria, (2) action plans for KSU-BOA workshops and IAA Finalize list of candidates and workshop schedule and send official invitation 	DODQ as supported by Consultant for 20 20 KSU-QPMS	30 hours
	AY June Month 10 – Weeks 1 to 4	<ul style="list-style-type: none"> DODQ completes a final review of QPAR and addresses any issues on incompleteness or inadequacies of QPAR DODQ officially submits the QPAR to Programs for Developmental Planning 	DODQ as supported by Consultant for 20 20 KSU-QPMS	30 hours
	New AY	Based on QPAR, the program develop and implement annual action plans as part of the College’s Strategic Annual Operation Plan	<ul style="list-style-type: none"> The programs’ Action plans of Developmental Planning are monitored and managed by the programs’ direct supervisory authority for monitoring and performance follow-up and decisions making. 	Vice Rectorates of Academic Affairs and Graduate Studies

Basically, in KSU, the critical activities of the annual 20|20 KSU Internal Audit & Assessment Cycle are summarized (Table 4) as follows:

- i. **September – November of AY** – The selected candidates undergo the KSU-prescribed 45 hours conducted in 3 workshops of 15 hours each with take-home assignments. The candidates are evaluated based on their overall performance in assessment competencies.
- ii. **January of AY** – A one-day “Refresher Course” is held for old and new assessors. They are officially appointed as KSU Assessors for an academic year for the annual IAA.
- iii. **February – May of AY** – In this period, there are two main sets of activities:
 - a. The actual Audit and assessment are conducted by the teams of assessors that result in the QPAR, and
 - b. The planning for the subsequent academic year, intakes and training of new assessors, and the master plan for the next IAA exercise are formalized.

Table 5: Summation of Total administrative and assessment Man-hours

Time Frame	Responsible Party	Man-Hours	Activities
Annually (8 months)	DODQ	150 hours	<ul style="list-style-type: none"> • Plan, organized, and managed annual IAA professionally and efficiently • The critical support and serving to the IAA teams during the four months of IAA • Support and service programs in the submission of all required documents for the bi-annual IAA
Months 6 to 9 (4 Months)	IAA Assessors	150 hours	<ul style="list-style-type: none"> • Each IAA team is to audit and assess the assigned program professionally and close all IAA, including submission of QPAR, during the four months

Table 5 summarizes the annual critical responsibilities of the BOAs and the DODQ during the annual IAA processes with the overall man-hours and necessary activities as follows:

1. **IAA Team** – 150 Man-hours work on IAA leading to QPAR over four months.
2. **DODQ** – 150 hours (110 hours in Months 4, 5, 8, 9, and 10 in the pre-and post-IAA periods, plus additional 40 hours of support during the IAA period).
3. **KSU – QPMS Consultant** – 150 hours, including 95 hours of in-depth training and 55 hours of consultation with IAA teams during the four months, and the DODQ’s consultation and performance throughout the year and monitoring the IAA and DODQ performance.

Reference

ETEC-NCAAA (Education Evaluation Commission - National Center for Academic Accreditation and evaluation), (2015), “*Handbook for Quality Assurance and Accreditation in Saudi Arabia, Part 1, The System for Quality Assurance and Accreditation*”, October 2015.

KSU, *KSU-PQPMS (Quality Performance Management System) Handbook 1 (5th Edition, June 2023)*, Vice Rectorate for Planning and Quality, Deanship of Quality and Development, KSU University Press, Riyadh, KSA, 2023.

