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Education Institutions (HEIs) is a two-stage process: Quality Audits followed by the Standards

Requirements for Oman'
FOREWORD

I am very pleased to introduce the Oman Academic Accreditation Authority’s (OAAA) Institutional Standards Assessment Manual. The publication of this manual is yet another key milestone in a project that commenced in 2011 to review and revise the institutional standards that were first published in the Requirements for Oman’s System of Quality Assurance (ROSQA) in 2004. Accreditation of Higher Education Institutions (HEIs) is a two-stage process: Quality Audits followed by the Standards Assessment. The Quality Audit scope is closely mirrored by the set of nine Institutional Standards used for Standards Assessment. Once accredited, HEIs will undergo Standards Assessment every five years in order to maintain their accreditation status.

The standards have been extensively benchmarked against standards applied by other international accreditation agencies, but have also been contextualised for Omani national and cultural requirements. An extensive consultation process took place with the sector and external stakeholders in relation to both the standards and the approach to Standards Assessment. The consultation process comprised establishing a Consultative Committee which included representatives from all HEIs operating in Oman. An external Panel of experts provided an international perspective. Dialogue was also held with key stakeholders including the Education Council, the Ministry of Manpower, the Ministry of Health, the Ministry of Defence, and the Ministry of Education, while the Ministry of Higher Education (MoHE) has been actively involved in the project from its inception. A National Symposium was held in 2013 to discuss the standards and the proposed approach to decision making. Following this, a revised approach to decision making was released to the sector and external stakeholders and received widespread support from stakeholders. Following the two pilot Institutional Standards Assessment in 2014, the approach to Standards Assessment was further refined to allow greater flexibility. This has resulted in the development of an approach to decision making which is rigorous and transparent, and it will provide reliable information on the quality of higher education in Oman, which can be readily accessed by the public.

The intended audiences for this manual are HEIs which undergo Standards Assessment, and External Reviewers who participate on Institutional Standards Assessment Panels. Other stakeholders having an interest in this manual might include: ministries, government bodies, overseas HEIs affiliated with institutions in Oman as well as members of the public.

On behalf of the Board of the OAAA, I wish all HEIs a positive and constructive experience with their Institutional Accreditation: Stage 2 Standards Assessment. Together, we will help assure that the quality of education in Oman is valued by our students, their families, and our nation’s organisations and industries and that the higher education system will continue to progress from strength to strength.

Dr Hamed Al Dhabab
Acting Chairperson
Oman Academic Accreditation Authority
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INTRODUCTION

This Institutional Standards Assessment Manual (ISAM) is structured into seven distinct parts:

Part A: Institutional Accreditation Overview
Part B: Institutional Standards
Part C: Accreditation Outcome and Ratings against Standards and Criteria
Part D: The Self-Assessment
Part E: The External Assessment
Part F: Methods of Analysis
Part G: Appendices

There are three main audiences for this manual: HEIs; Institutional Standards Assessment (ISA) Panels and other stakeholders including: students, the public, employers, the professions, supervising ministries, and institutional affiliates. While each section is written with a particular audience in mind all parts of the Standards Assessment process are included in this manual.

Both HEIs and ISA Panel Members are encouraged to become familiar with the content of the ISAM and pay particular attention to the parts that are most relevant to them (refer to Table 1).

Table 1: ISAM Content Summary and Key Audience

<table>
<thead>
<tr>
<th>Part</th>
<th>Content</th>
<th>Key audience</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Institutional Accreditation Overview</td>
<td>All stakeholders</td>
</tr>
<tr>
<td></td>
<td>This section is of interest to all stakeholders as it provides a brief summary of the National Quality Management System’s elements and frameworks, including Institutional Accreditation Stage 1: Quality Audit which was conducted prior to the introduction of Standards Assessment. This section also includes an introduction to Institutional Standards Assessment. A timeline outlining the Standards Assessment process provides a comprehensive overview of the different stages involved.</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>Institutional Standards</td>
<td>All stakeholders</td>
</tr>
<tr>
<td></td>
<td>This section details the nine standards used for institutional accreditation. Each standard is related to a broad area of activity and each consists of a number of distinct criteria. Some of the institutional standards and/or criteria will not be applicable to all HEIs. Therefore, HEIs are required to address those standards which are applicable to their context. A list of indicators accompanies each criterion. These are provided as a support to HEIs when preparing their Institutional Standards Assessment Application (ISAA). They are not compulsory requirements and HEIs may choose to provide alternative evidence of how they have met the criteria.</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>Accreditation Outcome and Ratings against Standards and Criteria</td>
<td>All stakeholders</td>
</tr>
<tr>
<td></td>
<td>This section provides information on the ratings to be used when evaluating performance against the criteria. Descriptions are provided for the expected levels of provision or practice related to each rating. Both HEIs and ISA Panels rate HEI performance against all applicable criteria using the ISA range of ratings. The possible Accreditation Outcome and ratings against standards resulting from criteria ratings are clearly explained.</td>
<td></td>
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### Part A: Institutional Accreditation Overview

<table>
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<th>Part</th>
<th>Content</th>
<th>Key audience</th>
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<tbody>
<tr>
<td>D</td>
<td><strong>The Self-Assessment</strong>&lt;br&gt;This section discusses the principles underpinning the Institutional Standards Assessment. It introduces the format of the ISAA and provides information on how to approach completing and submitting the ISAA. It also provides tips on conducting a trial self-assessment.</td>
<td>HEIs</td>
</tr>
<tr>
<td>E</td>
<td><strong>The External Assessment</strong>&lt;br&gt;This section outlines the OAAA assessment protocols used for Standards Assessment and the roles and responsibilities of various parties, including the ISA Panel Members and the OAAA Review Director. It provides information for HEIs on the logistical requirements for the Standards Assessment Visit, and it describes for the ISA Panel the process used for drafting the Standards Assessment Report.  In addition, this section outlines the processes to be followed by an HEI wishing to appeal the Accreditation Outcome. It also explains the feedback mechanisms used by the OAAA upon completion of the Standards Assessment.</td>
<td>ISA Panels and HEIs (especially Sections 20, 21 and 22)</td>
</tr>
<tr>
<td>F</td>
<td><strong>Methods of Analysis</strong>&lt;br&gt;This section provides a comprehensive description of some of the methods of analysis that ISA Panels will use when examining evidence provided by HEIs to demonstrate how they have met the criteria. This includes an explanation of how to apply an ADRI approach to analysing a topic. This approach is used by ISA Panels to inform their assessment, and HEIs are encouraged to use this approach to inform their self-assessment. Information is provided about Standards Assessment Visit interviews, particularly from the perspective of HEIs. In addition some tips are provided for HEIs on how to develop approaches to activities based on benchmarked good practice as well as benchmarking performance against that of similar HEIs nationally or internationally.</td>
<td>ISA Panels and HEIs (especially Sections 25, 26 and 29)</td>
</tr>
<tr>
<td>G</td>
<td><strong>Appendices</strong>&lt;br&gt;This section provides a range of information on the Standards Assessment process such as the Standards Assessment Preliminary Meeting template; Standards Assessment Planning Visit template; Standards Assessment Visit template; and an example of the preferred ISA Panel room layout. HEIs are provided with electronic links to data templates and other forms that are made available on the OAAA website.</td>
<td>HEIs and ISA Panels</td>
</tr>
</tbody>
</table>
PART A: INSTITUTIONAL ACCREDITATION OVERVIEW
1. The Oman Academic Accreditation Authority

1.1. Royal Decree

The Oman Academic Accreditation Authority (OAAA) was established by Royal Decree 54/2010 on 3 May 2010 and replaced the Oman Accreditation Council (OAC). The OAAA is an entity with legal status and financial and administrative independence, which reports to the Education Council. The OAAA was established to continue the efforts initiated by the OAC in the dissemination of a quality culture and accreditation of institutions and programs in Oman.

1.2. OAAA Vision, Mission and Values

The OAAA's Vision, Mission and Values are consistent with its Royal Decree 54/2010.

Vision

OAAA aspires to be an internationally recognised authority for accreditation and promotion of quality in higher education in Oman.

Mission

To encourage and support the Omani higher education sector in meeting international standards; to maintain the national qualifications framework; and, through a transparent rigorous system of institutional and program accreditation, provide reliable information to the public and other stakeholders on the quality of higher education in Oman.

Values

Integrity - We believe in fairness, honesty and respect and we adhere to the highest standards of integrity in dealing with all internal and external stakeholders.

Professionalism - We strive to apply our skills, knowledge and best judgment in order to do our jobs well.

Transparency - We ensure all stakeholders have relevant accessibility to our processes and decisions while respecting confidentiality.

Reflectiveness - We believe in continuous quality improvement in all processes. We reflect on what we do and aim to improve accordingly.

Commitment to international best practice - We strive to ensure that all our work processes comply with international good practices.

Accountability - We believe that we are accountable to all our stakeholders for ensuring that our mandate is achieved.

Collaboration - We value input from all relevant stakeholders to ensure that our work is responsive to their needs.

Diversity - We respect diversity of professional opinion, and encourage innovation and creativity.
1.3. **OAAA Structure and Organisation**
The OAAA is comprised of three elements:

- An OAAA Board, appointed by the Education Council which has governance responsibilities for the OAAA.
- The Executive Office which is made up of technical and administrative staff who conduct the Authority’s day-to-day activities.
- A Register of External Reviewers which lists eminent people from Oman and other countries who have been approved by the OAAA Board to participate in external review activities.

Further information about the OAAA structure and organisation is available on its website.

1.4. **INQAAHE Membership**
The OAAA is a member of the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) and seeks to abide by its policies and guidelines wherever possible.

2. **Overview of the National Quality Management System**
The initial version of the national quality management system was known as Requirements for Oman’s System of Quality Assurance (ROSQA). This document contained some of the key elements of the national system: namely, the Oman Qualifications Framework; the Oman Classification of Institutions; Institutional and Program Standards; and processes for Institutional and Program Accreditation. Royal Decree 54/2010 established the OAAA in order to further develop the national system for assuring the quality of Oman’s higher education sector. The Decree stated that OAAA is responsible for regulating the quality of higher education in Oman to ensure the maintenance of a level that meets international standards and to encourage higher education institutions to improve their internal quality. Background information on the OAAA’s establishment and responsibilities related to quality management is available online.

2.1. **Institutional Quality Assurance**
Individual HEIs are expected to establish rigorous systems to ensure that quality is maintained and improved. The approach developed by the OAAA to assure the quality of HEIs involves an initial Quality Audit followed by ongoing Standards Assessments. Quality Audit is formative in nature and has been designed to assist HEIs establish rigorous procedures to support teaching, learning and research. Standards Assessment is summative in nature in that it evaluates whether HEIs are adequately meeting each of the standards relevant to their Mission and context. Figure 1 illustrates the approach to institutional accreditation in Oman.

---

2. www.inqaahe.org
### 2.1.1. Institutional Licensure

Historically, HEIs have been established through a variety of means including Royal Decree or approval by the Education Council (formerly the Higher Education Council). The OAAAA’s mandate does not cover the licensing of HEIs. The granting of permission for an HEI to operate is based on the HEI having the capacity to deliver higher education at an acceptable quality. The proposed HEI must show that it has the appropriate funding to sustain its operations; the appropriate infrastructure in place to deliver educational programs; the appropriate level of staffing to ensure quality teaching and learning; and the appropriate level of ancillary support to be provided to students. The difference between licensing and accreditation is that the licensing/approval process is interested in what a proposed HEI plans to do; the focus of institutional accreditation is on what the operating HEI actually does. Licensing and accreditation take place during different phases of an HEI’s evolution.

### 2.1.2. Institutional Accreditation

In response to its mandate, the OAAA approaches institutional accreditation as an initial two-stage process. Stage 1 involves Quality Audit followed by Stage 2: Standards Assessment. Normally, four years after an HEI in Oman has undergone Quality Audit it undergoes Standards Assessment which then triggers a five-year institutional accreditation cycle. Quality Audit provides a formative stage for HEIs to critically assess their practices and processes and identify opportunities for improvement. HEIs then undergo a summative Standards Assessment which results in either HEIs being assessed as having met or not met the standards. All applicable standards must be met in order to achieve institutional accreditation. The cycle continues with a Standards Assessment taking place every five years (refer to Figure 1).
2.1.2.1. Institutional Quality Audit

The emphasis of Institutional Quality Audit is on evaluating the effectiveness of an HEI’s quality assurance and quality enhancement processes against its stated goals and objectives. The introduction of Quality Audits in the context of Oman’s higher education sector aimed to encourage a shift in the quality assurance culture to a position where an HEI is expected to take responsibility for the development of its internal quality management systems and to review their effectiveness. A deliberate decision was made to introduce a two-stage institutional accreditation approach in which the first stage – Quality Audit – would encourage HEIs to develop their internal quality management systems while giving the public reassurance that the HEIs were being monitored, prior to the second stage of assessment against external standards: Standards Assessment.4

The first Institutional Quality Audits commenced in 2008. Quality Audits focus on the following nine areas which are mirrored in the Standards Assessment scope:

- Governance and Management
- Student Learning by Coursework Programs
- Student Learning by Research Programs
- Staff Research and Consultancy
- Industry and Community Engagement
- Academic Support Services
- Students and Student Support Services
- Staff and Staff Support Services
- General Support Services and Facilities

In Quality Audit, the HEI undertakes a self-study which results in a Portfolio. An external Quality Audit Panel considers the Portfolio and other evidence and carries out an audit visit. The Quality Audit Panel prepares a Quality Audit Report which covers the same areas as in the Portfolio. The Quality Audit Reports are published on the OAAA website. Reports include Commendations for good practice and Recommendations in areas where there are significant opportunities for improvement. The reports often also include Affirmations which recognise where an HEI has identified areas for improvement in its Portfolio and has shown an ongoing commitment to addressing these. The outcome of a Quality Audit is formative rather than summative; there is no pass or fail. HEIs only undergo Quality Audit once, normally after the first cohort of students has graduated.

2.1.2.2. Institutional Standards Assessment

The second stage of institutional accreditation involves the HEI undergoing Standards Assessment. The result of the Standards Assessment process is summative as the emphasis is on evaluating whether an HEI has met or has not met the applicable standards of the nine institutional standards, where applicable, set by the OAAA. The nine standards are based on the nine areas of institutional accreditation scope used in the Quality Audit. An HEI’s responses to the formal conclusions in the Quality Audit Report are considered as part of the Standards Assessment process. HEIs which meet all applicable standards are accredited. HEIs which do not meet the standards are placed on probation prior to Standards Reassessment5. Five years later, the HEI will again undergo Standards Assessment to maintain their accreditation status.


2.1.3. **Major Change Notification**

Once accredited, HEIs have an obligation to inform the OAAA of any major changes which have occurred within the institution that may be relevant to their ability to meet the OAAA’s Institutional Standards. These may include, for example, changes to the HEI’s governance, financial viability or relationship with affiliate.

Further details can be found in the OAAA’s Major Change Notification Policy on the OAAA website.

2.1.4. **Revoking Accreditation Status**

The OAAA may revoke the Accredited status of an HEI where major changes have taken place that adversely impact on its ability to meet the Institutional Standards.

2.2. **Program Quality Assurance**

The alignment of program licensure and program accreditation results in a comprehensive process for the quality assurance of programs offered by HEIs in Oman. External program accreditation (for example by a recognised international accreditation body) is not a substitute for the national system for program quality assurance. Figure 2 illustrates the approach to program accreditation in Oman.

![Program Accreditation System](image)

**Figure 2: Program Accreditation System**

2.2.1. **Program Licensure**

The Ministry of Higher Education is responsible for the licensing of academic programs in private universities, university colleges and colleges. Other Ministries/bodies are responsible for the licensing of academic programs in public HEIs. The application process for program licensing identifies the information required when an HEI applies to launch a new program, which includes: information on the program curriculum; program benchmarking; current and future planned staffing; and physical facilities and other resources. Overall, the focus on licensing is primarily designed to meet international norms of good practice.

2.2.2. **Program Accreditation**

The OAAA is responsible for the accreditation of all programs offered in Oman. The OAAA’s role is to accredit programs against national standards. The process includes programs where the award is conferred by an affiliate university. HEIs must have been awarded institutional accreditation before they can apply for Program Accreditation. In some circumstances, it may be
appropriate for Program Standards Assessment to take place concurrently with Institutional Standards Assessment.

The OAAA is also responsible for maintaining the academic standards of General Foundation Programs (GFPs). While GFPs do not lead to a higher education academic award, they are an integral part of the introduction to higher education, and as such, it is envisaged that all GFPs will be accredited by the OAAA.

2.3. Related Processes and Frameworks

There are several components which make up Oman’s overall System of Quality Management for Higher Education (previously known as ROSQA 6). They all inter-relate to form a comprehensive system. The set of frameworks and processes is set out below.

2.3.1. Oman Qualifications Framework (OQF)

Royal Decree 54/2010 states that the OAAA is responsible for developing and maintaining the Oman Qualifications Framework 7 in collaboration with the Ministry of Higher Education and other relevant authorities. The framework is a key part of Oman’s system for quality assurance, as it defines the levels and types of qualifications in postsecondary education. The framework identifies six levels of awards, four at undergraduate level and two at postgraduate level. Standards for academic awards are expressed as student outcomes (achievements) at each level. While these are relevant to program accreditation requirements, they also impact on institutional accreditation requirements.

2.3.2. Oman Standard Classification of Education Framework (OSCED)

OSCED defines the broad, narrow and detailed fields of study 8. It was developed by the former Oman Accreditation Council in 2009. It has assisted with such matters as program licensing, program classification; enrolment statistics, and national reporting of academic offerings. Because it is based on international benchmarks, it can also help facilitate international reporting.

2.3.3. Oman HEI Classification Framework

The Classification of Institutions of Higher Education 9 sets the requirements for designating an institution and specifies what kinds of institutions may be recognised as universities, university colleges, and colleges of higher education. The classification system makes a clear distinction between the criteria for universities, university colleges, and colleges of higher education.

2.3.4. Appeals Process

A comprehensive Appeals Manual 10 sets out the criteria and process for formal appeals against, the OAAA’s external quality assurance reports and decisions.

3. Introduction to Institutional Standards Assessment

3.1. What is a Higher Education Institution?

A Higher Education Institution is defined as an institution (public/private; for-profit/not-for-profit) that offers academic or technical programs that lead to a higher education academic qualification which follows a General Education Diploma or equivalent and is in line with the Oman Qualifications Framework. Accreditation relates to all the HEI’s component parts (for example faculties, colleges, institutes, schools, academies and so on). The institution is accredited as a whole. An HEI’s component parts cannot apply for separate accreditation from the OAAA even though they may do so from relevant specialist or professional accreditation.

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6 http://www.oaaa.gov.om/Oman_ROSQA%20%28all%20part%20one%29.pdf
7 http://www.oaaa.gov.om/Framework.aspx#Fm_Qualification
8 http://www.oaaa.gov.om/Framework.aspx#Fm_Classification
9 http://www.oaaa.gov.om/Oman_ROSQA%20%28all%20part%20one%29.pdf. The institutional classification system is currently under review.
bodies. Any external accreditation will not impact on the OAAA’s institutional level accreditation of the institution as a whole. An HEI may have a number of branches, in which case each branch is considered part of the HEI and all branches will be included in a single Standards Assessment exercise. A network of colleges, such as Colleges of Applied Sciences and Colleges of Technology, that are supervised by the same Ministry and have a single Mission, Vision and shared goals will be assessed as a single institution.

3.2. What is Institutional Standards Assessment?
An HEI Standards Assessment is an independent evaluation of the extent to which an HEI meets national standards. It has three key elements: Self-Assessment, External Assessment, and an Accreditation Decision (refer to Figure 3).

Firstly, an HEI conducts a self-assessment of its own processes and practices against the standards and criteria, and writes the findings in an Institutional Standards Assessment Application (ISAA). The details of this are set out in Part D of this Manual. This element is based on the premise that ‘institutional and programmatic quality and quality assurance are primarily the responsibility of the higher education institutions themselves’.

An external ISA Panel, comprised of national and international peers from academia, industry and the professions considers this ISAA and checks its accuracy through such means as interviews and cross-checking with original documentation and other information sources. The ISA Panel produces a Standards Assessment Report. This document presents the ISA Panel’s rating for each of the nine applicable standards and their related criteria, and a narrative describing the basis of its decision. It also includes a recommendation to the OAAA Board as to what Accreditation Outcome should be awarded to the HEI (refer to Part C). The Standards Assessment Report is based on an Institutional Standards Assessment, which is detailed in Part E of this manual.

3.3. Structure of the Institutional Standards
Each of the nine standards consists of a number of criteria. There are 79 distinct sections within the institutional accreditation scope which have been developed into criteria that normally need to be satisfied in order to meet the nine standards.

Indicators related to each criterion (provided in Part B) are given in broad terms and are meant to be illustrative rather than prescribed requirements. HEIs may address all indicators or identify other indicators which can demonstrate how each criterion has been met. Some of the institutional standards and/or criteria will not be applicable to all HEIs. This will depend on an HEI’s Vision and Mission and context. If an HEI considers standards and criteria are not applicable to them, a rationale must be provided in the Institutional Standards Assessment Application (ISAA).


The number of criteria include an additional four requirements not specified in the Quality Audit Scope.
3.4. **Institutional Standards Assessment Schedule**

The schedule for Standards Assessments is based on the National Quality Audit Schedule. The exact dates for submission of applications for Standards Assessment by HEIs are agreed with HEIs and published on the OAAA website. HEIs are responsible for ensuring they are aware of the Institutional Standards Assessment Schedule and are prepared to submit their Institutional Standards Assessment Application (ISAA) in accordance with the schedule.

HEIs are expected to have confidence that they meet the standards before submitting an application. If an HEI recognises that it needs more time in order to ensure it meets the standards, an extension of up to 12 months may be granted. In accordance with the OAAA standards deferral policy, an HEI may only defer standards assessment once. The extension period granted to an HEI is recorded on the OAAA website, and the HEI’s accreditation status listed as ‘Institutional Standards Assessment Deferred’.

3.5. **Summary of Stages in Institutional Standards Assessment**

The following table sets out the main tasks associated with the Institutional Standards Assessment process. The key activities are highlighted in bold.

<table>
<thead>
<tr>
<th>Indicative Time</th>
<th>Task #</th>
<th>Task</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior to ISAA submission</td>
<td>1</td>
<td>HEI undertakes Self-Assessment, resulting in the Institutional Standards Assessment Application (ISAA).</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Review Director (RD) appointed to the project.</td>
<td>OAAA</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>ISA Panel long list prepared from OAAA Register of External Reviewers and submitted to the OAAA Board.</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>OAAA Board approves the ISA Panel long list (or sends back to Task 3 for further attention).</td>
<td>OAAA Board</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>OAAA Board sends ISA Panel long list to the HEI for consideration together with the name of the OAAA RD and a request for the HEI’s Contact Person to be identified.</td>
<td>OAAA Board</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>HEI reviews, in confidence, whether any External Reviewers on the Standards Assessment long list may have a conflict of interest. Contact Person returns comments and sends contact details to the OAAA.</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>RD discusses and confirms HEI’s key dates with Contact Person.</td>
<td>RD/HEI</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>RD invites selected External Reviewers on the Standards Assessment long list to form an ISA Panel.</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>ISA Panel announced to the HEI and ISA Panel published on OAAA website.</td>
<td>RD</td>
</tr>
<tr>
<td>Week 1</td>
<td>10</td>
<td>ISAA and Supporting Materials submitted to OAAA</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td>11</td>
<td>RD conducts a completeness check</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If ISAA is complete the ISAA and Supporting Materials are sent to the ISA Panel</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fee invoice sent to HEI</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>If ISAA is incomplete the application is returned to the HEI</td>
<td></td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>ISA Panel provide Preliminary Comments to RD.</td>
<td>ISA Panel</td>
</tr>
</tbody>
</table>

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56[http://www.oaaa.gov.om/About.aspx#OAAAPolicy](http://www.oaaa.gov.om/About.aspx#OAAAPolicy)
57Formerly this role was called ‘Executive Officer’ (refer to Quality Audit Manual Section 14.3)
<table>
<thead>
<tr>
<th>Indicative Time</th>
<th>Task #</th>
<th>Task</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 10</td>
<td>22</td>
<td><strong>Planning Visit to discuss:</strong></td>
<td>ISA Panel/Chairperson/RD/HEI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Matters for Clarifications</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Draft Standards Assessment Visit Program</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Request for Additional Materials</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Public Submissions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Standards Assessment Visit venue and logistics</td>
<td></td>
</tr>
<tr>
<td></td>
<td>23</td>
<td>Any additional materials and information requested by the ISA Panel</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>submitted to the OAAA.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>24</td>
<td>Call for Public Submissions circulated within HEI and via media.</td>
<td>HEI/OAAA</td>
</tr>
<tr>
<td></td>
<td>25</td>
<td>Final Standards Assessment Visit program prepared and forwarded to</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>the ISA Panel along with any additional materials and information</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>received from the HEI.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>26</td>
<td>Final Standards Assessment Visit program sent to HEI.</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td>27</td>
<td>HEI adds names to the Standards Assessment Visit program and returns</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>to OAAA.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>28</td>
<td>Call for Public Submissions closes. Submissions are assessed</td>
<td>OAAA</td>
</tr>
<tr>
<td></td>
<td></td>
<td>against acceptance criteria and then forwarded to the ISA Panel.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>29</td>
<td>HEI prepares interviewees and logistics for the Standards Assessment</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Visit.</td>
<td></td>
</tr>
<tr>
<td>Week 17</td>
<td>30</td>
<td><strong>Standards Assessment Visit</strong></td>
<td>ISA Panel/RD/HEI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ISA Panel submits text for Standards Assessment Report</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Draft v3 to RD at the end of the Standards Assessment Visit</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>31</td>
<td>Any additional materials requested by the ISA Panel are submitted</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>to the OAAA.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>32</td>
<td>Report v3 text collated, edited and circulate to ISA Panel for action</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>and feedback.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>33</td>
<td>ISA Panel submits amendments on Standards Assessment Report draft v3.</td>
<td>ISA Panel</td>
</tr>
<tr>
<td></td>
<td>34</td>
<td>Standards Assessment Report draft v4 prepared, including supporting</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>text, cross-checked against evidence.</td>
<td></td>
</tr>
<tr>
<td>Indicative Time</td>
<td>Task #</td>
<td>Task</td>
<td>Responsibility</td>
</tr>
<tr>
<td>----------------</td>
<td>-------</td>
<td>----------------------------------------------------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>Week 33</td>
<td>37</td>
<td>Standards Assessment Report v5 submitted to OAAA Board for provisional approval of the report which supports Accreditation Outcome and ratings against the standards and criteria</td>
<td>OAAA Board</td>
</tr>
<tr>
<td>Week 34</td>
<td>38</td>
<td>Standards Assessment Report draft v5 forwarded to HEI for response</td>
<td>OAAA/External Moderator</td>
</tr>
<tr>
<td></td>
<td>39</td>
<td>HEI submits response within ten working days.</td>
<td>HEI</td>
</tr>
<tr>
<td></td>
<td>40</td>
<td>HEI response sent to ISA Panel.</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td>41</td>
<td>Panel Members comment on HEI response.</td>
<td>ISA Panel</td>
</tr>
<tr>
<td></td>
<td>42</td>
<td>• ISA Panel response to HEI feedback collated and analysed</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Changes (if any) made to Standards Assessment Report draft v5 text and criteria/standard ratings and Accreditation Outcome to produce Standards Assessment Report v6.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>43</td>
<td>Draft Standard Assessment Report v6 forwarded to OAAA Board for approval.</td>
<td>OAAA CEO</td>
</tr>
<tr>
<td>Week 41</td>
<td>44</td>
<td>OAAA Board approves Accreditation Outcome and ratings against standards and criteria</td>
<td>OAAA Board</td>
</tr>
<tr>
<td></td>
<td>45</td>
<td>Approved ISA Report sent to HEI with details of the OAAA appeals procedure.</td>
<td>RD</td>
</tr>
<tr>
<td>Week 43</td>
<td>46</td>
<td>• Accreditation Outcome and ratings against the standards and criteria posted on OAAA website (unless an appeal is lodged)</td>
<td>OAAA/HEI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Accreditation Certificate awarded to accredited HEI</td>
<td>OAAA CEO</td>
</tr>
<tr>
<td>Post publication of results</td>
<td>47</td>
<td>OAAA sends feedback form to ISA Panel to seek comment on various aspects of the Standards Assessment process.</td>
<td>OAAA</td>
</tr>
<tr>
<td></td>
<td>48</td>
<td>OAAA Board Chairperson (or representative) seeks feedback from the HEI Chairperson about the value and effectiveness of the Standards Assessment process.</td>
<td>OAAA Board Chairperson</td>
</tr>
<tr>
<td></td>
<td>49</td>
<td>OAAA CEO seeks feedback from HEI CEO or equivalent and Contact Person about the value and effectiveness of the Standards Assessment process.</td>
<td>OAAA/HEI</td>
</tr>
<tr>
<td></td>
<td>50</td>
<td>RD prepares a report on the Standards Assessment process.</td>
<td>RD</td>
</tr>
<tr>
<td></td>
<td>51</td>
<td>OAAA CEO prepares a report on all feedback received for the OAAA Board.</td>
<td>OAAA CEO</td>
</tr>
</tbody>
</table>
PART B: INSTITUTIONAL STANDARDS
4. Introduction to Institutional Standards

The Institutional Standards are underpinned by the principle that the responsibility for quality assurance lies with the institution. This is in line with the INQAAHE Guidelines of Good Practice for External Quality Assurance Agencies16 (EQAA) states: “The EQAA recognises that institutional and programmatic quality and quality assurance are primarily the responsibility of the higher education institutions themselves”.

The following considerations guided the development of the standards:

- The standards are aligned with the Institutional Accreditation Scope which applies to both stages of the Institutional Accreditation Process: Stage 1 Quality Audit and Stage 2 Standards Assessment 17.
- The scope is divided into nine broad areas. There are nine standards, each related to a broad area of activity.
- Each of the nine standards consists of a number of criteria. Some of the institutional standards and/or criteria will not be applicable to all HEIs. This will depend on whether an HEI considers standards and/or criteria are applicable to them and, if not, a rationale will need to be provided in the ISAA.
- The standards have been informed by the findings from the analysis of Quality Audit Report formal conclusions.
- Institutional Standards Assessment encourages excellence and good performance through awarding Accreditation with Distinction/Merit in one or more standards. Further details on this are provided in Part C.

The Standards Assessment process is underpinned by the following principles:

- The OAAA seeks to ensure higher education institutions are not overly burdened with the amount and complexity of evidence to be submitted in order to demonstrate that a standard has been Met. For example, the OAAA will, when appropriate, suggest HEIs provide evidence aligned to data prepared for other government agencies, such as the data required by the Higher Education Statistical System (HESS).
- Granting accreditation status to an HEI will have a major impact for all stakeholders; therefore, it is imperative that the potential outcomes (e.g. resulting in accreditation/probation/non-accreditation) are clear and the result of the application of a transparent decision-making process based on a sound rationale and assessment approach. The approach to be used for rating standards and criteria is described in Section 5. The Accreditation Outcomes are provided in Section 6.

The standards, criteria and indicators are set out in the following section. Occasionally, blue boxes appear following a standard or criterion statement. The blue boxes aim to provide guidance and clarification regarding under which circumstances a standard or criterion is relevant to an HEI’s context (for example Standards 3 and 4, and Criteria 1.4, 2.1, 2.5, 2.7, 3.7, 4.4 and 4.8) or provide an explanation of the definition applied by the OAAA to specific terms (for example Criteria 1.10, 1.13 and 7.9).

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17 http://www.oaaa.gov.om/Institution.aspx#Inst_Quality
STANDARD 1: GOVERNANCE AND MANAGEMENT

Governance and management of the HEI is ethical and ensures implementation of academic and non-academic systems and functions which support the achievement of the HEI’s Mission and Vision and the protection of academic standards. Governance and management structures, processes and mechanisms for accountability are appropriate. At governance level, these result in effective setting and monitoring of the HEI’s strategic direction as well as leadership and oversight of the HEI’s academic, administrative and financial activities. Management systems and roles provide leadership which enables effective implementation of institutional systems. These systems are governed by sound policies and regulations and meet the needs of students, staff and other stakeholders.

Criterion 1.1: Mission, Vision and Values

The Mission, Vision and Values are appropriate, have been developed in consultation with stakeholders, formally approved, disseminated and communicated to stakeholders, and guide the HEI in all its activities. The HEI has Mission and Vision statements which clearly define the HEI’s purpose, who it serves and what it intends to accomplish; and these align with the national priorities of Oman. The HEI has a defined set of institutional Values.

Indicators
a) The Mission, Vision and Values effectively guide the HEI, are consistent with the HEI’s purpose and its ability to meet the national priorities of Oman, and community expectations.
b) The governing body has formally approved the Mission, Vision and Values.
c) Key stakeholders have been consulted and support the Mission, Vision and Values.
d) The Mission, Vision and Values are readily accessible and effectively communicated to stakeholders.
e) The Mission, Vision and Values are regularly reviewed and reaffirmed or amended as appropriate in order to maintain relevance and effectiveness in guiding the HEI.

Criterion 1.2: Governance Structure, System and Roles

The HEI has a clearly defined governance system through which appropriate roles and responsibilities are fulfilled. The governance bodies provide ethical, effective and strategic academic and administrative leadership and oversight of the HEI. The governance bodies play a key role in setting and overseeing the maintenance of academic standards.

Indicators
a) The governing body ensures its primary objective is to oversee the effective development of the HEI in the interests of students, other stakeholders and Oman.
b) Membership of the governing body ensures an appropriate balance of individuals with the range of perspectives and expertise necessary to guide the HEI.
c) The governing body adheres to the highest ethical standards and there are formal processes to ensure that any conflict of interest by those involved in governance is avoided.
d) There is a clear distinction between the role of governance and the routine management of the HEI.
e) The governing body is responsible for ensuring the maintenance of academic standards and oversight of awards.
f) The governing body is responsible for ensuring students are adequately protected in the case of major changes impacting on their program such as closure of the program, withdrawal of affiliate; loss of critical human or physical resources, or other similar critical events.
g) Internal regulations clearly establish responsibilities and operating procedures, major committees,
academic and administrative units and other positions within the HEI. These regulations are based on the principles of transparency and accountability.

h) The responsibilities of the governing body include the approval of the Strategic Plan, authorisation of the budget and appointment or dismissal of the most senior personnel.

i) The HEI’s governance body is regularly reviewed for effectiveness of its operation.

Criterion 1.3: Management Structure, System and Roles

The HEI has a clearly defined management system through which effective academic and administrative leadership is provided and tasks, responsibilities and resources are aligned. The HEI management supports the achievement of the HEI’s objectives through evidence-based decision-making processes. Students and staff are represented on decision-making bodies.

Indicators

a) The HEI has a clear management structure with defined roles and delegated responsibilities for management team members.

b) The HEI has a management system in which there is alignment of management objectives, tasks, responsibilities and resources, as well as mechanisms in place to monitor and evaluate the HEI’s achievements and effectiveness.

c) The HEI’s management regularly reviews key performance indicator data to ensure objectives are being met. Management systematically provides members of the governance team with reports on key performance indicators for all core functions.

d) The purpose of all HEI committees structures are clear and specify their terms of reference, lines of reporting and lines of communication to management.

e) Students, academic and administrative staff are represented on appropriate decision-making bodies and are provided with adequate support to fulfill their roles.

f) The HEI management system is regularly reviewed for effectiveness of its operation.

Criterion 1.4: Institutional Affiliations for Programs and Quality Assurance

The HEI’s academic affiliation agreements are clearly defined, effectively implemented and well-managed and these support the maintenance of academic standards, enhance quality and contribute to the HEI’s external engagement.

This criterion is only relevant to those HEIs which offer programs in affiliation with one or more higher education institutions.

Indicators

a) The HEI ensures that all affiliate programs have formal and current approval of the institution(s) responsible for the program award(s), the Ministry of Higher Education or supervising ministry and internal HEI approval. Responsibilities of both the HEI and the affiliate are clearly defined in formal agreements.

b) The HEI ensures all institutional affiliation agreements for programs specify quality assurance arrangements and respective responsibilities of both parties in detail, including for academic standards, program quality, quality improvement, monitoring and review.

c) Both the HEI and its affiliate discharge their respective responsibilities effectively.

d) The HEI ensures all programs offered through affiliate agreements align with the Oman Qualifications Framework and, for foreign programs, align with the national frameworks of the sending countries.
### Criterion 1.5: Strategic Planning

The HEI has a Strategic Plan which specifies priorities in line with its Mission and Vision and has been developed in consultation with relevant stakeholders. Resources are aligned to meet strategic objectives. The plan guides the HEI in all its activities, and performance against the plan is monitored and evaluated through the use of key performance indicators.

#### Indicators

| a) | The HEI’s Strategic Plan is effective in guiding and driving all the HEI’s activities. |
| b) | The HEI’s strategic planning process clearly articulates priorities, ensures alignment of the HEI’s purposes, core functions and resources, and defines the future direction of the institution. |
| c) | Externally benchmarked key performance indicators are used to measure progress towards achieving the HEI’s strategic objectives. |
| d) | The strategic planning process involves appropriate levels of involvement by key stakeholders. |
| e) | The HEI’s Strategic Plan is readily accessible and effectively communicated to stakeholders. |
| f) | The HEI’s strategic planning process for identifying priorities, defining performance indicators and measuring achievement of goals is regularly reviewed for effectiveness. |

### Criterion 1.6: Operational Planning

The HEI has an operational planning system which is aligned to the strategic planning process. The system identifies objectives, actions; and key performance indicators; and designated responsibilities for implementing actions. Operational planning enables the HEI to manage the achievement of strategic objectives and supports quality improvement.

#### Indicators

| a) | The operational planning process is derived from the HEI’s Strategic Plan. |
| b) | The HEI ensures all academic, administrative and support unit operational plans are aligned to overarching HEI plans. |
| c) | The HEI clearly designates responsibility and accountability for achieving specified targets. |
| d) | HEI operational planning is informed by the use of evidence, feedback and intelligence. |
| e) | Performance against operational plans is reviewed at a minimum annually and action is taken to address targets/objectives not yet achieved. |
| f) | The HEI’s operational planning process is reviewed for effectiveness in order to ensure alignment with the Strategic Plan and achievement of operational targets. |
**Criterion 1.7: Financial Management**

Financial resources for the activities and services offered by the HEI are adequate; formally approved; effectively managed; externally audited; and support quality of provision. Policies are in place to safeguard the HEI’s funds, and sufficient financial reserves are maintained to mitigate potential financial risks.

<table>
<thead>
<tr>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Annual budgets are developed within the context of long-term projections for revenue and expenditure, and are adjusted in the light of experience and emerging needs.</td>
</tr>
<tr>
<td>b) Budget proposals are linked to the HEI’s Mission, Strategic and Operational Plans, and budget proposals are reviewed, approved and monitored by the governing body.</td>
</tr>
<tr>
<td>c) The HEI ensures the appropriate delegation of authority for financial decisions and approvals.</td>
</tr>
<tr>
<td>d) Adequate policies and procedures exist for the receipt of deposits and safeguarding the HEI’s funds.</td>
</tr>
<tr>
<td>e) Adequate reserves are maintained to meet realistically assessed financial risks.</td>
</tr>
<tr>
<td>f) Financial audits are conducted annually by reputable external auditors which are independent of the HEI, of senior staff in the institution, and governance body members.</td>
</tr>
<tr>
<td>g) The HEI’s financial management system is regularly reviewed for effectiveness in order to ensure financial management and resources are adequate to fulfil the HEI’s requirements.</td>
</tr>
</tbody>
</table>

**Criterion 1.8: Risk Management**

The HEI has a risk management system which supports the identification, assessment, treatment and monitoring of risk and enables the HEI to address adverse events and situations which arise.

<table>
<thead>
<tr>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The HEI has an appropriate, detailed and approved risk management plan and policies and procedures governing the HEI’s risk management activities.</td>
</tr>
<tr>
<td>b) The risk management system is sufficiently comprehensive to address relevant strategic and operational risks.</td>
</tr>
<tr>
<td>c) The HEI ensures the appropriate delegation of responsibility for the effective management of risk.</td>
</tr>
<tr>
<td>d) The HEI’s approach to the management of risk is regularly reviewed for effectiveness in identification, assessment, avoidance/amelioration and monitoring risk.</td>
</tr>
</tbody>
</table>

**Criterion 1.9: Policy Management**

The HEI has a policy management system which governs policy development, implementation and review and ensures that policies remain current, appropriate and effective. Policies and procedures are used to guide the HEI in all major areas of activity. These are readily accessible and effectively communicated to students and staff.

<table>
<thead>
<tr>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The HEI has a comprehensive set of policies and procedures which guide all its academic, administrative and support services and external engagement activities.</td>
</tr>
<tr>
<td>b) The processes used to develop, implement and review policies and procedures are clearly documented and consistently applied.</td>
</tr>
<tr>
<td>c) The policy management system is regularly reviewed for effectiveness and all HEI policies and procedures are regularly reviewed for currency and appropriateness.</td>
</tr>
</tbody>
</table>

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**Part B: Institutional Standards**
**Criterion 1.10: Entity and Activity Review Systems**

The HEI implements a system for the routine monitoring and regular review of all key entities and activities for the evaluation of their effectiveness and identification of areas for improvement. Approved action plans are implemented and support quality improvement.

Entity and Activity Review refers to the cyclical reviews covering all aspects of the HEI’s operations. It includes the regular collection of institutional data and statistics. Entity and activity reviews should ideally lead to improvements.

<table>
<thead>
<tr>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a)</strong> The HEI’s mechanism for the quality assurance of all its activities is effectively managed; the mechanism for quality assurance includes internal and external monitoring and review.</td>
</tr>
<tr>
<td><strong>b)</strong> The HEI’s monitoring and review policies and procedures are systematically implemented.</td>
</tr>
<tr>
<td><strong>c)</strong> There is a regular review schedule of all the HEI’s core functions.</td>
</tr>
<tr>
<td><strong>d)</strong> The entity and activity review system involves all core functions of the HEI; is led by a senior member of staff and involves external reviewers where appropriate; review findings are systematically reported to management.</td>
</tr>
<tr>
<td><strong>e)</strong> Entity and activity monitoring and review systems are used to identify areas for improvement and result in action plans used to support and promote a culture of quality improvement throughout the HEI. Entity and activity monitoring and review draw on a range of evidence.</td>
</tr>
<tr>
<td><strong>f)</strong> The HEI’s approach to the review of all its entities and activities is regularly evaluated in order to ensure effectiveness in improving the quality of the HEI’s core functions.</td>
</tr>
</tbody>
</table>

**Criterion 1.11: Student Grievance Procedures**

The HEI has student grievance policies and procedures which cover both academic and non-academic matters. These are readily accessible and effectively communicated to students and staff, and are consistently used to resolve student grievances in a manner which is fair, impartial and transparent.

<table>
<thead>
<tr>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a)</strong> The HEI has implemented student grievance policies and procedures to address both academic and non-academic grievances.</td>
</tr>
<tr>
<td><strong>b)</strong> Student grievance policies and procedures are fair and impartial and ensure that all students are treated equitably.</td>
</tr>
<tr>
<td><strong>c)</strong> The HEI’s student grievance policies and procedures are effectively communicated to all stakeholders.</td>
</tr>
<tr>
<td><strong>d)</strong> The student grievance policies and procedures ensure students are protected against punitive action or discrimination following consideration of a grievance or appeal.</td>
</tr>
<tr>
<td><strong>e)</strong> During all stages of a grievance procedure, the HEI ensures appropriate student and staff confidentiality is maintained.</td>
</tr>
<tr>
<td><strong>f)</strong> Student grievance procedures outcomes are used to inform HEI reviews of related academic or service provision while maintaining student and staff confidentiality.</td>
</tr>
<tr>
<td><strong>g)</strong> The HEI’s approach to managing student grievances is regularly reviewed for effectiveness.</td>
</tr>
</tbody>
</table>
### Criterion 1.12: Health and Safety

The HEI has a health and safety management system which supports a healthy and safe on campus environment for all students, staff and other stakeholders. The HEI’s policies and procedures comply with national legal requirements for health and safety.

**Indicators**

- **a)** The HEI provides a healthy and safe environment for students, staff and visitors and one which meets all Oman’s legal requirements for safety.
- **b)** Policies and procedures relating to health and safety are readily accessible and effectively communicated to stakeholders.
- **c)** Health and safety policies and procedures are well implemented and adhered to.
- **d)** Safety drills are routinely practised.
- **e)** Health and safety equipment is regularly tested and evaluated by authorised external health and safety authorities.
- **f)** Responsibility for the implementation of health and safety policies and procedures is overseen by a senior member of staff.
- **g)** The HEI’s approach to health and safety is regularly reviewed for effectiveness and compliance with national laws.

### Criterion 1.13: Oversight of Associated Entities (e.g. Owned Companies)

The HEI exercises effective authority, oversight and review of all its associated entities and ensures that the HEI is protected against any financial, legal or reputational liabilities arising from any company or entity it owns or controls.

**Associated entities are those companies that are owned or controlled by the HEI.**

**Indicators**

- **a)** High ethical standards are maintained in the oversight of the HEI’s associated entities.
- **b)** There is no conflict between the HEI’s Mission and Vision and the purpose of its associated entities.
- **c)** The HEI clearly specifies the responsibilities and relationships of all parties, including ensuring there is no conflict of interest between members of the governance body, senior management or any other staff member and the activities of its associated entities.
- **d)** The HEI adheres to policies and procedures governing the oversight of the functions and activities of all its associated entities.
- **e)** The HEI’s associated entities provide audited financial reports which are considered by the HEI’s governance body.
- **f)** The HEI actively limits potential financial, legal or reputational liabilities arising from any inappropriate activities of its associated entities.
- **g)** The HEI regularly reviews its approach to the oversight of its associated entities in order to ensure it maintains its authority and control.
STANDARD 2: STUDENT LEARNING BY COURSEWORK PROGRAMS

Academic standards are maintained through the implementation of the HEI’s planned, well-managed approach to the design, delivery and assessment of all student learning by coursework programs. The HEI has clearly defined generic graduate attributes and program-specific learning outcomes which align with the Oman Qualifications Framework, the HEI’s Mission and Vision and stakeholder expectations. Program delivery is supported by effective use of appropriate teaching and learning methods and assessment is governed by soundly-based regulations, policies and procedures. The HEI’s processes support a culture of academic integrity. The HEI has a systematic approach to the monitoring of graduate destinations and employment that is used to inform the review of student learning by coursework programs.

Standard 2 applies to all undergraduate and postgraduate programs which are mainly comprised of coursework (taught components) rather than research, but which may contain substantial research components (e.g. Honours year of a Bachelor’s degree).

Criterion 2.1: Graduate Attributes and Student Learning Outcomes

The HEI has defined generic graduate attributes which reflect stakeholder expectations and which graduates from all programs are required to attain. These are effectively communicated to all stakeholders and incorporated into program development, design and delivery. The HEI’s systems and processes for designing, developing and approving programs ensure that the academic standards of awards are set at an appropriate level and that program-specific learning outcomes are appropriate for the award and align with the Oman Qualifications Framework. The process for assessing student attainment of generic graduate attributes and program-specific learning outcomes is clearly defined and implemented.

**Indicators**

a) The HEI has effective policies and procedures for the design, development and approval of its programs which are applied systematically and implemented consistently.

b) The HEI’s policies and procedures for the design, development and approval of its programs ensure that full consideration is given to all aspects of program design, including level of learning outcomes and the position of the award on the Oman Qualifications Framework; program duration and credit points/hours, structure, components and pathways of the program, and exit awards.

c) The HEI ensures that academic standards are set at the appropriate level for the award.

d) The design, development and approval process for all program proposals includes: consideration of the aims and learning outcomes of the program in relation to the HEI’s Mission, Vision and Values; the HEI’s graduate attributes; relevance to Oman’s workforce and research and development needs; and the use of national and international reference points and benchmarks.

e) The HEI has formal mechanisms to ensure that industry, the professions and employers are involved appropriately in the planning, design and review of the HEI’s programs. There are formal processes for gathering such stakeholder feedback in order to ensure programs remain relevant to industry and employer needs.

f) The HEI maintains a definitive record/specification of each of its programs and the awards to which they lead. The record constitutes the reference point for delivery and assessment of the programs, program monitoring and review, and for the provision of records of study to students.

g) The HEI clearly defines the graduate attributes and learning outcomes that all students should achieve by the completion of their program. The development of the graduate
attributes is informed by the HEI’s use of internal and external benchmarks and the needs, expectations and priorities of the labour market and other stakeholders.

h) Graduate attributes are clearly articulated to prospective and current students and staff. Strategies for developing graduate attributes are implemented across all programs and mechanisms for assessing and reporting students’ achievements of these attributes are in place.

i) The effectiveness of the HEI’s approach to embedding graduate attributes within programs is regularly reviewed, including through the use of feedback from graduates, employers and other stakeholders.

**Criterion 2.2: Curriculum**

The HEI implements systems and processes for curriculum development and review which ensure curricula are relevant, current and effective in supporting students to meet learning outcomes appropriate to the level of the award. Curricula are based on national and international expectations of relevant field(s) of study and are informed by a range of stakeholders, benchmarks and recognised good practice. Curriculum development takes into account national priorities, such as the need to develop a culture of entrepreneurship.

**Indicators**

a) The HEI’s policies and procedures ensure the review of existing programs includes: the purpose of the program and its relevance to the HEI’s Mission and strategic objectives; incorporation of national requirements (such as entrepreneurship); demand for graduates; and relationship to, and likely impact on, other programs.

b) The HEI implements policies and procedures to ensure all program curricula are based on national and international expectations of the relevant field(s) of study and are informed by the Oman Qualifications Framework.

c) The HEI employs mechanisms to ensure there is appropriate ongoing external input from employers and the professions into programs in order to inform curriculum content, academic rigour, practical relevancy and innovation in design.

d) Where applicable, the role of academic affiliates in the development of new curricula and the ongoing review of curricula is clear, appropriate and effectively implemented.

e) The HEI ensures that all programs undergo a regular cycle of curriculum review.

f) The HEI regularly reviews the effectiveness of its approach to the development, implementation and review of curricula.

**Criterion 2.3: Student Entry Standards**

The HEI has student entry standards which are appropriate, transparent and consistently and fairly applied. The entry standards ensure that students have adequate prior knowledge and skills, including English language proficiency, where relevant, to undertake a higher education program of study successfully.

**Indicators**

a) The HEI has implemented policies and procedures for student admission that include clear and explicit entry standards; the admission procedures are consistently, efficiently and fairly applied.

b) Entry standards for each higher education program are clearly stated, published and communicated accurately and effectively.

c) Students demonstrate appropriate English language proficiency prior to entry into a program delivered in English. The student entry standards reflect national or international
c) The HEI has implemented policies and procedures covering student mobility, credit transfer, articulation and recognition of prior learning for students entering and leaving a program.

d) The student entry standards for each program are regularly reviewed to ensure that students are adequately prepared to undertake study successfully.

**Criterion 2.4: Teaching Quality**

The HEI ensures teaching enables students to fully develop as learners in their chosen field(s) of study and to achieve the learning outcomes for their program and the HEI’s generic graduate attributes. Teaching quality is assured through a range of mechanisms including: implementation of defined and appropriate teaching and learning methods; the recruitment and appointment of appropriately qualified and experienced staff; the ongoing evaluation of teaching effectiveness; and the maintenance of appropriate staff/student ratios.

**Indicators**

a) The number, qualifications, experience and expertise of academic staff are appropriate to the nature, level and mode of delivery of programs and the attainment of expected student learning outcomes.

b) There is an appropriate mix of nationality, gender and, where applicable, full-time and part-time academic staff.

c) The HEI has a defined and appropriate approach to teaching and learning which is effectively implemented. The approach reflects contemporary pedagogies and incorporates the appropriate use of learning technologies.

d) The HEI’s approach to teaching and learning enables students: to develop as independent learners, to study their chosen field(s) of study in depth, to make connections across the curriculum and to develop their capacity for analytical, critical and creative thinking.

e) The HEI regularly evaluates the effectiveness of teaching to ensure students are able to develop as learners and achieve the HEI’s intended graduate attributes.

**Criterion 2.5: Research Components of Coursework Programs**

Academic staff involved in the supervision of students undertaking a research component in a coursework program are appropriately qualified and experienced to carry out their supervisory duties effectively and enable students to undertake research with a high level of independence. The assessment of the research components adhere to appropriate regulations, policies and procedures used for the assessment of research outputs and ensure academic standards are maintained. Where applicable, student research projects obtain formal ethics approval for research involving live subjects or approval for research involving biohazardous materials.

This criterion is relevant to all HEIs providing coursework programs that incorporate a substantial research component. An Honours year or research projects as a prescribed final year requirement are examples of research components of coursework programs which should be addressed against this criterion.

**Indicators**

a) The HEI has policies and procedures in place to ensure that students undertaking a...
substantial research component of a coursework program are provided with appropriate research supervision and resources.
b) The HEI’s policies and procedures for student research assessment and its review are consistently implemented and support the maintenance of appropriate academic standards.
c) The HEI has a high-level committee which approves student research involving humans, animals or genetic considerations or other considerations such as environmental.
d) The HEI regularly reviews the effectiveness of its approach to the management and assessment of research components of course work programs.

Criterion 2.6: Academic Integrity

The HEI has policies and procedures which support the protection of academic integrity. Mechanisms are implemented to prevent, detect and address all forms of academic misconduct by students or staff and instil an institutional culture of academic integrity; the mechanisms are reviewed for effectiveness. Academic staff ensure they acknowledge the intellectual property contained in materials used for teaching purposes, and teaching materials are managed in alignment with the HEI’s intellectual property policies and procedures.

Indicators

a) The HEI’s policies and procedures require all students and staff to uphold academic integrity in all coursework programs. The policies and procedures are readily accessible and effectively communicated to stakeholders.
b) The HEI takes effective steps to promote a culture of academic integrity.
c) The HEI has mechanisms to ensure students and staff understand and are able to avoid plagiarism.
d) Plagiarism detection methods are in place, and cases of plagiarism are effectively addressed through the implementation of appropriate policies and procedures.
e) The HEI has mechanisms to ensure students and staff understand what constitutes cheating and collusion and which help students avoid these forms of academic misconduct. Cases of cheating and collusion are effectively addressed through the implementation of appropriate policies and procedures.
f) The HEI has made it clear to students that all work must be the students’ own original work and not purchased or obtained by some other means.
g) The HEI’s policies and procedures require students and staff to respect copyright of print and digital resources.
h) The HEI regularly reviews the effectiveness of its approach to upholding academic integrity; the review includes consideration of cases of academic misconduct.

Criterion 2.7: Student Placements

Where student work placements are a formal requirement of the program, the HEI assures the quality of these by implementing systems and processes for securing placement opportunities; supervising, monitoring and assessing students on placement; and evaluating the contribution of placements to student learning. Where the HEI provides opportunities for student placements that are not part of the program requirements, there is appropriate oversight of these to ensure they enrich the learning experience of students.
Indicators
a) The HEI has developed an effective strategy to facilitate and support formal student placements that are an essential part of a program. Where student placements are not part of the program requirements, but are arranged by the HEI, there are suitable strategies in place to oversee these.
b) The HEI’s policies and procedures are used to effectively manage student placement provision; the roles and responsibilities of both the HEI and the host organisation; the supervision of students on placement; and the monitoring and assessment of student performance during placement.
c) The HEI has effective mechanisms to protect the health and safety of students while on placements.
d) The HEI regularly reviews the effectiveness and appropriateness of student placement in order to evaluate the contribution of placements to student learning.

Criterion 2.8: Assessment Methods, Standards and Moderation
The HEI has regulations, policies and procedures which govern all aspects of assessment including assessment methods, grading and moderation. These are implemented through assessment systems and processes which ensure that assessment is rigorous and fair. Processes are in place to verify student standards of achievement and ensure that appropriate academic standards are maintained.

Indicators
a) Assessment regulations, policies and procedures are clear, comprehensive, fair, transparent, readily accessible and effectively communicated to students and staff.
b) The HEI has effective mechanisms to ensure that assessment methods in all programs are appropriate and benchmarked against current best practice.
c) Assessments are effective in measuring student achievement of learning outcomes.
d) The HEI has effective mechanisms to ensure that assessment processes are rigorously implemented to ensure that assessment is valid, reliable and effective in maintaining academic standards. This includes the approval and classification of final awards.
e) The HEI assessment policies ensure that all programs have well-established internal and external moderation processes in place which are applied to both coursework assessment and examinations.
f) The HEI requires that feedback on performance and results of assessment are constructive, timely, and where required, linked to mechanisms for student learning support.
g) The HEI has established procedures for student appeals of assessment results and these procedures are effectively implemented and communicated to students.
h) The HEI regularly reviews its approach to methods of assessment and moderation in order to ensure appropriate academic standards are maintained.

Criterion 2.9: Academic Security and Invigilation
The HEI has arrangements in place which ensure the security of all its assessment activities including the robust invigilation of examinations and the secure handling of examination materials, results and records.

Indicators
a) The HEI has policies and procedures governing all aspects of academic security relating to assessment, including the assessment of major research projects and examination activities.
b) The HEI has policies and procedures governing all aspects of the invigilation of
c) The HEI has effective procedures to confirm the identity of students undertaking examinations.
d) The HEI follows up suspected assessment, examination and invigilation security breaches and appropriate disciplinary action is taken if required.
e) The HEI has effective policies and procedures to ensure paper-based and online examinations are handled securely.
f) All assessment materials, results and records are securely managed and stored, and students’ assessed work is archived for an appropriately defined period.
g) The HEI’s academic security policies and procedures are regularly reviewed for effectiveness in ensuring the integrity of all examination procedures.

Criterion 2.10: Student Retention and Progression

The HEI collects, maintains, monitors and acts upon data on student retention, progression and completion in each program and this assists students through to timely completion of their program.

Indicators
a) The HEI aggregates all its program year-to-year retention, progression, and completion rates. These are monitored for the institution as a whole; for different programs; and for particular groups of students.
b) Annual HEI-wide retention, progression and completion rates are assessed and actions taken when problems are identified.
c) The HEI has strategies to improve student retention, progression and completion rates.
d) Analysis and evaluation of student retention, progression and completion rates are used to inform program reviews.
e) Student retention, progression and completion rate data is externally benchmarked in order to ensure rates are consistent with those of other national and international institutions. Where retention, progression and completion rates are lower than benchmarked outcomes, strategies are put in place to improve performance.
f) The HEI regularly reviews the effectiveness of its mechanisms to ensure appropriate student retention, progression and completion rates are maintained.

Criterion 2.11: Graduate Destinations and Employability

The HEI actively monitors and reviews the destinations (such as employment/unemployment or rates of further study) of its student learning by coursework program graduates and implements strategies to help ensure student, graduate and other stakeholder expectations for graduate destinations and employability are met.

Indicators
a) The HEI has specified graduate employment targets for each program. The HEI maintains accurate, up-to-date data on graduate destinations to measure whether targets are met.
b) Graduate destination data, including feedback from employers and alumni, is regularly analysed to gauge the preparedness and employability of graduates and whether graduate knowledge, skills and attributes meet the requirements of employers and other stakeholders. This data is used to inform actions for improvement in areas such as program design, delivery and assessment.
c) Graduate destinations data is periodically externally benchmarked, for example HEIs participate in national initiatives related to data collection on graduate destinations and employability.
| d) The HEI regularly reviews the effectiveness of mechanisms used to monitor graduate destinations and employability. |
STANDARD 3: STUDENT LEARNING BY RESEARCH PROGRAMS

Academic standards for student learning by research are maintained through the implementation of the HEI’s planned, well-managed approach to the design, support, supervision and assessment of student learning by research programs. The HEI has clearly defined generic graduate attributes and program outcomes which align with the Oman Qualifications Framework and the HEI’s Mission and Vision and stakeholder expectations. Research program graduation requirements are sound and clearly communicated and adequate physical and learning resources are available to support students in their research. Research supervision and assessment are governed by soundly-based regulations, policies and procedures which support academic integrity, safe and ethical research, and positive student learning outcomes. The HEI has a systematic approach to the monitoring of graduate destinations and employment which informs the review of student learning by research programs.

Standard 3 applies to all postgraduate programs which are mainly comprised of research rather than coursework (taught components) but which may contain substantial coursework components (e.g. courses/modules on research methodology).

Criterion 3.1: Research Program Design

The HEI implements systems and processes for the design, development and review of research programs which ensure that these align with the Oman Qualifications Framework and international expectations of the academic field(s) of study. Research program design incorporates the graduate attributes which graduates are required to attain. Research program design is informed by a range of stakeholders, benchmarks and recognised good research practice.

Indicators

a) The HEI’s policies and procedures ensure that factors considered in the development of new research programs include alignment with the Oman Qualifications Framework, alignment with the HEI’s academic and research profile, availability of appropriately qualified staff, and availability of appropriate research equipment, facilities and resources.

b) The HEI ensures research program design include clearly defined graduate attributes and student learning outcomes. Research program design incorporates strategies for students to develop these attributes and learning outcomes.

c) The HEI employs mechanisms to ensure suitable external input into research program design in order to inform appropriateness of approach and academic rigour.

d) The HEI ensures all research programs undergo a regular cycle of review.

e) The HEI regularly reviews the effectiveness of the approach used for the design and implementation of research programs in order to ensure successful research student outcomes.

Criterion 3.2: Research Student Entry Standards

The entry standards for admission onto research programs are appropriate, transparent and consistently and fairly applied. The entry standards ensure that students have adequate prior knowledge and skills, including English language proficiency where relevant, to undertake a research program successfully.

Indicators

a) Policies and procedures for student entry standards for research programs are clear and explicit and are consistently, efficiently and fairly applied.
b) Student entry standards for each research program are clearly stated, readily accessible and effectively communicated.

c) Students demonstrate appropriate English language proficiency prior to entry into a research program delivered in English. The student entry standards reflect international norms for English language proficiency in similar research programs.

d) The entry standards for each research program are regularly reviewed to ensure that students are able to undertake a research program successfully.

Criterion 3.3: Supervisors

Supervisors of research students are appropriately qualified and experienced and are provided with ongoing professional development; the HEI ensures that supervisors carry out their supervisory duties effectively.

Indicators

a) Academic staff supervising research students are appropriately qualified and are active researchers in the field(s) in which they provide supervision.

b) The HEI makes available professional development programs on research supervision, and early career academic staff are mentored, monitored and supported in the development of their supervisory skills.

c) The workload of academic staff involved in the supervision of students undertaking research is clearly specified to ensure appropriate time can be dedicated to the supervision of students, including the provision of advice, guidance, and timely responses to student needs.

d) The HEI has processes to ensure that intellectual property generated by its students is protected.

e) The HEI implements a range of strategies to monitor and review the effectiveness of supervisors’ performance in order to improve the quality of research student supervision.

Criterion 3.4: Student Research Supervision

The HEI implements a system for student research supervision which enables students to undertake research with a high level of independence and engage in research leading to knowledge creation.

Indicators

a) The HEI has a defined and appropriate approach to research student supervision which is effectively communicated and implemented. This reflects contemporary pedagogies and, where applicable, incorporates appropriate use of current technology.

b) The HEI has formal student research supervision policies and procedures which are effectively communicated and implemented.

c) The HEI requires that all research students be provided with a supervisory team which includes as a minimum a main supervisor who is the clearly identified primary point of contact and support.

d) A supervision handbook is made available to all research students and supervisors. The handbook includes the HEI’s policies, procedures and code of practice for research and research supervision.

e) The HEI has clearly defined the roles, responsibilities and expectations of research students and supervisors and these are clearly stated and effectively communicated to stakeholders.

f) The HEI has clearly defined mechanisms for monitoring and supporting research students’ progress, including formal reviews of student progress at different stages.

g) The HEI regularly reviews the effectiveness of student research supervision in order to ensure students are adequately supported to undertake independent research.
Criterion 3.5: Student Research Support

The HEI implements systems and processes which provide research students with appropriate support to undertake their research. Funding is allocated to resource research programs adequately and students have access to appropriate study spaces, library and information technology resources, and research equipment and facilities. Students receive support which enables them to attend relevant conferences and/or participate in a community of scholars.

Indicators

a) The HEI ensures there is an adequate budget for research program staffing, equipment and facilities in order to fully support research students and their programs.

b) Research students have appropriate access to laboratory and study spaces, library, information technology and other relevant resources to support their research program activities.

c) There is support for research students to attend and present at conferences, seminars or other research events.

d) Opportunities are provided for research students to participate in the HEI’s scholarly research community; to be exposed to high quality research; and where applicable, be exposed to research activities across a range of disciplines.

e) The HEI’s approach to student research support is regularly reviewed for effectiveness in order to ensure the services and resources contribute to positive research student outcomes.

Criterion 3.6: Student Research Assessment

The HEI has regulations, policies and procedures which govern all aspects of the assessment of research student theses or other research outputs. These are implemented through assessment systems and processes which ensure that assessment is rigorous and fair. Processes are in place to verify student standards of achievement and ensure that appropriate academic standards are maintained.

Indicators

a) The HEI’s policies and procedures for student research assessment and its review are consistently implemented in order to ensure appropriate academic standards are maintained. These policies and procedures and the criteria for assessment are readily accessible and effectively communicated to stakeholders.

b) Student research assessment is timely and carried out to an appropriate timescale that has been benchmarked against comparable national and international research programs.

c) Student research assessment, including the assessment of oral presentations (and where applicable including thesis defence) involves external examiners and/or examination panels in which the supervisor is not an examiner.

d) Student research assessment results, including the analysis of longitudinal trends, are used as part of an effective approach to the review of student research assessment.

e) The HEI regularly evaluates the effectiveness of its management of student research assessment.
**Criterion 3.7: Coursework Components of Research Programs**

Curricula elements of research programs have appropriate learning outcomes and curricula are relevant and current. Teaching enables students to achieve their learning outcomes for the coursework component, and teaching quality is assured through a range of mechanisms. The assessment methods, including grading and moderation of coursework are governed by the HEI’s regulations, policies and procedures and assessment systems ensure appropriate academic standards are maintained. Where student work placements form part of the coursework component the HEI implements effective systems and processes to supervise, monitor and assess students undertaking these.

**This criterion is relevant to all HEIs providing research programs that incorporate a substantial coursework component (such as a course or sets of modules on research methodology or subject specialisation topics).**

**Indicators**

a) The HEI implements policies and procedures to ensure all coursework components of research program curricula are based on national and international expectations of the relevant field(s) of study and informed by the Oman Qualifications Framework.

b) The HEI employs mechanisms to ensure there is appropriate ongoing external input from employers and the professions into coursework components of research programs in order to inform curriculum content, academic rigour, practical relevancy and innovation in design.

c) The HEI has a defined and appropriate approach to teaching and learning in coursework components of research programs which is effectively implemented, incorporates the use of appropriate learning technologies and reflects contemporary pedagogies.

d) The HEI has effective mechanisms to ensure that assessment processes are rigorously implemented and result in assessment that is valid and effective in maintaining academic standards.

e) The HEI has developed an effective strategy to facilitate and support formal student placements that are an essential part of the coursework component of the research program.

f) The HEI conducts regular reviews of its management and assessment of its coursework components of research programs to determine their effectiveness.

**Criterion 3.8: Academic Integrity, Ethics and Biosafety**

The integrity of research produced by students is assured through the consistent application of the HEI’s policies and procedures on academic integrity and ethics. Support is provided to research students to ensure they do not engage in research misconduct. The HEI’s policies and procedures ensure the safe handling of biohazardous materials, where applicable. The intellectual property generated through student research is managed in alignment with the HEI’s intellectual property policies and procedures.

**Indicators**

a) The HEI has separate policies and procedures on academic integrity, ethics and the safe handling of biohazardous materials; these policies and procedures are readily accessible and effectively communicated to stakeholders.

b) The HEI’s policies and procedures support the ethical conduct of research.

c) The HEI provides research students with appropriate support and training in preparing an application for ethics approval.

d) The HEI has an effective approach to ensuring research students understand and are able to avoid plagiarism and other forms of academic misconduct.

e) The HEI regularly reviews the effectiveness of its approach to ensuring the academic integrity of its students.
Criterion 3.9: Retention, Graduate Destinations and Employability

The HEI maintains, monitors and acts upon data on research student retention and progression and this assists students through to the successful and timely completion of their research program. The HEI actively monitors the destinations of its research program graduates and implements strategies to help ensure student, graduate and other stakeholder expectations for graduate destinations and employability are met.

Indicators

a) The HEI has specified graduate employment targets for each research program. The HEI maintains accurate, up-to-date data on research graduate destinations to measure whether targets are met.

b) Research graduate destination data, including feedback from employers and alumni, is regularly analysed to gauge the preparedness and employability of research graduates and whether research graduate knowledge, skills and attributes meet the requirements of employers and other stakeholders. This data is used to inform actions for improvement.

c) Research student employment destinations actively contribute to the advancement of Omani society.

d) Research student retention and progression data is analysed and evaluated; where negative results are identified; effective actions to improve results are implemented.

e) Analysis and evaluation of research student retention and progression data are externally benchmarked against national and international targets and used to inform part of research program reviews.

f) Graduate destinations data is periodically externally benchmarked, for example HEIs participate in national initiatives related to data collection on graduate employment and employability.

g) The HEI regularly reviews research student retention, progression and graduate destinations and employability data in order to ensure it is effective in meeting its intended research graduate outcomes and stakeholder expectations.
STANDARD 4: STAFF RESEARCH AND CONSULTANCY

The HEI's research activities and outputs reflect its institutional classification. Strategic objectives for research are achieved through the implementation of a planned and well-managed approach and supported by appropriate levels of funding and professional development activities. The HEI ensures that research and consultancy activities are conducted ethically. Research and scholarly activities are used to inform teaching and learning.

All HEIs are expected to conduct some level of research and this standard is relevant to all HEIs. Depending on the HEI's institutional classification, the degree of research conducted may vary.

Criterion 4.1: Research Planning and Management

The HEI implements a strategic approach to research planning and management that aligns with its institutional classification and Mission and guides its research and scholarly activities. Research activities are formally approved, adequately resourced and monitored and enable good quality research outcomes.

**Indicators**

a) The HEI has a strategic approach to research which is consistent with its Mission and research objectives. The approach includes the use of appropriately benchmarked targets to measure research performance.

b) The HEI has regulations, policies and procedures related to all research activities which are readily accessible and effectively communicated to stakeholders.

c) The HEI ensures there is a fair, timely and transparent research approval process for research involving ethical or biosafety consideration which is readily accessible and effectively implemented.

d) The HEI ensures that appropriate structures and resources are available to support the attainment of research targets.

e) The HEI regularly monitors and reviews research performance against appropriate benchmarked key performance indicators to ensure research targets are being met.

f) The HEI regularly reviews the effectiveness of its approach to research planning and management in order to ensure quality research outcomes are achieved.

Criterion 4.2: Research Performance

The HEI’s research performance and outputs are monitored and reported regularly to ensure research targets are met. Staff performance in research and scholarly activities is consistent with the HEI’s institutional classification and its strategic objectives for research.

**Indicators**

a) Expectations for academic staff involvement in research and scholarly activities are clearly stipulated and are at least consistent with the HEI’s institutional classification and strategic intent.

b) The research outputs of staff are recorded and acknowledged in staff performance planning and review and in promotion criteria.

 c) There are appropriate mechanisms to facilitate collaboration and cooperation with external research networks.

d) Data on the HEI’s overall research activity is maintained and used to inform evaluation of research performance.
Criterion 4.3: Research Funding Schemes

The HEI’s research funding schemes are aligned to its strategic objectives for research and enable research outcomes appropriate to its institutional classification. Research funds are sufficient to achieve the HEI’s strategic objectives for research and funds are distributed equitably to research-active staff. All research funds sourced externally to the HEI are managed appropriately.

**Indicators**

a) The HEI ensures the research budget is sufficient for staff, staff support, equipment and facilities in order to support achievement of research targets.

b) The HEI’s policies and procedures support the effective management of research funds. Research funding activities are reported and audited regularly.

c) A number of internal research grants are provided to support new research proposals and projects.

d) Assistance in developing research proposals is given to staff and students applying for both internal and external research grants.

e) The HEI’s policies and procedures set out the ownership of, and responsibilities for, facilities, equipment and other resources obtained through research grants, commissioned research or other research ventures.

f) The HEI regularly reviews the effectiveness of its research funding schemes.

Criterion 4.4: Consultancy Activities

Where consultancy activities take place, these are aligned to the HEI’s Mission and strategic objectives, are well-managed and supported, and lead to beneficial results for stakeholders.

**Indicators**

a) The HEI’s consultancy activity policies and procedures clearly specify how any income generated during the consultancy period is managed.

b) A culture of entrepreneurship and involvement in external consultancy activities is actively encouraged and the HEI supports staff to cooperate with industry and other research agencies.

c) Implementation of appropriate policies and procedures ensures that staff engagement in consultancy activities is effectively managed in terms of contractual and workload issues, financial arrangements and legal liabilities.

d) The HEI has established an ‘Outside Work Policy’ or similar which clearly specifies the private consultancy activities in which an employee may engage with external companies or institutions.

e) The HEI’s consultancy activities are regularly reviewed for effectiveness in order to ensure the activities and their outcomes are aligned to its strategic objectives.
**Criterion 4.5: Ethics and Biosafety**

The HEI ensures that all research activities involving human, animal or genetic ethical considerations or biohazardous materials considerations are well-managed and controlled. This is achieved through the implementation of appropriate research policies and procedures which also govern the approval of research projects and guide the ethical conduct of researchers.

**Indicators**

a) **The HEI’s research policies and procedures are informed by international research conventions and are effectively implemented to ensure that all research activities carried out by staff and students are of the highest ethical standards.**

b) **The HEI has separate policies and procedures on ethics and the safe handling of biohazardous materials; these policies and procedures are readily accessible and effectively communicated to stakeholders.**

c) **The HEI has a high-level committee that includes senior researchers and external experts to approve the ethics of research projects involving humans, animals or genetic considerations.**

d) **The HEI has a high-level committee that includes senior researchers and external experts to approve research projects involving biohazardous materials.**

e) **Staff are provided with appropriate support and training in preparing their application for ethics or biosafety committee approval.**

f) **The HEI regularly reviews the effectiveness of the approach used to ensuring research ethics and biosafety considerations are well managed and controlled.**

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**Criterion 4.6: Intellectual Property**

The HEI has a fair and well-managed system through which the ownership of intellectual property generated through research or consultancy or other HEI activities is clearly identified and managed.

**Indicators**

a) **Intellectual property policies conform to national laws and guidelines.**

b) **The intellectual property policy defines the ownership of intellectual property generated through research or consultancy activities, including any financial benefits.**

c) **Intellectual property policies are readily accessible and effectively communicated to all stakeholders.**

d) **The HEI ensures that, where appropriate, all research projects define the intellectual property ownership of the project outputs. Disputes regarding the ownership of intellectual property are resolved in accordance with national laws.**

e) **The HEI periodically reviews the effectiveness of its approach to protecting the rights of intellectual property generated through research and consultancy.**

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**Criterion 4.7: Professional Development for Research**

The HEI provides structured opportunities for those staff expected to be research-active to undertake training which enables them to develop, maintain and improve their research skills and expertise.

**Indicators**

a) **The HEI conducts a needs-analysis based on its strategic objectives for research in order to ensure it is matched to its staffing profile and informs research training and development.**

b) **Structured professional development opportunities are provided to ensure academic staff members have the appropriate skills to achieve the HEI’s strategic objectives for research.**
c) The HEI provides support for early career academic staff in the development of their research capabilities.
d) Professional development for research includes support for staff to undertake scholarly activity and to maintain their academic currency.
e) The HEI ensures staff research training needs are considered as part of its academic staff performance planning and review process.
f) The HEI regularly reviews the effectiveness of its approach to professional development for research in order to ensure academic staff develop or enhance their skills and capacity to undertake quality research and scholarly activities.

**Criterion 4.8: Research Commercialisation**

Where the HEI is engaged in commercialising outputs from its research, systems and processes are implemented to ensure that this is in line with strategic objectives and is well-managed.

Many HEIs will not yet be producing commercial research products. This criterion should only be addressed by HEIs that are generating income from research products.

**Indicators**

a) The HEI actively encourages a culture of entrepreneurship and promotes the appropriate commercialisation of research by staff. The HEI actively supports staff involved in research commercialisation activities.
b) The HEI has effective systems for: the assessment and approval of all legal and contractual arrangements; applications for patents, trademarks and copyrights; and implementation of marketing schemes used for the commercialisation of research.
c) The HEI has developed strategies for capitalising on the expertise of academic staff and students in providing services to the public and generating funds through research activities.
d) Before investment by the HEI is approved by the governing body, ideas for the potential commercial exploitation are critically evaluated. The evaluation includes input from industry and professional experts.
e) The HEI regularly reviews and evaluates the effectiveness of its research commercialisation strategy to ensure research commercialisation activities and outcomes positively contribute to its strategic objectives for research.

**Criterion 4.9: Research-Teaching Nexus**

The HEI has implemented a systematic approach to ensure its research and scholarly activities have a positive impact on teaching and student learning.

**Indicators**

a) The HEI supports the integration and application of research findings into program curricula and teaching and learning activities.
b) The HEI ensures academic staff members remain actively engaged with current research related to the academic disciplines/fields of study in which they teach.
c) The HEI has strategies to support the incorporation of staff research and staff scholarly activities into student learning in order to foster student interest in, and understanding of, the benefits of research.
d) The HEI supports students’ participation in research activities with academic staff.
e) The HEI ensures that student participation in research resulting in publication or commercialisation is given appropriate recognition and attribution.
f) The HEI regularly reviews the effectiveness of its systems for incorporating its research and scholarly activities into teaching in order to ensure they positively impact on student learning.
STANDARD 5: INDUSTRY AND COMMUNITY ENGAGEMENT

The HEI implements a planned, well-managed approach to its engagement with a range of stakeholders, including: industry and employers; professions and professional bodies; other education providers; its alumni; and the community at large. This engagement supports the establishment and maintenance of constructive and productive relationships with key industry and community stakeholder groups.

Criterion 5.1: Industry and Community Engagement Planning and Management

The HEI has a strategic approach to industry and community engagement which is aligned to its Mission. The approach is planned, well-managed, implemented and regularly reviewed to ensure relationships with key stakeholder groups are constructive, productive and positively contribute to the HEI’s activities.

Indicators
a) The HEI has a well-defined, coordinated and institution-wide approach to the identification of, and engagement with, industry, employers, professions and the community at large.
b) The HEI encourages and supports staff and students to engage in industry and community activities that lead to productive relationships.
c) The HEI maintains data on industry and community engagement activities, including stakeholder feedback. Data is used as part of the regular review of the HEI’s industry and community engagement activities to ensure its approach remains constructive and productive.
d) The HEI regularly reviews the effectiveness of its approach to engaging with industry and the community in order to ensure it positively contributes to the HEI’s functions and meets stakeholder expectations.

Criterion 5.2: Relationships with Industry and Employers

The HEI actively engages with relevant industry and employers. The HEI fosters positive relationships to enhance student learning activities; to identify industry and employer requirements of graduates; and to provide students and staff with opportunities to engage with industry and employers.

Indicators
a) The HEI has established and maintains positive relationships with industry and employers so that there are opportunities for students to make links with local industries and employers.
b) The HEI seeks to ensure that there are opportunities for staff to make links with industry and employers so that staff can contribute their expertise to relevant partners in industry, business and government, and benefit from continuing professional development opportunities.
c) The HEI has formal mechanisms to ensure that industry and employer stakeholders are involved appropriately in HEI core planning, program development and review activities. There are formal processes for gathering feedback from industry and employers in order to ensure the HEI’s activities remain relevant to industry and employer needs.
d) The HEI keeps informed of relevant labour market requirements.
e) The HEI regularly reviews and evaluates its relationships with industry and employers in order to assess the effectiveness of those relationships used for program development and review and student and staff engagement.
Criterion 5.3: Relationships with Professions

The HEI actively engages with the professions and professional bodies and involves them in the development, design and review of its programs and this ensures that it remains responsive to professional requirements. Staff and student engagement with relevant professions and professional bodies is encouraged and supported.

Indicators

a) The HEI has an institution-wide approach to the identification of, and engagement with, relevant professions and professional bodies.

b) The HEI understands the requirements of professional bodies and monitors its programs to ensure they are appropriately responsive to those requirements.

c) The HEI provides professional bodies with an opportunity to contribute to the design and review of programs.

d) Those programs seeking accreditation by professional bodies benefit from input from the professions on the program design.

e) The HEI takes steps to encourage staff to participate in the activities of the professions and professional bodies, contribute their expertise and benefit from continuing professional development opportunities.

f) The HEI takes steps to encourage students to participate in, and benefit from, the activities of the professions and professional bodies.

g) The HEI regularly reviews its approach to establishing and maintaining relationships with the professions and professional bodies in order to ensure the effectiveness of those relationships in program development and review and student and staff engagement.

Criterion 5.4: Relationships with Other Education Providers

The HEI maintains constructive relationships with other national and/or international education providers in order to, for example, network, share resources, benchmark the HEI’s processes and outputs and provide educational links for staff and students.

Indicators

a) The HEI has an institution-wide approach to establishing, developing and maintaining relationships with other education providers.

b) The HEI has established relationships with other education providers nationally and/or internationally to support activities such as the sharing of resources, benchmarking, research, networking, establishing student articulation pathways and other beneficial activities.

c) The HEI regularly reviews its activities with other education providers in order to continue to support and develop these relationships.

Criterion 5.5: Relationships with Alumni

The HEI implements systems and processes for managing and maintaining relationships with its alumni. Its engagement with this group ensures their input into a range of the HEI’s academic and community engagement activities.
Criterion 5.6: Relationships with the Community at Large

The HEI’s community engagement activities are planned and well-managed and help to ensure that its engagement with the community at large is appropriate and productive.

Indicators

a) The HEI has implemented a strategic approach to establishing positive relationships with the community at large.

b) The HEI provides a range of community education activities or initiatives in areas of local interest or concern.

c) The HEI maintains regular contact with local schools, such as through arranging enrichment activities, offering assistance and support in areas of specialisation, and providing information about higher education and career opportunities.

d) Where appropriate, the HEI shares its resources with the community.

e) The HEI regularly reviews the effectiveness of its approach for engaging with the community at large to ensure the positive relationships are maintained.
STANDARD 6: ACADEMIC SUPPORT SERVICES

The HEI implements a planned, well-managed approach to its provision of academic support services which helps students meet their educational goals. The HEI’s academic advising service and its learning support and teaching resources are accessible, appropriate and adequately resourced to support students. The Registry, Library and information and learning technology services are resourced appropriately and effectively support the HEI’s academic and research activities.

Criterion 6.1: Academic Support Services Planning and Management

The HEI implements a strategic approach to the planning and management of academic support services which is aligned to its Mission, provision of academic programs and particular requirements of its students. Academic support services are adequately resourced and regularly monitored to facilitate students’ academic achievement.

Indicators

a) The HEI bases its approach to the planning and management of academic support services on student learning needs.

b) Academic support services planning and management takes into account the specific needs of students in non-standard modes of study and/or studying in different locations.

c) The HEI gives prominent organisational status to academic support services and assigns overarching responsibility for the planning and management of those services to a senior member of staff or high level committee.

d) The HEI undertakes ongoing analysis of the profile of its student population to inform strategic decision making and longer-term planning and development of academic support services.

e) The HEI regularly reviews the effectiveness of its approach to academic support services planning and management in order to ensure it positively contributes to students’ academic achievement.

Criterion 6.2: Registry (Enrolment and Student Records)

The HEI maintains an efficient, reliable registry system which ensures that student enrolment, student records and related student data are well managed. The HEI’s policies and procedures govern the maintenance, security and confidentiality of all student records.

Indicators

a) The HEI’s student registration procedures are efficient, and use appropriate data recording and retrieval systems adequate for accurate reporting requirements.

b) The HEI has policies and procedures to effectively govern the management, collection, maintenance, security and disposal of student records.

c) The HEI maintains cumulative records of student enrolment and performance in a secure area. Back-up files are maintained in a separate, secure location, preferably remote from the campus.

d) The HEI has clear rules governing the privacy of information which effectively control access to individual student records.

e) The HEI undertakes regular reviews to evaluate the effectiveness of its Registry system in order to ensure student records are well managed.
Criterion 6.3: Library
The HEI implements systems and processes to effectively manage its library services. The HEI provides appropriate physical and electronic learning resources; ensures appropriate collection management; and provides support for staff and students in their use of library resources.

**Indicators**

a) The HEI’s policies and procedures for the development of physical and electronic library resources and services give appropriate attention to the requirements of its coursework and research programs, as well as any wider staff research activities.

b) The HEI’s library budget allocation is adequate to ensure that physical and electronic library materials, resources and library services are satisfactorily provided for and sustainable.

c) Both short-term and longer-term plans are implemented for updating physical and electronic library resources. Academic staff and other stakeholders are involved in the development of collections and review of materials.

d) Students and staff receive appropriate and adequate support to develop the skills they need to make effective use of the library and its resources.

e) Library resources are maintained in a readily accessible location. The library is open to students and staff for appropriate periods to enable access both during and after class time.

f) Learning resources are catalogued according to established international practice, to facilitate student and staff ease of access to both physical and electronic resources whether on-campus or off-campus. Reliable systems are in place for managing the loan and return of materials, including efficient follow-up for overdue materials.

g) Where appropriate, the HEI has established cooperative arrangements with other institutions for interlibrary loans and for sharing of library resources and services.

h) The HEI regularly reviews and evaluates the adequacy of its library resources and services. Such evaluation includes consideration of the needs of the HEI’s programs, levels of usage, and student and staff satisfaction with provision.

i) The HEI regularly reviews the effectiveness of its approach to library service management in order to ensure library services provision is appropriate for stakeholder needs.

Criterion 6.4: Information and Learning Technology Services
The HEI effectively manages its information and learning technology services. This includes: developing and implementing compatible systems; the maintenance of equipment; ensuring accessibility of services; overseeing the appropriate use of the Internet and virtual learning environments by staff and students; and monitoring software copyright. Students and staff are supported in their use of information and learning technology services. These services are appropriate for the HEI’s student body.

**Indicators**

a) The approach to the development of information and learning technology services gives appropriate attention to the requirements of the HEI’s programs and research activities.

b) Information and learning technology services policies and procedures detail appropriate use of the internet, including safeguards against the infringement of copyright and use of unlicensed software. The HEI implements these policies and procedures effectively so that staff and students are supported in the safe use of the internet and virtual learning environments.

c) Information and learning technology services budget allocation is adequate for staff training, acquisition and replacement of IT equipment and learning technologies, acquisition and replacement of contemporary software and hardware including the
provision of appropriate bandwidth and systems development.
d) Appropriate support is provided to students and staff to enable them to make effective use of information and learning technology services.
e) Both short-term and longer-term plans for the improvement of information and learning technology services are implemented and staff and other stakeholders are involved in the development of these services.
f) The HEI regularly reviews its information and learning technology services to ensure they maintain currency with contemporary developments and innovations in information and learning technology.
g) The HEI takes steps to ensure that the security of the IT infrastructure is maintained (for example, protected from hacking).
h) The HEI regularly evaluates the effectiveness of its approach to the management of information and learning technology services.

Criterion 6.5: Academic Advising

The HEI implements systems and processes for academic advising which provide effective advice and support to students and assist them in achieving their educational goals.

Indicators

a) The HEI’s academic advising policies and procedures ensure regular opportunities are provided for individual students to discuss with their adviser issues about their program choices and academic progress. The approach includes specific arrangements for students in non-standard modes of study and/or studying in different locations or students with special needs.
b) The HEI monitors students’ academic performance in order to identify students at risk, and the academic advising system ensures that assistance and support is provided for students demonstrating poor academic performance.
c) The HEI provides appropriate training for advisers so that they can carry out their advisory role effectively. The HEI has a policy on the number of advisees allocated to an adviser, which is appropriate in relation to advisers’ other responsibilities, and enables advisers to carry out their advisory role effectively.
d) The HEI ensures that advisers have appropriate access to students’ records in order to undertake their adviser role effectively. The HEI ensures that advisers adhere to the HEI’s policies and procedures regarding confidentiality of academic or personal issues. Appropriate records of academic advising are maintained.
e) In addition to the formal academic advising system, the HEI takes steps to ensure that academic staff members are available to provide consultation and advice to students on their courses/modules. Academic staff members are familiar with the HEI’s learning support services for students, and are able to refer students to these services as appropriate.
f) The HEI regularly reviews the effectiveness of its approach to academic advising.

Criterion 6.6: Student Learning Support

The HEI provides a range of extracurricular learning support services which ensure students are effectively and appropriately assisted in their learning and achievement of their educational goals.

Indicators

a) The HEI provides a range of extracurricular learning support services tailored to meet the particular requirements of its student population.
b) The HEI has effective mechanisms for identifying student learning support needs, and for
planning, resourcing and delivering services and activities appropriate to meet those needs.

c) Student learning needs are met in a manner that is equitable, supportive and sensitive.

d) The HEI has systems in place to identify and support students at risk of not successfully completing their programs.

e) The HEI ensures that students with special needs are provided with targeted learning support services.

f) The HEI has appropriate mechanisms to assist students when first undertaking study in a higher education environment.

g) The HEI regularly reviews the adequacy of its extracurricular student learning support services and activities.

**Criterion 6.7: Teaching and Learning Resources**

The HEI ensures that teaching facilities, equipment and materials are appropriate and adequate for the effective delivery of its programs.

**Indicators**

a) The HEI has effective systems to provide and allocate teaching resources and ensure they are well maintained.

b) The HEI ensures that teaching resources and facilities are appropriate and adequate to meet the needs of its programs.

c) The HEI ensures that the physical and virtual learning environments are safe, accessible, supportive and reliable for all its students, and that the environment and facilities meet national health and safety requirements.

d) The HEI ensures that in providing learning materials national copyright laws are not breached through the pirating of software or inappropriate reproduction of copyrighted texts and journals.

e) The HEI regularly reviews teaching resources to ensure they are appropriate and effectively support teaching and learning.
## STANDARD 7: STUDENTS AND STUDENT SUPPORT SERVICES

The HEI implements a planned, well-managed approach to its provision of non-academic student support services. These services are appropriate and adequate for the HEI’s student body. Students benefit from a positive and constructive climate in which they have a range of opportunities to express their views. The HEI’s regulations specify expectations for student behaviour and are readily accessible; effectively communicated to stakeholders; and implemented consistently and fairly. Student support services are adequately resourced and effectively monitored.

### Criterion 7.1: Students and Student Support Services Planning and Management

The HEI implements a strategic approach to the planning and management of non-academic student support services that is aligned to its Mission and the particular requirements of students. Student support services are adequately resourced and monitored. They support and enhance the student experience and facilitate students’ academic achievement.

#### Indicators

**a)** The HEI’s approach to the planning and management of student support services includes the identification of student needs, including the specific needs of students in non-standard modes of study and/or studying in different locations.

**b)** The HEI ensures that the range of student support services provided and the resources devoted to them meet the requirements of the student population.

**c)** The HEI gives prominent organisational status to student support services and assigns overarching responsibility for the planning and management of those services to a senior member of staff or high level committee.

**d)** The HEI provides students with an opportunity to provide input into the planning and review of services to ensure they reflect actual student needs.

**e)** The HEI’s approach to students and student support services planning and management is regularly reviewed for effectiveness in order to ensure student support services enhance the student experience and facilitates students’ academic achievement.

### Criterion 7.2: Student Profile

The HEI undertakes ongoing analysis of the profile of its student population to inform decision making and the longer-term planning and development of student academic and support services and facilities.

#### Indicators

**a)** The HEI collects a comprehensive range of trend data on its students, including classifications related to gender, age, nationality, special needs and other key demographic characteristics.

**b)** The HEI undertakes ongoing and critical analysis of its student profile data in order to inform short-term and long-term strategic decision making related to the planning and development of academic and support services and facilities.

**c)** The HEI ensures that the spectrum of needs identified in the student population is catered for in a manner that is equitable, supportive and sensitive, including meeting the needs of international students and students with special needs.

**d)** The HEI regularly reviews its approach to monitoring its student profile to ensure its practices are efficient in gathering informative and accurate data.
Criterion 7.3: Student Satisfaction and Climate

The HEI maintains a positive and constructive student climate guided by its Values. There are formal mechanisms which facilitate student representation on appropriate HEI decision-making bodies and there is a range of opportunities for students to convene and make their views known. Analysis of student satisfaction feedback results in the improvement of services, facilities and learning opportunities for students and these improvements are communicated to students.

**Indicators**

- a) The HEI has implemented a systematic approach to measure student satisfaction and improving the student climate.
- b) Students are represented on appropriate HEI decision-making bodies at different levels within the HEI.
- c) The HEI provides students with opportunities to convene a Student Council in order to make their views known.
- d) The HEI provides structured opportunities for students to give feedback on their individual views, and actions taken in response to this feedback are communicated to students and staff.
- e) The HEI provides a range of formal and informal activities and events for its student population designed to positively impact on student welfare and enhance the student experience.
- f) The HEI regularly reviews and evaluates student satisfaction and climate and its systems for effectively ensuring student representation on formal bodies and gaining their feedback in order to address student views and make improvements.

Criterion 7.4: Student Behaviour

The HEI has regulations, policies and procedures to govern student behaviour which are readily accessible, effectively communicated to stakeholders and are implemented consistently and fairly. The regulations, policies and procedures are used to guide appropriate student behaviour. Students are provided with a Code of Conduct or equivalent which specifies students’ rights and responsibilities.

**Indicators**

- a) The HEI’s regulations, policies and procedures on student behaviour specify the steps to be taken in investigating breaches of student discipline, the responsibilities of relevant staff and committees, and the penalties which may be imposed on students.
- b) The HEI’s regulations, policies and procedures governing student behaviour are readily accessible and effectively communicated to all students and staff and are implemented consistently and fairly.
- c) Students are provided with advice on the right of appeal against student discipline processes or outcomes and the mechanisms used for appeals.
- d) The HEI takes prompt and appropriate action in relation to disciplinary matters. Full documentation of investigations is retained in secure records. Analysis of aggregate data from disciplinary cases is used to identify and address any systemic issues that require the HEI’s attention.
- e) The HEI regularly reviews its approach to managing student behaviour in order to ensure student rights, representation, discipline and students’ right to appeal is effectively implemented.

Criterion 7.5: Career and Employment Services

The HEI provides a range of well-planned, appropriate career and employment services which assist students in preparing for employment and planning their future careers.
**Indicators**

a) Career development services, such as career guidance and advice, information and counselling, support in writing CVs, job interview coaching, job placement and follow-up activities, are provided to assist students in career planning and securing appropriate employment.

b) Career and employment services are provided by qualified staff and periodic review of graduate placement statistics and feedback from alumni and employers are used to improve career and employment services.

c) The HEI has effective processes for identifying employment market needs, and for collecting and analysing data on graduate destinations and feedback from the alumni and employers.

d) Keep students informed about national initiatives related to the labour market requirements, such as those identified in national graduate surveys.

e) The HEI undertakes periodic review of its career and employment services in order to improve their effectiveness.

f) The HEI regularly reviews the effectiveness of its approach to career and employment services in order to ensure students are adequately prepared for employment.

**Criterion 7.6: Student Finances**

The HEI provides all relevant financial information to prospective and current students. It implements a systematic approach to receiving and managing fees and managing administrative functions associated with students receiving external scholarships. Financial advice is available to students and, where applicable, internal scholarships or financial support for students are governed by soundly-based and fairly implemented policies and procedures.

**Indicators**

a) The HEI ensures that all prospective and current students and other stakeholders have access to accurate information about all charges, conditions and refunds related to their studies, including program-specific costs.

b) The provision of HEI funded financial aid and scholarships is governed by policies and procedures and ensures an equitable distribution of funds to students in need. The amount of financial aid and the number of scholarships provided are periodically reviewed.

c) Where the HEI’s regulations allow students to defer payments, the conditions and dates for payments are clearly specified in formal agreements, signed by the student and witnessed.

d) The HEI ensures that all students can access financial counselling services for support and advice.

e) The HEI regularly reviews its approach to student finances, including the allocation and distribution of financial aid and scholarships, to ensure that these arrangements remain appropriate and effective in supporting students.

**Criterion 7.7: Accommodation, Catering and Transportation**

Where applicable, the HEI ensures that students have access to adequate and culturally appropriate accommodation, catering and transportation. The HEI implements policies and procedures which result in these services and facilities being effectively managed, ensures provision complies with national health and safety requirements and meets the needs of the student body.

**Indicators**

a) The HEI ensures that its students and staff have access to catering services and facilities which are culturally appropriate, healthy and affordable.

b) Where the HEI provides accommodation for students, this should: be of a good standard, be safe and secure and meet the needs of students; meet cultural norms, including those for female students; and be supervised appropriately by staff with the necessary expertise and authority.
c) Where provided, transport services provided by the HEI are safe and appropriate to meet the needs of students.
d) Students are provided an opportunity to provide feedback on the quality and appropriateness of accommodation, catering or transportation services provided by the HEI. Feedback is acted upon in order to improve services and is communicated to students.
e) The HEI regularly reviews the accommodation, catering and transportation facilities in order to ensure they remain appropriate and effective in meeting student needs.

Criterion 7.8: Medical and Counselling Facilities

The HEI implements systems and processes for ensuring all students have access to adequate and appropriate medical and counselling facilities and services which meet the needs of the student body.

Indicators

a) The HEI has effective arrangements in place to identify the needs of its student population for medical and counselling facilities and services, and provides access to a range of appropriate professional services to meet those needs.
b) Provision is made for emergency medical assistance when required.
c) The HEI ensures that medical services and student counselling, are provided by staff with appropriate qualifications and experience.
d) Medical and counselling facilities are readily accessible and the availability of these services is effectively communicated to students at the outset of their studies.
e) The HEI regularly reviews the quality, appropriateness and effectiveness of its medical and counselling facilities in order to ensure they meet student needs.

Criterion 7.9: International Student Services

Where applicable, the HEI ensures that appropriate support services are provided for international students during their period of study in Oman and that these are tailored to meet their particular needs.

An International Student is defined as: ‘A student who has come to Oman from another country with the sole intention of gaining a higher education qualification in Oman’.

Indicators

a) The HEI provides a range of specific support services for international students, and ensures that information on these services is provided to international students at the outset of their studies in Oman.
b) The HEI provides access to appropriate accommodation and general welfare arrangements for international students during their period of study in Oman.
c) The HEI regularly reviews the effectiveness of its approach to the management of international student services in order to ensure the needs of these students are met.
**Criterion 7.10: Social and Recreational Services and Facilities**

The HEI’s social and recreational services and facilities are well-planned and managed and are appropriate for the student body. Cultural, social and recreational services and facilities are equitable, readily accessible and support students’ well-being and personal development.

**Indicators**

a) Opportunities are provided for students to participate in cultural activities such as clubs and societies in the arts and other fields appropriate to their interests and needs. Informal social interaction among students is facilitated through a range of formal and informal activities provided by the HEI.

b) The HEI actively supports student involvement in social and recreational activities and monitors participation rates in order to ensure activities are well attended.

c) The HEI’s policies and procedures specify how students are to be supervised when using the HEI’s social and recreational facilities.

d) The HEI regularly reviews the effectiveness of its social and recreational services, including the health and safety requirement of its facilities, in order to ensure they are appropriate and meet the needs of the student population.
STANDARD 8: STAFF AND STAFF SUPPORT SERVICES

The HEI implements a strategic approach to the planning and management of staff and staff support services which enables the effective provision of its academic and non-academic activities. The HEI implements systems and processes for staff recruitment, professional development, performance planning and review and takes deliberate steps to ensure a positive organisational climate and to support staff retention. The HEI endeavours to recruit and retain Omani academic and non-academic staff in order to support national goals for Omanisation in the higher education sector.

Criterion 8.1: Human Resources Planning and Management

The HEI implements a strategic approach to the planning and management of human resources which is aligned to its Mission and strategic objectives. The HEI implements formally approved regulations, policies and procedures which guide all aspects of human resources management. Human resource activities are adequately resourced and monitored.

Indicators
a) The HEI’s approach to human resources management includes the identification of staff needs.
b) Human resources policies and procedures are transparent and consistently and fairly implemented, comply with national requirements and, where applicable, comply with relevant HEI supervisory requirements.
c) All staff are provided with a staff handbook (or equivalent) which sets out clearly human resources policies and procedures.
d) The HEI provides delegated authority to senior staff for the planning and management of human resources.
e) The HEI appropriately funds its human resources activities to ensure it is able to recruit and retain well-qualified and experienced academic and non-academic staff and provide suitable staff support services.
f) The HEI regularly reviews the effectiveness of its approach to the planning and management of human resources in order to ensure human resources functions are adequately resourced.

Criterion 8.2: Staff Profile

The HEI ensures that its staffing profile supports the achievement of its Mission and strategic objectives, including those for scholarship and research. Staff qualifications and staffing levels are adequate to deliver the HEI’s academic programs and efficiently administer its activities.

Indicators
a) The HEI’s staff profile is appropriate in size and composition to support the full scope of its activities and reflects a diversity of age, gender and nationality.
b) The range of staff qualifications, skills and expertise match the HEI’s academic, administrative and student support requirements.
c) The HEI’s academic staff qualifications meet the requirements of any relevant Ministries, professional bodies or affiliate HEIs.
d) Accurate academic titles are used by academic staff.
e) Where applicable, HEI policy specifies the balance of part-time and full-time academic staff and ensures all staffing arrangements comply with national laws.
f) The HEI regularly reviews its staff profile to ensure that it remains appropriate and is effective in meeting the needs of the HEI’s portfolio of academic programs, research and scholarly activities.
Criterion 8.3: Recruitment and Selection

The HEI implements systems and processes which are successful in selecting and recruiting appropriately qualified and experienced staff sufficient to adequately support the full range of its academic and administrative functions.

Indicators
a) The HEI’s policies and procedures specify the approach to advertising vacant positions, and selecting and appointing academic and non-academic staff.
b) The HEI’s recruitment processes ensure that staff are appropriately qualified, experienced and competent in order to fulfil the requirements of their posts.
c) The HEI’s most senior appointments (such as the vice-chancellor, president, rector or dean) are made by members of the governance body on the recommendation of a selection committee that includes both members of the governance body and experienced senior staff.
d) When appointing staff, measures to avoid potential conflict of interest are strictly observed.
e) The HEI appoints senior academic staff based on the recommendation of committees which include, where appropriate, external senior academics who are able to assess candidates on their ability to meet appropriate international standards of scholarship, research, qualifications and experience.
f) Candidates for employment are provided with full position descriptions and conditions of employment.
g) All newly appointed staff are provided with letters of appointment, contracts or other documents that clearly describe the terms and conditions of employment.
h) Key selection criteria used for the recruitment and selection of short-term contract and part-time, academic and non-academic staff are consistent with those used for full-time academic and non-academic staff.
i) The HEI regularly reviews its approach to the recruitment and selection of staff to ensure that it remains appropriate, transparent, and effective and all vacancies are filled quickly and in accordance with need.

Criterion 8.4: Staff Induction

The HEI implements a systematic approach to the induction of all newly appointed staff to ensure their familiarity with the HEI’s academic and administrative systems and processes which enables them to successfully fulfil their roles and responsibilities.

Indicators
a) The HEI’s staff induction policy and procedures specify those responsible for providing staff induction and outline the range of formal induction activities to be implemented consistently across the institution.
b) Newly appointed staff are provided with a structured orientation program to ensure familiarity with the institution, its services, programs and priorities.
c) The HEI provides all new staff with a handbook or similar resource which specifies the HEI’s Mission, and provides copies of, or links to, policies and guidelines to assist staff throughout their period of employment.
d) Induction into the HEI for part-time or short-term contract academic and non-academic staff is consistent with the induction provided to full-time academic and non-academic staff.
e) The HEI regularly reviews its staff induction policy, procedures and activities to ensure that these remain appropriate and effective.
**Criterion 8.5: Professional Development**

The HEI implements a systematic approach to the professional development of academic and non-academic staff which is adequately resourced and enables all staff to successfully fulfill their roles and responsibilities. Professional development opportunities align with needs identified in performance planning and review.

**Indicators**

- The HEI’s staff professional development policy and procedures are consistently applied for all staff.
- Academic staff members are provided access to ongoing professional development opportunities designed to enhance their teaching skills, maintain currency with scholarship in their discipline and to promote reflection on their professional practice.
- Non-academic staff members are provided with access to ongoing professional development opportunities to support them in their role and maintain currency in their area of expertise or develop new skills.
- Where applicable, students undertaking teaching duties (for example, assisting with practical sessions and tutorials or offering technical support) receive appropriate training, support and mentoring for their own professional development and to enhance the experience of students they are teaching or supporting.
- The HEI regularly reviews its approach to staff professional development to ensure that it remains appropriate and effective.

**Criterion 8.6: Performance Planning and Review**

The HEI implements a systematic approach to performance planning and review which is supported by performance planning policy and procedures that are readily accessible and communicated to staff. The approach enables the review of staff performance, the setting of staff performance objectives, and the identification of professional development needs.

**Indicators**

- The HEI has in place a performance planning and review policy and procedures for undertaking staff performance review which are readily accessible and effectively communicated to all staff.
- The HEI ensures that all staff members participate in performance planning and review at least annually, with the opportunity to review performance, set work performance objectives and identify professional development needs.
- The HEI ensures that all academic and non-academic staff members are included in the performance planning and review process regardless of their employment status (full-time/part-time, short-term/long-term contract/permanent tenured positions).
- Appropriate arrangements are in place for the performance planning and review of the HEI’s most senior appointments (such as the vice-chancellor, president, rector or dean) by members of the governance body.
- The HEI ensures that formal performance planning and review outcomes are documented and retained confidentially. Staff members have the opportunity to put their own comments on file, including points of disagreement. Staff members have an opportunity to appeal a negative performance review outcome.
- The HEI regularly reviews the effectiveness of its approach to performance planning and review to ensure that it remains appropriate and effective.
Criterion 8.7: Promotion and Other Incentives

The HEI implements systems and processes for the promotion of staff and provision of other rewards and incentives. The approach is transparent and appropriate and supported by policies and procedures for the recognition of staff achievement.

Indicators

a) The HEI’s policies and procedures effectively govern staff promotion and other incentives. The criteria for promotion and other incentives are clearly specified, readily accessible and effectively communicated to all staff.

b) Promotion and the provision of rewards or other incentives procedures are fair and equitable.

c) The HEI’s policies for recognition and reward through promotion or other incentives are based on a model of equitable work distribution and merit, and use appropriate, transparent and fair procedures.

d) In the case of academic staff, promotion criteria are appropriate and may include for example: quality of teaching; research and scholarly activity; performance improvement; service to the HEI; and service to the community.

e) The HEI regularly reviews the effectiveness of its approach to promoting staff and the provision of other incentives to ensure it appropriately recognises and supports staff achievement.

Criterion 8.8: Severance

The HEI implements a systematic approach to managing staff severance which is fair and transparent.

Indicators

a) The HEI’s severance policy and procedures are aligned to national labour laws and clearly specify the criteria/circumstances for the termination of staff employment.

b) The HEI’s severance policy and procedures are guided by the principles of fairness, transparency and equity of treatment, and include the provision for staff appeal.

c) Exit interviews are conducted with staff prior to the end of their employment in order to gain feedback related to the HEI’s terms and conditions of employment.

d) There are formal mechanisms for the management, retention or disposal of former staff records.

e) The HEI regularly reviews severance policy and procedures, including appeals and exit records and feedback from staff, to ensure that they are well managed, appropriate, transparent and fair.

Criterion 8.9: Staff Organisational Climate and Retention

The HEI creates and sustains a positive organisational climate for staff through the implementation of appropriate mechanisms and activities. There are formal systems which support staff representation on appropriate HEI decision-making bodies and there are a range of opportunities for staff to convene and make their views known. Staff grievance policies and procedures are implemented and readily accessible by all stakeholders. There is evidence of the positive organisational climate supporting retention of good quality staff.

Indicators

a) The HEI creates and sustains a positive staff organisational climate through a range of mechanisms and activities in order to attract and retain good quality staff.

b) A broad range of staff representing different levels are represented on appropriate HEI decision-making bodies.

c) The HEI provides structured opportunities for staff to give feedback on an appropriate range of
Criterion 8.10: Omanisation

The HEI has an appropriate strategy for the Omanisation of its staff which is informed by Omanisation policies where applicable. This strategy is implemented through a planned approach to the recruitment and retention of Omani academic and non-academic staff at all levels in the institution and supports national goals for Omanisation in the higher education sector.

Indicators

a) The HEI’s planned approach to the Omanisation of its staff is informed by set national targets for the sector; the HEI demonstrates an ongoing commitment to achieving national targets for the recruitment of Omani academic and non-academic staff.
b) The HEI has implemented a rigorous plan for the Omanisation of its workforce. The plan identifies strategies for the appointment of Omani staff with appropriate qualifications, experience and skills to positions at various levels across the institution.
c) Professional development opportunities are provided to Omani staff to ensure their ongoing development and retention.
d) The HEI regularly reviews its Omanisation strategy in order to evaluate its effectiveness in meeting targets.

d) The HEI has implemented staff grievance policies and procedures that are fair and impartial and ensure that all staff are treated equitably.
e) The HEI evaluates the staff organisational climate by collecting and analysing data and benchmarking outcomes. Required improvements are implemented, where necessary, to enhance staff satisfaction and the organisational climate.
f) The HEI provides a range of formal and informal activities and events for staff designed to positively impact on staff experience in the workplace.
g) A range of mechanisms are used in the HEI’s review of its approach to managing and evaluating staff organisational climate and staff retention, including gathering and reviewing data on staff turnover in order to secure staff retention and maintain a positive and constructive climate.
STANDARD 9: GENERAL SUPPORT SERVICES AND FACILITIES

The HEI implements a planned, well-managed approach to the provision of general support services. Public relations and marketing effectively promote the HEI to external stakeholders and the wider community. Communication services support effective internal and external information sharing. General facilities are effectively managed and adequately meet the needs of students, staff and other stakeholders.

Criterion 9.1: General Support Services and Facilities Planning and Management

The HEI implements a strategic approach to the planning and management of general support services and facilities which is aligned to its Mission and strategic plan. General support services and facilities comply with all relevant national codes and regulations and meet the needs of stakeholders.

Indicators

a) The HEI’s general support services and facilities support its Mission and goals, its portfolio of academic programs, its research or scholarly activities and any other HEI actions, initiatives or activities. The HEI ensures the availability of appropriate general support services and facilities required by students and staff.

b) The HEI effectively implements a long-term strategy for the planning, development and management of facilities, equipment and services to meet the needs of students, staff and other stakeholders. Planning is carried out in consultation with stakeholders and is responsive to their requirements.

c) Students and staff have opportunities for religious observance consistent with Islamic beliefs and traditions; expressions of other religious beliefs are respected.

d) The HEI regularly reviews the effectiveness of its approach to general support services and facilities management, including the use of staff and student feedback, in order to evaluate the fitness for purpose of services and facilities.

Criterion 9.2: Public Relations and Marketing

The HEI implements systems and processes to accurately and truthfully promote its activities to external stakeholders. Public relations and marketing activities are used to maintain and enhance the HEI’s reputation.

Indicators

a) The HEI has in place an effective strategy for promoting the HEI’s programs and achievements. The promotion strategy is evaluated against benchmarked targets.

b) The HEI’s marketing strategy is appropriately funded and effectively implemented in order to attract students and raise the HEI’s profile, locally, regionally, nationally and internationally (as appropriate).

c) The HEI’s public relations and marketing activities meet high ethical standards, and accurately and truthfully represent the HEI’s academic goals, programs and services to students, prospective students and other stakeholders.

d) The HEI monitors public views and published media reports about its operations and takes actions, where necessary.

e) The HEI undertakes a periodic review of its public relations and marketing activities in order to evaluate their effectiveness in promoting the HEI to stakeholders.
**Criterion 9.3: Communication Services**

The HEI implements systems and processes for the facilitation of internal and external communication which support efficient and effective communication with stakeholders.

**Indicators**

a) Appropriate systems are in place to facilitate communication with stakeholders within the institution; the HEI effectively communicates institutional issues, plans and/or new developments among and between its internal communities.

b) The HEI’s communications policy and procedures support effective communication with internal and external stakeholders.

c) The HEI has a language policy, which sets out the HEI’s approach to the language of use (for example English or Arabic or both) in documentation for staff, students and stakeholders. The policy is consistently applied.

d) The HEI periodically reviews its communication services, systems and processes in order to evaluate their effectiveness.

**Criterion 9.4: Facilities Management**

The HEI implements a strategic approach to facilities management and ensures that all facilities are well-maintained, meet the needs of staff and students, and satisfy the requirements of all relevant national laws. Where services are outsourced, the HEI maintains oversight of these to ensure that they are appropriate and effectively delivered.

**Indicators**

a) The HEI has a comprehensive strategy for the planning and management of its facilities and grounds.

b) The HEI ensures that its facilities and grounds meet national health and safety requirements, with adequate provision for the personal safety and security of all students and staff. The HEI ensures that facilities provided by external parties meet health and safety requirements, and also ensures that they are of an appropriate quality.

c) The HEI’s services, such as cleaning, waste disposal, minor maintenance, safety and environmental management and air conditioning are overseen effectively by senior staff.

d) The HEI ensures that there is adequate funding for required facilities and services.

e) The HEI regularly reviews its approach to facilities management and the quality of facilities provided, including through the use of staff and student feedback, in order to evaluate the effectiveness of facilities management and the fitness for purpose of facilities.
PART C: ACCREDITATION OUTCOME AND RATING AGAINST STANDARDS AND CRITERIA
5. **Institutional Standards Ratings**

5.1. **How to Rate against the Criteria**

All nine standards, where applicable, have to be Met for an HEI to be accredited. In order to show that a standard has been Met, it is normally expected that all the related criteria are Met. In some cases, up to two criteria per standard may be Met and the standard may be considered to be Met. This Partially Met rating has been introduced to allow the flexibility to recognise an HEI’s efforts in identifying and addressing opportunities for improvement. In this way, the Partially Met rating acts in a similar way to an Affirmation in Quality Audits and positively acknowledges efforts made by HEIs to identify and address opportunities for improvement. A Partially Met rating is applied when the ISA Panel has confidence that through the deliberate actions the HEI has implemented, the HEI will achieve sustainable results that meet the requirements of the criterion in the future. The Partially Met rating is only applicable where not fully meeting the requirements of the criteria does not have a significant impact on the overall achievement of the standard.

HEIs must explain why they have rated a criterion or standard as Not Applicable to their context. The ISA Panel will then verify this rating based on the HEI’s context.

Both HEIs and ISA Panels are required to rate criteria. The criteria rating will determine the standards ratings and the Accreditation Outcome. The same rating scale is used by both HEIs and ISA Panels. HEIs are encouraged to critically self-evaluate their current performance against all applicable criteria and standards in their ISAA. The OAAA’s internationally benchmarked criteria and standards represent what is normally expected in higher education provision. The ISA Panel will rate the HEI’s performance against the expectations set out in the OAAA criteria and standards.

Criteria ratings are numerical; the scale ranges from 0-4. There are three possible criteria ratings (rating 2, 3 or 4) which are applied to indicate the requirements of the criterion being Met.

A rating 4 indicates that the HEI self-assessment or ISA Panel has assessed the HEI as consistently meeting the requirements of the criterion and exceeding the requirements most of the time. The HEI has also demonstrated that the results are deliberate in that they have been well planned and well executed; and the results are sustainable in that the performance levels are likely to be maintained for the duration of the accreditation period. This rating also reflects innovative or best practice related to the criterion.

A rating 3 indicates that the HEI self-assessment or ISA Panel has assessed the HEI as consistently meeting the requirements of the criterion and exceeding the requirements some of the time. The HEI has also demonstrated that the results are deliberate in that they have been well planned and well executed; and the results are sustainable in that the performance levels are likely to be maintained for the duration of the accreditation period. A rating 3 is indicative of good practice.

A rating 2 indicates that the HEI self-assessment or ISA Panel has assessed the HEI as meeting the requirements of the criterion most of the time. The results are deliberate in that they have been planned and executed as planned; and the results are sustainable in that the performance levels are likely to be maintained for the duration of the accreditation period. A rating 2 is indicative of practice that meets international norms and expectations.


19. Aggregated data on self-rating against criteria and standards by HEIs may be used by OAAA for research purposes. Outcomes of this research may be published.
Criteria may be rated 1 resulting in a *Partially Met* outcome. This indicates that the HEI self-assessment or ISA Panel has assessed an HEI as having met some of the criterion’s requirements but not all requirements at the time of the Standards Assessment. However, the HEI self-assessment or ISA Panel has assessed the HEI as demonstrating a commitment to fully meeting all requirements in the future, and not meeting all the requirements of the Standards Assessment does not preclude the standard from being met. In other words, there are two conditions for a criterion rating of 1 to be awarded:

- There is evidence that all the requirements of the criterion will be met in the future;
- Not meeting all the requirements of the criterion at the time of the Standards Assessment does not prevent the standard from being met.

A standard may still be rated as *Met* with up to a maximum of two criteria assessed as *Partially Met* (irrespective of the number of criteria forming the standard) as long as it is determined that not fully meeting the requirements of the two criteria combined does not have a significant impact on the overall achievement of the standard and preclude the standard from being met. The *Partially Met* rating is not applicable to ratings against standards.

A rating of 0 results from the HEI self-assessment or ISA Panel having assessed the HEI as not meeting the requirements of the criterion. If any applicable criterion is rated 0, the standard will be rated *Not Met*. The criteria ratings are detailed in Table 3 below.

### Table 3: Criteria Ratings, Descriptions and Outcomes

<table>
<thead>
<tr>
<th>Criterion Rating</th>
<th>Description</th>
<th>Outcome</th>
</tr>
</thead>
</table>
| 4                | • Provision or practice consistently meets the requirements of the criterion and exceeds the requirements most of the time.  
• Results against the criterion are achieved through a deliberate approach and are sustainable.  
• Performance is innovative and/or indicative of best practice. | Met |
| 3                | • Provision or practice consistently meets the requirements of the criterion and exceeds the requirements some of the time.  
• Results against the criterion are achieved through a deliberate approach and are sustainable.  
• Performance is indicative of good practice. | Partially Met |
| 2                | • Provision or practice meets the requirements of the criterion most of the time.  
• Results against the criterion are achieved through a deliberate approach and are sustainable.  
• Performance is satisfactory. | |
| 1                | • Provision or practice does not fully meet the requirements of the criterion but the HEI has demonstrated an appropriate commitment to meeting the requirements of the criterion in the future.  
• Not fully meeting the requirements of the criterion does not have a significant impact on the overall achievement of the standard or, on its own, preclude the standard from being met.  
• Performance is expected to be at least satisfactory in the future. | |
| 0                | • Provision or practice does not meet the requirements of the criterion.  
• Performance is unsatisfactory. | Not Met |
| NA               | • The criterion is not applicable to the HEI’s context. | Not Applicable |

**Note:**
1) The highest applicable rating is awarded.
2) For a criterion rating to be awarded, all elements of the criterion description should normally apply.
3) Meeting the requirements of the criterion most of the time does not mean meeting it in most of the departments of a college or meeting it in most colleges of a university, etc.
5.2. How to Rate against the Standards

Standard ratings are not numerical; the scale ranges from Unsatisfactory to Excellent. Standards are rated based on an HEI’s performance against the corresponding criteria. Criteria are rated using a numerical value ranging from 0-4. The criteria ratings for each standard are combined to determine the overall rating for the standard as shown in Table 4.

**Table 4: How Criteria Ratings Determine Standard Ratings**

<table>
<thead>
<tr>
<th>Criteria Ratings</th>
<th>Leads to</th>
<th>Standard Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>More than half of the criteria are rated at least 3, at least one criterion is rated 4 and no criterion is rated 1 or 0.</td>
<td>➔</td>
<td>Excellent</td>
</tr>
<tr>
<td>More than half of the criteria are rated at least 3, no more than two criteria are rated 1 and no criterion is rated 0.</td>
<td>➔</td>
<td>Good</td>
</tr>
<tr>
<td>No more than two criteria are rated 1, and no criterion is rated 0.</td>
<td>➔</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>More than two criteria are rated 1 or one or more criterion is rated 0.</td>
<td>➔</td>
<td>Unsatisfactory</td>
</tr>
<tr>
<td>The criteria of the standard are not applicable to the HEI’s context.</td>
<td>➔</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

**Note:**
1) The highest applicable rating is awarded.
2) NA criteria are excluded when rating the standard.

There are three standard ratings for *Met*: Excellent, Good and Satisfactory. These ratings are described in Table 5 below together with descriptions of Unsatisfactory and Not Applicable.

**Table 5: Standard Ratings, Descriptions and Outcomes**

<table>
<thead>
<tr>
<th>Standard Rating</th>
<th>Description</th>
<th>Standard Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>The HEI exceeds the requirements of more than half of the applicable criteria of a standard and meets the requirements of rest of them. The HEI has demonstrated innovative and/or best practice in at least one of the criteria.</td>
<td>Met</td>
</tr>
<tr>
<td>Good</td>
<td>The HEI exceeds the requirements of more than half of the applicable criteria of a standard. The HEI either meets the rest of the applicable criteria; or meets the rest of them except for up to two criteria which the HEI partially meets and demonstrates commitment to fully meeting in the future.</td>
<td></td>
</tr>
<tr>
<td>Satisfactory</td>
<td>The HEI either meets the requirements of all the applicable criteria of a standard; or meets all the applicable criteria except for up to two criteria which the HEI partially meets and demonstrates commitment to fully meeting in the future.</td>
<td>Not Met</td>
</tr>
<tr>
<td>Unsatisfactory</td>
<td>The HEI does not meet the requirements of one or more of the applicable criteria of a standard and/or partially meets more than two of the applicable criteria.</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>NA</td>
<td>The standard is not applicable to the HEI’s context.</td>
<td></td>
</tr>
</tbody>
</table>

Table 6 sets out how, in turn, the standards ratings determine the final Accreditation Outcome. All applicable standards must be met in order for the HEI to be accredited. Accredited with Distinction/Merit in one or more standards is achieved when the HEI has been rated Excellent/Good in one or more standards. Those HEIs which have not met the requirements will be placed on probation and, if after Standards Reassessment, continue to not meet the standards, will not be accredited (refer to Sections 8 and 9).
Table 6: How Standards Ratings Determine Accreditation Outcomes

<table>
<thead>
<tr>
<th>Standards Ratings</th>
<th>Leads to</th>
<th>Accreditation Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>All standards are rated at least Satisfactory. Any standard which is rated Excellent is recognised with Distinction. Any standard which is rated Good is recognised with Merit.</td>
<td></td>
<td>Accredited with Distinction/Merit in [name of Standard(s)]</td>
</tr>
<tr>
<td>All standards are rated Satisfactory.</td>
<td></td>
<td>Accredited</td>
</tr>
<tr>
<td>One or more standard is rated Unsatisfactory.</td>
<td></td>
<td>On Probation</td>
</tr>
<tr>
<td>One or more standard is rated Unsatisfactory (following Institutional Standards Reassessment)</td>
<td></td>
<td>Not Accredited</td>
</tr>
</tbody>
</table>

6. Accreditation Outcomes

Each accreditation outcome is clearly defined in order to ensure stakeholders understand the HEI’s accreditation status and any implication the outcome may have for the HEI in the future. HEIs that are Accredited or Accredited with Distinction/Merit in one or more Standards may choose to use this accreditation status in promotional activities or materials. The potential Accreditation Outcomes are described in Table 7 below:

Table 7: Accreditation Outcomes and Descriptions

<table>
<thead>
<tr>
<th>Accreditation Outcome</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accredited with Distinction/Merit in [name of Standard(s)]</td>
<td>The HEI meets all applicable national institutional standards and has demonstrated excellent/good performance in [name of Standard(s)].</td>
</tr>
<tr>
<td>Accredited</td>
<td>The HEI meets all applicable national institutional standards.</td>
</tr>
<tr>
<td>On Probation</td>
<td>The HEI does not meet one or more of the applicable national institutional standards. The HEI will undergo Institutional Standards Reassessment following a defined period of probation.</td>
</tr>
<tr>
<td>Not Accredited</td>
<td>The HEI has failed to demonstrate that it meets the applicable national institutional standards. The HEI has already completed one or more periods of probation and undergone Institutional Standards Reassessment at least once.</td>
</tr>
</tbody>
</table>

7. Outcome Deferred

ISA Panels may recommend to the OAAA Board in v5 of the report (refer to Section 21.5) that the Accreditation Outcome be deferred for a period of up to three months to allow the HEI to finalise processes or obtain necessary documentation required as evidence that the requirements of one or more standards are Met. The Accreditation Outcome will only be deferred if:

- The HEI is considered able to provide the necessary evidence that it has Met the standard in a relatively short period of time; and
- Meeting the requirements of the one or more standards in question will result in the HEI being Accredited (or Accredited with Distinction/Merit in one or more standards).

The actions the HEI is required to complete in order to demonstrate it has Met the requirements of the standard(s) will normally be administrative (for example, signatures may not be included on formal contracts or Memoranda of Understanding but the necessary documentation can be corrected in a relatively short period of time). Once the required evidence has been provided to the ISA Panel, and the ISA Panel approves it as evidence that the standard has been Met, the Accreditation Outcome can be released. The advantage of such an outcome is that where evidence that a standard (or standards) has been Met can be provided by the HEI in a relatively short period of time, the HEI will avoid being placed on probation. It must be emphasised that this outcome will only be applied where the ISA Panel has identified actions can be implemented quickly by the HEI in order to meet the full requirements of the standards and that by meeting these requirements, the HEI will be accredited (or accredited with Distinction/Merit in one or more standards). This provision may not be used simply to improve criterion or standard ratings.
in the case of an HEI meeting all the applicable standards. In the unlikely event that the HEI is not able to demonstrate meeting the full requirements of the standards in a period of up to three months, the HEI is placed on probation; no extension to the agreed outcome deferred period is permitted.

8. **Probation**
If an HEI demonstrates unsatisfactory performance against one or more of the standards, the ISA Panel will recommend to the OAAA Board that the HEI be placed on probation. The length of the probation period (up to one year) will depend on the number of standards that were Not Met and the amount of time that the ISA Panel considers is required for the HEI to meet the standards. This time period will be approved by the OAAA Board. The Accreditation Outcome of On Probation will be published on the OAAA website together with the HEI’s ratings for all standards and criteria. The Education Council and the HEI’s supervising Ministry (if applicable) will be notified accordingly. After probation, an HEI will submit a Standards Reassessment Application. If, after Standards Reassessment, standards have again not been fully Met but good progress has been made, the probation period may be extended for up to one year. If insufficient progress has been shown, then the OAAA will award an outcome of Not Accredited and the OAAA Institutional Accreditation process will be terminated. The OAAA will advise the Education Council and the HEI’s supervising Ministry (if applicable) accordingly. Together these bodies may decide to terminate the HEI’s license to operate.

9. **Institutional Standards Reassessment**
An HEI placed on probation is required to undergo Standards Reassessment up to a year after the initial Standards Assessment has taken place. This may be followed by a second Standards Reassessment up to a year following this. In each case, the Standards Reassessment Panel will recommend the length of time it considers the HEI will need to prepare for an Institutional Standards Reassessment. During Standards Reassessment, only the following criteria will be re-assessed:

- All criteria which were Not Met at the time of the initial Standards Assessment, or, where applicable, the preceding Standards Reassessment.
- All Partially Met criteria associated with Standards which were not met in the initial Standards Assessment or, where applicable, the preceding Standards Reassessment. (Partially Met criteria associated with Standards which have been met will not be reassessed).

The possible results of an initial Standards Reassessment are:

- If the requirements of the criteria which are reassessed now fulfil the requirements for the standards to be Met (up to two criteria may still be Partially Met), the ISA Panel will recommend to the OAAA Board that the HEI be accredited.
- If the requirements of the criteria which are reassessed still do not fulfil the requirements for the standards to be Met, but the ISA Panel considers good progress has been made and the criteria/standards are likely to be Met in the near future, the ISA Panel will recommend to the OAAA Board that the probationary period be extended and the HEI will undergo a further Standards Reassessment at a time to be approved by the OAAA Board. The maximum period that probation can be extended for is one year.
- If the requirements of the criteria which are reassessed do not fulfil the requirements for the standard(s) to be Met, and the ISA Panel determines that the HEI is unable to meet the requirements of the standards and criteria in the near future, the ISA Panel will recommend to the OAAA Board that the HEI not be accredited. The OAAA will award an outcome of Not Accredited and the OAAA Institutional Accreditation process will be terminated. The OAAA will advise the Education Council and the HEI’s supervising Ministry (if applicable) accordingly.
Depending on the nature and number of criteria requiring reassessment, the reassessment may be undertaken by desk-top analysis or involve a standard Reassessment Visit, or both. For each ISA Reassessment, a Reassessment Panel will be convened accordingly. This will have a minimum of two external reviewers; these reviewers may or may not have been involved in the initial Standards Assessment or, where applicable, the previous Standards Assessment.
PART D: THE SELF-ASSESSMENT
10. The Self-Assessment

10.1. Institutional Standards Assessment Principles

Standards Assessment is based on the evaluation of both qualitative and quantitative evidence. HEIs are encouraged to use ADRI (refer to Section 25) and are expected to provide evidence to show the effectiveness of the systems in place in order to meet the standards. Results are important in evaluating whether a standard has been Met or Not Met, as is evidence of sustainability.

Institutional Accreditation Stage 1 Quality Audit is the prerequisite for the Stage 2 Standards Assessment. Once an HEI is accredited the institution then enters a five-year accreditation cycle which only involves Standards Assessment. This means that HEIs only undergo institutional Quality Audit once, prior to their first Standards Assessment; thereafter, they only undergo Standards Assessment for Reaccreditation (and, if applicable, Standards Reassessment following probation).

As part of the first Standards Assessment only, an HEI’s responses to formal conclusions made in the Quality Audit Report are considered. HEIs are expected to include comment on actions with regard to all formal conclusions in the quality Audit Report (Recommendations, Affirmations and Commendations) related to the corresponding Standards Assessment criteria. The OAAA Review Director will check that all the HEI’s Quality Audit Report formal conclusions have been addressed in the HEI’s ISAA. The Review Director will instruct the ISA Panel to consider the HEI’s response to formal conclusions made in the Quality Audit Report and assess this in light of its impact on the requirements of the overall criteria. However, for Reaccreditation, there will be no preceding Quality Audit and therefore no requirement for Quality Audit conclusions to be considered.

The standards endorse national protocols, guidelines and strategies; for example, national directives from bodies such as the Directorate General, Private Universities and Colleges (DG PUC), MoHE, which calls for all private institutions to abide by national health and safety regulations; and other national recommendations such as the need for an understanding of human rights and entrepreneurial skills to be addressed in higher education programs.

10.2. Project Management

There are many different ways in which an HEI may manage its project to undertake its ISAA – the OAAA does not require one specific approach. However, the HEI must recognise this comprehensive process that takes considerable time and resources. The OAAA Training Module Preparing a Self-Study Portfolio20 which provides advice on how to prepare a Quality Audit Portfolio is also applicable to the preparation of an ISAA. One possible method for conducting the self-assessment is set out in the bullet points below:

- Form a high level Standards Assessment Steering Committee well in advance and communicate this initiative and its purpose to the whole HEI community.
- Form a working group for each standard. The chairperson of each working group should is on the Standards Assessment Steering Committee.
- For the first Standards Assessment, review all Commendations, Affirmations or Recommendations made in the Quality Audit Report and include these as part of the self-assessment.
- All members of the working groups should become familiar with this ISAM, especially those sections which explain how to conduct a self-assessment (refer to Part B: Institutional

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20 An ‘ISAA’ is completed using an ISAA Template. The training module predates this Institutional Standards Assessment Manual; where there are inconsistencies between this manual and the training module, then this manual takes precedence; refer to http://www.oaaa.gov.om/Training.aspx#Train
Each working group starts by collecting all the relevant external and internal directives, statements of intent, etc. pertaining to each standard. Those documents can be used as the starting point for the ADRI analysis. The working group should not operate exclusively, but should involve other people wherever appropriate.

- Write up the findings in a draft ISAA. The Quality Director (or equivalent) has responsibility for bringing all the sections together in a coherent, overall draft ISAA and ensure consistency in style, tone and presentation.
- An application will not be considered complete unless each applicable criterion and standard is given a rating. Ensure all applicable criteria and standards have been realistically rated (refer to Section 5). All ratings must be justified in the commentary and Supporting Materials used to support the justification.
- The Standards Assessment Steering Committee reviews the draft ISAA and, in addition to helping improve the document generally, identifies which opportunities for improvement have been identified as a result of the self-assessment. This will provide an opportunity for the HEI to implement processes or practices which ensures it meets the standards prior to the external Standards Assessment (providing time for this activity is one reason why an ISAA can take many months to prepare).
- Finalise the ISAA. Ensure it has been professionally edited and then approved by the governing body.

Points to keep in mind when preparing the ISAA include:

- It is recommended that the ISAA is be championed by the very highest levels of the institution.
- The ISAA, as with quality assurance and quality enhancement generally, should involve many people. A team approach is recommended.
- The ISAA will take time. There is a large amount of information to be collected, analysed, interpreted and reported in order for the HEI to have an evidence-based approach to rating its performance against the criteria and standards.
- The ISAA must be evaluative, not just descriptive. The idea is to find out not just what is happening, but how well it is happening. If an HEI thinks it is doing something well, can it prove this and show that the results are deliberate and sustainable?
- The ISAA will require valid and reliable quantitative and qualitative information. Remember – claims require evidence; impressive claims require impressive evidence.
- The ISAA requires HEIs to rate their performance against all applicable criteria and standards. The ratings must be realistic and based on evidence. The rating given to each criterion and standard should accurately reflect the HEI’s performance in line with the descriptions of criteria ratings (0-4) and standards ratings (Unsatisfactory, Satisfactory, Good or Excellent) (refer to Part C).
- It is expected that the ISAA criteria ratings will usually result in a rating 2 for most criteria. It is important to stress that a rating 2 means the HEI has achieved a level of operation that is consistent with internationally benchmarked standards.
- If done well, the ISAA will also have a value to the HEI independent from its purpose as the submission document for Institutional Standards Assessment.
- The ISAA and Supporting Materials must be checked for plagiarism. Any plagiarism detected by the OAAA will be dealt with according to OAAA’s policy (refer to the OAAA Policy on Plagiarism21).
- THE ISAA MUST BE BASED on EVIDENCE! (refer to Section 27).

21 [http://www.oaaa.gov.om/About.aspx#OAAAPolicy]
11. The Institutional Standards Assessment Application (ISAA)

11.1. The Format of the ISAA
The ISAA template can be downloaded from the OAAA website\(^{22}\). All sections of the template must be completed and submitted by the HEI.

11.2. Official Declaration
The declaration is signed by the HEI’s most senior representative. The declaration states that the information contained in the ISAA is complete and accurate and the HEI adheres to all applicable laws and regulations. The HEI also declares that the preparation of the ISAA conformed to all protocols as set out in the Institutional Standards Assessment Manual.

Upon receipt of the ISAA, the OAAA Review Director will conduct an ‘ISAA Completeness Check’ (refer to Section 14.3).

11.3. Completing the ISAA

11.3.1. HEI Overview
The HEI overview should provide a context for the HEI. It should be brief and succinct. The ISA Panel will not rate this information in any way, but it will help the ISA Panel understand the context in which the HEI operates and the constituencies it serves.

11.3.2. Rating and Commentary against Each Applicable Criterion
The HEI is required to rate its own performance against each applicable criterion (refer to Part C for information on how to apply ratings against applicable criteria and standards). The commentary should objectively explain the HEI’s related processes and practices and describe how they meet the requirements of the standards.

An HEI is expected to include references and links to key evidence (such as policies and procedures and analysis of survey findings), which support its claims and self-assessment rating made against each criterion. The self-assessment template has a free text section under each criterion in which the HEI should explain how it addresses the requirements of the criterion. The free text section is not word limited, but it is advisable to ensure its commentary is focused, succinct and can be supported by evidence. Items of evidence may be relevant to a number of different criteria. Where the same evidence is used to demonstrate more than one criterion has been Met, the HEI should cross reference materials; no Supporting Material should be submitted more than once.

A number of templates are provided as tools to assist the recording and reporting of data (refer to ISAM Appendix Q or ISAA Appendix A). HEIs may format their own data but all applicable data fields in the templates must be included.

All claims made against the criteria must be defensible, be supported by evidence (either qualitative or quantitative) and based on fact. The ISA Panel focuses particular attention on results that have been achieved through the implementation of defined systems, processes and practices. HEIs are encouraged to use ADRI as a tool to review relevant processes and evaluate their effectiveness (refer to Section 25). The Oxford English Dictionary defines ‘effective’ as: ‘successful’ in producing a desired or intended result’.\(^{24}\), The OAAA has adapted this definition to its use of “effective” in the context of its institutional accreditation process to mean, where appropriate, ‘successful in producing a deliberate and sustainable result that meets the

\(^{22}\) http://www.oaaa.gov.om/InstitutePdf/ISAA%20template%20draft%20v1%20for%20circulation.docx

\(^{23}\) The OED defines ‘successful’ as accomplishing a desired aim or result; ‘desired’ as wanting or wishing something to happen; ‘intended’ as planned or meant; and ‘result’ as a consequence or outcome http://www.oxforddictionaries.com/definition/english/successful

\(^{24}\) http://www.oxforddictionaries.com/definition/english/effective
requirements of the criteria and standards’. The ISA Panel looks for evidence that results obtained by HEIs against the criteria are underpinned by effective systems and are therefore sustainable.

In line with the ADRI approach, the commentary should include summary information relevant to each criterion in relation to:

- key objectives of relevant plans, procedures or similar (Approach);
- consistent implementation of policies, plans, procedures or similar across all the relevant areas of activity (Deployment);
- the outcomes achieved by applying a deliberate approach (Results);
- any improvements made to the HEI’s approach related to the criterion as a direct result of analysing data (Improvement).

The commentary should be supported with relevant evidence that is submitted with the ISAA (sequentially labelled as detailed in Section 11.3.7); and a list of other related evidence that can be used to demonstrate that the HEI meets each applicable criterion and standard. The HEI should attach the evidence to the Application so that it is made immediately accessible to the OAAA and the ISA Panel.

The criterion indicators provided describe the typical characteristics of each criterion and can be a useful aid for the HEI in the selection of sufficient evidence to show that it has appropriate arrangements in place and that it is achieving desirable outcomes against the criteria.

The primary consideration for HEIs in submitting evidence should be the adequacy and relevance of each item of evidence, not the quantity of evidence. There is no maximum number of items of supporting documentation that may be submitted against each criterion, but the OAAA asks that HEIs only submit items which have direct relevance to the criteria.

The OAAA is interested in an HEI demonstrating how systematic it is in meeting a standard at an organisation-wide level and across all the HEI’s operations. The OAAA is also interested in evidence of benchmarking outcomes that demonstrate the HEI’s performance against the requirements of the criteria and standards compared with the performance of other similar HEIs nationally or internationally.

11.3.3. Rating and Commentary against Each Applicable Standard

The overall rating and summary statement for each standard can only be made after all the criteria have been rated. When ratings and commentary have been applied to all the standard’s criteria, an HEI is required to fill in the summary rating table for the standard in the ISAA template. It should then rate the standard in accordance with the guidance detailed in Part C.

Each standard in the ISAA template requires a summary statement outlining how the HEI meets the standard. Not all standards may be applicable to all HEIs; only those standards and criteria which are applicable to the HEI’s context should be addressed. Commentary against each applicable standard should only include summary information directly related to the standard and the standard’s criteria.

11.3.4. Supporting Materials

The ISAA should be submitted with a number of Supporting Materials. The purpose of these materials is to help the ISA Panel verify claims made in the ISAA and to facilitate its understanding of the HEI. There are two sets of Supporting Materials – a required set and an additional set which the HEI will provide to support its self-assessment. The OAAA Review Director will check that all Supporting Materials referenced in the ISAA are included as attachments (refer to 14.3). An ISAA will not be considered complete unless all applicable required Supporting Materials are submitted with the application.
11.3.5. **Required Supporting Materials**
The following “Required Supporting Materials” must be submitted together with the ISAA, if applicable:

- Institutional establishment and licensing information (such as Decree establishing the HEI or similar);
- official licences for all programs offered;
- current catalogue (prospectus or similar);
- most recent Annual Report; and
- a campus map.

11.3.6. **Additional Supporting Materials**
The HEI is required to submit evidence to support claims made in the ISAA. All materials submitted should be referenced in the main text of the ISAA and be directly applicable to the standards and criteria; overwhelming the ISA Panel with information that is not relevant is not productive. Standards Assessment Panels will look for evidence that the documents, policies and procedures related to practice are fully embedded in the HEI’s systems.

11.3.7. **Indexing Supporting Materials**
Standards Assessments will involve a substantial number of items of evidence. It is important to maintain a clear indexing system to assist with managing these materials, and it is helpful if the OAAA and the HEI use the same system to facilitate communication. All Supporting Materials, whether submitted with the ISAA or thereafter, should be indexed using the following convention:

- SM001 Institutional establishment and licensing information
- SM002 Official licenses for all programs offered
- SM003 Current Catalogue
- SM004 Annual Report
- SM005 Campus map
- … and so on.

Each Supporting Material document must be sequential and clearly named to reflect its contents so that it may be readily located by the OAAA and ISA Panel.

If a request for further Additional Supporting Materials is made by the ISA Panel, either at the Standards Assessment Planning Visit or during the Standards Assessment Visit, the Supporting Material numbering should follow the last numbered item submitted. HEIs should ensure all required components of the application have been completed and all Supporting Materials are included in the application.

11.4. **Submitting the ISAA**

11.4.1. **Requirements**
The following sets out some precise details for presentation and submission of the ISAA:

- The ISAA should be written in the main language of the HEI/language of instruction (to be clarified with the OAAA at the outset).
- The ISAA should be professionally typeset, printed and published. It should be presented in softcover book format (preferably with back-stitch or hot melt binding). Ring binder and spiral bound copies will not be accepted. Electronic copies should also be made available on a USB data stick in PDF format.
- Eight (8) hard copies of the ISAA and e-version on data sticks must be submitted to the OAAA (five for the ISA Panel; one for the Review Director; one for an Observer and one for the OAAA’s official record). The Review Director will have notified the HEI in advance of the due date for submission. It is imperative that this date be met, because the rest of the
Standards Assessment will depend upon the adherence to the time frame (refer to the OAAA Policy on Deferral of an External Quality Assurance Activity\(^2\)).

- **Supporting Materials** must be submitted together with the ISAA (electronically on a data stick or similar). These may be cross-referenced in the ISAA when used as evidence against multiple criteria. All electronic copies of Supporting Materials must be in a searchable and printable PDF format.

- Where the ISAA or any attachments refer to information or evidence on the HEI’s website, the web link reference (URL) should be written in full, together with the exact location of the relevant information (for example, the name of the document and page number or section number that is being referred to). The URL reference should hyperlink to that URL. If information is referred to on a website, ensure:
  - the system is accessible by the OAAA;
  - appropriate checks have been made to ensure that access is not hindered by internal firewall protection; and
  - there is a facility to print, save and download the documents.

11.4.2. **Suggestions**

- It is strongly recommended that the ISAA is professionally edited prior to its final submission. A number of potential problems and misunderstandings during a Standards Assessment can be prevented by ensuring that the ISAA is accurate and understandable.

- The HEI should consider printing a number of ISAA copies for its own future use. Copies are needed for the HEI Board/Council, senior management and persons selected by the ISA Panel for interviews.

11.5. **Fees**

The OAAA operates on a cost recovery basis. Royal Decree 54/2010, Article 18 permits the OAAA to determine fees for services and activities done in the performance of its functions. The Ministry of Finance has approved OAAA fees for work undertaken by the OAAA related to Standards Assessment. The OAAA Policy on Fees provides details of the current fees OAAA charges\(^\text{26}\).

12. **Trial Self-Assessment**

12.1. **Possible Purposes of a Trial Self-Assessment**

A trial self-assessment (sometimes called a mock self-assessment) is a process whereby an HEI engages its own ISA Panel to conduct an internal Standards Assessment prior to the external Standards Assessment conducted by the OAAA. The OAAA does not require HEIs to undergo a trial self-assessment – it is up to each HEI to determine whether it wishes to do so or not. The OAAA offers the following advice, based on international experience, to those HEIs considering a trial self-assessment.

12.1.1. **ISAA Quality Control**

If a trial self-assessment is conducted before the ISAA is finalised and submitted to the OAAA, it could be used to help identify any problems with the application (such as inaccuracies, inconsistencies, significant omissions or lines of reasoning which do not make good sense) by comparing it with interview responses. This is a legitimate and potentially useful addition to the HEI’s own process of self-assessment. It may lead to amendments to the ISAA, which will make it a more accurate and complete account of the HEI’s assessment of the standards and criteria. Of course, if the trial self-assessment occurs after the ISAA has been finalised, then this purpose becomes redundant.

\(^{25}\) [http://www.oaaa.gov.om/About.aspx#OAAAPolicy](http://www.oaaa.gov.om/About.aspx#OAAAPolicy)  
\(^{26}\) [http://www.oaaa.gov.om/About.aspx#OAAAPolicy](http://www.oaaa.gov.om/About.aspx#OAAAPolicy)
12.1.2. Familiarising the HEI with the Standards Assessment Process
Some HEIs may seek to conduct a trial Institutional Standards Assessment Visit in order to provide its staff and students with an experience of being interviewed by a panel. This is a potentially useful purpose and may benefit those who are new to the HEI since the last OAAA External Quality Assurance Activity was conducted. Some people are nervous about being interviewed in a formal setting, and having the opportunity to experience it in advance of the Institutional Standards Assessment Visit may help them develop confidence. It also provides the HEI with an opportunity to test out its logistical arrangements, in terms of room setup, catering, mobilising groups of people, etc. The purpose of a trial Institutional Standards Assessment is to focus on the process and not on the content.

12.1.3. Planning Responses for the ISA Panel
An HEI may choose to undergo a Trial Standards Assessment as a way of anticipating what questions may be asked during the Standards Assessment Visit so that the HEI may prepare model answers. This is a dangerous purpose that the OAAA strongly advises against. According to Standards Assessment protocols, it is wholly inappropriate for an HEI to instruct its staff and/or students on the answers they should give in response to questions from the ISA Panel.

12.2. Suggestion on Timing for a Trial ISAA
A trial self-assessment places an additional financial and administrative burden on the HEI. If an HEI chooses to proceed with a trial self-assessment then it should seek to maximise the potential benefits and to minimise the potential disadvantages. One way to do this is to conduct the trial self-assessment at least nine months to a year before the external Standards Assessment. In that way, it becomes a part of the HEI’s own quality management and review activities.
PART E: THE EXTERNAL ASSESSMENT

12.1.2. Familiarising the HEI with the Standards Assessment Process

Some HEIs may seek to conduct a trial Institutional Standards Assessment Visit in order to provide its staff and students with an experience of being interviewed by a panel. This is a potentially useful purpose and may benefit those who are new to the HEI since the last OAAA External Quality Assurance Activity was conducted. Some people are nervous about being interviewed in a formal setting, and having the opportunity to experience it in advance of the Institutional Standards Assessment Visit may help them develop confidence. It also provides the HEI with an opportunity to test out its logistical arrangements, in terms of room setup, catering, mobilising groups of people, etc. The purpose of a trial Institutional Assessment is to focus on the process and not on the content.

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13. **Standards Assessment Protocols**

The part of the Standards Assessment most commonly discussed is the visit of the Panel to interview staff and students (the Institutional Standards Assessment Visit). However, this is just one component of what is a comprehensive and rigorous External Review. The *INQAAHE Policy Statement* (2006) states:

> While higher education comes in many forms, the Network holds that the defining characteristics of higher education include clear policy and procedural commitments to academic integrity and academic freedom, which is the recognition that academic endeavours should be wholly conducted in a spirit of honesty and openness. External quality assurance should be conducted in such a way as to promote academic freedom and intellectual and institutional integrity.

It also states that “every effort should be made to ensure the independence of the individual evaluators, including the adoption of a clear policy on real or potential conflicts of interest.” The OAAA applies several protocols in order to meet this policy statement.

13.1. **Conflicts of Interest**

All people involved in Institutional Standards Assessment from the OAAA must declare any potential conflict of interest prior to their participation. A conflict of interest may prevent a person’s further involvement.

A person may have a personal conflict of interest if:

- They have an immediate family member or very close friend on the governing body or staff of the HEI or as a student of the HEI;
- Animosity exists with a person on the governing body or staff of the HEI;
- They have any financial interest in the HEI, or financial interest in a going concern in association with a Board Member, Council Member or Senior staff of the HEI; or
- They bear bias for or against the HEI due to some previous event (including being a graduate or having been a staff member of that HEI).

A person may have a professional conflict of interest if they:

- Are currently an applicant or candidate for a position with the HEI;
- Are currently providing, or have provided within the past five years, professional services to the HEI which may impact on the Standards Assessment (such as being an external examiner; participating in internal review processes, providing consulting services, etc.); or
- Belong to, or have an interest in, an organisation currently involved in an explicit and important competitive process against the HEI (this does not include normal competitiveness within the sector).

HEIs will be asked to advise the OAAA if any proposed External Reviewers on the ISA long list pose a potential conflict of interest. The HEI must detail the nature of the personal or professional conflict of interest in writing. The OAAA will respond to the HEI’s claim, and if necessary, recommend an alternative appointment to the ISA External Reviewer long list.

13.2. **External Reviewer Declarations**

External Reviewers must complete, sign and return the ISA Panel Declarations Form (refer to Appendix C) to the OAAA before they can be confirmed as a member of a particular Panel. If they have concerns about a possible conflict of interest, they should contact the relevant Review Director or the OAAA Chief Executive Officer to discuss the matter.

13.3. **Review Director Declarations**

Review Directors or Back-up Review Directors (refer to Section 17.3) must disclose any potential conflict of interest to the OAAA Chief Executive Officer at the time that they are...
assigned to an Institutional Standards Assessment. The OAAA Chief Executive Officer may decide to replace them on the Standards Assessment with another Review Director.

13.4. **OAAA Board Member Declarations**
OAAA Board Members must disclose any potential conflict of interest to the OAAA Chairperson (or, if it is the Chairperson, to the Deputy Chairperson), who may ask the Board Member to absent themselves from any discussions at the Board relating to that particular Standards Assessment.

13.5. **Observer Declarations**
From time to time the OAAA provides opportunities for individuals involved in external accreditation or related quality assurance professional role to observe a Standards Assessment. OAAA staff are also provided opportunities to observe Standards Assessments as part of their professional development. Although observers have no influence on the Standards Assessment outcomes, they will have access to information about the HEI undergoing Standards Assessment. Members of OAAA staff attending as Observers must complete, sign and return an Observer Declarations Form (refer to Appendix D) before they can be confirmed as an Observer for the Institutional Standards Assessment. If they have concerns about a possible conflict of interest, they should contact the relevant Review Director or the OAAA CEO to discuss the matter (refer to Section 13.1). No more than one observer is permitted to participate in a Standards Assessment (refer to Section 16).

13.6. **Undue Influence**
It is not acceptable for the HEI to exert any undue influence on the ISA Panel, OAAA staff or OAAA Board in relation to the Institutional Standards Assessment. Undue influence by the HEI (or stakeholders of the HEI) may take a number of forms, including (but not limited to) the following:

- Communication about the Standards Assessment with individual ISA Panel or OAAA Board members during the course of the Standards Assessment (except, of course, as a formal part of the Standards Assessment Visit).
- Explicit or implied threats made against the ISA Panel, OAAA staff or Board members.
- Explicit or implied promises of benefits to the ISA Panel, OAAA staff or Board members.
- Gifts and overly generous hospitality.

In the event of undue influence occurring, it will be reported to the Board. Excessive undue influence may require the Standards Assessment process to be cancelled and the HEI will be placed on probation.

13.7. **The Non-Attribution Rule**
When conducting Standards Assessment interviews, the ISA Panel need to use the information it receives, but it should not attribute that information to the person who provided it. The OAAA asks that confidentiality be respected by all people who participate in the Standards Assessment interview process. In particular, this will mean:

- Interviewees will not be permitted to take notes or use any form of recording device in the interview sessions.
- HEIs should not place Interviewees under any pressure to disclose any responses that they or other Interviewees provided to the ISA Panel.

13.8. **Personal and Commercially Sensitive Information**
The OAAA’s Royal Decree 54/2010 states that HEIs and other related parties “shall provide the OAAA with the information it requires and deems imperative for the accomplishment of its tasks”. From time to time, an HEI may claim that certain information requested by an ISA Panel is either personally or commercially confidential and may wish to withhold the information from the ISA Panel. Whether or not certain information should be treated as confidential is often a
matter of opinion and the ISA Panel is not obliged to agree with the HEI’s assessment of that information unless stipulated otherwise by applicable Royal Decrees. However, as a general principle, the OAAA Board has ruled that ISA Panels should avoid accessing personally or commercially confidential information unless it is absolutely necessary for the assessment of a particular standard or criterion. Should such a need arise, ISA Panels are required to treat the information with sensitivity in order to avoid or minimise any potential discomfort for the HEI. A range of options for accessing the information should be explored, as follows:

- Examples of information that an HEI may deem personally confidential include a student’s marked work, a staff member’s appraisal report or promotion result. If the ISA Panel wishes, for example, to verify that staff performance appraisals are actually taking place then it may ask to see a sample of completed appraisal forms but with the staff members’ names removed.
- Examples of information that an HEI may deem commercially sensitive include competitive student recruitment strategies or financial records. If the ISA Panel wishes, for example, to explore the alignment of planning with resource allocation then it may arrange with the HEI to view any particularly sensitive financial records on site rather than removing copies of those records from the institution.

The ISA Panel will use its best efforts to be sensitive to the concerns of the HEI in terms of personal and commercially sensitive information. At the same time, the HEI needs to acknowledge that the ISA Panel must have access to the information necessary for it to effectively complete the Standards Assessment. In most cases, mutually acceptable solutions can be reached through discussion between the Review Director and the Contact Person (refer to Section 14.2).

Lastly, all OAAA External Reviewers are required to sign a confidentiality agreement prior to their participation on an ISA Panel (refer to Appendix C).

### 13.9. Complaints about the HEI

It is not the purpose of a Standards Assessment to hear and resolve complaints about specific issues in relation to the HEI. The ISA Panel is not a court, arbitrator or mediator. It does not have a role in resolving individual complaints or problems, and will never offer a proposed resolution to a particular case. However, the ISA Panel may use a particular case as one source of evidence when exploring whether the HEI has policies and processes in place for receiving and addressing complaints and for resolving not only the individual complaint but any systematic problem that may have caused it.

### 14. Starting the Institutional Standards Assessment

#### 14.1. Initiating the Institutional Standards Assessment

At least six months prior to the date by which an HEI must submit its ISAA (and usually earlier), the OAAA will contact the HEI in writing and in person to commence general arrangements for the Institutional Standards Assessment.

#### 14.2. Appointing a Contact Person

For each Standards Assessment, there will be a single communication channel between the HEI and the OAAA. For the OAAA, the point of contact is the Review Director appointed to the ISA Panel. The Review Director will usually be a professional staff member of the OAAA.

The HEI should designate its own Contact Person. This needs to be someone with sufficient seniority to direct or influence the HEI’s involvement in the Standards Assessment. A senior member of the Quality Office or similar is a suitable person to act as the Contact Person but it should not be the HEI’s most senior academic post holder (such as Vice-Chancellor or Dean).
All communication between the OAAA and the HEI about Standards Assessment matters should be conducted through these contact people. No communication about the Standards Assessment process is permitted between the HEI (including its governing body, staff, students and external stakeholders) and any member of the ISA Panel or OAAA Board until the Standards Assessment is completed. The only exceptions to this pertain to formal communications between the Chairperson of the HEI and the Chairperson of the OAAA Board or the OAAA Chief Executive Officer. Even these communications should be limited to matters of protocol or in the event of a serious complaint by the HEI over the conduct of the Standards Assessment (refer to Section 22.2).

14.3. **ISAA Completeness Check**
Upon receipt of the ISAA, the OAAA Review Director will conduct a Completeness Check of the ISAA. The Review Director will check:

- Each standard applicable to the HEI’s context has been addressed and self-rated by the HEI;
- All applicable criteria have been addressed and self-rated by the HEI;
- A justification has been provided in each case where a criteria or standard has been deemed not applicable.
- All Quality Audit Report formal conclusions have been related to the relevant corresponding criteria and addressed in the ISAA;
- All Supporting Materials referenced in the ISAA are included with the application;
- All Supporting Materials are complete documents and as described in the title;
- All Supporting Materials are in pdf format, searchable and printable; and
- All Supporting Materials are clearly numbered and labelled.
- The ISAA and Supporting Materials appear to be free from plagiarism (however, if plagiarism is detected at a later stage in the process the OAAA Plagiarism Policy will be applied).

Any issue identified by the Review Director during the completeness check will be addressed on a case by case basis with the aim of ensuring that the Standards Assessment process and the planned time-frame for this are not compromised.

15.  **The Institutional Standards Assessment Panel**

15.1. **Register of External Reviewers**
The OAAA Board has established a Register of External Reviewers. The Register includes eminent people from Oman and overseas who have shown leadership in their disciplines, higher education management, or professions and industries that engage with higher education institutions. The Register is publicly available\(^2\). All people listed on the Register have been through a rigorous selection and approval process.

15.2. **Criteria for External Reviewers on Institutional Standards Assessment Panels**
It is important that the Register of External Reviewers be comprised of peers who command the respect of the higher education and Omani communities. Desirable attributes and characteristics of External Reviewers are as follows:

- Commitment to principles of quality enhancement and quality assurance in higher education;
- Knowledge of quality assurance methods and terminology and their appropriate uses;
- Knowledge and understanding of the Omani higher education sector, including its broader context;
- Ability to reconcile the theory of quality with organisational realities;
- Experience of undertaking quality reviews (audit, assessment, accreditation, etc.) in educational, professional or industrial settings;

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\(^2\) [http://www.oaaa.gov.om/About.aspx#Reviewer](http://www.oaaa.gov.om/About.aspx#Reviewer)
15.4. Assembling the Institutional Standards Assessment Panel

For each Standards Assessment, the OAAA will assemble an ISA Panel normally comprised of up to five or six External Reviewers from the Register. The OAAA reserves the sole right to determine the composition of the ISA Panel and, in each case, will endeavour to assemble a group of External Reviewers that are appropriate for the HEI undergoing Standards Assessment. ISA Panels will typically (but not necessarily) comprise:

- An academician from within Oman;
- An academician from another country;
- A person with HEI management expertise from within Oman;
- A person with HEI management expertise from another country; and
- A person with related industry or professional body expertise.

Each ISA Panel will have a Review Director, who will usually be a member of the OAAA professional staff. A Back-up Review Director will also be assigned to the Panel. The HEI and the Panel will be provided with the names of the Review Director and the Back-up Review Director. The OAAA will implement necessary support and back up mechanisms as required to ensure that the role of the Review Director is carried out effectively (in line with the OAAA Policy on Management of External Review activities).
15.3. Typically for two days and is run at the expense of the OAAA. The training program for Institutional Quality Audit (Institutional Accreditation: Stage 1). All locally based External Reviewers will undergo the training program for Standards Assessment prior to their inclusion in the Register is confirmed. The Training Program is different from the training program before their inclusion in the Register. The OAAA reserves the sole right to implement the Standards Assessment process in accordance with this Manual.

15.4. If there are places available, people who are not External Reviewers may participate in the training program on a fee-paying, first come first served basis.

15.5. Administrative Support for the Panel

15.5.1. Panel Support Officer
The OAAA will assign an ISA Panel Support Officer (PSO) to each ISA Panel. For the purposes of the Standards Assessment, the PSO works under the instruction of the Review Director. The role of the PSO is to facilitate the logistics of the Standards Assessment such as travel, accommodation and other administrative tasks related to the Standards Assessment. This may include attendance at the Standards Assessment Visit. However, the PSO is not a member of the ISA Panel and may not influence the ISA Panel or the HEI in any way.

15.5.2. Honoraria
Each ISA Panel Member will receive an honorarium. The sum of the honorarium is reviewed from time to time by the OAAA Board and the External Reviewers are notified of the sum at the time that they are invited to join an ISA Panel. Any tax liabilities associated with the honorarium will rest in full with the ISA Panel Member.

15.5.3. Travel, Accommodation and Meals
All travel for ISA Panel Members related to the External Review is in business class by the most direct and economical route. The PSO will usually make the necessary arrangements. The OAAA will reimburse Panel Members the cost of travel from home to the airport and vice versa (if the distance exceeds 50 km) to a predetermined limit.

For most ISA Panel Members, the Institutional Standards Assessment Visit will take place away from their home. The PSO will arrange suitable hotel accommodation and all panel meals for the days of the Institutional Standards Assessment Visit. The OAAA will normally fund accommodation from the night before Day 0 to the day immediately after the end of the Institutional Standards Assessment Visit and any additional nights that are incurred as an unavoidable consequence of the travel arrangements.

It is understood that international ISA Panel Members may wish to extend their time in Oman for personal purposes. The OAAA welcomes this interest in Oman and will endeavour to provide some helpful advice as required, but regrettably advises that any additional night’s accommodation and any increase in the cost of the flight is at the ISA Panel Member’s personal expense.

15.5.4. Travelling Companions
The OAAA understands that some ISA Panel Members, and particularly international external reviewers, may wish to bring companions with them during the Standards Assessment Visit. The OAAA appreciates this interest in Oman and the desire to spend some time to enjoy the country. However, ISA Panel Members are reminded that during the Standards Assessment Visit no external social activities can take place. All ISA Panel Members are asked to commit their time and full attention to the Standards Assessment throughout the duration of the Institutional Standards Assessment Visit. ISA Panel Members will normally have meals together in the evenings, and although the setting is social, the meals often involve continuing discussion of the Standards Assessment in which the participation of non-Panel Members would not be appropriate.
Part E: The External Assessment

15.5.5. **Medical Insurance**

The OAAA requires that all international ISA Panel Members arrange medical insurance for the time that they are in Oman and will reimburse the cost up to a pre-determined limit against original receipt. The PSO will provide detailed information on reimbursement.

16. **Observers on Institutional Standards Assessment Panels**

From time to time, the OAAA will invite members of its staff to observe the External Quality Review process for their own professional development purposes. Staff from other quality assurance agencies or relevant organisations may also apply to observe an OAAA External Quality Review. The practice of permitting observers is well established internationally and is an important means by which knowledge and experience about Standards Assessment can be shared.

The OAAA permits up to one external Observer for each ISA Panel (refer to Section 13.5). However, in order to ensure that the presence of an Observer does not in any way compromise the integrity of the Standards Assessment, the following conditions apply. In order to protect the HEI’s confidentiality members of the public are not permitted to observe an Institutional Standards Assessment.

16.1. **What will the Observer ‘observe’?**

In order for the position of Observer to be as beneficial as possible, the OAAA will seek to provide the Observer with substantial access to the Standards Assessment process and materials.

The Observer will receive a copy of the ISAA along with a list of Supporting Materials. In order to minimise the burden on the HEI, and recognising that the Observer is not tasked with scrutinising materials for External Review purposes, the Observer will not receive the Supporting Materials.

The Observer may attend the Standards Assessment Preliminary Meeting (in person or by teleconference) and the Standards Assessment Visit and be present for all interview sessions and ISA Panel review sessions. The ISA Panel Chairperson reserves the right to require the Observer to absent him or herself from any session where his or her presence may otherwise be problematic, but it is expected that this will only be exercised in exceptional circumstances.

The Observer will receive a copy of all drafts of the Standards Assessment Report, the Accreditation Outcome and the HEI Submission on Draft v5, so that they may experience how the drafts change at each stage of the process. However, they do not participate in the drafting process and will not be copied into any of the ISA Panel’s deliberations other than during the Standards Assessment Preliminary Meeting and the Standards Assessment Visit.

The Observer may not participate in any disputes or Appeals process. The Observer’s involvement concludes when the final Standards Assessment Accreditation Outcome is published.

16.2. **Conduct of Observers**

The Observer is not a Member of the ISA Panel and has no formal role in relation to the Standards Assessment. The Observer may not influence the ISA Panel or the HEI in any way during the Standards Assessment.

The Observer **must remain silent** during all interview, feedback and ISA Panel review sessions. The Observer may not take notes on content or use any recording devices during any of the ISA Panel’s interview or feedback sessions; however notes on the process and procedural matters may be taken. The Observer may take notes about the Standards Assessment process during Panel-only sessions, including the Standards Assessment Preliminary Meeting and Standards Assessment Visit Panel review sessions, but is not permitted to take notes about the ISA Panel’s deliberations on the HEI nor about the HEI itself. It must be clearly understood that the purpose
for having Observers is to share information about the Standards Assessment process, not about the HEI.

During the course of the External Review, the Observer will have questions about the process. These should be put to the Review Director during appropriate breaks in the process. The Observer must not under any circumstances liaise with the HEI during the Institutional Standards Assessment process.

16.3. Administrative Arrangements for Observers
Observers (excluding OAAA staff members) are responsible for the costs of their own meals, travel and accommodation, although the PSO may assist with bookings. The OAAA will not be liable for any other costs associated with the Observer’s involvement with the Standards Assessment.

17. Roles and Responsibilities

17.1. Institutional Standards Assessment Panel Members
The following responsibilities are shared by ISA Panel Members:

- Complete and return the ISA Panel Declaration Form (refer to Appendix C) and inform the Review Director about any matters that are or could be perceived as possible conflicts of interest;
- Read the ISAM thoroughly and apply the process and methods of Standards Assessment set out in this ISAM;
- Commit fully to the Standards Assessment process, including postponing all other professional commitments during the Standards Assessment Preliminary Meeting and Standards Assessment Visit, and completing all other assigned tasks in a timely manner;
- Read and evaluate the HEI ISAA and all other materials assigned to them;
- Participate actively in all ISA Panel meetings and activities (whether face-to-face or via communication technologies) in a spirit of teamwork and collaboration, and undertake any consequential responsibilities assigned to ISA Panel Members during meetings;
- Participate in the construction of the Standards Assessment Visit agenda, develop interview questions, and requests for additional Supporting Materials;
- Participate positively and constructively in the Standards Assessment Visit, including interview sessions and ISA Panel review sessions;
- Record evidence from the different review activities (e.g. interviews, documentary reviews) and share it with other ISA Panel Members;
- Provide draft text for sections of the ISA Report, as assigned to them;
- Provide detailed and timely commentary on all drafts of the Standards Assessment Report;
- Be vigilant in identifying and reporting to the Review Director any suspected incidences of plagiarism, particularly in relation to the primary submission of the ISAA and Supporting Materials;
- Comply at all times with the direction of the Chairperson and the guidance on the professional process provided by the Review Director;
- Provide feedback on the Standards Assessment process to the OAAA as requested; and
- Be available to participate in an Appeal interview if required.

ISA Panel Members are ambassadors for the OAAA. As such, they should:

- Be aware of the OAAA’s values and seek to uphold these at all times;
- Act in a positive, ethical and professional manner at all times, and perform duties to the highest standards of honesty and diligence;
- May not at any time delegate work to anyone else. ISA Panel members have been carefully selected based on their experience, expertise and skills. All ISA Panel Members are approved by the OAAA Board prior to their invitation to be involved in a Standards Assessment.
Delegation of work to any person not approved by the OAAA Board to participate on the Standards Assessment would constitute a serious breach of confidentiality;

- Respect the OAAA’s protocols and report any potential breach of the protocols to the Review Director as soon as possible;
- Avoid direct liaison with the HEI during the Standards Assessment process, other than the interview sessions. All other liaison with the HEI is to be via the ISA Panel’s Review Director. If the HEI and ISA Panel Member have contact during the review process, this must be disclosed to the Review Director for appropriate consideration;
- Maintain positive and constructive relationships with other ISA Panel Members, the OAAA staff and the HEI throughout the process;
- Recognise that ISA Panel Members do not have a power of veto over the final Accreditation Outcome; and
- Adhere to the OAAA’s policy on media management (refer to Section 21.9). ISA Panel Members may not publicly disclose any deliberations, discussions or materials of the Standards Assessment.

17.2. **Institutional Standards Assessment Panel Chairperson**

In addition to the responsibilities of Panel Members, the Panel Chairperson has the following responsibilities:

- Chair all meetings of the Assessment Panel, including all interview sessions during Institutional Standards Assessment Visits. This responsibility may be delegated to another Panel Member if the Panel needs to split during the Standards Assessment Visit to conduct additional interviews.
- Create a professional, open and positive atmosphere in which critical enquiry, difficult decision making and robust debate may occur without compromising the integrity of the process or of participants;
- Guide the ISA Panel towards consensus, but not necessarily unanimous agreement, on key findings and standards and criteria ratings; and
- Undertake with the Review Director, the Planning Visit and any Visits to one or more campus sites that may be required. This responsibility may be delegated to another ISA Panel Member if necessary.

17.3. **Review Director**

The OAAA ensures that there are sufficient mechanisms in place to support the smooth and effective implementation of the Standards Assessment process through the appointment of a Review Director who directs the process. The Review Director is usually a member of the OAAA staff. This role includes the following responsibilities:

- Provide direction to the ISA Panel on the professional process as set out in this ISAM and in other directives from the OAAA;
- Be the primary point of contact between the HEI and the ISA Panel;
- Read and be familiar with the ISAA and all supporting documentation submitted by the HEI;
- Based on Panel members’ contributions, prepare agendas, worksheets and other working documents;
- Based on Panel members’ contributions, produce and edit reports and circulate drafts to ISA Panel Members for their comments and input;
- Prepare the Institutional Standards Assessment draft report v4 for internal and external moderation, address issues identified by the moderators, provide feedback on the moderation process to the ISA Panel and prepare draft report v5 for provisional approval by the OAAA Board and consideration by the HEI;
- Prepare draft v6 incorporating action taken in response to HEI’s feedback on draft report v5 for final approval by the OAAA Board;
- Prepare a confidential report on the Institutional Standards Assessment process including an assessment of the effectiveness of the ISA Panel; and
17.3. In addition to the responsibilities of Panel Members, the Panel Chairperson has the following responsibilities:

- Chair all meetings of the Assessment Panel, including all interview sessions during Institutional Standards Assessment Visits. This responsibility may be delegated to another ISA Panel Member if the Panel needs to split during the Standards Assessment Visit to conduct additional interviews.
- Undertake with the Review Director, the Planning Visit and any Visits to one or more campus sites that may be required. This responsibility may be delegated to another ISA Panel Member if necessary.
- Provide direction to the ISA Panel on the professional process as set out in this ISAM and in guidelines.
- Based on Panel members' contributions, produce and edit reports and circulate drafts to ISA Panel.
- Provide, with the assistance of other OAAA staff, high quality administrative support to the ISA Panel.

The Back-up Review Director will be expected to fulfil the role of the Review Director in their absence and will have ready access to all ISA materials. On occasion, a Back-up Review Director may be assigned by OAAA to support the Review Director.

17.4. **OAAA Chief Executive Officer**

The OAAA Chief Executive Officer is not a member of the ISA Panel, but plays an important role in the overall management and quality control of the process. This role includes the following responsibilities:

- Develop the Institutional Standards Assessment Schedule and submit it to the OAAA Board for approval (refer to Section 3.4);
- Assign a Review Director to each ISA Panel;
- In conjunction with the Review Director, propose the long list of ISA Panel Members to the OAAA Board for approval (refer to Section 15.4);
- Manage the budget for the Standards Assessment;
- Intervene in the Standards Assessment process to help resolve serious process disputes, but only if necessary;
- Undertake a final check of Standards Assessment Report and Accreditation Outcome prior to their submission to the Board for approval, to ensure they comply with OAAA policies and guidelines;
- Manage all media statements in relation to the Standards Assessment; and
- Prepare a briefing report on the Institutional Standards Assessment process for the OAAA Board.

17.5. **OAAA Board**

The Board has the overall governance role for Institutional Accreditation Stages 1 and 2. This role includes the following responsibilities:

- Approve the ISAM and amendments to this Manual;
- Approve all External Reviewers for entry into the Register (refer to Section 15.1);
- Approve the Institutional Standards Assessment Schedule (refer to Section 3.4);
- Approve the budget for each Standards Assessment;
- Approve the long lists for all ISA Panels (refer to Section 15.4);
- Provisionally approve the Institutional Standards Assessment Report Draft v5 and the Accreditation Outcome (refer to Section 21.5);
- Approve Standards Assessment Report Draft v6 after considering feedback from the HEI and based on a judgment as to whether the OAAA’s policies have been properly followed (refer to Section 21.6);
- Approve the release of the Final Report (approved Draft v6) to the HEI and publication of the Accreditation Outcome on the OAAA website; and
- Receive and consider a debriefing report on each Standards Assessment process (refer to Section 23.5).

18. Before the Institutional Standards Assessment Visit

18.1. **Establish Institutional Standards Assessment Folders**

ISA Panel Members will receive a substantial amount of information about the HEI during the Standards Assessment. Some of this information is confidential to the HEI and/or to the OAAA. ISA Panel Members should immediately establish three folders:

- An email folder, for storing all emails relating to the Standards Assessment;
18.2. Preliminary Comments
The ISAA and Supporting Materials are circulated to ISA Panel Members as soon as the completeness check is finalised. Each ISA Panel Member is asked to read the entire ISAA (at least once) and to consider all the Supporting Materials in order to provide Preliminary Comments which include provisional ratings of all standards and criteria and supporting text. If the provisional rating given by the ISA Panel Member differs from that given by the HEI in its self-assessment, the ISA Panel Member should provide a reason why a different rating has been given or identify further documentation required in order to make a decision. The preliminary analysis should also consider:

- Important issues requiring further attention;
- Further information that is required;
- People that the ISA Panel will need to meet;
- Questions that need to be asked; and
- Points requiring clarification.

ISA Panel Members should immediately report to the Review Director any suspected incidences of plagiarism detected in the primary submission of the ISAA and Supporting Materials.

Preliminary Comments are submitted to the Review Director by a notified date. The Review Director collates and reviews all ISA Panel Member responses and drafts the first version of the Standards Assessment Report (refer to Section 21.1), which is circulated before the Preliminary Meeting.

18.3. The Institutional Standards Assessment Preliminary Meeting
About 11 weeks before the Standards Assessment Visit, the ISA Panel holds a Preliminary Meeting to discuss the HEI’s ISAA. International ISA Panel Members are invited to participate in this meeting by communication technology. (Refer to Appendix E for a sample Preliminary Meeting Agenda). This meeting is crucial for the following reasons:

- It ensures that the ISAA receives appropriate attention (so that the Standards Assessment overall is not dominated by the Standards Assessment Visit);
- It provides an opportunity to discuss the ISA Panel Members provisional ratings and comments;
- It enables the ISA Panel to become familiar with each other;
- It ensures that the ISA Panel is very clear about the task and the expectations at an early stage; and
- It helps with planning for the rest of the Standards Assessment.

18.4. Additional Supporting Materials
ISA Panel Members may decide additional Supporting Materials are required in order for them to have a better understanding of the HEI’s performance in relation to the criteria. The ISA Panel Chairperson (or representative) and Review Director will request these additional Supporting Materials during this meeting by communication technology. (Refer to Appendix E for a sample Preliminary Meeting Agenda).
Materials during the Standards Assessment Planning Visit. The HEI will normally be required to submit the requested materials several weeks prior to the Standards Assessment Visit.

The ISA Panel may also request Additional Materials during the Standards Assessment Visit. All requests must be made through the Review Director. While the Review Director may submit a request to the HEI for Additional Supporting Materials at any time during the External Review, it is best if the requests are made in block in order to minimise the burden on the HEI. The best times to make the requests are:

- In the paperwork sent to the HEI regarding the Planning Visit; and
- In the Daily Liaison Meetings during the Standards Assessment Visit.

18.5. **The Institutional Standards Assessment Planning Visit**

About six weeks before the Standards Assessment Visit, the ISA Panel Chairperson (or representative) and the Review Director will visit the HEI to discuss the forthcoming Standards Assessment Visit and other matters pertaining to the Standards Assessment.

These meetings are small, operational meetings. Usually the attendees from the HEI are the CEO (at least for the first session) and the Contact Person. The HEI may involve other people as it deems necessary, but should keep the meeting small so that the focus may be operational.

It is important to note that the focus of the Planning Visit is on facilitating the overall Standards Assessment and preparing for the Standards Assessment Visit. The Planning Visit is not an opportunity for the ISA Panel delegation to conduct interviews or other such Standards Assessment activities, or for the HEI to enquire as to the ISA Panel’s preliminary conclusions. (Refer to Appendix F for a sample Planning Visit Agenda).

19. **Public Submissions**

There is only one formal submission from the HEI to the Standards Assessment process and that is the ISAA and associated Supporting Materials. However, an important aspect of the public accountability is to ensure that the ISA Panel, representing the interests of the public at large, is able to investigate the HEI in an independent manner. This involves having access to information that has not first been vetted by the HEI. Shortly prior to the Standards Assessment Visit, the Review Director will call for public submissions on behalf of the ISA Panel. The method used is as follows:

- A Public Submission Notice is sent to the Contact Person for wide distribution within the HEI (refer to Appendix G);
- Notices are made public through appropriate media (such as local newspapers, SMS); and
- A notice is posted on the OAAA website.

The notices will include an email address to which submissions should be forwarded. The ISA Panel will only accept unsolicited submissions provided that they meet the following criteria:

- They include the name, position, organisation (HEI, workplace, etc.) and contact details of the person/s making the submission. This information is treated in confidence. Anonymous submissions will not be considered by the ISA Panel under any circumstances.
- The person/s making the submission must be willing to participate in a telephone interview should the ISA Panel consider such a discussion necessary.
- They should not refer to personal grievance or single out individual members of staff.
- Submissions must contain specific evidence of claims made. Vague allegations will not be pursued by the ISA Panel.
- The submission, excluding any particular corroborating evidence, should be no more than 1,000 words (two sides of an A4 page) in length.
A general call for submissions does not constitute a statistically valid survey. The number of submissions received on a certain topic is not relevant. However, the substance of the submission received is potentially useful. The ISA Panel may choose to investigate or not investigate the matters raised. If they choose to investigate, it will only be as part of the overall Standards Assessment and not in terms of the details of a particular complaint. The ISA Panel will not make any response or report to the person/s making the submission other than to confirm receipt of the submission and alert those making submissions to the publication of the ratings against the standards and criteria and the Accreditation Outcome following the Standards Assessment. The only report issued by the ISA Panel is the Standards Assessment Report which is confidential to the HEI and a limited number of stakeholders (refer to Section 21.7). The ISA Panel will not reach any conclusion for inclusion in the Standards Assessment Report on the basis of unsolicited submission without triangulating the issue (refer to Section 28.2). This may include directly asking HEI management about the matter, although if this occurs, the identity of the person making the submission will remain confidential to the ISA Panel.

20. The Institutional Standards Assessment Visit
The Standards Assessment Visit is perhaps the most visible part of the overall process and typically attracts most of the attention. However, it is important to recognise that it is only one part of the overall Standards Assessment process. Prior to the Institutional Standards Assessment Visit, the ISA Panel is able to begin testing the accuracy of claims made in the ISAA through examination of documentary evidence provided in Supporting Materials. The visit provides the ISA Panel with a further opportunity to do this. While the ISA Panel visits the HEI to thoroughly check the claims made in the ISAA and other matters that may arise, the Standards Assessment Visit should be conducted in a positive, friendly and professional spirit.

20.1. Purpose of the Institutional Standards Assessment Visit
The primary purpose of the Standards Assessment Visit is to help the ISA Panel verify the HEI’s claims in relation to its ratings against standards and criteria.

The methods the ISA Panel will use to fulfil this purpose include:

- Interviewing people to compare their personal experiences with what is reported in the ISAA;
- Viewing resources and facilities in situ to verify that they match what is reported in the ISAA; and
- Considering further documentary evidence.

20.2. Institutional Standards Assessment Visit Program
A typical Standards Assessment Visit program template (i.e. before the names have been added) is provided in Appendix H. Each ISA Panel may amend this to suit the particular issues that they wish to explore during the Standards Assessment Visit. In particular, the interviews may be extended to three days or more if the ISA Panel decides that the Standards Assessment warrants the additional time.

For multi-campus HEIs, the Standards Assessment Visit Program may involve two or more ISA Panel Members visiting satellite campuses for additional Standards Assessment Visit days.

20.3. The Institutional Standards Assessment Visit Logistics
Attention to the logistics of the Institutional Standards Assessment Visit will help to ensure that the ISA Panel is well supported in carrying out its work and the HEI is not unduly inconvenienced.

20.3.1. Daily Liaison Meetings
At the end of each day, the Contact Person and the OAAA’s Review Director should meet to review the day and plan for the next day. These meetings usually last only a few minutes. Items for discussion will typically include the following:
The primary purpose of the Standards Assessment Visit is to help the ISA Panel verify the claims made in the ISAA and other matters that may arise, the Standards Assessment ISA Panel with a further opportunity to do this. While the ISA Panel visits the HEI to thoroughly examine of documentary evidence provided in Supporting Materials. The visit provides the claims in relation to its ratings against standards and criteria.

20.3.1. Daily Liaison Meetings

Typically attracts most of the attention. However, it is important to recognise that it is only one part of the overall Standards Assessment process. Prior to the Institutional Standards Assessment Review Director should meet to discuss the day and plan for the next day. These meetings usually last only a few minutes. Items for discussion will typically include the following:

- Any problems that may have arisen during the day.
- Potential call back interview (refer to Section 29.2.3);
- Additional Supplementary Material requested by the ISA Panel;
- Logistics; and
- Any problems that may have arisen during the day.

The Daily Liaison Meetings should under no circumstances be used to exchange information about the ISA Panel’s deliberations.

20.3.2. The Institutional Standards Assessment Panel Room

Ideally the rooms used by the ISA Panel during the Institutional Standards Assessment Visit are conveniently co-located; the ISA Panel will have much to achieve in a short period of time and will wish to work as efficiently as possible. The following room/interview setup details are designed to help ensure that the Standards Assessment Visit flows smoothly.

The ISA Panel Room is where the ISA Panel will spend the majority of its time and is where most of the interviews and ISA Panel review sessions will take place. Appendix L shows a typical layout of an ISA Panel Room.

- An interview table is required with six or seven chairs on the ISA Panel’s side (for the ISA Panel Members and the Review Director) and eight chairs on the Interviewees’ side. The table will need to be large enough to accommodate the ISA Panel’s folders, laptops, etc.
- Given the amount of time that the ISA Panel Members will spend in their chairs working at the table, it is appreciated if the HEI can ensure that the chairs are of an appropriate ergonomic design.
- If there is an Observer accompanying the ISA Panel, a small separate table/desk for the Observer is required. This should be in a convenient location to the side of the room.
- ISA Panel Members and the Review Director will wish to work from their laptops and sufficient access to a power supply is required. This may require the provision of one or more extension cables. ISA Panel Members and the Review Director (and, if applicable, the Observer) will bring their own laptops.
- On a separate table, the HEI should provide at least one computer with access to the Internet and a printer with a supply of paper. The printer should be in the ISA Panel Room. Where applicable, the ISA Panel should be provided with appropriate access to the HEI’s intranet or Virtual Learning Environment (VLE).
- A small supply of stationery, including a stapler and a hole punch should be provided for use by the ISA Panel.
- The room should have an internally connected telephone to enable direct calls to the HEI’s Contact Person for the Standards Assessment.
- The room should have an easily visible and accurate wall clock.
- Provision of a projector and screen is appreciated. It is likely that the ISA Panel will require these during its deliberations, particularly towards the end of the visit.
- A room with good acoustics will facilitate the interview sessions.
- A supply of refreshments is appreciated. Institutional Standards Assessment Visits are tiring and intensive exercises. Continuous access to refreshments, such as water and juice, tea and coffee, fruit and biscuits, is welcomed. Ideally, these should be permanently in the room as the interview sessions and ISA Panel review sessions should never be interrupted.
- The OAAA Review Director will require a key to the ISA Panel Room for use during each day. This will allow the OAAA to ensure that the room is locked if fully vacated at any time during the day. This will help to ensure that confidentiality of ISA Panel Members’ work is maintained.

20.3.3. Room for Concurrent Interview Sessions

It is likely that some concurrent interview sessions will be scheduled. For these sessions, one interview is normally conducted in the ISA Panel Room with two or three members of the ISA
Panel and the second interview is normally conducted at the same time in another room and with the remaining members of the ISA Panel. The additional interview room needs to have an interview table set up in a similar manner to the interview table in the ISA Panel Room. There will need to be three chairs on the ISA Panel’s side (for either two of the ISA Panel Members and the Review Director or for three of the ISA Panel Members) and eight chairs on the Interviewees’ side. The room needs to have an easily visible and accurate wall clock, but there are no other requirements.

20.3.4. **Round Table Interview Room**

The ISA Panel will conduct some interviews in a round-table format. This format is used for interviews which lend themselves to a slightly less formal setting (e.g. interviews with students). In these interview sessions, each ISA Panel Member will interview a group of five Interviewees who sit with the ISA Panel Member around a small table. Students are typically interviewed in a round-table format but other interviewees may also be interviewed in this way. The room in which round-table interviews are held needs to have five tables each with six chairs (for one ISA Panel Member and five Interviewees), with sufficient distance between the tables to allow the five different interviews to be conducted without undue disturbance.

The room for the round-table interviews should have an easily visible and accurate wall clock, but there are no other requirements. No refreshments need to be provided during round-table interviews (refer to Appendix M). It may be possible for the HEI to use the same room for both concurrent and round-table interview sessions; this will depend on the timing of the sessions and how easily the HEI is able to rearrange the furniture in accordance with the requirements for the different sessions.

20.3.5. **Facilities for Telephone Interviews**

The Institutional Standards Assessment Visit may involve one or more local or international telephone interviews. For these, the ISA Panel will require access to a telephone with a speaker phone facility and an outside/international line as required. If required, ideally the telephone facility should be provided in the ISA Panel Room or in the room used for concurrent interviews. This will help to ensure the confidentiality of calls and avoid interruptions. Telephone facilities in offices should not normally be used.

20.3.6. **In Situ Interviews**

The Institutional Standards Assessment Visit will involve a number of ‘in situ’ interviews during which ISA Panel Members will conduct interviews with relevant staff in a specific location/facility associated with the program(s), (e.g. laboratories and the Library). These interviews will allow the ISA Panel to view the location/facility and to verify how it supports the HEI meet the standards and criteria being considered.

While, in situ interviews may involve demonstration of the use of equipment or facilities, there is no requirement for any special room-layout for the ISA Panel; ISA Panel Members will simply ask questions while viewing the location/facility and will either remain standing or may sit informally if there is already available seating. It is likely that two or three in situ interviews will be scheduled to run concurrently.

20.3.7. **Institutional Standards Assessment Panel Lunch Room**

The ISA Panel will schedule a time period for lunch during each day of the Institutional Standards Assessment Visit. An appropriate room other than the ISA Panel Room is required for this. It is not suitable for the ISA Panel to have lunch in the ISA Panel Room as any lingering smell of food would make the environment unpleasant for interviews and ISA Panel discussions following the lunch period. The ISA Panel will also appreciate a break from the ISA Panel Room and vacation of the ISA Panel Room at this time will provide an opportunity for the HEI to replenish refreshments in this room. During formal breaks (lunch breaks, campus facility visits and so on) the ISA Panel Room is locked and the key is in the sole possession of the Review Director. The ISA Panel lunches are likely to be working lunches during which the ISA Panel will continue discussions. Therefore, the ISA Panel needs to have lunch in a room which allows
confidentiality to be maintained. It is therefore not appropriate, for example, for the ISA Panel to have lunch in an open cafeteria. The ISA Panel will appreciate provision by the HEI of a simple lunch buffet from which the ISA Panel will serve themselves. Provision of a vegetarian option is appreciated.

20.3.8. **Prayer Facilities**

Conveniently located prayer facilities are appreciated.

20.4. **Evidence Deadline**

The evidence deadline for the Standards Assessment is the date of the last day of the Standards Assessment Visit. In other words, no information that is created after that date may be included in the ISA Panel’s deliberations.

In the period following the Standards Assessment Visit, the ISA Panel will be refining ISA Report Draft v4 text and confirming ratings for each standard and criterion. This is based on extensive cross-checking of preliminary findings against all the available evidence. During this time the ISA Panel may find that it requires further documentary evidence in order to finalise its conclusions. Therefore, it may request Additional Supporting Materials from the HEI for up to two weeks after the end of the Standards Assessment Visit. However, the ISA Panel should ensure that it only seeks information where that information is necessary to help finalise a preliminary assessment decision. It is not appropriate to use this time to raise new topics, because there is no further opportunity to fully saturate or triangulate such topics. Also, consistent with the evidence deadline, any material or information provided to the ISA Panel in response to requests during these two weeks must have already existed before the end of the Standards Assessment Visit.

20.5. **Concluding Session**

The ISA process does not allow for a preliminary feedback of the Panel’s recommendation to either Accredit or Not Accredit the HEI. The concluding session of the ISA Visit will allow an opportunity for the ISA Panel to extend its thanks to the HEI for its cooperation during the ISA process, and if required, participate in a photo opportunity in order to commemorate the ISA Visit. Under no circumstances will any findings from the visit be discussed with the HEI.

21. **The Institutional Standards Assessment Report**

The Standards Assessment Report is not made publically available. The ISA Report v5, which includes the Accreditation Outcome, is made available to the HEI for comment. The Report provides summative text and ratings against each standard and its criteria. The overall ratings achieved against the standards and criteria will determine the Accreditation Outcome. The Accreditation Outcome and rating for each applicable standard and criterion (refer to Part C) will be made publically available on the OAAA website. The accreditation of an HEI will provide public assurance that the HEI has the capacity and capability to deliver high quality programs and, according to the HEI’s context, undertake research. The discrete stages for drafting the Institutional Standards Assessment Report are described below.

21.1. **Institutional Standards Assessment Report Draft v1**

This is written by the Review Director upon receipt of the provisional ratings and preliminary comments against each standard and criterion ISA Panel Members provide on the ISA report template. It is tabled at the Standards Assessment Preliminary Meeting as an aid for discussion.

All ISA Panel Members are required to consider the HEI’s performance against all applicable standards. However, following the Preliminary Meeting, each ISA Panel Member will assume primary responsibility for the in depth review and evaluation of the HEI’s performance against one or two standards. Overall, this will ensure that all applicable standards are evaluated in depth.
21.2. **Institutional Standards Assessment Report Draft v2**

This is written by the Review Director after the Standards Assessment Preliminary Meeting. The purpose of this draft is to incorporate the ISA Panel’s discussions during the Standards Assessment Preliminary Meeting and to provide an aid for the ISA Panel Members during their ongoing review of the HEI’s ISAA, Supporting Materials and the Standards Assessment Visit.

An important reason for preparing ISA Report Drafts v1 and v2 prior to the Standards Assessment Visit is to ensure that appropriate emphasis is given to the ISAA and Supporting Materials. The Standards Assessment Visit can be a very influential part of the process. However, care must be taken to ensure that it remains a mechanism for verifying the ISAA rather than becoming the primary information source for the ISA Panel’s deliberations. Much of the evidence obtained during the ISA Visit is subjective and its value lies in its ability to confirm or alter the ISA Panel’s ratings given to standards and criteria.

21.3. **Institutional Standards Assessment Report Draft v3**

ISA Panel members, having been assigned responsibility for the evaluation of one or two standards, focus particular attention on these standards and report their findings after close consideration of: the HEI’s ISAA; Supporting Materials provided with the ISAA and Additional Supporting Materials provided prior and during the Standards Assessment Visit; and insights gained through interviews or campus facility tours conducted during the Standards Assessment Visit.

On the penultimate day of the Standards Assessment Visit, ISA Panel members are asked to reach consensus on the ratings to be applied to each criterion and standard (this is why it is important for ISA Panel Members to engage with all applicable standards, not just those assigned to them). On the last day of the Visit, ISA Panel Members are requested to build on the Report text developed prior to and during the visit that will result in concluding text against each criterion they have been assigned. For each criterion, this should comprise concise, but sufficiently comprehensive, evidence based justification for the ISA Panel’s rating decision. Initial consensus on the rating for each criterion and standard should be reached prior to the conclusion of the Standards Assessment Visit and it is expected that ISA Panel Members will submit their draft text to the OAAA Review Director at the end of the visit.

The Review Director collates and edits text written by the ISA Panel to ensure accuracy, sufficiency and that a coherent and consistent voice is used throughout the Report. The compiled and edited ISA Report Draft v3 is returned to all ISA Panel Members asking them to check on whether the edits made by the Review Director accurately capture the essence of each ISA Panel Member’s original text and the overall findings of the ISA Panel. ISA Panel Members are also asked to read through the entire Report and comment on the text, including whether they disagree with the final ratings given to standards and criteria.

21.4. **Institutional Standards Assessment Report Draft v4**

The Review Director prepares Standards Assessment Report Draft v4 which includes supporting text which has been cross-checked against evidence generated through the Standards Assessment process. ISA Report Draft v4 undergoes comprehensive internal and, normally, external moderation. Moderation helps ensure the ISA Report Draft v4 text is consistent with the OAAA ISA guidelines; supports OAAA ratings for standards and criteria; is internally consistent in content across the text from different standards and criteria; is professional and objective in tone; expresses clarity of thought and flow of ideas; and reflects international good practice in external assessment. External moderators sign an External Moderator’s Declaration Form which requires them to acknowledge the ISA Report and ratings are strictly confidential and that they may not refer to any part of the OAAA Standards Assessment Report, standards and criteria ratings or Accreditation Outcome.
21.5. **Institutional Standards Assessment Report Draft v5**

The Review Director develops the ISA Report Draft v5 based on feedback given during the internal and external moderation process.

The Accreditation Outcome and standards and criteria ratings in the ISA Report Draft v5 are provisionally approved by the OAAA Board. This may also include a recommendation that the Accreditation Outcome is deferred (refer to Section 7). Where a recommendation has been made to place an HEI on probation, the period of probation will be included.

After the provisional approval has been granted, the ISA Report Draft v5 is forwarded to the HEI for comment. The HEI response to the ISA Report Draft v5 is a vital part of the Standards Assessment process. It provides an HEI with an opportunity to address any matters in the report with which it disagrees with regard to the following:

- Factual inaccuracies.
- Evidence used to highlight factual inaccuracies in the report must not post-date the last day of the Standards Assessment Visit. The evidence must exist during the Standards Assessment Visit; new policies, practices, data, etc., which have been developed after the Standards Assessment Visit are not permissible at this stage. However, new evidence will be considered in cases of Outcome Deferred (refer to Section 7).
- Emphases or perspectives taken by the ISA Panel which are unfairly prejudicial against the HEI and result in an unfair assessment decision against a criterion.
- The omission of an issue so significant that its omission is unfairly prejudicial against the HEI and results in an unfair assessment decision.
- The Standards Assessment process was conducted in a manner that was manifestly unfair and deviated from this Manual in a manner that had not been agreed to between the parties.

An HEI should not challenge contents in the Standards Assessment Report without providing clear evidence in support of their claims. The claims or opinions of a senior member of the HEI are unlikely, on their own, to constitute clear and convincing evidence. A template for the HEI’s response to the draft Standards Assessment Report is provided in Appendix N.

The HEI’s response to Standards Assessment Report Draft v5 is forwarded to the ISA Panel for comment. The ISA Panel’s response to HEI feedback is collated and analysed. Changes (if any) are made to the Report in order to produce ISA Report Draft v6. Standards Assessment Report v6 is forwarded to the OAAA Board for approval.


The OAAA Board will make a determination of the final Accreditation Outcome and ratings against the standards and criteria based on a review of the ISA Report Draft v6 and discussion with the OAAA CEO on relevant aspects of the Standards Assessment process. The OAAA Accreditation Outcome is final.

21.7. **The Final ISA Report**

The Final ISA Report including changes requested by the OAAA Board (if any), is sent to the HEI under embargo for 10 days. If the HEI does not lodge an appeal against the Accreditation Outcome or ratings of standards or criteria within the 10 day period, the Accreditation Outcome and ratings of standards and criteria is made public on the OAAA website.

The OAAA Final ISA Report will not be made publically available but will be circulated as a confidential document to OAAA Board Members; the Education Council; the HEI’s supervising ministry, if applicable; and to other government bodies on request subject to OAAA Board approval. The Final ISA Report will also be made available to Panel Members working on Program Standards Assessments for that HEI.
21.8. Public Reporting and Accountability

The Accreditation Outcome is published on the OAAA website, alongside the publication of ratings for each standard and its associated criteria. The OAAA has developed a transparent and effective means for stakeholders to identify how an HEI has performed in Standards Assessment. Part of the rationale for the rating scales (refer to Section 5) is that this provides clear information to meet that need. Stakeholders, such as supervising ministries, employers, students and the public, are able to use this data in order to distinguish between HEIs and compare their performance in different areas.

The OAAA’s intention is not to produce an institutional overall ranking system but to allow prospective students, their parents and other stakeholders to search against items which match their specific needs. This approach to public reporting avoids institutional ranking which has recognised shortcomings. Such ‘league tables’ are produced by international organisations and are based on a defined set of institutional data, irrespective of the institution’s mission, age or geo-political or social environment. The proposed approach to the reporting of Standards Assessment results will enable HEIs to build their own profile and make claims, which are supported by the OAAA, about their ability to provide quality education services and experiences. It also enables students and other stakeholders to compare institutions based on their own choice or weighting scheme (based on their own priorities) for the 79 criteria.

Other information that will be made publically available on the OAAA website includes the following:

- Name of the institution
- HEI Classification and whether Public or Private
- Licensing Status
- Date of Quality Audit
- Quality Audit Report
- Institutional Standards Assessment Submission Date (Standards Assessment Deferred)
- Accreditation Outcome
  - Probation may be an Accreditation Outcome in which case the period of probation will also be recorded on the website
- Standards Assessment Ratings for all standards and criteria
- Reaccreditation: Standards Assessment Submission Date
  - Pending indicates the OAAA is yet to commence the Institutional Standards Reassessment.
  - Referred to the Education Council indicates the OAAA has not received an Institutional Standards Reassessment Application by the due date and the OAAA has recommended to the Education Council that the HEI’s license to operate as an institution be revoked.

21.9. Media Management

The Standards Assessment Report is not released to the public. However, the Accreditation Outcome is posted on the OAAA website. The Chairperson of the OAAA Board and/or the Chief Executive Officer may make public statements on behalf of the OAAA, if necessary. The ISA Panel, Review Director, other OAAA staff and the Observer are not permitted to make any public comment to the media.

The HEI may make its own comments about the Standards Assessment, but may not use the Standards Assessment Report in a misleading way or to publically harm other HEIs. As the Standards Assessment Report is not made public, the HEI is not permitted to publish any part of

the report. If the HEI publishes any part of the report, the OAAA will make the whole report publically available.

Any disputes about the Standards Assessment process are addressed via the Appeal process (refer to Section 22.4) and not in the media.

21.10. In Confidence Matters
On rare occasions an issue may arise during the Standards Assessment Visit which is so significant and so personally or commercially sensitive that it may need to be discussed at the highest level of the OAAA. In such cases, the Panel Chairperson and the Review Director shall discuss the matter with the OAAA Board Chairperson and Chief Executive Officer. Together, they may decide that it would be helpful for the Panel Chairperson and the Review Director to meet privately with the HEI senior management to discuss the matter. Such private and confidential meetings are to be considered only as an exceptional circumstance and not as the norm. Its sole purpose is to allow the HEI to demonstrate that it has Met the requirements of a standard/criterion.

22. Disputes and Appeals

22.1. Disputes during the Institutional Standards Assessment
Every attempt should be made by the HEI and the ISA Panel to ensure that the Standards Assessment is conducted in a positive and professional manner. However, it is possible that matters may arise during the Standards Assessment that give rise to a complaint.

22.2. Complaints by the HEI against the Institutional Standards Assessment Panel
During the course of the Standards Assessment, and particularly during the Standards Assessment Visit, it is possible that the HEI may believe there are grounds to complain about the behaviour of the ISA Panel. Grounds for such a complaint may include:

- An unnecessarily hostile or aggressive manner;
- Perceived breach of the confidentiality of particularly sensitive information;
- Unreasonable demands of the HEI by the ISA Panel; and/or
- Any other perceived breach of the Standards Assessment Protocols.

The objective of raising such issues should be to enable the Standards Assessment to proceed in a professional manner. In the first instance, the HEI should try to resolve any problems with the ISA Panel as quickly and as informally as possible through discussions between the Contact Person and the ISA Panel’s Review Director. In most cases, positive and professional discussions are sufficient to resolve disputes. In the unlikely event that this does not occur, then the Review Director may ask the OAAA Chief Executive Officer to intervene.

22.3. Complaints by the Institutional Standards Assessment Panel against the HEI
During the course of the Standards Assessment, and particularly during the Standards Assessment Visit, it is possible that the ISA Panel may believe there are grounds to complain about the behaviour of the HEI. Grounds for such a complaint may include:

- Refusal to comply with reasonable requests for access to information, locations or people;
- Perceived coaching by the HEI designed to influence responses given by Interviewees;
- Perceived breach of the confidentiality of the ISA Panel’s information and deliberations; or
- Any other perceived breach of the Standards Assessment Protocols.

The objective of raising such issues should be to enable the Standards Assessment to proceed in a professional manner. In the first instance, the ISA Panel should try to resolve any problems with the HEI as quickly and as informally as possible through discussions between the OAAA Review Director and the Contact Person. In most cases, positive and professional discussions are sufficient to resolve disputes. In the unlikely event that this does not occur, then the Review Director may ask the OAAA Chief Executive Officer to intervene.
Given that the OAAA has a legal mandate to conduct accreditation, any clear breach of the Standards Assessment Protocols or processes as set out in this manual may lead to the Standards Assessment being terminated early.

### 22.4. Appealing the Institutional Standards Assessment Ratings and Outcome

There are many checkpoints in the Standards Assessment process designed to ensure that the Accreditation Outcome is based on a fair and reasonable assessment of the HEI’s activities related to applicable criteria. However, it is possible that the HEI may still believe that the Accreditation Outcome or standard and criterion ratings are unfair and will damage the HEI’s reputation. In such cases, the HEI may apply for a formal appeal.

The grounds for appeal are:

- Significant factual inaccuracies that the HEI has already tried to correct by providing the appropriate evidence to the ISA Panel.
- Emphases or perspectives taken by the ISA Panel that are unfairly prejudicial against the HEI and result in an unbalanced assessment of a particular standard or its criteria.
- The omission of an issue so significant that its omission is unfairly prejudicial against the HEI and results in an unbalanced assessment of a standard or its criteria.
- The Standards Assessment process was conducted in a manner that was manifestly unfair and deviated from this ISAM in a manner that had not been agreed to between the parties.

In order for the application to proceed to the Appeals Committee, the Chairperson of the Appeals Committee must be satisfied (without reaching a conclusion about the appeal itself):

- The matter is significant enough to have resulted in an unreasonable Standards Assessment Report and the resulting Accreditation Outcome. In other words, trivial issues will not be accepted for an appeal.
- The HEI has already attempted to correct the issue by providing the ISA Panel with appropriate evidence during the normal course of the Standards Assessment. In other words, if the HEI did not provide the information before the deadline, then it cannot complain afterwards that the ISA Panel reached an unfair conclusion.

The opportunity to apply for an appeal occurs up to 10 working days from receipt by the HEI of its Accreditation Outcome. Upon receipt of an application for Appeal, the OAAA will defer publication of the Accreditation Outcome until either the application has been rejected without proceeding to the Appeals Committee or, if it is accepted, until the Appeals Committee has completed its deliberations. Even after publication of the Accreditation Outcome on the OAAA website an HEI has the right to appeal the result of the Accreditation Outcome up to 60 days from the time it is notified of the Accreditation Outcome by the OAAA.

The formal costs of convening an Appeals Committee are structured to ensure that applications for Appeals are lodged with appropriate seriousness. The fee for lodging an Appeal is non-refundable. The detailed process for an Appeal is available in the OAAA Appeals Policy and Appeals Manual.

### 23. After the Institutional Standards Assessment Process

#### 23.1. Feedback on the Institutional Standards Assessment Process

The OAAA is interested in the continuous improvement of its own processes. Therefore, it will seek feedback from a variety of sources on each Standards Assessment.

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23.2. Institutional Standards Assessment Panel Member Evaluations

After the Standards Assessment Report and Accreditation Outcome has been approved by the OAAA Board, the Review Director will send each ISA Panel Member a feedback form (refer to Appendix O) seeking their feedback about the ISAM, the Standards Assessment Report, the Standards Assessment process in general and the support provided by the OAAA staff.

23.3. HEI Representative Evaluations

After the Accreditation Outcome has been publicly released, the OAAA will seek feedback from HEI representatives on the ISAM, the Standards Assessment process and the Standards Assessment Report. This feedback is an important means for the OAAA to ensure its Standards Assessment processes remain robust and appropriate (refer to Appendix P).

23.4. Review Director Report

The Review Director will prepare a confidential report (two or three pages) providing an account of the Standards Assessment. The purpose of this report is to help the OAAA identify ways in which it can improve the Standards Assessment process. It should include the following:

- Suggested amendments to the ISAM and processes;
- Comments on the effectiveness of the ISA Panel; and
- Comments on the interactions with the HEI.

23.5. Debriefing Report

The OAAA Chief Executive Officer will draw together the feedback from the ISA Panel Member evaluations, feedback from the HEI and the Review Director’s Report, along with any other relevant evaluative information, into a Debriefing Report. This is submitted to the OAAA Board for consideration. Given that the Debriefing Report is likely to include information about individual people, it is confidential and used for the OAAA’s own improvement purposes.\[31\]

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\[31\] The OAAA itself will be subject to external review from time to time, in accordance with the INQAAHE Guidelines for Good Practice: http://www.inqaahe.org/admin/files/assets/subsites/1/documenten/1231430767_inqaahe---guidelines-of-good-practice[1].pdf.
PART F: METHODS OF ANALYSIS
24. Obtaining a General Overview of the HEI
The ISAA provides an introductory overview of the HEI’s operations and relevant contextual information. This section is designed to assist ISA Panel Members to gain a brief and accurate description of the HEI’s history, campus location/s, a general description of the HEI and its context and any special characteristics it may have. The description should include the academic and general structure of the organisation and a complete list of programs being offered, including details of their licensing and accreditation status (and if the HEI is not the body awarding the qualifications, which entity is the awarding body). ISA Panel Members are also encouraged to become familiar with the HEI’s website in order to understand its key features and how it promotes itself to an external audience.

25. ADRI

25.1. ADRI Approach to Self-Assessment
ADRI (or a similar tool) helps to facilitate structured and systematic self-assessment. ADRI can help an HEI assess whether or not it has Met a criterion. It can also be used to show that outcomes and achievements have not come about by chance. ADRI can be used at all levels of the HEI – institutional, department, program or cohort. The ADRI tool is used by ISA Panels and HEIs are encouraged to use ADRI as an analytical tool when preparing their ISAA. HEIs are familiar with an ADRI approach as this is the same approach HEIs were encouraged to use when preparing their Portfolio for the first stage of the Standards Assessment cycle, Quality Audit.

HEIs are expected to provide evidence to show the effectiveness of the systems in place in order to meet the applicable criteria. Results are important in evaluating whether the requirements of the criteria and standards have been Met or Not Met, as will evidence of sustainability. ADRI provides a useful tool for HEIs to assess their performance against the requirements of all applicable criteria. Standards Assessment is summative; i.e. it determines whether applicable criteria have been Met or Not Met. Therefore, HEIs should pay particular attention to providing evidence of actual results achieved against applicable criteria. Results are not achieved in a vacuum. They are the outcome of a purposeful approach (identifying what result is intended), and the actions that have been implemented (deployment) in order to achieve those results.

25.2. Applying an ADRI Analysis
HEIs in Oman used ADRI when preparing their Portfolio for Quality Audit and Quality Audit Panel members used the same tool to assess the Portfolio. ADRI as a tool for analysis remains equally relevant to the Standards Assessment for both HEIs and ISA Panel members for the analysis and assessment of an HEI’s performance against the criteria.

The first step in conducting Standards Assessment using an ADRI analysis approach is to systematically work through the Standards Assessment criteria applicable to the HEI. ADRI can be used to analyse anything that an HEI does. ADRI can be applied at the micro level (i.e. to specific, well-defined issues often directed by an objective or target). An example would be ‘Student Evaluations of Teaching’ (an essential element of analysis for Criterion 2.4: Teaching Quality). It can also be applied at the macro level (i.e. to larger, aggregated issues often directed by a broad aim or goal). An example would be ‘Teaching Effectiveness’ (another example of an essential element related to the analysis of Criterion 2.4), which involves many related issues such as instructional design, peer review, student evaluations and professional development. ADRI is a useful tool for assessing the HEI’s performance against each individual criterion.

Put simply, ADRI is a four step cyclical model comprising consideration of Approach ➔ Deployment ➔ Results ➔ Improvement (an ADRI Training Module, including a presentation

32 Derived from Deming’s (1986) PDSA cycle (Plan_Do_Study_Act); originally attributed to Walter Shewhart (1980).
and handouts, is available on the OAAA website. The ADRI model can be applied to an analysis of any given topic. It is an evidence-based method of determining:

**Approach:** what the HEI aims to achieve for that criterion and how it proposes to achieve these aims. (What results does the HEI intend to achieve?)

**Deployment:** whether the plans are being followed in practice, and if not, why not.

**Results:** the evidence of whether the approach and deployment are effective in achieving the intended outputs and outcomes for a criterion or standard.

**Improvement:** how the HEI is reviewing its Approach and Deployment in order to make improvements to them that may lead to better Results. (Has it conducted a review, analysed results of the review and implemented changes based on that analysis?)

Standards Assessment is primarily focused on results and the results will determine whether or not a standard has been *Met*. Evidence of continuous improvement would normally lead to a standard rating of Good or Excellent.

### 25.3. Approach

The *approach* may also be thought of as the intentions that the HEI has in relation to each criterion undergoing analysis. The *approach* takes two forms: what the HEI is proposing to do and how it is proposing to do it.

Against each criterion, the HEI should describe what it is proposing to do. These statements of intent take many forms, ranging from the highest strategic levels to the lowest operational levels. They include:

- Mission statement (i.e. the highest level purpose that the HEI serves);
- Vision statement (i.e. how the HEI and its targeted stakeholders will have changed in the long term as a result of the HEI successfully achieving its Mission);
- Values (i.e. what the HEI holds dear, e.g. academic freedom, collegiality, the advancement of knowledge);
- Aims and Goals (broadly, what the HEI aims to achieve);
- Objectives (a more specific definition of its intended achievements);
- Targets (a measurable expression of its objectives);
- Policies and procedures (rules by which the HEI operates); and
- Plans (identifying objectives).

These statements of intent are found in a variety of sources – and sometimes they will conflict with each other. Reviewers (internal or external) should undertake a wide search of such materials to ensure that a complete understanding of the intention is attained. Typical source materials include:

- Strategic Plan;
- Operational Plans;
- Website;
- Prospectus/Catalogue;
- Minutes of Board and Committees;
- Directives issued from the Board or Dean;
- Less formal memos from the Dean and other heads; and

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Against each criterion, the HEI should describe how it is proposing to do it. With statements of intent to meet the requirements of the criterion as the starting point, the next step for the HEI is to decide how it will achieve them. There are a number of mechanisms used for this purpose, including the following:

- Verbal statements.
- Policies setting out the rules of the organisation;
- Strategies, describing in broad terms how the goals and objectives are achieved;
- Operational plans, detailing what should be done, by when, by whom, to what standard and with what resources;
- Manuals detailing how the processes should be implemented;
- Budgets detailing the allocation of resources to activities;
- Staff training and development activities that improve people’s capability to achieve the intentions; and
- Guidelines that provide non-prescriptive advice on how to achieve intentions.

25.4. Deployment

Statements of intent remain exactly that until they are put into effect. The next step is to deploy those intentions. In other words, do the plans happen in reality? This is sometimes also known as implementation’, ‘processes’ or, most simply, ‘do’.

There are several ways for investigating deployment. One of the most effective is to hold discussions with people, such as in interviews, focus groups or departmental meetings. The idea is to explore people’s ‘lived experiences’, to see if they align with the plans and manuals. Another way of investigating deployment is to check whether the planned resources are actually in place and of appropriate quantity and quality.

25.5. Results

Assessment of the Standards cannot be determined by focusing on the goals, plans, inputs and processes only. There must be an emphasis on what is actually achieved, i.e. the results. In general, every goal must have a reported result (or multiple results) and vice versa, i.e. every result should link back to a goal. It is essential that a causal relationship can be shown between the approach, the deployment and the eventual result, otherwise the result may be just chance, with no guarantee that the HEI understands how to influence future results.

Results may be either quantitative or qualitative (or both). It is not essential that every result be numerical, although it is essential that every result be measurable. The HEI will need to ensure that it has produced the appropriate type of result for each criterion. Also, for some goals the results presented may be aggregated from the results of its component objectives. This may involve combining various different types of data. Care must be taken to ensure that such results remain valid and reliable.

25.6. Improvement

This aspect of ADRI is applicable to all criteria as they require the HEI to provide evidence that its processes related to a certain activity are ‘effective’. The way the HEI will know whether its approach is effective or not is to review its activities. Without evidence of review, the HEI will not know whether it is effective or not. The OAAA has defined ‘effective’ as “successful in producing a deliberate and sustainable result that meets the requirements of the criteria and standards”.

This dimension looks at what an HEI knows about itself in order to get better and better. It may be thought of as the ‘quality enhancement’ aspect of ADRI and is one of the most important distinctions between Quality Audit and Standards Assessment. Quality Audit goes beyond whether or not a minimum standard has been Met and looks at the overall potential for the HEI to improve on whatever results it is obtaining. Overall however the fundamental assumption of
this dimension is that an HEI ought to be continually reviewing its activities and looking for ways to improve. Targets should be recalibrated periodically; processes should become more efficient and more effective over time; results should indicate increasing success. This requires a comprehensive system of review – not just consideration of results. In Standards Assessment, improvement of performance levels above minimum requirements for accreditation is recognised through ratings above Satisfactory.

While ADRI provides a robust tool for the analysis of HEI performance, ISA Panel members are reminded that the focus of their deliberations must remain fixed on the requirements of the criteria and that evidence related to the four elements of ADRI should inform rather than override this. What is important is for ISA Panels to determine that criteria are Met as a result of a deliberate effort by the HEI, and that the HEI’s performance is underpinned by systems which give the ISA Panel confidence that the criteria will continue to be Met (or exceeded) for the five year period for which accreditation is granted.

26. Benchmarking

Several criteria specifically require HEIs to provide evidence that they have benchmarked their practice and activities related to the criteria against the practices and activities of other HEIs sharing a similar context. The following discussion describes the key steps used to benchmark outcomes.

- **Identify the topic to be benchmarked.** An HEI should not try and benchmark everything at the same time. It should focus on those areas it wants to know how well it is performing in comparison to other similar HEIs. For benchmarking to be successful, first the HEI must study its own side. The HEI should conduct a review of the topic in terms of ADRI (refer to Section 25). Examples of approach and deployment information include plans, resources (especially financial resources and staff), training, manuals and processes. The process may involve an exchange of materials and reciprocal visits. Joint meetings will also be required. It should not be assumed that if you give someone your data it will be interpreted in the same way as it is by you.

- **Determine the goal,** the planned method, what happens in practice and what your results are.

- **Find potential benchmarking partners** from within the sector, nationally or internationally. It is best to establish partnerships with other HEIs which are a similar size, have a similar mission, offer similar programs or cater to a similar demographic (student characteristics, regional or remote location, etc.). HEIs should not get too worried about exact matches – there is no such thing. However, partners ought to be similar enough for comparisons to be meaningful. Approach these partners and ask if they are interested in conducting confidential, informal benchmarking. Benchmarking partners should not be limited to the HE sector but may also include cross-industry comparisons.

- **Establish a formal Memorandum of Understanding.** The aim of benchmarking is not to gather commercially confidential information but to share data and the learnings the data may reveal. The agreement should outline project details such as topic/s, contact people, method, timeframe and cost sharing arrangements. It is also important to establish rules regarding how the information will be treated, such as whether confidentiality is required, how the information is to be stored and disposed of, and how the information will be used.

- **Identify performance gaps** by comparing results, using both quantitative and qualitative data and other information. Negotiate what data and information collection methods will be used, e.g. common metrics or conducting totally new surveys. Focus on comparing results and determine who has the best results. Your next step is to find out why one partner has better results than the other. The key phrase in benchmarking is adapt then adopt. In other

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34 This section is based on the OAAA benchmarking training module:
words, you may need to modify their superior practices to ensure they will work in your particular institutional context.

It is anticipated that the Institutional Standards Assessment will result in significant benchmarking activities throughout the HEI sector in Oman. This is inevitable since a number of criteria require HEIs to specifically relate to benchmarked data when making a claim against these criteria. The MoHE has also established Key Performance Indicator (KPI) data which can provide national comparative data in a number of areas. In order to ensure ongoing preparedness, HEIs could consider establishing informal benchmarking clubs with three or four other Omani HEIs and compare results against the KPI data. The purpose of these clubs is to improve one’s own best practice by finding and learning from others. HEIs are also encouraged to establish relationships with overseas HEIs and use these relationships to support international competitiveness.

27. Types of Evidence and Data Analysis
The ratings given to standards and criteria in the ISA Report are not based on whether the evidence is incontrovertible, but rather are based on the professional judgments of peers (the ISA Panel Members) based on careful consideration of all the available evidence. Standards Assessment does not assume that there is a single correct way in which something should be done or that there is only a single correct interpretation of an organisational situation. Instead, it endeavours to reach conclusions that are authoritative and support the ratings given to the standards and criteria.

To achieve that goal, it is helpful to consider the wide range of evidence and a number of tools for collecting, analysing and interpreting the evidence. This Manual does not intend to be fully comprehensive on these topics, but presents some relevant comments as follows:

27.1. Authority to Access Information
An ISA Panel has the authority to access any information (other than legally protected/privileged information) that it deems necessary to fulfil its responsibilities under the Royal Decree (54/2010) establishing the OAAA.

27.2. Using Statistics
One of the most powerful means for communicating information about an HEI’s performance is to present statistics. Some suggestions on this are provided in the OAC Training Module #4 ‘Statistics in Reporting – an introduction to descriptive statistics’.35

The OAAA offers the following advice about presenting and interpreting statistics presented by HEIs in their ISAA:

- Statistical results should be reported against targets to assist with their interpretation.
- Statistics should be presented as trends of five years.
- Where possible, ratios or percentages should be used instead of raw numbers, which are difficult to interpret.
- The HEI should be prepared to defend the accuracy, validity and reliability of any statistics in the ISAA.

27.3. Date Stamping Evidence
Many forms of evidence are dynamic. They may change over time, and even during the course of the Standards Assessment Visit. This can make point-in-time assessment extremely difficult, because the evidence may change during the course of the ISA Panel’s deliberations, meaning that findings can be disproved. Therefore, it is essential that techniques are used for confirming

35 http://www.oaaa.gov.om/Training.aspx#Train
the date (and, sometimes, the time) when the evidence was collected. There are several techniques for doing this and they are collectively known as ‘date stamping’.

The form of evidence most at risk of changing during the Standards Assessment is websites and other online items. If an ISA Panel Member finds a website that is used as reference material for a finding in the Standards Assessment Report, then they should print the page as a PDF or Microsoft Office Document Image file or similar, and save it in the Standards Assessment Folder (refer to Section 18.1). These file formats should automatically include a date stamp in the document footer.

Another form of evidence prone to change is the verbal comments made during interviews. The most effective means by which the ISA Panel can ensure that it accurately captures verbal comments is by taking notes at the time.

27.4. Evaluating New Processes
HEIs are usually motivated to address a range of problems before the Standards Assessment occurs. Ideally, HEIs ought to be committed to making improvements with or without Standards Assessment. However, the OAAA is supportive of an HEI using the Standards Assessment to gain additional momentum for its improvement efforts.

One consequence of this phenomenon is that ISA Panels will often find quality assurance processes that appear sound but are, in fact, brand new. It is not uncommon for an HEI to feel embarrassed about admitting that the process is new, hoping instead that the ISA Panel will simply accept it as the HEI’s standard practice.

It is advised that HEIs are up front about the recent history of their quality assurance activities. If a policy or process is brand new, then certainly the ISA Panel is unlikely to reach positive conclusions about its Deployment or subsequent Results, as these may not yet have come into effect. However, it may well reach positive conclusions about Improvement and Approach in that the HEI clearly identified an opportunity for improvement and did something about it. This demonstrates quality management in practice. Where the ISA Panel evaluates newly introduced systems or processes that have yet to yield deliberate or sustainable results, the related criterion may be rated Partially Met if, in the professional judgment of the ISA Panel, the new system or process appears to be appropriate and capable of achieving the HEI’s intended results at a later date.

27.5. Institutional Standards Assessment Visits and Observations
Most of the Standards Assessment Visit is spent conducting interviews in a designated ISA Panel Room (refer to Section 20.3.2). There is only a limited amount of time during a Standards Assessment Visit and it is best spent talking with people rather than walking from venue to venue. However, there are some opportunities for ISA Panel Members to visit locations and make observations. In each Standards Assessment Visit, one or more sessions are designated as ‘Interviews in situ’. In conducting ‘Interviews in situ’, ISA Panel Members should have a specific and relevant plan for what they wish to see, rather than a random visit (refer to Section 20.3.6).

28. Gaining a Comprehensive Picture
Conclusions should never be reached based on single items of evidence. Most issues are complex and arriving at a defensible conclusion will involve comprehensive consideration of the issue. Three strategies for achieving this are saturation, triangulation and process mapping.

28.1. Saturation
The existence of an issue does not necessarily mean that the issue is systematic or endemic. For example, a staff member who expresses satisfaction to the ISA Panel about professional development opportunities at the HEI does not constitute evidence that the majority of staff are satisfied about the professional development opportunities.
Saturation is a method whereby an ISA Panel explores an issue until no new information about it comes to light. During the Standards Assessment Visit, this is achieved by asking the same (or similar) questions to several different groups of people until a clear theme emerges from the responses.

It is not always necessary to obtain saturation of an issue. Sometimes, the mere presence of an issue is sufficient. For example, if an HEI claims that all classrooms have fixed data projectors, and the ISA Panel discovers one that does not, then the HEI's claim has been disproved. However, the exception may or may not be particularly important. In general, it is better for ISA Panel Members to seek as much corroborating evidence as possible in order to have greater confidence in the importance of the findings.

28.2. Triangulation

Triangulation is a method whereby analysis is strengthened using a combination of the following:

- Multiple original sources of data (e.g. students, staff, management, external stakeholders, authoritative references and benchmarks);
- Multiple methods of data collection (e.g. surveys, interviews, observations, internal documents, literature and statistics); and
- Different types of data (e.g. objective and subjective).

Limitations in data types, sources and methods of collection can lead to criteria being rated Not Met. However, by using a combination of the above, the potential for such problems can be reduced. This is important to help ensure that the ratings ISA Panel Members reach are appropriate.

28.3. Process Mapping

One way of obtaining a comprehensive overview of a complex process is to visually describe it using process mapping techniques. This can be a very powerful tool and can be particularly helpful to HEIs wishing to fully understand their processes; however it can also be a useful tool for ISA Panel Members, albeit used in a less complex form, to draw the key stages of a process and the relationships between these stages. Some suggestions are provided in the OAAA Training module #8 Process Mapping\(^\text{36}\).

29. Conducting Interviews

Interviews are a key feature of the Standards Assessment Visit. They provide an opportunity for the ISA Panel Members to clarify issues, check for completeness and accuracy of the ISAA, as well as potential discrepancies and pursue lines of enquiry in greater depth.

29.1. The Interviewees’ Perspective

29.1.1. Before the Interview

People have many different reactions to participating in an interview session for a Standards Assessment. The experience can be enjoyable or frightening, interesting or boring, easy or daunting. The following are some ways in which the HEI can help people prepare for their interviews:

- Provide a copy of the Information for Interviewees from the OAAA (refer to Appendices J and K);
- Provide a copy of the ISAA sufficiently in advance so that they will have had an opportunity to read it;

\[^{36}\text{http://www.oaaa.gov.om/QualityTraining/Handout/08v2_handout.pdf}\]
- Provide a briefing on the process and what to expect; and
- Assure them that their participation will not be monitored.

29.1.2. During the Interview/Responding to Questions

The following are some tips for interviewees to think about during the interview itself (HEIs may wish to print and circulate these to Interviewees as part of a briefing):

- Relax! The ISA Panel is professional and genuinely wants to hear your views.
- The ISA Panel will ensure that everybody is given an opportunity to speak.
- The interview is not a test – you cannot pass or fail! If you do not know the answer to a question, just say so. This is a much better option than guessing.
- Feel free to seek clarification about any questions that are asked in order to help provide an answer (in other words, it is okay to ask “what do you mean by…?”).
- It is inappropriate to seek information about the ISA Panel’s preliminary views (including questions like “why do you ask that?”).
- You may receive a question that does not obviously fit within your area of responsibility. Try and answer it anyway – the ISA Panel probably knows this and asked you deliberately to test how widespread an issue is.
- Sometimes you may feel that you are better placed to respond to a question than the person to whom it was put. The ISA Panel may have done this deliberately; or, if they want the ‘authoritative’ answer, may not have known the most appropriate person to ask. You will not know which of these applies, and so the best strategy is not to interject until the person asked the question has had an opportunity to provide a response, and then seek the ISA Panel Chairperson’s permission to provide another response.
- The interview time is limited so answers should be kept as concise as possible.
- Do not try to present the ISA Panel with materials. If you have some that you think are important for the ISA Panel to have, then convey this to the Contact Person and mention them to the ISA Panel during the interview. If the ISA Panel wishes to consider these materials, it will make a formal request for them through the Contact Person.

29.1.3. After the Interview

It is common for interviewees to be left with two distinct impressions after their session, both of which require discussion.

Firstly, it is normal for interviewees to believe that they did not have sufficient time to say everything that they wanted to say. Standards Assessment Visits are intensive periods during which the ISA Panel must cover a wide range of topics in sufficient depth.

Secondly, interviewees often feel that the ISA Panel focused too much on process (i.e. Deployment) and not enough on actual results. It is important for interviewees to understand that the ISA Panel is seeking information on each topic from a variety of sources. Formal results are usually available in reports and similar printed formats. On the other hand, what people actually do each day is not easily documented and is best explored by asking people about their ‘lived experience’.

29.2. The Institutional Standards Assessment Panel Members’ Perspective

Interviews will yield primarily subjective information, sometimes called people’s ‘lived experience’. This is valuable in testing whether the situations described in the ISAA are generally reflected in practice.

29.2.1. Interview Sessions

There is a maximum of eight interviewees per interview session. The reason for this is to ensure that every participant will have an opportunity to speak in the limited time available:

- Interviewees should wait outside the ISA Panel Room until the Review Director invites them in.
• Individuals will not be permitted to dominate the session (for example, by attempting to answer all the questions on behalf of the other interviewees).
• Where practicable, people should meet with the ISA Panel once only. It is understood that many people will hold more than one area of responsibility. However, the ISA Panel is seeking a broad range of input. Also, by meeting people other than the most senior person for any given issue, the ISA Panel is able to explore such topics as internal communication, delegation of authority and teamwork.
• Managers and staff will, where possible, be interviewed separately.
• The sessions are confidential, in that the ISA Panel may use the information received, but not in a manner that reveals the identity of the provider.
• HEIs are also expected to respect the confidentiality of the process and may not coerce interviewees to say certain things or divulge what was said.
• All interviewees should have a name card that identifies their name and program of study (for students) or department/role (for staff and others). These should be printed in a large and plain font (e.g.: Arial 72 pt) and positioned upright on the table in front of the person.
• Interviewees should not bring mobile phones into the ISA Panel Room.
• Interviewees are not permitted to take notes or use any form of recording device in the interview session.

29.2.2. Random Interviews
For Standards Assessment to meet the public’s demanding expectations of HEI accountability, it must be able to show that the data collection methods were, in part, independent of the HEI’s influence. One mechanism for achieving this is to conduct random interviews with the HEI staff and students during the Standards Assessment Visit (and only at that time). The way this occurs is for an ISA Panel Member to excuse him or herself from the Panel interviews and to visit staff and students in their places of work and study. There are some rules for Random Interviews in order to ensure that they are conducted in a fair, safe and professional manner.

• All ISA Panel Members will have name badges that clearly identify them and their status.
• ISA Panel Members will only seek to speak with staff and students. Other visitors on campus will not be interviewed.
• ISA Panel Members will politely request the interview, and will not pressure people if they do not wish to participate.
• Every attempt is made to keep the duration of each random interview less than 15 minutes.
• Interviews will usually be with individual people and are conducted confidentially.
• Most Random Interviews are expected to be conducted in staff offices or in communal spaces such as the Library, the Cafeteria or foyers.
• ISA Panel Members will not intrude upon teaching sessions.
• ISA Panel Members will not access secure locations such as laboratories, chemical storage areas, cashiers or construction sites.
• It is not appropriate for HEI staff to accompany ISA Panel Members during the Random Interviews. ISA Panel Members will use the Campus Map as a guide but may also need to ask the Contact Person (through the Review Director) for assistance in determining appropriate locations.

Responses are recorded on Random Interview Worksheets. These are shared with the other ISA Panel Members, but will otherwise be confidential. ISA Panel Members will have one worksheet for each random interview. They are prepared in advance of the Standards Assessment Visit by the Review Director, using information submitted by ISA Panel Members at the Preliminary Meeting. Each Random Interview Worksheet for staff should be the same, allowing the collection of several responses to the same questions. However, the scope should be left for other issues to be raised by the interviewee if they wish.
29.2.3. **Call Back Interviews**

Some time is set aside after the formal scheduled interviews for the ISA Panel to meet people whom it believes can assist in finalising its deliberations on certain issues. Sometimes issues arise during the assessment about which the ISA Panel cannot form a final judgment without asking further questions or seeking further data. Therefore, it may ask to meet key people at the end of the Standards Assessment Visit to assist with those issues. These ‘Call Back’ interviews are different from the normal interview sessions in three respects:

- The interviewees are likely to have already met the ISA Panel earlier in the Standards Assessment Visit;
- They will not know they are required until the evening before; and
- The interviewees are told in advance what the line of questioning will be.

The Review Director will meet with the Contact Person well in advance of the Call Back interviews (this will typically be at the end of the second day of the visit) and discuss whom the ISA Panel wishes to meet and what the precise topics are. The Contact Person then needs to try and arrange for those people to be available at the designated times. These call back interviews are normally focused on a single issue and about 10 to 15 minutes in duration.

This is a very important part of the Standards Assessment Visit. It is in the HEI’s best interests to ensure that the ISA Panel has all its questions answered to ensure that the final ISA Report, the Accreditation Outcome and the standards and criteria ratings, are as accurate and fair as possible. That said, the OAAA understands that organising the Call Back sessions require some flexibility on the part of the HEI and appreciates the HEI’s assistance in this regard.

30. **Reaching Conclusions**

30.1. **Institutional Standards Assessment Panel Review Sessions**

The ISA Panel will meet on its own at regular intervals throughout the Standards Assessment Visit in order to discuss the information obtained through the interviews and to plan for the following interview sessions. These sessions are confidential.

30.2. **Report Writing Day**

The Standards Assessment Visit will include a Report Writing Day. No interviews are scheduled on this day. The Review Director may request the Contact Person to provide additional materials to assist the ISA Panel to reach an informed conclusion against the criteria and standards. At the end of the Report Writing Day, the ISA Panel will normally conclude the Standards Assessment Visit by meeting with the HEI’s senior representatives in order to thank them for their cooperation. The ISA Panel will not provide any indication of the ISA Panel’s findings, Accreditation Outcome or standards and criteria ratings. The HEI may request a photo opportunity with the ISA Panel at the end of the Visit.

30.3. **Evidence-Based Decision Making**

ISA Panels are encouraged to work towards consensus, but not necessarily unanimous agreement, on key findings and standard and criterion ratings. In all cases, decisions regarding whether a criterion has been *Met* or *Not Met* must be based on evidence. Different types of evidence should be considered including objective and subjective evidence. Ratings should also be based on complete analysis. Lack of data does not necessarily mean that the analysis is incomplete. Requests for Additional Supporting Materials should be made by the ISA Panel in order to arrive at a carefully considered rating for criteria and standards. In some cases HEIs may be unable to provide the type of data which is needed to demonstrate the requirements of the criteria have been *Met*. Standards Assessment is evidence based and HEIs must ensure they provide evidence to support claims made in the ISAA.
30.4. **Rating against the Criteria and Standards**

When rating each criterion it is important to understand the particular characteristics of provision or practice associated with each rating. Table 3 in Section 5.1 should be the key reference point for determining ratings against the criteria.

Once all criteria have been rated, the standard rating can be easily calculated by identifying the rating given to more than half of its criteria (refer to Table 4 in Section 5.2). Where more than two criteria are rated *Partially Met* in any standard the standard is rated *Not Met*.

The overall Assessment Outcome is based on the rating given to more than half of the standards (refer to Table 5 in Section 5.2). In order for the HEI to be accredited all (applicable) standards must be *Met*. When one (or more) standard is rated *Unsatisfactory*, the HEI is placed on Probation and required to undergo Standards Reassessment. Refer to Part C on how to rate against the criteria and standards.

30.5. **Determining the Probation Period**

HEIs that have any criteria rated *Not Met* or have more than two criteria within any standard rated *Partially Met*, will automatically be placed on Probation. An HEI may be placed on probation for up to one year (the probation period may be extended for a further year following Standards Reassessment if good progress has been made towards meeting the requirements of the standard). The ISA Panel should make a recommendation to the OAAA Board on the likely period it will take for the HEI to address *Not Met or Partially Met* criteria in order to meet the requirements of the standards in the future (refer to Section 5.1).
PART G: APPENDICES
APPENDIX A: REFERENCES


Oman Academic Accreditation Authority, (OAAA), ‘External Reviewer Register’, http://www.oaaa.gov.om/About.aspx#Reviewer


Oman Academic Accreditation Authority (OAAA) Classification of Institutions, http://www.oaaa.gov.om/Framework.aspx#Fm_Institution


APPENDIX B: ABBREVIATIONS

ADRI ........................................... Approach - Deployment - Results - Improvement
ANQAHE ...................................... Arab Network for Quality Assurance in Higher Education (http://www.anqahe.org)
CEO .............................................. Chief Executive Officer
ENQA ........................................... The European Association for Quality Assurance in Higher Education (http://www.enqa.eu)
EQA .............................................. External Quality Assurance
EQAA ............................................ European Quality Assurance Agency (http://eqaa.eu)
EO .............................................. Executive Officer (former role title of Review Director)
HEAC ............................................ Higher Education Admissions Centre (www.heac.gov.om)
HEI .............................................. Higher Education Institution
HEI Chairperson ............................. The Chairperson of the HEI’s governing body.
HESS .............................................. Higher Education Statistical System
INQAAHE ..................................... International Network of Quality Assurance Agencies in Higher Education (www.inqaahe.org)
ISA .............................................. Institutional Standards Assessment
ISAA ............................................ Institutional Standards Assessment Application
KPI .............................................. Key Performance Indicator
MoHE .......................................... Ministry of Higher Education (http://mohe.gov.om)
OAAA ........................................... Oman Academic Accreditation Authority (http://www.oaaa.gov.om/ar/Default.aspx)
OAC ............................................ Oman Accreditation Council (former name of OAAA)
OSCED ......................................... Oman Standard Classification of Education Framework (http://www.osaa.gov.om/Framework.aspx#Fm_Classification)
OQF ............................................ Oman Qualifications Framework (http://www.osaa.gov.om/Framework.aspx#Fm_Qualification)
OQNHE ........................................ Oman Quality Network in Higher Education (http://www.qnhe.om)
PSO ............................................ Panel Support Officer
QA .............................................. Quality Audit
QE .............................................. Quality Enhancement
RD .............................................. Review Director
ROSQA ......................................... Requirements of Oman’s System for Quality Assurance (http://www.oaaa.gov.om/Oman_ROSQA%20%28All%20part%20on e%29.pdf)
ISAM ........................................... Institutional Standards Assessment Manual
SM .............................................. Supporting Materials
APPENDIX C: STANDARDS ASSESSMENT PANEL DECLARATION FORM

Oman Academic Accreditation Authority

This form should be used ONLY once the Institutional Standards Assessment (ISA) Panel Member has received a written invitation from the OAAA to join a specific ISA Panel. External Reviewers who receive such an invitation must complete and return this form to OAAA before their participation on the ISA Panel can be confirmed.

Name of ISA Panel Member (print): .............................................................................................................................................................

Name of HEI undergoing Institutional Standards Assessment: ..........................................................................................................................

Date of Institutional Standards Assessment Visit: ..................................................................................................................................

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<thead>
<tr>
<th>Declarations</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
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<tbody>
<tr>
<td>I have read and understood the Institutional Standards Assessment Manual (ISAM) and will abide by the Roles and Responsibilities for ISA Panel Members.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I know of no conflict of interest, as set out in Section 13.1 of the ISAM, which would jeopardize my participation on this ISA Panel. (If you tick 'disagree', the Review Director will contact you as soon as possible to discuss the matter further.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have already provided to the OAAA, or have submitted with this form, accurate and up to date biographical information as required, including a digital photograph, and I consent to this information being edited and published on the OAAA website and otherwise used by OAAA for the purposes of Institutional Standards Assessment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I will not enter into a consultancy relationship (or similar) with the HEI undergoing Standards Assessment, from the time of signing this form until one full calendar year after the public release of the Accreditation Outcome.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I will not breach the confidentiality of any information in relation to the HEI’s Institutional Standards Assessment. This includes information received by the ISA Panel in written form (e.g. the Institutional Standards Assessment Application, Supporting Materials, Public Submissions, feedback from internal and external moderators, and the HEI’s response to the draft OAAA Standard Assessment Report) as well as information received face-to-face (e.g. during the Planning Visit, interview sessions or random interviews). It also includes the ISA Panel’s deliberations and information produced by the ISA Panel in the form of Preliminary Ratings, Conclusions and all draft versions of the Report.</td>
<td></td>
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<tr>
<td>I agree that I will not delegate work to anyone else and that the delegation of work to any person not approved by the OAAA Board to participate on the Standards Assessment would constitute a serious breach of confidentiality.</td>
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ISA Panel Member’s signature: .............................................................................................................................................................

Date: .............................................................................................................................................................

Please complete and return a scanned copy by e-mail or send by fax to +968 2412 1231
APPENDIX D: STANDARDS ASSESSMENT OBSERVER DECLARATION FORM

Oman Academic Accreditation Authority

This form should be used ONLY once the Observer has received a written approval from the OAAA to observe a specific Institutional Standards Assessment (ISA) Panel. Observers who receive such an approval must complete and return this form to OAAA before their participation on the ISA Panel can be confirmed.

Name of Observer (print): ........................................................................................................................................

Name of HEI undergoing Institutional Standards Assessment: ..............................................................................

Date of Institutional Standards Assessment Visit: ....................................................................................................

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<tr>
<th>Declarations</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
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<tbody>
<tr>
<td>I have read and understood the Institutional Standards Assessment Manual (ISAM) and will abide by the Roles and Responsibilities for Observers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I know of no conflict of interest, as set out in Section 13.1 of the ISAM, which would jeopardize my observations of this Institutional Standards Assessment.</td>
<td></td>
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</tr>
<tr>
<td>(If you tick ‘disagree’, the Review Director will contact you as soon as possible to discuss the matter further.)</td>
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</tr>
<tr>
<td>I have already provided to the OAAA, or have submitted with this form, accurate and up to date biographical information as required, including a digital photograph, and I consent to this information being edited and published on the OAAA website and otherwise used by OAAA for the purposes of Institutional Standards Assessment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I will not enter into a consultancy relationship (or similar) with the HEI undergoing Standards Assessment, from the time of signing this form until one full calendar year after the public release of the Standards Assessment Outcome.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I will not breach the confidentiality of any information in relation to the HEI’s Institutional Standards Assessment. This includes information received by the ISA Panel in written form (e.g. the Institutional Standards Assessment Application, Supporting Materials, Public Submissions, feedback from internal and external moderators, and the HEI’s response to the draft OAAA Standards Assessment Report) as well as information received face-to-face (e.g. during the Planning Visit, interview sessions or random interviews). It also includes the ISA Panel’s deliberations and information produced by the ISA Panel in the form of Preliminary Ratings, Conclusions and all draft versions of the Report.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Observer’s signature: ........................................................................................................................................

Date: ............................................................................................................................................................

Please complete and return a scanned copy by e-mail or send by fax to +968 2412 1231
APPENDIX E: STANDARDS ASSESSMENT PRELIMINARY MEETING AGENDA

This sets out a typical agenda assuming that only the Institutional Standards Assessment (ISA) Panel Members from Oman are able to be physically present and that the international members will need to link in by teleconference. This agenda can be modified at the ISA Panel Chairperson’s discretion and on the advice of the Review Director.

<table>
<thead>
<tr>
<th>Item</th>
<th>Duration</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>10 minutes</td>
<td>Brief introductions: clarifying objectives of the Preliminary Meeting</td>
</tr>
<tr>
<td>2</td>
<td>15 minutes</td>
<td>Key features of the Standards Assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Context of the ISA with HEI undergoing Standards Assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Approach to Institutional Standards Assessment (Stage 2) v. Quality Audit (Stage 1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Standards, criteria, indicators and ratings</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Role of ADRI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Evidence – Supporting Materials</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Standards Assessment Visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Expected outcomes of the ISA and report writing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Questions/clarifications required by ISA Panel Members</td>
</tr>
<tr>
<td>3</td>
<td>25 minutes</td>
<td>Brief general overview comments about the Institutional Standards Assessment Application (ISAA) and any further contextual information required by Panel members.</td>
</tr>
<tr>
<td>4</td>
<td>60 minutes</td>
<td>ISAA Analysis and ISA Report draft v1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Looking at each Standard, what are the main issues for consideration?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Is there any particular criterion that needs discussion?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Any areas for clarification or contextual information required?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Any strong diverging views between the HEI’s self-ratings and the Panel’s preliminary ratings?</td>
</tr>
<tr>
<td>5</td>
<td>10 minutes</td>
<td>Next steps</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Task allocations can be decided prior to the Preliminary Meeting.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>In order to best utilise the time available, ISA Panel Members will focus on particular areas of the ISA (and related Supporting Materials submitted so far) in order to:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Decide on any further evidence required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Decide on who the ISA Panel wishes to meet and why</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Frame potential questions to ask during the ISA Visit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ISA Panel Members are welcome to look at the whole ISAA and share any further thoughts they may have, especially in relation to evidence required</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Preparing for the Planning Visit.</td>
</tr>
<tr>
<td>6</td>
<td>5 minutes</td>
<td>Any other business</td>
</tr>
</tbody>
</table>
APPENDIX F: STANDARDS ASSESSMENT PLANNING VISIT AGENDA

This sets out a typical agenda for a Planning Visit. Apart from the pre-meeting with the HEI CEO or equivalent, the remainder of the meeting will take place between OAAA, the HEI Contact Person and representatives.

<table>
<thead>
<tr>
<th>Duration</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 minutes</td>
<td>Pre-meeting</td>
</tr>
<tr>
<td></td>
<td>Brief meeting between OAAA and HEI CEO or equivalent.</td>
</tr>
<tr>
<td>30 minutes</td>
<td>Matters for Clarification</td>
</tr>
<tr>
<td></td>
<td>This is an opportunity for the Institutional Standards Assessment (ISA) Panel Chairperson (or representative) and the OAAA Review Director to seek clarifications from the HEI about statements in the Institutional Standards Assessment Application.</td>
</tr>
<tr>
<td>60 minutes</td>
<td>Additional Supplementary Materials</td>
</tr>
<tr>
<td></td>
<td>The list of Additional Supplementary Materials requested by the ISA Panel is discussed.</td>
</tr>
<tr>
<td>60 minutes</td>
<td>Draft Standards Assessment Visit Program</td>
</tr>
<tr>
<td></td>
<td>The draft Standards Assessment Visit program is discussed. The HEI may raise any concerns or questions.</td>
</tr>
<tr>
<td>10 minutes</td>
<td>Public Submissions</td>
</tr>
<tr>
<td></td>
<td>The process for advertising and handling public submissions is discussed.</td>
</tr>
<tr>
<td>30 minutes</td>
<td>Logistics &amp; Inspection of Premises</td>
</tr>
<tr>
<td></td>
<td>Venues to be inspected for suitability including the ISA Panel’s room (in which the interviews and panel review sessions are held) including power and internet access for ISA Panel Members; the designated room for the Panel to meet with students (separate from the Panel room) and the lunch room (also separate from the Panel room).</td>
</tr>
<tr>
<td></td>
<td>Depart lunch venue</td>
</tr>
</tbody>
</table>
APPENDIX G: CALL FOR PUBLIC SUBMISSIONS

Oman Academic Accreditation Authority

CALL FOR PUBLIC SUBMISSIONS

The Oman Academic Accreditation Authority (OAAA) has convened an Institutional Standards Assessment (ISA) Panel to undertake a Standards Assessment of [HEI]. All Higher Education Institutions (HEIs) in Oman undergo Standards Assessment as the second stage of the national institutional accreditation system. The ISA determines the HEI’s ability to meet OAAA internationally benchmarked external standards and criteria applicable to its context. The standards are available on the OAAA website (www.oaaa.gov.om). The ISA involves a comprehensive self-assessment by the institution resulting in an Institutional Standards Assessment Application (ISAA), followed by an external review by an ISA Panel. The process results in publication on the OAAA website of ratings against (applicable) standards and criteria and the publication of the Accreditation Outcome.

As part of its deliberations, the ISA Panel invites submissions from interested persons. Submissions may cover any issue relevant to the ISA. A submission will be accepted by the ISA Panel only under the following conditions:

- It must be sent by email to [OAAA staff name and email] by no later than [close date].
- It must include the name, position, organisation (HEI, workplace, etc.) and contact details of the person/s making the submission. This information is treated in confidence. Anonymous submissions will not be considered by the ISA Panel under any circumstances.
- The person/s making the submission must be willing to participate in a telephone interview should the ISA Panel consider such a discussion to be necessary.
- The submission should address aspects of the [HEI’s] activities that will assist the ISA Panel in forming conclusions about whether standards have been Met. It should contain specific evidence for any claims being made. Vague statements or allegations will not be pursued by the ISA Panel.
- The submission should not refer to personal grievances or single out individual members of staff (the ISA Panel has no mandate to address grievances).
- The submission (excluding any particular corroborating evidence) should be no more than 1,000 words (two sides of an A4 page in length).

All submissions are confidential in the sense that the ISA Panel needs to be able to use the information provided in submissions, but will not reveal their source.

If the ISA Panel chooses to investigate a public submission, it is only as part of the overall ISA, and not in terms of the details of a particular complaint. The ISA Panel will not make any response or report to the person/s making the submission.

Staff and students of [HEI] may wish to contact [Contact Person] for further information about [HEI’s] preparations. For more general inquiries about the OAAA or the ISA, you can contact [Review Director] on [phone number] or visit www.oaaa.gov.om.
APPENDIX H: STANDARDS ASSESSMENT VISIT PROGRAM

The following is only indicative. A Standards Assessment Visit may vary between three and five days depending upon the size of the HEI. The exact program and request for interviews with stakeholders will depend on the Institutional Standards Assessment (ISA) Panel’s requirements.

<table>
<thead>
<tr>
<th>Time</th>
<th>Day 0</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>0900-0945</td>
<td>Interview 1 VC/Dean</td>
<td>Interview 7 Council Members</td>
<td>Call Back interviews (if necessary)</td>
<td>Panel Review Agree on ratings for criteria</td>
<td></td>
</tr>
<tr>
<td>1000-1045</td>
<td>Interview 2 Heads of Department</td>
<td>Interview 8 Non-academic Managers/ Directors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1100-1130</td>
<td>ISA Panel Review</td>
<td>ISA Panel Review</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1130-1215</td>
<td>Interview 3 Academic staff</td>
<td>Interview 9 Non-academic staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1230-1300</td>
<td>ISA Panel Lunch</td>
<td>ISA Panel Lunch</td>
<td>ISA Panel Lunch</td>
<td>ISA Panel Lunch</td>
<td>ISA Panel Lunch</td>
</tr>
<tr>
<td>1445-1530</td>
<td>Interview 4 Students</td>
<td>Interview 10 Students</td>
<td></td>
<td></td>
<td>Concluding session</td>
</tr>
<tr>
<td>1530-1615</td>
<td>Interview 5 Teaching facilities and laboratories (in situ)</td>
<td>Interview 11 External stakeholders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1615-1700</td>
<td>Interview 6 Library and IT (in situ)</td>
<td>Interview 12 Non-academic staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1700-1830</td>
<td>ISA Panel Review</td>
<td>ISA Panel Review</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX I: STANDARDS ASSESSMENT NOTICE

GENERAL INFORMATION FOR [HEI] STAFF, STUDENTS AND STAKEHOLDERS

The Oman Academic Accreditation Authority (OAAA) has convened an Institutional Standards Assessment (ISA) Panel to undertake Standards Assessment of [HEI]. All Higher Education Institutions (HEIs) in Oman undergo Standards Assessment as the second stage of the national institutional accreditation system. The Standards Assessment determines the HEI’s ability to meet OAAA internationally benchmarked external standards and criteria applicable to its context. The standards are available on the OAAA website (www.oaaa.gov.om). The Standards Assessment involves a comprehensive self-assessment by the institution resulting in an Institutional Standards Assessment Application (ISAA), followed by an external review by an ISA Panel. The process results in publication on the OAAA website of ratings against (applicable) standards and criteria and publication of the Accreditation Outcome.

The ISA Panel comprises the following people, who are from the national and international higher education sector, professions and industries:

- [Name]
- [Name]
- [Name]
- [Name]
- [Name]
- [Name]
- [Name], (OAAA Review Director)

As part of its deliberations, the ISA Panel will visit [HEI] between [Standards Assessment Visit start date] and [Standards Assessment Visit end date]. During that time, the ISA Panel will meet a wide range of people, including staff, students and external stakeholders. Mostly, these meetings are in formal interview sessions. However, other interviews are ‘random’ in order to help the ISA Panel Members gain a broad perspective. Therefore, at some stage during the Standards Assessment Visit, an ISA Panel Member may approach you on campus and ask whether you would be willing to spend a few minutes with them responding to some questions. All ISA Panel Members are clearly identifiable from their name badges. You are under no obligation to participate, but it is hoped that you will assist in order to help the ISA Panel gain as full an understanding of [HEI] as possible. The questions will cover a range of topics focusing on your personal experiences at [HEI].

All interviews are confidential in the sense that although the ISA Panel needs to be able to use the information you provide, it will not do so in a way that attributes the statements to you. In other words, the ISA Panel may reveal what was said, but not who said it.

If you have any questions or concerns, you should contact [Contact Person] on [phone number] who is able to provide you with more information about the Standards Assessment and the random interviews. You may also wish to read the Institutional Standards Assessment Manual (http://www.oaaa.gov.om/Institution.aspx#Inst_Assessment_New).

For further information about the OAAA generally, you can visit the website (www.oaaa.gov.om).

Thank you very much for your participation in this important exercise.
APPENDIX J: INFORMATION FOR INTERVIEWEES – STAFF/STAKEHOLDERS

The Oman Academic Accreditation Authority (OAAA) has convened an Institutional Standards Assessment (ISA) Panel to undertake Standards Assessment of [HEI]. All Higher Education institutions (HEIs) in Oman undergo Standards Assessment as the second stage of the national institutional accreditation system. The Standards Assessment determines the HEI’s ability to meet OAAA internationally benchmarked external standards and criteria applicable to its context. The standards are available on the OAAA website (www.oaaa.gov.om). The Standards Assessment involves a comprehensive self-assessment by the institution resulting in an Institutional Standards Assessment Application (ISAA), followed by an external review by an ISA Panel. The process results in publication on the OAAA website of ratings against (applicable) standards and criteria and Accreditation Outcome.

The ISA Panel comprises the following people, who are from the national and international higher education sector, professions and industries (they may be accompanied by an Observer, who has no formal role in the Standards Assessment):

- [Name]
- [Name]
- [Name]
- [Name]
- [Name]
- [Name], (OAAA Review Director)

As part of its deliberations, the ISA Panel will visit [HEI] between [Standards Assessment Visit start date] and [Standards Assessment Visit end date]. During that time, the ISA Panel will meet a wide range of people, including staff, students and external stakeholders. You have been requested to participate in an interview with the ISA Panel. As a member of staff or an external stakeholder, your interview may be with the full ISA Panel in an interview session involving up to eight people being interviewed together or it may be with a single ISA Panel Member in a round table interview session involving up to five people being interviewed together. The ISA Panel / ISA Panel Member will ask a number of questions about issues directly relevant to you and may also seek your comments on a broader range of issues and your experiences at [HEI] generally.

All interviews are confidential in the sense that although the ISA Panel needs to be able to use the information you provide, it will not do so in a way that attributes the statements to you. The OAAA expects that all participants in Standards Assessment will respect this rule and will not report on what they or other people said during the interview.

By way of preparation, we suggest that you read your institution’s ISAA. This provides [HEI’s] main submission for the Standards Assessment and many of the ISA Panel’s questions are based on its preliminary analysis of the ISAA. However, please do not bring pre-planned answers to the interview. The ISA Panel will obtain a wide range of Supporting Materials during its process. What it most wants from you is your experience.

[Contact Person] will provide you with the time and venue of your interview, along with more detailed information about the Standards Assessment process. For further information about the OAAA generally, you can visit www.oaaa.gov.om. Thank you very much for your participation in this important exercise.
APPENDIX K: INFORMATION FOR INTERVIEWEES – STUDENTS

The Oman Academic Accreditation Authority (OAAA) has convened an Institutional Standards Assessment (ISA) Panel to undertake Standards Assessment of [HEI]. All Higher Education Institutions (HEIs) in Oman undergo Standards Assessment as the second stage of the national institutional accreditation system. The Standards Assessment determines the HEI’s ability to meet OAAA internationally benchmarked external standards and criteria applicable to its context. The standards are available on the OAAA website (www.oaaa.gov.om). The Standards Assessment involves a comprehensive self-assessment by the institution resulting in an Institutional Standards Assessment Application (ISAA), followed by an external review by a Standards Assessment Panel. The process results in publication on the OAAA website of ratings against (applicable) standards and criteria and the Accreditation Outcome.

The ISA Panel comprises the following people, who are from the national and international higher education sector, professions and industries (they may be accompanied by an Observer, who has no formal role in the Standards Assessment):

- [Name]
- [Name]
- [Name]
- [Name]
- [Name]
- [Name], (OAAA Review Director)

As part of its deliberations, the ISA Panel will visit [HEI] between [Standards Assessment Visit start date] and [Standards Assessment Visit end date]. During that time, the ISA Panel will meet a wide range of people, including staff, students and external stakeholders. You have been requested to participate in a round table interview with the ISA Panel. Interview sessions with students involve groups of up to five people being interviewed together by a single ISA Panel Member. The ISA Panel Member will ask a number of questions about issues directly relevant to you and may also seek your comments on a broader range of issues and your experiences at [HEI] generally.

All interviews are confidential in the sense that although the ISA Panel needs to be able to use the information you provide, it will not do so in a way that attributes the statements to you. The OAAA expects that all participants in Standards Assessment will respect this rule and will not report on what they or other people said during the interview.

By way of preparation we suggest that you read your institution’s ISAA. This provides [HEI’s] main submission for the Standards Assessment and many of the ISA Panel’s questions are based on its preliminary analysis of the ISAA. However, please do not bring pre-planned answers to the interview. The ISA Panel will obtain a wide range of Supporting Materials during its process. What it most wants from you is your experience of enrolling and studying at [HEI].

[Contact Person] will provide you with the time and venue of your round table interview, along with more detailed information about the Standards Assessment process. For further information about the OAAA generally, you can visit www.oaaa.gov.om.

Thank you very much for your participation in this important exercise.
HEIs are invited to respond to claims made in the Institutional Standards Report Draft v5 or to ratings given to standards and criteria (refer to Section 21.5). The HEI’s response to the Institutional Standards Assessment Report Draft must be submitted on the template made available by the OAAA. An example is provided on the type of information which might be included in each column.

- Quote and reference the precise part of the Standards Assessment rating or Report commentary that is being contested.
- Present the claim and the supporting evidence.
- Additional evidence materials may be attached with the Response submission.
- Present alternative wording or make other appropriate suggestions for amending the Standards Assessment Report in a manner that would resolve the issue from the HEI’s perspective.

APPENDIX M: TYPICAL ROUND TABLE INTERVIEW ROOM LAYOUT

![Round Table Interview Room Layout]

Table 1
Table 2
Table 3
Table 4
Table 5
APPENDIX N: HEI RESPONSE TO INSTITUTIONAL STANDARDS ASSESSMENT DRAFT REPORT

HEIs are invited to respond to claims made in the Institutional Standards Report Draft v5 or to ratings given to standards and criteria (refer to Section 21.5). The HEI’s response to the Institutional Standards Assessment Report Draft must be submitted on the template made available by the OAAA. An example is provided on the type of information which might be included in each column.

<table>
<thead>
<tr>
<th>HEI to number the responses</th>
<th>Quote and reference the precise part of the Standards Assessment rating or Report commentary that is being contested</th>
<th>Present the claim and the supporting evidence. Additional evidence materials may be attached with the Response submission</th>
<th>Present alternative wording or make other appropriate suggestions for amending the Standards Assessment Report in a manner that would resolve the issue from the HEI’s perspective</th>
</tr>
</thead>
<tbody>
<tr>
<td>#</td>
<td>Standards Assessment Report Extract</td>
<td>Claim</td>
<td>Suggestion</td>
</tr>
<tr>
<td>1</td>
<td>There have not been any reviews of facilities in the last three years.</td>
<td>This is incorrect. The Halls of Residence were independently reviewed in 2012. The Review Report is attached.</td>
<td>The Halls of Residence facilities were reviewed in 2012.</td>
</tr>
</tbody>
</table>

There is no limit to the number of claims that an HEI can make in response to the draft Standards Outcome and ratings. However, all claims must be supported with evidence.
APPENDIX O: PANEL MEMBER FEEDBACK FORM

In order to support the continuous improvement of the OAAA and its activities, Institutional Standards Assessment (ISA) Panel Members are kindly requested to provide feedback on various aspects of the Standards Assessment once the Standards Assessment Report and outcomes are finalised. The information provided will remain confidential to the OAAA.

<table>
<thead>
<tr>
<th>Name of Panel Member</th>
<th>Institutional Standards Assessment of (name HEI)</th>
</tr>
</thead>
</table>

### Initial Stages of the ISA

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I clearly understood what my role would be and what was required of me during the Standards Assessment.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Advice provided by the OAAA on how to use the ISA template for report writing purposes was clear and helpful.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>All necessary documents were received from the OAAA in a timely fashion.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>I was provided with enough information to allow me to write preliminary comments.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>I was provided with all necessary information on how to rate the standards and criteria.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Comments about the initial stages of the ISA:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### The Preliminary Meeting

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.</td>
<td>The Preliminary Meeting was well-planned, well-structured and clearly focused.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>The Preliminary Meeting was useful.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>The Preliminary Meeting helped to clarify the OAAA’s approach to ISA.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>I had adequate opportunity to contribute to the Preliminary Meeting discussion.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Comments about the Preliminary Meeting:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### The ISA Visit – Day Zero

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.</td>
<td>By the end of Day Zero, I clearly understood my role during the ISA Visit.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>By the end of Day Zero, the Panel was clear about which questions needed to be asked.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>By the end of Day Zero, I had an understanding of how ADRI could be applied to ISA.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
15. By the end of Day Zero, I had confidence in rating the standards and criteria.

16. Comments about the ISA Visit – Day Zero:

### The ISA Visit

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>17.</td>
<td>The ISA Visit was well organised and allowed the ISA Panel to meet with appropriate HEI staff, students and other stakeholders.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>The ISA Visit was well structured and the balance between the number of interview sessions, time for panel discussion and reflection, and review of Supporting Materials made available on site was appropriate.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>The ISA Visit allowed enough time to develop questions for each interview session.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Reaching Conclusions

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>21.</td>
<td>The process for rating the HEI is effective.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td>I had enough time to reflect on interview findings and to synthesise evidence.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23.</td>
<td>I understood the approach to reaching conclusions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24.</td>
<td>The Panel was able to reach consensus on appropriate ratings for criteria and standards.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.</td>
<td>The Accreditation Outcome reflected evidence-based panel decisions.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### The ISA Report

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.</td>
<td>The process for writing the Report is effective.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28.</td>
<td>The ISA Visit allowed enough time to write commentary in the Report against the allocated criteria and standards.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29.</td>
<td>I had confidence in writing the Report.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30.</td>
<td>The format of the final Report is appropriate for its purpose.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### The OAAA

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>32.</td>
<td>The Review Director provided useful professional guidance.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX P: HEI FEEDBACK FORM

In order to support the continuous improvement of the OAAA and its activities, HEIs are kindly requested to provide feedback on the various aspects of the Institutional Standards Assessment once the Standards Assessment Report and outcomes are finalised. The information provided will remain confidential to the OAAA.

Preparing the Institutional Standards Assessment Application (ISAA)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. The OAAA provided appropriate support prior to and during the preparation of the ISAA.

2. We felt confident supplying evidence to support claims we made in the ISAA.

3. We understood what the range of ratings meant and felt confident in applying them.

4. Comments about preparing the ISAA:

5. The Planning Visit was well structured and had a clear focus.

6. The Planning Visit was professionally conducted by the OAAA.

7. The Planning Visit was useful for preparing for the Standards Assessment Visit.

8. Enough time was scheduled for the Planning Visit.

9. Comments about the Planning Visit:

10. The Standards Assessment Visit was well structured.

11. We were confident in implementing the logistical requirements for the Standards Assessment Visit.

12. Interviews conducted by the Panel were friendly and created a professional atmosphere for open interaction.

13. The requests for Additional Supporting Materials made during the Standards Assessment Visit were reasonable.

14. Comments about the Standards Assessment Visit:

15. The Standards Assessment Report is clear, consistent and easy to read.

16. The Standards Assessment Report provided clear justification for the

17. The documents and templates organised by the Review Director (agendas, editing reports, etc.) were done well.

18. The Panel Support Officer provided good administrative support.

19. OAAA staff were responsive to the Panel’s requirements.

20. The ISA was carried out in line with international practice.

21. Comments about the OAAA:

22. The ISA Panel

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

23. The Panel Members worked together well as a team.

24. Panel Members behaved professionally throughout the ISA.

25. Comments about the ISA Panel:

26. Does the ISA Process allow the Panel make sound judgement of the criteria and standards?

27. Were there any aspects of the ISA that were done particularly well?

28. Were there any aspects of the ISA that could be improved for the future?
APPENDIX P: HEI FEEDBACK FORM

In order to support the continuous improvement of the OAAA and its activities, HEIs are kindly requested to provide feedback on the various aspects of the Institutional Standards Assessment once the Standards Assessment Report and outcomes are finalised. The information provided will remain confidential to the OAAA.

<table>
<thead>
<tr>
<th>Preparing the Institutional Standards Assessment Application (ISAA)</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The OAAA provided appropriate support prior to and during the preparation of the ISAA.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. We felt confident supplying evidence to support claims we made in the ISAA.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. We understood what the range of ratings meant and felt confident in applying them.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Comments about preparing the ISAA:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The Planning Visit</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. The Planning Visit was well structured and had a clear focus.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. The Planning Visit was professionally conducted by the OAAA.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. The Planning Visit was useful for preparing for the Standards Assessment Visit.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Enough time was scheduled for the Planning Visit.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Comments about the Planning Visit:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The Standards Assessment Visit</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. The Standards Assessment Visit was well structured.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. We were confident in implementing the logistical requirements for the Standards Assessment Visit.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Interviews conducted by the Panel were friendly and created a professional atmosphere for open interaction.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. The requests for Additional Supporting Materials made during the Standards Assessment Visit were reasonable.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Comments about the Standards Assessment Visit:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The Standards Assessment Report</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>15. The Standards Assessment Report is clear, consistent and easy to read.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. The Standards Assessment Report provided clear justification for the</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The following tables outline the minimum data reporting requirements in the ISAA. HEIs may add other key data which they consider important.

**Table 1: Number of students by program, year of study and gender**

<table>
<thead>
<tr>
<th>Program</th>
<th>Award</th>
<th>Year of study</th>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>20__</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>20__</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>20__</td>
<td></td>
</tr>
<tr>
<td>General Foundation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accountancy</td>
<td>Diploma</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Economics</td>
<td>Diploma</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

**Table 2: Number of students by program, year and mode of study**

<table>
<thead>
<tr>
<th>Program</th>
<th>Award</th>
<th>Year of study</th>
<th>Mode of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0</td>
<td>Internal</td>
</tr>
<tr>
<td>Accountancy</td>
<td>Diploma</td>
<td>1</td>
<td>Face-to-face</td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Mixed</td>
</tr>
<tr>
<td>Economics</td>
<td>Diploma</td>
<td>1</td>
<td>Distance</td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Other</td>
</tr>
</tbody>
</table>

**Table 3: Attrition, progression and completion rates**

<table>
<thead>
<tr>
<th>Program</th>
<th>Year 1 (insert year)</th>
<th>Year 2 (insert year)</th>
<th>Year 3 (insert year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
<td>Completion</td>
</tr>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
<td>Completion</td>
</tr>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
<td>Completion</td>
</tr>
</tbody>
</table>

37. Accountancy and Economics are included as examples only.

38. Nested awards, such as a Diploma leading to an Advanced Diploma leading to a Degree, should all be listed under the same group.

39. The table should show a five-year trend ending in whatever is the most recent year of available data.

40. HEIs must provide details on how they have calculated student attrition, progression and completion rates.
APPENDIX Q: SUMMARY DATA (TEMPLATES)

The following tables outline the minimum data reporting requirements in the ISAA. HEIs may add other key data which they consider important.

### Table 1: Number of students by program, year of study and gender

<table>
<thead>
<tr>
<th>Program</th>
<th>Award</th>
<th>Year of study</th>
<th>20_</th>
<th>20_</th>
<th>20_</th>
<th>20_</th>
<th>20_</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>General Foundation</td>
<td>Year 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accountancy</td>
<td>Diploma</td>
<td>Year 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>Year 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>Year 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Year 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Economics</td>
<td>Diploma</td>
<td>Year 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>Year 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>Year 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Year 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Table 2: Number of students by program, year and mode of study

<table>
<thead>
<tr>
<th>Program</th>
<th>Award</th>
<th>Year of study</th>
<th>Mode of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Internal (face-to-face)</td>
</tr>
<tr>
<td>General Foundation</td>
<td>Year 0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accountancy</td>
<td>Diploma</td>
<td>Year 1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>Year 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>Year 3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Year 4</td>
<td></td>
</tr>
<tr>
<td>Economics</td>
<td>Diploma</td>
<td>Year 1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Adv. Dip</td>
<td>Year 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bachelor</td>
<td>Year 3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Year 4</td>
<td></td>
</tr>
</tbody>
</table>

### Table 3: Attrition, progression and completion rates

<table>
<thead>
<tr>
<th>Program</th>
<th>Year 1 (insert year)</th>
<th>Year 2 (insert year)</th>
<th>Year 3 (insert year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
<td>Completion</td>
</tr>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
<td>Completion</td>
</tr>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
<td>Completion</td>
</tr>
</tbody>
</table>

### Table 3 (continued): Attrition, progression and completion rates

<table>
<thead>
<tr>
<th>Program</th>
<th>Year 4 (insert year)</th>
<th>Year 5 (insert year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
</tr>
<tr>
<td></td>
<td>Attrition</td>
<td>Progression</td>
</tr>
</tbody>
</table>

---

37 Accountancy and Economics are included as examples only.
38 Nested awards, such as a Diploma leading to an Advanced Diploma leading to a Degree, should all be listed under the same group.
39 The table should show a five-year trend ending in whatever is the most recent year of available data.
40 HEIs must provide details on how they have calculated student attrition, progression and completion rates.
### Table 4: Number of staff by department, year, employment status and gender

<table>
<thead>
<tr>
<th>Dept.</th>
<th>Status</th>
<th>20__</th>
<th>20__</th>
<th>20__</th>
<th>20__</th>
<th>20__</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>Dept. A</td>
<td>Full-time</td>
<td>44</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. B</td>
<td>Full-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. C</td>
<td>Full-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The table should show a five-year trend ending in whatever is the most recent year of available data.

### Table 5: Number of staff by academic department, year, employment status and Omani national/Expatriate

<table>
<thead>
<tr>
<th>Academic Dept.</th>
<th>Status</th>
<th>20__</th>
<th>20__</th>
<th>20__</th>
<th>20__</th>
<th>20__</th>
</tr>
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<tr>
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<td></td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>Dept. A</td>
<td>Full-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. B</td>
<td>Full-time</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Part-time</td>
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<td></td>
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<td>Total</td>
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<td></td>
</tr>
<tr>
<td>Dept. C</td>
<td>Full-time</td>
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<tr>
<td></td>
<td>Part-time</td>
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</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

The table should show a five-year trend ending in whatever is the most recent year of available data.

### Table 6: Number of staff by academic department and highest qualification held

<table>
<thead>
<tr>
<th>Academic Dept.</th>
<th>Bachelor</th>
<th>Number of staff with highest qualification</th>
<th>Number of staff holding an additional academic qualification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Bachelor (Hons) or Graduate or Postgrad Diploma</td>
<td>Master or equivalent</td>
<td>Doctorate</td>
</tr>
<tr>
<td>Dept. A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. C</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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41 Includes all academic and administrative departments
42 The table should show a five-year trend ending in whatever is the most recent year of available data.
43 The table should show a five-year trend ending in whatever is the most recent year of available data.
Table 7: Number of staff by administrative department, year, employment status and Omani national/ Expatriate

<table>
<thead>
<tr>
<th>Administrative Dept.</th>
<th>Status</th>
<th>20___</th>
<th>20___</th>
<th>20___</th>
<th>20___</th>
<th>20___</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Omani</td>
<td>Expat</td>
<td>Omani</td>
<td>Expat</td>
<td>Omani</td>
</tr>
<tr>
<td>Dept. A</td>
<td>Full-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dept. B</td>
<td>Full-time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Part-time</td>
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<td></td>
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</tr>
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<td>Total</td>
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<tr>
<td>Dept. C</td>
<td>Full-time</td>
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<tr>
<td></td>
<td>Part-time</td>
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<td>Total</td>
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<td></td>
<td></td>
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</tr>
</tbody>
</table>

The table should show a five-year trend ending in whatever is the most recent year of available data. 

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44The table should show a five-year trend ending in whatever is the most recent year of available data.