



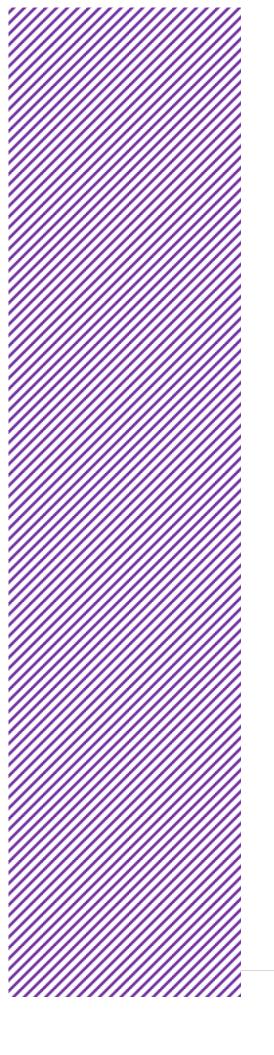
Program Quality System Manual

Department of Physical Therapy & Health Rehabilitation

College of Applied Medical Sciences

Jouf University, KSA







IN THE NAME OF ALLĀH
THE MERCIFUL,
THE MERCY-GIVING

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1. Glossary

Quality Assurance

Quality is process of regularly and systematically evaluating and reporting on evidence of student learning and program performance and using it to improve educational outcomes.

Academic Program

A set of courses and practical elements leading a student to award of an academic degree upon successful completion.

Courses:

Multiple units within the program through which the students achieve some of the learning outcomes through hours within the course plan. These courses can be requisite or elective.

Course:

Scientific content in one of the fields, which constitutes a set of knowledge and skills based on appropriate teaching strategies and evaluation tools. It helps achieve the goals and learning outcomes of the program.

Academic qualification:

A degree awarded to a student upon the completion of an integrated program such as the bachelor's degree.

Accreditation:

Accreditation is a peer process whereby a private, nongovernmental body grants public recognition to an institution or specialized program that meets or exceeds nationally established standards of acceptable educational quality.

Institutional accreditation:

The accreditation of an institution by the accrediting body for a specific period of time following verification of the minimum accreditation criteria in all aspects of the institution.

Program accreditation:

The accreditation of an academic program by the accrediting body for a specific period of time following verification of the program quality and achieving the minimum accreditation criteria of the accrediting body.

Academic Reference standard:

Reference points against which the standards and quality of the program will be compared, therefore, they displaying general expectations about achievement levels and general characteristics that must be met by a graduate of the program.

Academic Standard:

These are specific criteria approved by the institution; they are design from external national or international references and include the minimum skills and knowledge that are acquire by the program's graduates and supposed to be fulfill the institution's stated mission.

Action Plans:

The set of different activities that are design in clear sequence to accomplish specific goals.

Annual Report:

This is annual self-evaluation report for the educational institution that is prepare based on the reports of academic programs and the various activities that fulfill the mission of the institution.

Documentation:

This is process of achieving and recording work data in the institution. Therefore, this data can be analyze and yield results will use for designing action plans.

Effectiveness of Quality Management and Enhancement:

The efficiency of the quality system used within the organization and its ability to achieve the desired achievements and achieve the goal satisfaction of all beneficiaries.

Review:

This is process of reviewing and evaluating the programs and activities by internal auditing committee and by independent external individuals (Reviewers).

Saudi Arabian Qualification Framework (SAQF)

The SAQF is a framework that is intended to support the development of skills and competence for transforming economy, personal development, mobility and employability and drive career paths, including improved opportunities for transferability between academia, training and employment.

Learning Outcomes:

The knowledge and targeted skills acquired by students in a program courses or educational program.

Teaching strategies:

This is specific methods such as case studies, practical work, and class discussion, which are apply to develop students' knowledge and skills in various fields.

Students' achievement:

The level of students' performance within the educational institution, which reflects their achievement of knowledge and skills.

Key performance indicators:

These are variables use assess the program performance by comparing actual results with the planned ones.

SWOT Analysis:

SWOT (strengths, weaknesses, opportunities, and threats) analysis is a framework used to evaluate and study the current situation of an institution and to develop strategic planning. SWOT analysis assesses internal and external factors, as well as current and future potential.

National Commission for Academic Accreditation and Assessment (NCAAA):

NCAAA was established pursuant to High Order No. 7/B/6024 dated 9/2/1424H with a legal personality and administrative and financial autonomy. The Commission acted as the body in charge of academic accreditation and quality assurance in public and private higher education institutions

University of Jouf Policies:

All of program policies, procedures and manuals are based on the university policies, which control and forward the program activities

Policy of student's evaluation and examination

Policy of independent verification for students works

Policy of learning and teaching

System of Responsibility, Powers and Accountability:

The system of Responsibility, Powers and Accountability follow the organizational structure of program, college and university, which clarified through line of authority

2. Introduction

Quality assurance process can rule out both strengths and weakness points of the program. It also helpful for designing and implementation of correction plans in order to improve the quality of academic program. Jouf University strategies direction undergoing for improvement the academic programs in order to applied the vision of 2030 in preparing well-qualified and distinguished cadres in all discipline. This mission will be reality through translation of the program mission, vision, goals into ILOS and their implementation monitor through program quality assurance system under guiding of Jouf University Deanship of Quality and Accreditation.

Program Mission:

To prepare qualified physical therapists to meet the labour market demand through distinction learning, research, and community service..

Program Vision:

The Jouf University Physical Therapy & Health Rehabilitation Department will be a Nationally Recognized Centre of Academic Excellence by Providing Quality Physical Therapy & Health Rehabilitation Programs within a Collaborative Learning Environment that Enhance Physical Therapy Knowledge, Practice and Research.

Program Goals:

The Jouf University Bachelor of Science in Physical Therapy & Health Rehabilitation program goals are to:

- To establish attractive learning environment to gain physical therapy knowledge
- To prepare qualified physical therapist capable of dealing with updated scientific and medical advancement
- To conduct and publish scientific research in the physical therapy and rehabilitation field.
- To provide effective community and social services.

3. Objectives Program Quality Assurance System

3.1. Main objective

To apply PDCA cycle (Plan – Do – Check – act) as shown in Figure 1.

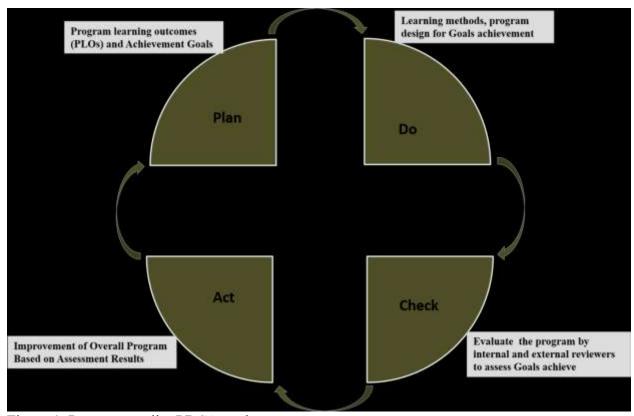


Figure 1. Program quality PDCA cycle

3.2. Specific objectives

- 1. Ensure excellence in quality practices in teaching and learning as well as its support services
- 2. Assessment of quality outcomes and determining the weakness paths of the program
- 3. Designation of correction plans and monitoring their implementation.
- 4. Documentation and achieving the quality records and reports

4. Organization Structure of the Quality Management System in the Department of Physical Therapy & Health Rehabilitation:

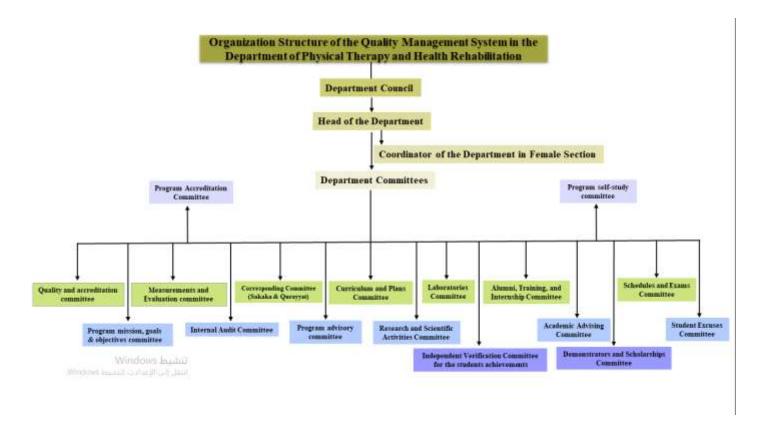


Figure 2: Organization structure of the program Quality Management system

4.1. Department Council

Department council consists of assistant and associate professors in both campus (main & female) and is chaired by the head of the department. The department council is formed at the beginning of every academic year based on a decision by the president of University and recommendation of dean.

The department Council meets at least once a month, at the call of the chairperson, to study all critical issues of the department, set strategic directions, discuss regulations and operation guidelines, and decide on all academic as well as non-academic issues. The department Council

also reviews the policies, practices, and procedures of the department. The department council meetings are conducted using video conferencing facilities since the faculty members of the female branch are council members.

The topics discussed by the department council are referred from the head department. According to department procedures, the minutes of meetings and decisions of department have to be endorsed by the department council's approval. The decisions of the permanent or temporary committees are not final unless approved by the department council.

The Council meeting is considered official only if one-third of the members attend the meeting. No decisions are taken unless they gain the absolute majority of votes among the members who are present. However, if there is a tie in the voting, the Chairperson will have the deciding vote.

4.2. Head of the department

- Hold the responsibility for leading the department with vision, creativity and excellence.
- Provides collaborative and collegial leadership for the department.
- Designs and implements the academic plan as it relates to the department.
- Develops, implements, promotes, and evaluates curriculum.
- Supervises the management, development, and evaluation of curriculum for the department.
- With the help of the faculty members, recruits, supervises, and evaluates full-time and adjunct department faculty and support staff.
- Promotes and fosters professional development activities related to academic leadership, classroom instruction, instructional technology, and support staff development.
- Develops and implements department budget and planning documents.
- Works with department faculty to coordinates student program activities.
- Ensures the vitality, currency, and academic excellence of the department programs.

4.3. Department Committees

4.3.1. Quality and accreditation Committee

Duties of this committee includes:

- Provide the necessary assistance and support to all faculty members in the department to complete the quality documents and fulfill the department's quality requirements.
- Preparing workshops to spread the culture of quality in the department.
- Preparing a guide for the policies and systems of quality assurance in the department.
- Proposing, organizing, and monitoring the implementation and supervision of all quality assurance activities in the department.
- Reporting to the head of the department directly and periodically of the results and outputs of the quality assurance work.

4.3.2. Program Mission, Goals, Vision, and Objectives Committee

This committee is responsible for:

- Reformulation of the mission, vision, goals, and objectives of the bachelor of Physical Therapy & Health Rehabilitation program.
- Update the mission, vision, goals, and objectives of bachelor of Physical Therapy & Health Rehabilitation Program in line with the mission and vision of Jouf University and the requirements of the labor market.
- Carry out the tasks assigned to it by the head of the department

4.3.3. Internal audit Committee

Auditing and reviewing the following program documents:

- Program specification
- Courses specifications
- The final examination paper
- Courses reports
- The program learning outcomes
- Carry out the any tasks assigned to them by the head of the department

4.3.4. Program self-study Committee

- Prepare of study report for academic accreditation.
- Identifies all supporting materials needed to study report.
- Validate the evidences for self-study reports.

- Follow up the achievement of self-study re ports
- Works with other faculty to prepare the annual program reports.
- Carry out the any work assigned to it by the head of the department.

4.3.5. Program accreditation Committee

- Performing the academic accreditation activities in Physical Therapy & Health Rehabilitation Department.
- Find out the suitable national and international accreditation bodies.
- Organizing seminars and workshops to spread the concept and requirements of national and international accreditation.
- Monitor the completion of forms and documents require for the academic accreditation.
- Carry out any tasks assigned to it by the head of the department

4.3.6. Measurements and Evaluation Committee

- Prepare Key performance indicators (KPIs) reports of the program.
- Identifies all supporting materials needed for KPIs reports.
- Conduct the statistics of surveys for quality assurance activities.
- Prepare the correction plans based on feedback of surveys and reports
- Distribute the culture of assessment and evaluation in order to improve the level of the educational process in the department.
- Integration, cooperation and coordination with the unit of measurement and evaluation at the College and University in order to achieve the general objectives of the unit.
- Perform the tasks assigned to it by the head of the department.

4.3.7. Curriculum and Plan Committee

- Developing and updating the program study plans
- Reviewing the program and courses specifications
- Evaluating the requests for transfer to the department and supervise the equivalence of courses between the various plans.
- Contributing to the development and modernization of learning and teaching methods.
- Carry out any work assigned to it by the head of the department.

4.3.8. Research and Scientific activities Committee

- Preparing the plan of research priorities in the department and coordinating with the relevant bodies of the University.
- Create scientific activities and workshops periodically for the faculty members and students.
- Recommend the cooperative scientific research centers and scientific societies related to Physical Therapy field.
- Preparing a database for the research of independent study in the department.
- Preparing a database for the research and scientific works published by the faculty members in the department.
- List the scientific and research projects of the faculty members that are sponsors by University or other funding body.
- Carry out any tasks assigned to it by the head of the department

4.3.9. Corresponding Committee (Sakaka & Qurayyat)

- Review of academic achievement of both branches
- Discus the collaborative activities of branches and similarities of academic working
- Coordinate with head of departments regarding improvement plans for academic process.

4.3.10. Laboratories Committee

- Supervise the processing of laboratories equipment preparation.
- Prepare the lists of laboratories needs and studying the offers submitted by the companies.
- Follow-up of the approved companies with regard to supplying the laboratories equipment and reagents.
- Continuous follow-up of malfunctions and coordination with the competent authorities regarding the maintenance and operation of the laboratory equipment.
- Prepare periodic reports on the activities held on the laboratories.
- Prepare and following up the schedules of faculties, technicians, and assistants.
- Carry out any tasks assigned by the head of the department.

4.3.11. Independent verification Committee for the students achievements

- Determine the standards for the students' achievement.
- Compare the course learning outcomes with the exam questions.
- Measuring learning outcomes and their compatibility with periodic and final exams.
- Periodic follow up of key performance indicators measurements.
- Carry out any tasks assigned by the head of the department.

4.3.12. Alumni, Training, and Internship Committee

- Determine the availability of health facilities for the students training and solve any difficulties facing them.
- Division and distribution of students to hospitals for training and coordination to provide greater opportunities to cover all specializations.
- Prepare reports of follow-up the students in internship year from their places of training.
- Follow-up the reports of the training supervisors in hospitals about the students practical performance.
- Follow up the students evaluation reports from the different departments of the hospitals.
- Prepare reports from observations of the training and internship supervisors in the concerned hospitals.
- Follow up the completion of the internship program for male and female students and coordinate with the central training committee in the college.
- Carry out any tasks assigned by the head of the department.

4.3.13. Academic Advisory committee

- Establish a plan for academic advising in the department.
- Monitor the implementation of the academic advising plan.
- Distribution of new students to the academic advisors.
- Discussing the most prominent students' problems that may affect their academic achievement.
- Awareness of the students with importance of academic counseling and the importance of communicating with the academic advisor.

- Inform the students with the rules and regulations of the university.
- Carry out any tasks assigned by the head of the department.

4.3.14. Demonstrators and Scholarships Committee

- Helping teaching assistants to find admission to study masters or doctoral degrees in universities that meet the regulations and policies of the Jouf University.
- Prepare a detailed annual report on the scholarship status of the department according to the subspecialties and submit it to the head of the department.
- Follow-up on scholarships from teaching assistants and lecturers during their studies.
 Provide the necessary advice to the scholarly teaching assistants and delegated lecturers.
- Establishing a database for teaching assistants, lecturers and scholarships.
- Carry out any tasks assigned by the head of the department.

4.3.15. Schedules and Exams Committee

- Prepare department's lectures schedules and announcing them during the first week of the semester.
- Distribution of courses to the faculty members based on their specializations.
- Determine the timetable for the quarterly and final exams.
- Inform the students with rules and instructions of the exams.
- Receiving the requests for re-correction of exam and proposing the formation of recorrection committees.
- Propose the course coordinators.
- Carry out any tasks assigned by the head of the department.

4.3.16. Students Excuses Committee

- Receiving the absent excuses of students submitted by academic advisor.
- Judgment of received the excuses based policies issued by Vice Rectorate for Educational Affairs at Jouf University.
- Writing recommendation to accept or reject the excuse.

• Follow up the attendance of students and determine the deprived of them in the event of passing the specified percentage of absence, which is 25%.

5. Program Quality Control System

5.1. Program and Courses Specifications

5.1.1. Program Specification

Program specification main objective is to provide platform for the planning, monitoring and improvement of the program by faculty members responsible for its delivery. It contains sufficient information to demonstrate that the program will meet the requirements of the Standards for Quality Assurance and Accreditation of Higher Education Programs, the SAQF, and specific requirements for Physical Therapy & Health Rehabilitation program professional accreditation.

The program specification prepared according the template (T4) (https://www.ju.edu.sa/en/administrations/deanships/deanship-of-quality-academicaccreditation/from/), which designed by NCAAA. The specification include general descriptive information about the bachelor of Physical Therapy & Health Rehabilitation program, mission, Goals, and program objectives, which are aligned with College of Applied Medical Sciences and Jouf University's mission and goals. It also contains the learning outcomes that should be acquired by the students and the methods of teaching and student assessment strategies (direct and indirect) for their achievement of learning outcomes in different domains of learning. Moreover, the program specification also include plans for ongoing evaluation of its effectiveness and planning processes for improvement.

5.1.2. Course Specification

The course specification is prepared after approval of program specification and before a course delivery on the first time. Nevertheless, it can be subjected to modification according to the major or minor comments provided by internal and external auditors. The purpose of course specification is to make clear roadmap for the course as part of the package of arrangements courses to achieve the intended learning outcomes of the program. Course specification includes the course identification and general information, objectives, description, and topics to be deliver to the students. It also contains learning domains, and intended learning outcomes (ILOs)

matching with that of the programs and are keeping with the National Qualifications Framework (NQF). Furthermore, course specification includes teaching strategies and the methods of assessment of the students for each ILOs. Course Coordinator in coordination with the course instructors will held the responsibility for preparation of course specifications according to the template (T4) (https://www.ju.edu.sa/en/administrations/deanships/deanship-of-quality-academic-accreditation/from/), which designed by NCAAA and on the light of program specification. Course specification is use as reference for preparation course teaching plan.

5.1.2.1 Course Teaching Plan

The Vice Rectorate for Educational Affairs at Jouf University requires the preparation of a course teaching, which will be uploaded along with course specification, and learning outcomes measurement plan to students at beginning of each semester through blackboard. The course plan will be prepare (T5) form

(https://www.ju.edu.sa/fileadmin/Vice_Rector_for_Educational_Affairs/%D8%A7%D9%84%D9%86%D9%85%D8%A7%D8%B0%D8%AC/%D9%86%D9%85%D8%A7%D8%B0%D8%AC_%D8%A7%D9%84%D8%AE%D8%B7%D8%B7_%D8%A7%D9%84%D8%B3%D9%86%D9%88%D9%8A%D8%A9/4.pdf), which contains:

- Course general information such as course name, code, credit hours, No. building and classroom, and date of lecture.
- Main references for the course
- Other Learning sources such as official scientific website or specialize journal website.
- Evaluation process, which include methods of evaluation, time (week and date), and marks distribution.
- Debarred: This contains No of absent hours that Debarred the student from attending the final test
- Course contents distribution per week
- Distribution of teacher office Hours: Usually 6 hours/week
- Finally authorized signatures (course instructor, head of the department, and dean of the college)

5.2. Course and Program Reports

5.2.1. Course Report

By end of each semester, course instructor should prepare course report according to the template (T5) (https://www.ju.edu.sa/en/administrations/deanships/deanship-of-quality-academic-accreditation/from/) and course coordinator will prepare report for its own division and gather reports from instructors to make a combined course report for all divisions. The course report include summary course general information of the course, analysis of students grades achievements and students of evaluation of the course. It also includes average of ILOS achieved by students compared with program ILOS target benchmark. Improvement plans are determined according ILOS score.

5.2.2. Annual report of the program

The annual report of the program is prepared after the completion of the first and the second semester of the academic year, in which the progress of the graduated class within four years is shown and the number of graduates of male and female determined, and the percentage of employment for graduates in the government and private sectors are also presented.

Student achievement for the current academic year for all levels and it also contains a report of students 'evaluation of the courses, in which an overview of the teaching and learning standard for self-study is presented, as well as the benchmark of learning outcomes for the next year for the course reports. It also presents in the program report the evaluation of performance indicators and improvement plans for them. After its completion, the course report for the program at the headquarters is combined with the branch in Qurayyat to prepare a combined report.

Preparation of the annual report of the program according to the template (T6) (https://www.ju.edu.sa/en/administrations/deanships/deanship-of-quality-academic-accreditation/from/) which designed by NCAAA.

5.3. Field experience specification and reports

Field experiences specification include ILOS required for the field of bachelor of Physical Therapy & Health Rehabilitation. Field experiences ILOS is transformation of knowledge covered in advance levels into practical skills. Filed experience prepared according to the template (T8) (https://www.ju.edu.sa/en/administrations/deanships/deanship-of-quality-academic-accreditation/from/). It will carry out in health setting in public under supervision of Physical Therapy specialists. Field experience will be evaluated by direct and indirect methods and results use for preparation of field experience report (see template t7) (https://www.ju.edu.sa/en/administrations/deanships/deanship-of-quality-academic-accreditation/from/).

5.4.Course Files

Course file or portfolio, contains evidences for conducted course and used for consideration in the review of the program. Course file is divided into 17 chapters and provide broad knowledge about what have been done in the course in previous semesters. Course file chapters include course outline, Professor's office hours, course approval document, course specification, course report, evidences of course spec to the students in beginning of the semester, copy of teaching materials, sample of assessment materials, copy of key answers, evaluation of the exam paper, question bank, full record of results for all assessments, report of course evaluation by the students, sample of students activities, sample multimedia, internal auditing report for course specification and course coordinator response. Every course instructor will submit the course file to program coordinator by the end of each semester. Then, program coordinator will deliver all courses files to the internal auditing committee for reviewing.

5.5. Program's Key Performance Indicators

Key Performance Indicators (KPIs) are the key indicators of progress toward an intended result. KPIs provide a focus for strategic and operational improvement, create an analytical basis for decision-making, and focus on what matters most. It helps to measure what is intended to be measured to help inform better decision making. It also offers a comparison that gauges the

degree of performance change over time. KPIs can track efficiency, effectiveness, quality, compliance, behaviors, project performance, personnel performance, and resource utilization.

Department of Physical Therapy & Health Rehabilitation, College of Applied Medical Science (CAMS) at Jouf University is committed to accomplishing the goals consistent with its stated vision and mission. Program KPIs provide the necessary quantifiable metrics to monitor progress in the department and are consistent with the University's mission.

Department of Physical Therapy & Health Rehabilitation prepares a report for KPIs measurements annually. There are seventeen KPIs scales for the program that are evaluated for students' activities and faculty roles in the department's academic development. These indicators are prepared in accordance with the fundamental plans and objectives of the University. For the evaluation of students and faculty, workshops, training, seminars, blackboard activities, and questionnaire responses are monitored to document the program activities. The scales of KPIs are calculated as a percentage, ratio, or value and compared with the previous performance report. These indicators are prepared to record the actual benchmark compared to the target benchmark, internal benchmark, and external benchmark. The target benchmark is set in response to the actual benchmark of the recent year, and the internal benchmark is the actual benchmark of the previous year. For each indicator, the strengths, weaknesses, and recommendations are described for the future improvement perspective. Suppose there is a minimal level of achievement for any indicator. In that case, an action plan is proposed with recommendations to improve that indicator to achieve the target set by the Internal and the External benchmark.

No	KPIs Code	KPIs	Target	Measurement Methods	Measurement Time
	KPI-P-	Percentage of	80%	Number of performance	End of academic
	01	achieved		indicators of the objectives of	year
4		indicators of		the program's operational plan	
1		the program		that achieved the target level /	
		operational		The total number of indicators	
		plan objectives.		for these goals in the same year x 100	
	KPI-P-	Students'	4	Applying a questionnaire to	End of academic
	02	Evaluation of		evaluate the final year students	year
2		quality of		for the quality of learning	
_		learning		experiences in the program on a	
		experience in		five-level scale in an annual	
	*****	the program		survey	
	KPI-P-	Students'	4.3	Implementing a student	End of academic
3	03	evaluation of		assessment questionnaire for the	year
		the quality of		quality of the courses on a five-	
	KPI-P-	the courses.	90%	level scale in a survey	End of academic
	KPI-P- 04	Completion rate	90%	The number of undergraduate students who completed the	
	04	iate		program during the prescribed	year
4				period of the program from	
7				each batch / The total number	
				of students registered in the	
				program in each batch x 100	
	KPI-P-	First-year	100%	The number of first year	End of academic
	05	students		students in the program who	year
5		retention rate		continue in the program for the	
3				following year / The total	
				number of first year students in	
				the same year x 100	
	KPI-P-	Students'	Not	Number of students or	End of academic
	06	performance in	applicabl	graduates who have successfully	year
		the professional	e	passed professional and / or	
6		and/or national		national exams / The total	
		examinations.		number of graduates from the program who entered	
				program who entered professional and / or national	
				exams within a year x 100	
	KPI-P-	Graduates'	50%	Number of graduates of the	End of academic
	07	employability	5%	program who were employed	vear
	.	and enrolment		during the first year of their	V
7		in postgraduate		graduation / The total number	
		programs		of graduates of the program in	
				the same year x 100	
	KPI-P-	Average	20	Number of students in class in	End of academic
	08	number of		each meeting / teaching activity	year
8		students in the		Small group lecture Workshops	
		class.		or clinical seminars / The total	
				number of students in the class	
	I/DI D	D 1 .	4.3	during the year	
9	KPI-P-	Employers'	4.3	Implementing a questionnaire	End of academic
y	09	evaluation of		to evaluate employment	year
		the program		agencies for the efficiency of the	

No	KPIs Code	KPIs	Target	Measurement Methods	Measurement Time
		graduates proficiency.		program graduates on a five- level scale in an annual survey	
10	KPI-P- 10	Students' satisfaction with the offered services.	4	Implementing a questionnaire to measure student satisfaction with the various services provided by the program (restaurants, transportation, sports facilities, restaurants, and academic guidance) on a five-level scale in an annual survey	End of academic year
11	KPI-P- 11	Ratio of students to teaching staff.	10:1	The total number of students of the program / Total number of full-time faculty or equivalent for the program	End of academic year
12	KPI-P- 12	Percentage of teaching staff distribution	Professor : 10% Associate : 20% Assistant: 55%	The number of the teaching staff members in the program (gender-branch-designation) / The total number of teaching staff in the program (gender-branch-designation) x 100	End of academic year
13	KPI-P- 13	Proportion of teaching staff leaving the program.	< 3%	The number of faculty members who leave the program annually for reasons other than reaching retirement age / The total number of faculty members in the program x 100	End of academic year
14	KPI-P- 14	Percentage of publications of faculty members.	75%	Number of full-time faculty members who published at least one research during the year / Total faculty members in the program x 100	End of academic year
15	KPI-P- 15	Rate of published research per faculty member.	2	The total number of research papers and / or published during the year for the program / Total faculty members in the program	End of academic year
16	KPI-P- 16	Citations rate in refereed journals per faculty member.	13	The total number of quotations in peer-reviewed journals from published scientific research for full-time faculty members or their equivalent in the program / The total number of published research for faculty members in the program	End of academic year
17	KPI-P- 17	Satisfaction of beneficiaries with the learning resources.	3.8	Application of a questionnaire to measure the satisfaction of the beneficiaries of the program (faculty and students) from learning sources in terms of (adequacy and diversity) (references, periodicals,	End of academic year

No	KPIs Code	KPIs	Target	Measurement Methods	Measurement Time
				databases, etc.) - Support services provided to benefit from them (on a five-level scale in an annual survey	
18	KPI- PT -1	The percentage of interns who completed the clinical placements within the minimum required time	100%	The number of interns who completed the clinical placements within the minimum required time/Number of interns who started the clinical placement x 100	End of academic year
19	KPI- PT – 2	Percentage of Students who Participate in Community Service Campaigns	20%	No. of students who participate in community service campaigns / Total no. of students enrolled in the program x 100	End of academic year
20	KPI- PT – 3	No of annual research grants received by the program's faculty members.	5	No of funded research projects (internal and external) which at least one faculty member has participated in a year.	End of academic year
21	KPI- PT – 4	The percentage of students' withdrawals from the program courses	< 5%	No. of students who withdrew from the courses / No. of students who started the courses x 100	End of academic year

5.6.Program's Self-study

A program self-study is a thorough examination of the quality of a program. The mission and objectives of the program and the extent to which they are to be being achieved thoroughly analyzed according to the standards for quality assurance and accreditation defined by the NCAAA. These standards are designed to support continuing quality improvement and to publicly recognize programs and institutions that meet required quality standards. The objective is to ensure good international standards in all programs offered in Saudi Arabia institutions. There are six standards evaluation scales have been determined for monitoring the quality assurance of the program. This document can also be used for planning, self- review, and support programmatic quality improvement strategies in higher education institutions.

This document provides Self-Evaluation Scales for programmatic quality assurance and academic accreditation standards, which include the following standards:

- 1. MISSION AND GOALS
- 2. PROGRAM MANAGEMENT AND QUALITY ASSURANCE
- 3. TEACHING AND LEARNING
- 4. STUDENTS
- 5. TEACHING STAFF

6. LEARNING RESOURCES, FACILITIES, AND EQUIPMENT

The quality assurance and continuous improvement of bachelor of Physical Therapy & Health Rehabilitation program is based on the self-evaluation carried out by program various units and committees based on the quality performance criteria. The faculty and staff responsible for the various activities in the program evaluate the level of performance. These are carry out according to each scale criteria and based on suitable evidence and proofs, with the support of performance indicators and benchmark comparisons with other programs of high-quality performance, especially in areas of high importance. This self-evaluation is supported by independent opinion through an independent evaluator or evaluators from outside the institution; to enhance the credibility, objectivity and accuracy of the evaluation.

Timetable of quality activities

	Activities	Responsible	Follow up	From	То	Performance Indicator
Quality Assurance	Prepare of operational plan	Quality Committee	Program Coordinator	Beginning of 1 st semester	End of 1 st month of 1 st semester	Operational Plan
Activities	Review of course	Internal auditing	Program Coordinator	Beginning of 1 st semester	End of 2 nd semester	Reports of internal auditing

	Review of	Committee				
	program					
	specification					
	Review of course					
	report					
	Internal auditing			Beginning of 1 st		
	of course	Internal		semester		Reports of internal auditing
	specification	auditing	Program		End of 2 nd	Reports of internal additing
	Internal auditing	Committee	Coordinator		semester	
	of program	Committee				
	specification					
	Periodic report of	Internal	Program	Beginning of 1 st	End of 2 nd	Reports
	quality activities	auditing	Coordinator	semester	semester	
		Committee				
	Follow up of	Internal	Program	Beginning of 1 st	End of 2 nd	Reports
	operational plan	auditing	Coordinator	semester	semester	
	achievement	Committee				
	Preparing of KPIs	Internal	Program	Beginning of 1 st	End of 2 nd	Reports
	evidences and	auditing	Coordinator	semester	semester	
	report	Committee				
	Program Annual	Internal	Program	Beginning of 1 st semester	End of 2 nd	Reports
	Report	auditing	Coordinator	SCHICSLEI	semester	
		Committee		a:		
		Internal	Program	Beginning of 1 st semester	End of 2 nd	Portfolio
	Students portfolio	auditing	Coordinator		semester	
		Committee		S. C. St	nd	
	Program File	Internal	Program	Beginning of 1 st	End of 2 nd	Files

		auditing	Coordinator	semester	semester	
		Committee				
	Courses file	Internal auditing Committee	Program Coordinator	Beginning of 1 st semester	End of 2 nd semester	Files
	External Auditing	External Auditing	Program Coordinator	Beginning of 1 st semester	End of 2 nd month of 1 st semester	Reports
	Independent verification	Independent reviewer	Program Coordinator	Beginning of 1 st semester	End of 2 nd month of 1 st semester	Reports
	Intended learning outcomes	Evaluation committee	Program Coordinator	Beginning of 1 st semester	End of 2 nd semester	Reports
	Self-scale evaluation	Quality Committee	Program Coordinator	Beginning of 1 st semester	End of 2 nd month of 1 st semester	Reports
	Self —study Report	Quality Committee	Program Coordinator	Every 3 years	End of 2 nd semester	Reports

Annexes for Bachelor of Science in Physical Therapy and Health Rehabilitation

Program specification

Course specifications

Course reports

External Auditing

KPIs

<u>Independent verification</u>

Deanship of Quality and Accreditation forms of internal auditing

Deanship of Quality and Accreditation forms of external auditing

NCAAA templates

Appendices

NCAAA Program Accreditation Forms

- Eligibility Requirements for Program Accreditation (16 Eligibility Pro V2019)
- Program Specification (T3 Program Specifications V2020- Eng)
- Course Specification (<u>T4 Course Specifications V2020-Eng</u>)
- Field Experience Specification (<u>T5 FE Course Specifications V2020-Eng</u>)
- Annual Program Report (<u>T6 Annual Program Report V2020-Eng</u>)
- Course Report (T7 Course Report V2020-eng)
- Field Experience Report (<u>T8 FE Course Report V2020-Eng</u>)
- Program Key Performance Indicators (<u>Program KPIs V2019-Eng</u>)
- Self-Study Report for the Program (T12 SSRP V2020-eng)
- Self-Evaluation Scales for Higher Education Program (<u>T10 SES-Pro V2020-Eng</u>)

:Approved :minutes council Department	9th department Council meeting
: Date	2021/03/17