



Quality Manual

Bachelor of Dental Surgery Program

COLLEGE OF DENTISTRY

QASSIM UNIVERSITY

Prepared by

Quality Assurance, Information & Documentation Unit

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COLLEGE OF DENTISTRY
QASSIM UNIVERSITY

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Introduction

College of Dentistry Quality Assurance, Information and Documentation Unit (QAIDU) is a key for fulfilling the college mission and objectives, which is derived from the Qassim University mission and objectives. QAIDU was established in the college under the guidance of His Excellency the President of the University and a decision by the Dean of the College to follow the internal quality standards of the college and help educational programs to fulfill the college strategic plan. QAIDU is committed to all the regulation of Qassim University Deanship of Development and Quality which follows all regulations specified by the National Center for Academic Accreditation and Assessment (NCAAA).

The QAIDU has prepared this guide to describe its administrative structure and as a guide to quality standards and all models that we use in the college to evaluate programs and units within the college and as an aid to all faculty employees to clarify the tasks of the quality unit.

Scope of Quality Assurance Manual

1. This manual sets out in detail the college quality assurance philosophy and how this translates into daily practice. The college:
 - Values excellence in the daily work of the college in all areas of activity;
 - Emphasizes on monitoring the quality of service provided to students and prospective students;
 - Recognizes the importance of self-evaluation, action planning and constant improvement;
 - Recognizes that benchmarking with other institutions is an important tool in the monitoring and improvement of educational quality.
2. The QAIDU manual will be updated every two years through changes or additions approved in the minutes of the college QAIDU. Over time the procedures contained in this manual will be improved, expanded and fine-tuned so that they fully meet the needs of the college and all its stakeholders.

Brief information about College of Dentistry, Qassim University

The Royal Decree to establish the college was issued on 27th January 2005. The college had received its first batch of students starting from the academic year 2007- 2008. The graduation of the first batch of college students was at the end of the academic year 2012 - 2013.

Quality Assurance, Information & Documentation Unit

College Vision

National leadership in education, research and community services in the field of dentistry.

College Mission

Graduate dentists of high scientific, professional and research competency, committed to continuous education, developing the profession and fulfill the needs of the labor market.

College Values

Justice: We seek to achieve the principles of fairness and equal opportunities for all.

Honesty: We perform with loyalty and commit to morality and professional ethics.

Creativity: We encourage innovative thinking and valuable creative initiatives.

Perfection: We apply the highest quality standards to distinguish our outputs.

Transparency: We are committed to disclosure and support requirements of accountability and integrity.

Belongingness: We foster a sense of national belongingness and the spirit of initiative, giving and volunteering.

Institutionalism: We establish a culture of intellectual and behavioral team work.

College Goals

1. Assurance of the quality of education and achieving excellence in the educational programs.
2. Raising the competence, competitiveness and professionalism of students.
3. Enhancement of the research identity and improvement of applied research and innovation.
4. Development of institutional governance administrative performance and enhancement of institutional satisfaction and loyalty.
5. Completion, development and sustainability of infrastructure.
6. Enhancement of partnership and knowledge exchange nationally and internationally.
7. Enhancement of the role of the college in providing community services.

Program title and code:	Bachelor of Dental Surgery / BDS
Credit hours required for completion of the program:	179 Hours
Award (s) granted on completion of the program:	Bachelor of Dental Surgery (BDS)
Major tracks or pathways within the program:	General Dentistry
Professional occupations for which graduates are prepared:	General Dental Practitioner

Program teaching system	Hybrid system (lecture- PBL)
Study Language	English
Study pre-requisite	Completion of Preparatory year
Study duration and Phases	<p>Five years followed by a clinical training internship year:</p> <ul style="list-style-type: none"> • Basic Phase: first and second years, • Clinical Phase: third, fourth, and fifth years • Internship Phase: sixth clinical training year after graduation

BDS Program Mission

Teaching dental students to become qualified in the general practice of dentistry by providing a distinguished educational program that meets the needs of the labor market, in accordance with the highest clinical standards to meet the professional needs, committed to continuous education, providing research and local community service programs.

Program Goals

1. Teaching the students the concepts, principles, basic theories, and research methodologies in the fields of dentistry.
2. Enabling students to apply the dental conceptual perception, skills of critical thinking, problem-solving and decision- making in the fields of dentistry to fulfill the requirements of the labor market.
3. Providing the students with the ability and competency in motor skills necessary for different methods in dentistry.
4. Providing the students with the essential skills to apply the information technology, basic quantitative skills and problems management skills, developing the student's competency in oral and written communications in the field of dentistry while considering the production and quality improvement of applied research.
5. Providing students with the basics of teamwork, applying ethical issues, personal and social responsibilities for the provision of community services.

PART I

POLICY AND SYSTEM OF QUALITY IN THE COLLEGE OF DENTISTRY

Policy and System of Quality in the College of Dentistry

1. Quality Policy:

The College of Dentistry quality policies are consistent with Qassim University quality policies and the quality standards specified by the National Center for Academic Accreditation and Assessment (NCAAA).

The College of Dentistry policy is to fulfill the college mission which its first pillar is providing advanced educational programs to prepare highly qualified and skilled health contributors in dentistry along with the college objectives:

- Prepare and graduate dentists at a high level of knowledge and clinical skills to provide services in all areas of Dentistry.
- Fill labor market needs of dentists.
- To provide distinct therapeutic services for patients in all disciplines of dentistry by students under the supervision of a team of teachers who has the scientific and practical experience, and who are able to use the modern technologies in the areas of treatment and diagnosis.
- Raise awareness of community health and prevention methods needed to maintain oral health.
- Contribute to the continuing dental education for all dentists.
- Conduct scientific research to find appropriate solutions to the problems of oral and dental health in the community.
- Provide dental and technical advice to various sectors in the field.
- Prepare specialized staff in different fields of dentistry through the Graduate Program.

Quality Policy in Dental Clinic:

In accordance with the global changes in the field of dentistry and in order to reach and maintain the highest levels of quality of education and treatment services. Dental Clinics at College of Dentistry, Qassim University is committed to apply and improve its quality management system for continuous improvement in consistent with the standards and requirements of the Quality Management System ISO (9001:2008) and all organizational and internal regulation of College and University.

Also, the Dental Clinics commits to establish the goals of the quality management system and reviews it annually to be aligned with the strategic objectives of the college, and to ensure the effectiveness of the quality management system of Dental Clinic in order to provide excellent treatment and preventive

services in the field of dentistry for Qassim Community and around. And qualifying graduates at the highest level of training and competence.

2. Quality System:

Quality Assurance processes involve participation of all college Departments, Units and Committees. It is subjected to proper planning and continuous evaluation. Where the performance metrics focus particularly on outcomes. Stakeholders (Faculty, administration, students and employment institution) participation in planning and evaluation is a corner stone in the college development. Quality is assessed based on KEY Performance Indicators (KPIs) and internal and external benchmarks to ensure the continuous improvement and quality of education and administration system in the college. The College's quality process is based on the following:

- Presence of the Quality Assurance, Information and Documentation Unit (QAIDU) which has an annual plan to support implementation of quality in the college, this unit linked to Quality Center to ensure its efficacy. It is also linked with the Deanship of Development and Quality in the university, which assess the quality of the college and program through annual evaluation.
- Participation of all beneficiaries (faculty, staff and students) in quality assurance processes, the College of Dentistry ensures that all faculty, administration and students are committed to all quality activities, in both planning and evaluation.
 - Staff members' participation in quality improvement and self- assessment process and decision making is through:
 - Preparing course file which include: course book, course specification, course report, student course evaluation survey, response to survey, grade report, sample of exams and sample of student activity.
 - Participation in College Units and committees
 - Participation in program self-evaluation activities
 - Participation in all annual surveys distributed by QAIDU which include program evaluation, evaluation of program administration, teaching and learning resources, IT, Maintenance and job satisfaction survey.
 - Student participation in quality assurance and program decision making is encouraged by program administration through:
 - Student committee (Council) (elected group of students of all years and levels) meets the dean and vice-dean of educational affairs to discuss problems encountered during their academic education. Each meeting has an action plan and report to resolve the encountered problems.
 - Student leaders are invited to participate in units and committees' meetings when issues regarding students' needs are discussed.

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- Students participate in QAIDU annual surveys (Program evaluation, student experience, course evaluation, academic advising, student club, transportation, teaching and learning resources, it and maintenance surveys).
 - Employee participation in quality assurance and decision making is through different units and committees, in addition to participation in the annual surveys by QAIDU which include: IT, maintenance and job satisfaction surveys.
- The college and its program have both academic and administrative Key Performance Indicators (KPIs) and internal and external benchmark to ensure the quality of the program.
- The college quality system is subject to continuous evaluation and improvement. Through internal evaluation presented in QAIDU annual reports, program reports and development plans, assessment of beneficiaries through different surveys, independent opinion and self-study report every five years.

The Organizational Structure of the Quality in the College of Dentistry

The Program Management is committed toward quality assurance through the establishment of the QAIDU within the Quality Center (QC) in the College of Dentistry. QAIDU is committed to the rules and regulation of Qassim University Deanship of Quality Assurance and Accreditation as well as the National Center for Academic Accreditation and Assessment (NCAAA).

Quality Assurance, Information & Documentation Unit

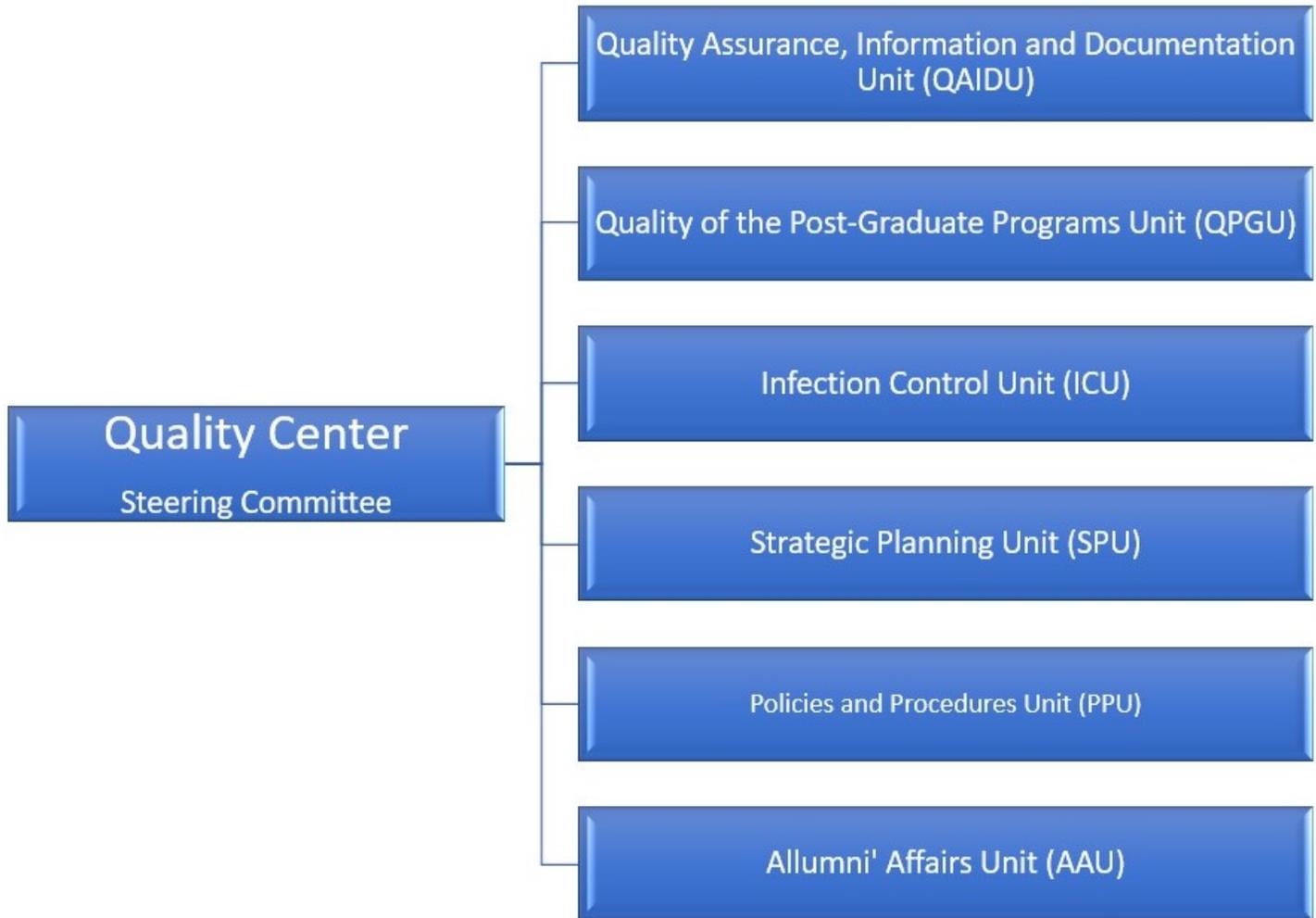


Figure1: Organizational Structure of Quality Center

I. Quality Assurance, Information and Documentation Unit

1. Organizational Relationship

QAIDU is directly associated with Steering Committee of Quality Center of the college.

2. Vision of the Unit

Implementing efficiently the best practices and standards of quality assurance, information and documentation in all sections and procedures of the College.

3. Mission of the Unit

The enhancement of the quality culture and best practices in the College; commitments toward supporting continuous improvement of the quality, and playing an effective role in the assessment of the College performance.

4. Goals of the Unit

The Unit of Quality Assurance Information and Documentation at Qassim College is committed to:

- A. Promotion of a culture of comprehensive quality in all educational and administrative practices, and research of the College units to achieve the necessary progress in the field of quality assurance by providing workshops and training courses.
- B. Verification of the implementation of quality standards in the various educational and administrative practices and research in the college units through the development of effective systems for performance evaluation.
- C. Provision of effective support to the College units in the administrative and technical aspects, program and curricula development, improvement of teaching and administrative practices and research with the highest quality standards in order to meet the needs of the labor market and to contribute to national educational excellence.
- D. Support and provision of the requirements of academic program accreditation for the college through technical support that facilitates academic accreditation by the best national and international commissions.

5. Values of the Unit

QUALITY	<ul style="list-style-type: none">• Implementation of Quality the highest standards that maintain the best outcomes
CREATIVITY	<ul style="list-style-type: none">• Maintenance of an organizational environment that ensures creative thinking and innovative behavior
TRANSPARENCY	<ul style="list-style-type: none">• Commitment to disclosure in the transactions, procedures, and requirements to reinforce accountability and integrity
TEAMWORK	<ul style="list-style-type: none">• Establishment of a culture of teamwork both in thinking and in behavior
INTEGRITY	<ul style="list-style-type: none">• Performance of the work faithfully and commitment to morality and professional ethics

6. Strategic Objectives of the Unit

- Promoting a culture of quality in the College
- Contributing to quality requirements and accreditation.
- Providing effective support to the units and committees of the College.
- Developing and evaluating academic and institutional performance.

7. The Main Goals of the Unit

Contributing to make the college achieve its Mission and objectives through quality assurance

Reinforcing the college capabilities to obtain the academic accreditation for its academic programs.

Maintaining the obtained academic accreditation by applying the highest national and international standards of quality on all aspects according to its Vision, Mission and strategic objectives.

8. Detailed Tasks of the Unit

- Participating in providing data and information necessary to prepare, develop and evaluate academic, research, and community program plans.
- Ensuring the quality of the outcomes of the educational process in the program through continuous development of the program and identification of opportunities and priorities for improvement mentioned in the program reports.
- Participating in the preparation and implementation of the college strategic plan.
- Applying and constantly following up on all of the systems, regulations, procedures, and criteria for obtaining academic accreditation.
- Ensuring that all the systems and regulations of the quality assurance standards are applied in the educational, administrative, organizational, and technical fields with a great emphasis on constant follow-up.
- Directing for the identification of the annual training needs of the program's affiliates and the development of training plans to develop and improve the skills of faculty members, as well as working on developing the administrative and technical performance of administrators and technicians, upon which training plans are built for them.
- Guidance in defining the research interests of the program at the level of students and faculty.
- Preparing a comprehensive quality manual guide based on national and international pioneering experiences to ensure that the college can obtain and maintain academic accreditation as well as apply all of the standards and requirements of the quality in the educational, administrative, organizational, and technical fields.
- Ensuring ongoing monitoring and tracking of distinguished experiences in the field of quality assurance, information, and documentation (including policies, systems, regulations,

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standards, tools, and utilized technologies) as well as preparing reports that include the development proposals in the college.

- Suggesting names of institutions, universities, and colleges with that the college can make cooperation, alliance, and partnership with them in the field of quality assurance and academic accreditation.
- Suggesting names of centers that are specialized in the field of quality assurance and academic accreditation that the college can benefit from their expertise and services which will ultimately lead to academic accreditation.
- Suggesting the academic accreditation commissions that are appropriate for the college based on the extensive study and the planned comparisons between all the available alternatives in light of the overall Vision, Mission, and strategic goals.
- Suggesting standards, tools, and mechanisms for evaluating and measuring the performance of the educational and administrative units in the college in the field of quality assurance and academic accreditation and following up on their accreditation.
- Ensuring ongoing monitoring of the performance of educational and administrative units in the area of quality assurance and academic accreditation and preparing reports that include the development proposals.
- Establishing a comprehensive database for quality assurance, information, and documentation and preparing reports that include the development proposals.
- Establishing a comprehensive database for the quality and academic accreditation in which necessary data should be entered, processed, and updated continuously.
- Preparing and implementing programs in the college that help raise the awareness of the importance of quality.
- Providing the Deanship of quality assurance and academic accreditation with annual reports about all the activities and achievements of the college in the field of quality assurance and accreditation.
- Spreading the culture of quality among students, faculty members, technicians, and employees.
- Carrying out any other tasks within the scope of work.

9. Standards of Performance Measurement and Assessment of the Unit

- The effectiveness of the implementation of the college strategic plan.
- Ensuring the quality and the degree of benefit from the distinguished experiences in the field of quality assurance and academic accreditation.
- Obtaining and maintaining the national and international academic accreditation.
- Ensuring the quality and completeness of the manual guide of the quality assurance, information and documentation.

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- The high quality of the proposed institutions that issue the accreditation.
- The high quality of the consultations and services obtained for the purpose of quality assurance and accreditation.
- The high quality of all the standards, assessment tools and measurement criteria of the performance of the educational and administrative units in the field of quality assurance and accreditation.
- The high quality and regularity of assessing the performance of the educational and administrative units in quality assurance and accreditation.
- The high quality of the proposals submitted for computerization the process of the quality assurance, information, and documentation.
- The high quality and completeness of the database of the quality assurance and accreditation.
- The effectiveness of developing reliable standards, tools and mechanisms of the performance assessment process as well as ensuring accurate measurements of the achievements of the educational and administrative units in the college.
- The effectiveness of raising the awareness of the importance of the quality in the college.
- The high quality of the process of coordination and interaction with the Deanship of quality assurance and accreditation at the university.
- The high quality of the prepared reports and periodicals.
- The accuracy and completeness of the information of the unit on the college main website.

10. Cycle of Quality Assurance

The Quality Assurance and continuous improvement of educational programs is based on the self-evaluation carried out by the program and its various units based on the quality performance criteria.

The cycle of quality assurance has two levels according to Qassim University policies and procedures:

- Cycle of quality assurance at the academic program level
- Cycle of quality assurance at the college level

Cycle of Quality Assurance at the Academic Program Level

The quality assurance process is an ongoing process of planning and evaluation. For the BDS program, a continuous evaluation process is carried out for the courses, annual assessment of the learning outcomes, and the key performance indicators, in addition to stakeholders' surveys. Then the program annual report is prepared including points of strength and opportunities for improvement, from which improvement plans are established. Thereafter, at the end of the cycle, the program prepares the self-study report.

I. Annual evaluation



Figure 2: Annual Quality Assurance at the Academic Program Level

1. Plan

(Program Annual Plan)



1. The Program Annual Plan (Plan) includes the following:

1.1. Program Specification

It is prepared by the QAIDU according to the template (T3_Program Specifications V2020-Eng.) which is designed by NCAAA _ Education & Training Evaluation Commission, and announced on the website of the Deanship of Development and Quality in the University.

1.2. Course Specification

The course specification is prepared after the approval of the program specification and before the delivery of the course for the first time. However, it can be subjected to modification according to the major or minor comments provided by the internal and external auditors. The course/block organizer held the responsibility for the preparation of the course specification according to the template (T4 Course Specifications V2020-Eng) which is designed by NCAAA _ Education & Training Evaluation Commission, and announced on the website of the Deanship of Development and Quality in the University. The QAIDU takes it upon itself to review the course/block specification at the start of each course/block and present it to the College Council for approval. The course/block specification is used as reference to prepare the course/block book.

1.3. Course Book

The QAIDU requires the preparation of a course/block book which includes all the information about the course, along with the timetable to be uploaded to the students on the blackboard at the beginning of each course/block.

1.4. Field Experience Course Specification

It is the responsibility of the Intern's Affairs Unit to prepare the Field Experience Course Specification before starting the training period of the interns according to the template (T5 FE Course Specifications V2020-Eng) which is designed by NCAAA _ Education & Training Evaluation Commission, and announced on the website of the Deanship of Development and Quality in the University. The QAIDU takes the responsibility to review the Field Experience course specification at the start of the training period and present it to the College Council for approval.

1.5. Annual Operational Plan

It is prepared by the QAIDU according to C-D-3 form which is designed by the Deanship of Development and Quality in the University and announced on its website.

1.6. Graduate attributes specification and learning outcomes according to the National Qualifications Framework and their measurement plans

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It is prepared by the QAIDU according to C-D-5 form which is designed by the Deanship of Development and Quality in the University and announced on its website.

1.7. Exit Exam Specification

It is prepared by the Assessment and Evaluation Unit according to C-D-7 form which is designed by the Deanship of Development and Quality in the University and announced on its website.

1.8. Training plan and professional development activities for the Faculty members

It is prepared by the Faculty Development Unit according to C-D-8 form which is designed by the Deanship of Development and Quality in the University and announced on its website.

1.9. Training plan and professional development activities for the administrative body in the college

It is prepared by the College Administrative Director according to C-D-9 form which is designed by the Deanship of Development and Quality in the University and announced on its website.

1.10. Community service and extracurricular plan

It is prepared by Qwafel Voluntary Program, Community Dentistry and Oral Epidemiology Department, as well as the units included the Community Services Center.

1.11. Targeted Key Performance Indicators

Prepared by the QAIDU in collaboration with other Units and Committees that are responsible for collecting data related to each KPI.

Implement (Application along the year)



2. Application along the year (Implement) includes the following:

2.1. Educational process

It is the responsibility of the all the faculty members.

2.2. Research at the student level

It is the responsibility of the Dental Skills Unit that is responsible for offering the 5 presentation skills courses for the students along all educational levels, in collaboration with the Interns' Affairs Unit that is which is assigned to supervising interns and following up their research.

2.3. Research at the Faculty members level

The Postgraduate Studies and Scientific Research Center is responsible to facilitate the task of faculty members and provide the necessary atmosphere for them to conduct their research.

2.4. Community service and extracurricular activities

The Community Services Center and the Executive Committee of the Voluntary Dental Convoys Program in collaboration with the Community Dentistry and Oral Epidemiology Department are responsible for the community service and extracurricular activities that are conducted along the academic year.

2.5. Workshops to develop Faculty members

The Faculty Development Unit is responsible for the implementation of the training plan and professional development activities for the Faculty members.

2.6. Workshops and training courses to develop administrative and technicians

The training courses to develop administrative and technicians are conducted through the Leadership and Capacity Development Center and the Institute of Public Administration.

2.7. Measuring targeted KPIs

This is the responsibility of the QAIDU to collect the data concerning the KPIs and calculate the target values.

2.8. Collecting meeting minutes of the scientific departments

The QAIDU is responsible to collect the meeting minutes from the scientific departments.

2.9. Collection of the meeting minutes for the Units and Committees

The meeting minutes for the Units and Committees are collected through the QAIDU by the end of each semester.

2.10. Offering opinion polls to students, faculty members, graduates, employers, internship dentists and their supervisors, as well as the program staff to get their opinions about all aspects of the BDS program

- The Deanship of Development and Quality released the central and standardized program questionnaires at Qassim University for the 1st and 2nd semesters.
- These surveys are directed to the students, faculty members, graduates, employers, internship dentists and their supervisors, as well as the program staff.
- With regard to the time frames of these questionnaires, they were divided into two parts:
 - a. Three questionnaires to be completed in the first semester of the academic year:
 1. Students' evaluation of the quality of the program and its services (1) (PO_SU_01)
 2. Faculty member evaluation of the quality of the program and its services (1) (PO_SU_01)
 3. Staff evaluation of program quality and services (PO_STAFF)
 - b. Six questionnaires to be completed in the second semester of the academic year:
 1. Students' evaluation of the quality of the program and its services (2) (PO_SU_02)
 2. Faculty member evaluation of the quality of the program and its services (2) (PO_SU_02)
 3. Field Experience evaluation (Students) (PO_FTR_STU)
 4. Field Experience evaluation (Supervisors) (PO_FTR_SUP)
 5. Graduate evaluation of the quality of the program (PO_GRAD)
 6. Employers' evaluation of program quality and the efficiency of its graduates (PO_EMPO)
- Each stage begins with the Deanship of Development and Quality preparing the questionnaires scheduled for the semester on the electronic system, then distributing their links through an official circular directed to the College in the eighth week, so that the QIADU distributes the links to the targeted groups.
- It is expected that the response to all the distributed questionnaires will be completed during the eighth and ninth weeks.
- After that, the Deanship of Development and Quality checks the response rates for each questionnaire and ensures that it is 50% or more.
- In the event that this percentage is not achieved, the academic program is given an additional period to complete during the tenth and eleventh weeks.
- During the twelfth week, detailed report is issued for each questionnaire and sent to the program for use in preparing the periodic questionnaire report (Form C-D-11).

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- **For the Course Evaluation Survey (CES)**, QAIDU send the links to the block/course organizer by the end of each course for students' evaluation, also, another link is sent to the block/course organizer to follow the students' responses and to complete the analysis of students' responses as well as strength points and improvement recommendations mentioned by the students.

2.11. Offering the Self-Evaluation Scale and Job Satisfaction surveys to the faculty to evaluate the BDS Program

QAIDU offers the Self-Evaluation Scale survey and the job satisfaction survey to the faculty to evaluate the BDS Program near the end of each academic year.

The results of the beneficiary surveys are employed in planning and improvement of the program by addressing the improvement recommendations contained in the report of the results of periodic surveys to assess the quality of the program (Form C-D-11). This is accomplished by including these improvement recommendations as operational goals in the annual operational plan of the program (Form C-D-3).

Evaluation (Data Collection)



3. Data collection for evaluation as they are employed in measuring the extent to which the program's mission and goals are verified.

This includes the following:

3.1. Course Report

By the end of each semester, the course block/course organizer prepare the course report according to the template (T4 Course Specifications V2020-Eng) which is designed by NCAAA _ Education & Training Evaluation Commission, and announced on the website of the Deanship of Development and Quality in the University. The QAIDU takes the responsibility to revising the course/block report upon its submission. The course/block report is used as a reference for the course learning outcomes (CLOs) achievement.

3.2. Field Experience Course Report

The Intern's Affairs Unit prepare the Field Experience Course report after the interns completing their training period and at the end of the internship year. The report is prepared according to the template (T8 FE Course Report V2020-Eng) which is designed by NCAAA _ Education & Training Evaluation Commission, and announced on the website of the Deanship of Development and Quality in the University. The QAIDU takes the responsibility to revise the Field Experience course report upon its submission. The course report is used as a reference for the course learning outcomes (CLOs) achievement.

3.3. Self-Evaluation Scale Report

The QAIDU is responsible for data collection and analysis and report completion.

3.4. Report of the results of periodic surveys

All data collected from the periodic surveys are collected and analyzed by the QAIDU, and the report is prepared.

3.5. Annual Program Report

The annual program report is prepared by the QAIDU after the completion of the first and the second semesters of the academic year, according to the template (T6 Annual Program Report V2020-Eng) which is designed by NCAAA _ Education & Training Evaluation Commission, and announced on the website of the Deanship of Development and Quality in the University.

3.6. Annual KPIs Results Report

The QAIDU is responsible for the preparation of the report of the results of the annual performance indicators of the program (C-D-12 form) which is designed by the Deanship of Development and Quality in the University and announced on its website.

3.7. Exit Exam Results

The Assessment and Evaluation Unit is responsible for the release of the exit exam results.

3.8. Graduate Attributes Results Measuring Report

The QAIDU is responsible for the preparation of the annual report on the results of measuring graduate characteristics and learning outcomes (C-D-6 form) which is designed by the Deanship of Development and Quality in the University and announced on its website.

3.9. Faculty Development Plan Achievement Report

The Faculty Development Unit is responsible for the preparation of the achievement report (C-D-10 form for Faculty members) of the Faculty development plan which is designed by the Deanship of Development and Quality in the University and announced on its website.

3.10. Administrative & Technicians Plan Achievement Report

For the achievement report of the training plan of the administrative and technicians (C-D-10 form for Administrative and technicians), which is designed by the Deanship of Development and Quality in the University and announced on its website, the administrative manager is responsible to prepare and complete the report.

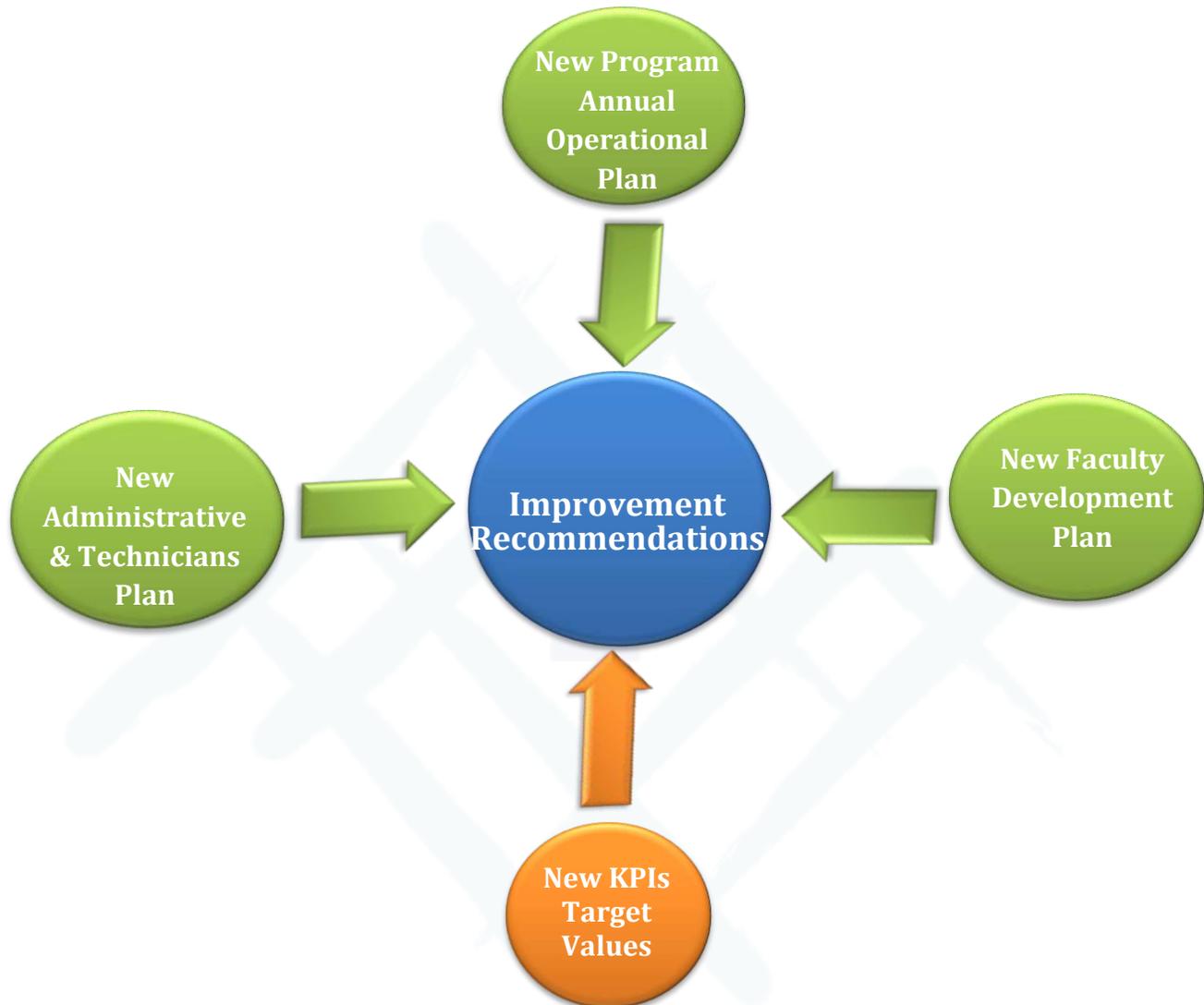
3.11. Scientific Departments Achievement Reports

The Heads of the Scientific Departments are responsible to supply the QAIDU with the achievement reports of their departments.

3.12. Units and Committees Achievement Reports

The Heads of the Units and Committees are responsible to supply the QAIDU with the achievement reports of their departments.

Improvement Recommendations (New Program Annual Operational Plan)



Taking into consideration the strengths and the recommendations for improvement.

The following plans are developed:

- 4.1 New Faculty Development Plan**
- 4.2 New Administrative Plan**
- 4.3 New Key Performance Indicators Target Values**
- 4.4 New Program Annual Operational Plan**

II. Periodic evaluation which occur every five years



Figure 3: 5-Year Quality Assurance at the Academic Program Level

Cycle of Quality Assurance at the College Level

The Quality Assurance, Information and Documentation unit has an annual action plan and annual report to ensure high quality performance and to measure the fulfillment of its intended plan. Both the annual plan and its report are approved from the Quality Center and the College council. The QAIDU action plan ensures high quality of the whole educational and administrative process through ensuring preparation of program specification and report along with course portfolio at the academic program level, as well as, ensuring that all administrative units and committees prepare their action plan at start of the academic year and submit their accomplishment report at the end of academic year, along with applying satisfaction surveys regularly for stakeholders.



Figure 4: Cycle of Quality Assurance at the College Level

II. Policies & procedures Unit

1. The Main Goal of the Unit

Contribute to enabling the college to achieve its vision, mission and strategic objectives through documentation and coding Its policies and procedures and the dissemination of the concept of work through it.

2. Detailed Task of the Unit

Non-negotiable, clear, formal and authoritative statement(s). They can be brief, broad statements or longer and detailed as required by the subject matter. While Procedures describe how each policy will be put into action in our college. Detailed series of steps, or outline a sequence of activities.

Each procedure should outline:

- Who will do what?
- What steps they need to take?
- Which forms or documents to use?

3. Flow chart of Developing and Approval of Policies and Procedures

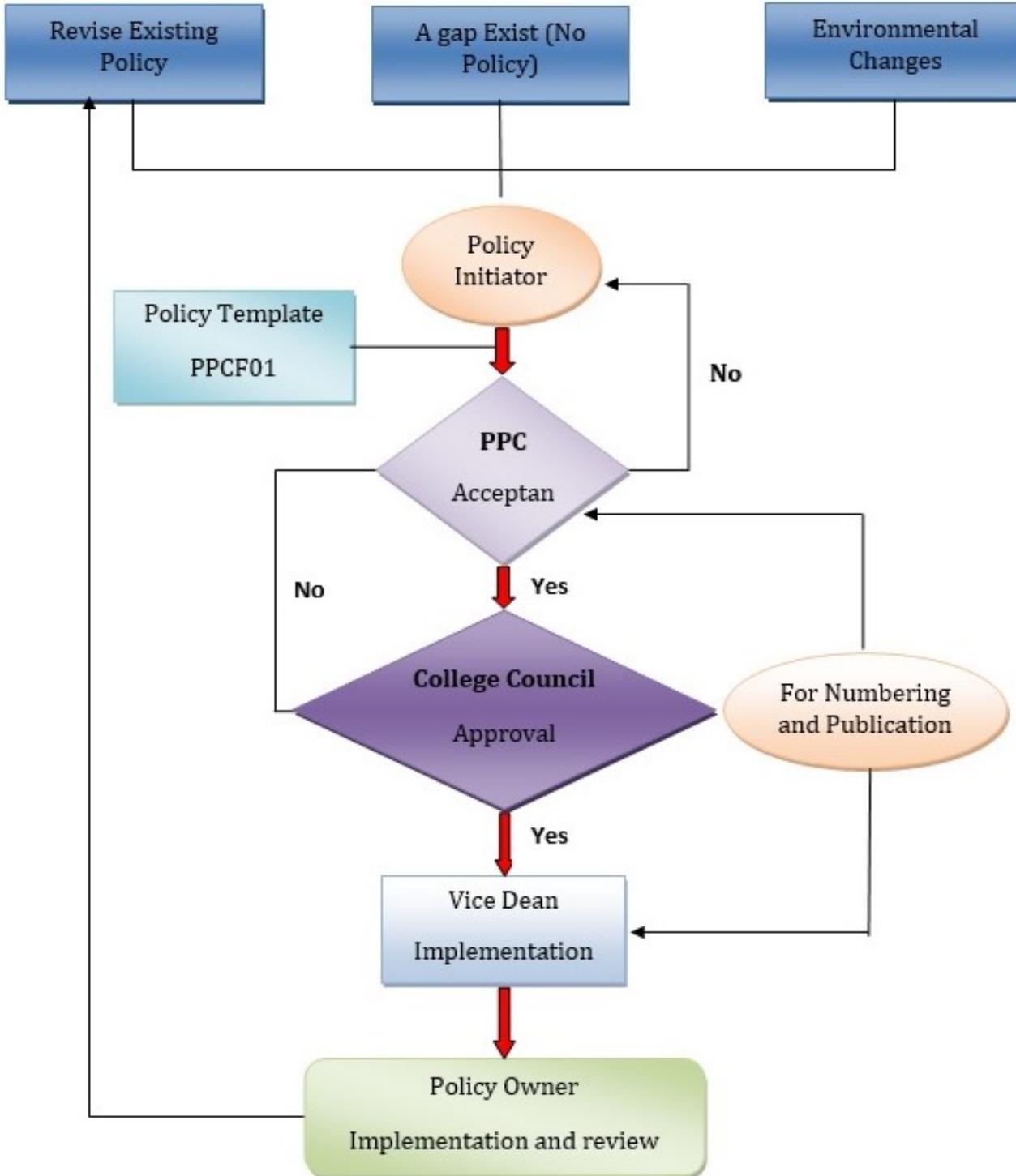


Figure 5: Flow chart of Developing and Approval of Policies and Procedures

4. List of Policies and Procedures (December 2021)

No.	Policy Title	Policy Code	Issue No.	Policy Owner	Policy Status	Issuing Date	Last revision date (updated)
1.	Academic Advising Policy	AACP01	1.1	Academic Advising Unit	Approved	22-10-2016	19-01-2019
2.	Student participation in the conferences, seminars and workshops policy	ACFP01	1.1	Academic Affairs	Approved	30-1-2015	23-11-2017
3.	Student Remediation Policy	ACFP02	1.0	Academic Affairs	Approved	23-3-2018	None
4.	Faculty Award Policy	AEUP04	1.0	Assessment and Evaluation Unit	Approved	18-11-2018	None
5.	Faculty member evaluation policy	AEUP02	1.0	Assessment and Evaluation Unit	Approved	23-08-2016	None
6.	Plagiarism Policy	AEUP05	1.0	Assessment and Evaluation Unit	Approved	18-11-2018	None
7.	Student narrative assessment policy	AEUP03	1.0	Assessment and Evaluation Unit	Approved	18-11-2018	None
8.	Exit exam policy (Arabic version)	AEUP01	1.1	Assessment and Evaluation Unit	Approved	8-6-2016	8-6-2019
9.	Evacuation Plan Policy	CDP01	1.0	Clinical Director	Approved	18-11-2018	None
10.	Medical Emergency Policy	CDP02	1.0	Clinical Director	Approved	18-11-2018	None
11.	Communication & Media Policy	MCP01	1.1	College Media Center	Approved	15-11-2015	29-1-2019
12.	Information policy in the Faculty of Dentistry (Arabic version)	MCP02	1.1	College Media Center	Approved	16-8-2015	25-2-2019

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13.	Community Service Policy	CSP01	1.0	Community Service Unit	Approved	10-2-2019	None
14.	Occupational health and safety (OHS) Policy for Faculty and students in community outreach activities	CSP02	1.0	Community Service Unit	Approved	25-12-2020	None
15.	Continuing Dental Education Policy	CDEP01	1.1	Continuing Dental Education unit	Approved	12-3-2015	26-1-2019
16.	Scheduling and supervision of blocks/Courses policy (Arabic version)	DEUP01	1.1	Dental Education Unit	Approved	8-3-2016	5-3-2019
17.	Duties of block organizing committee policy (Arabic version)	DEUP02	1.1	Dental Education Unit	Approved	8-3-2016	5-3-2019
18.	Final Examination Schedule Policy (Arabic version)	ETUP01	1.1	Educational Timetables and Class Room Care Unit	Approved	8-3-2016	11-2-2019
19.	E-learning Policy	ELUP01	1.1	E-learning and E-exam unit	Approved	27-3-2016	22-1-2019
20.	Appeal of Examination/Course Result policy (Arabic version)	ECUP02	1.1	Exam Control Unit	Approved	16-8-2015	25-2-2019
21.	Exams Control & Monitoring Policy (Arabic version)	ECUP01	1.2	Exam Control Unit	Approved	16-08-2015	6-2-2019
22.	Students' Excuses Policy	EXCP01	1.1	Students' Excuses Committee	Approved	8-2-2015	8-2-2019
23.	Vaccination against hepatitis B Policy	ICUP02	1.1	Infection control unit	Approved	18-3-2015	1-2-2019
24.	Waste Management Policy	ICUP03	1.1	Infection control unit	Approved	15-03-2016	1-2-2019
25.	Sterilization Policy (Arabic version)	ICUP01	1.1	Infection control unit	Approved	8-3-2016	1-2-2019

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26.	Internship Policy	IAUP01	1.1	Interns' Affair unit	Approved	23-08-2015	23-1-2019
27.	Acceptance of graduates from outside the Qassim University in the Internship year Policy (Arabic version)	INAUP02	1.0	Interns' Affair unit	Approved	15-10-2020	None
28.	Policy on Policies	PPUP01	1.2	Policy and Procedure Unit	Approved	23-08-2015	15-12-2020
29.	Student Attire and Dress Code Policy	PCUP01	1.1	Professionalism Competency Unit	Approved	1-9-2015	17-2-2019
30.	Students Attendance Policy	PCUP02	1.1	Professionalism Competency Unit	Approved	1-9-2015	17-2-2019
31.	Exceptional retention incentive	RCP02	1.0	Recruitment Committee	Approved	12-11-2018	None
32.	Recruitment Policy	RCP01	1.1	Recruitment Committee	Approved	16-8-2015	6-2-2019
33.	Very Important Persons (VIPs) Clinics	SCUP01	1.1	Specialized Clinics unit	Approved	23-08-2015	2-01-2019
34.	Locker Usage Policy	SCOP01	1.1	Students' Care Office	Approved	8-2-2016	13-3-2019
35.	Laboratory Instruments Distribution Policy	SCOP02	1.1	Students' Care Office	Approved	16-10-2014	20-3-2019
36.	Equipment Distribution Policy	SCOP03	1.1	Students' Care Office	Approved	16-10-2014	20-3-2019
37.	University/ College Rest House Policy	STCP01	1.1	Student's Club	Approved	16-8-2015	9-3-2019
38.	Students' registration Policy	SRUP01	1.1	Students' Registration unit	Approved	8-2-2015	21-1-2019
39.	Academic Program Development, approval and Review Policy	CCP01	1.0	Curriculum Committee	Approved	15-9-2019	None

Quality Assurance, Information & Documentation Unit

Draft Policies							
40.	Academic integrity Policy	ACFP03	1.0	Academic Affairs	Not approved yet	-	-
Not Needed Policies/Outdated							
41.	Photography Equipment Borrowing Policy	MCP01	1.0	College Media Center	Outdated	-	-
42.	Supply & Purchase Policy	SUP01	1.0	Supply Unit	Outdated	-	-
43.	Information and Documentation Policy	IDUP01	1.0	Information and Documentation unit	Outdated	-	-
44.	Tasks Follow-up Policy	TSCP01	1.0	Tasks Committee	Outdated	-	-
45.	Warehouse Supervisory Policy	WSUP01	1.0	Warehouse Supervisory Committee	Outdated	-	-
46.	Information Technology and Technical Support	ITUP01	1.0	Information Technology Unit	Outdated	-	-

PART II

KEY PERFORMANCE INDICATORS OF THE COLLEGE OF DENTISTRY

Key Performance Indicators of the Bachelor of Dental Surgery (BDS) Program

Key Performance Indicators (KPIs) are a specific form of evidence used by the college to provide evidence of quality performance. The basic performance indicators are one of the most important tools for assessing the quality of academic program according to the criteria and tools of the National Center for Academic Assessment and Accreditation and are among the most important practices that contribute to decision-making and follow-up processes and continuous development and improvement.

The BDS Program relies on all performance indicators that are approved by the NCAAA (17 KPIs), in addition to the institutionally approved performance indicators stipulated in the "Performance Indicators Guide at Qassim University", this is beside 27 performance indicators used to measure the extent to which the program's strategic and operational mission and goals are achieved, as well as the performance levels in all program quality criteria and standards.

All performance indicators are calculated annually according to the time frames, mathematical equations and measurement sources stipulated in the "Performance Indicators Guide at Qassim University", through the Quality Unit in the program, which in turn prepares the program performance indicators report according to the institutionally approved model (Form C-D-12). After that, the performance indicators report is sent to the program director to check and ensure the accuracy of the data and the completeness of all its elements. After the performance indicators audit process is completed, the report is presented to the study plan committee for discussion and review of all the recommendations contained therein and then approved, in preparation for its presentation and approval by the College Council, and then sent to the Deanship of Development and Quality for study and presentation to the higher quality committees.

The results of the performance indicators analysis are employed in planning and improvement of the program by addressing the improvement recommendations contained in the report of the results of the annual performance indicators of the program (Form C-D-12). This is accomplished by including these improvement recommendations as operational goals in the annual operational plan of the program (Form C-D-3).

List of Key Performance Indicators in the College

1. KPIs required by NCAAA



Figure 6: KPIs Required by NCAAA

Standard	KPIs Code	KPIs	Measurement Methods	Measurement Time
-1- Mission and Goals	KPI-P-01	Percentage of achieved target level of KPI of program operational plan	- Statistical data and analysis - Questionnaires	Annually (end of academic year)
-3- Teaching and Learning	KPI-P-02	Students' Evaluation of quality of learning experience in the program	Questionnaires: -Program evaluation questionnaire -A questionnaire evaluating the student's experience	Annually (end of academic year)
	KPI-P-03	Students' evaluation of the quality of the courses	Questionnaires	Annually (end of academic year)
	KPI-P-04	Completion rate	Statistical data and analysis	Annually (end of academic year)
	KPI-P-05	First-year students retention rate	Statistical data and analysis	Annually (end of academic year)
	KPI-P-06	Students' performance in the professional and/or national examinations	Statistical data and analysis	Annually (end of academic year)
	KPI-P-07	Graduates' employability and enrolment in postgraduate programs	Statistical data and analysis	Annually (beginning of academic year)
	KPI-P-08	Average number of students in the class	Statistical data and analysis	Annually (beginning of academic year)
	KPI-P-09	Employers' evaluation of the program graduates proficiency	Questionnaires	Annually (end of academic year)
	-4- Students	KPI-P-10	Students' satisfaction with the offered services	Questionnaires: -Alumni questionnaire -Program evaluation questionnaire
-5- Teaching Staff	KPI-P-11	Ratio of students to teaching staff	Statistical data	Annually (beginning of academic year)
	KPI-P-12	Percentage of teaching staff distribution	Statistical data	Annually (beginning of academic year)
	KPI-P-13	Proportion of teaching staff leaving the program	Statistical data	Annually (beginning of academic year)
	KPI-P-14	Percentage of publications of faculty members	Statistical data	Annually (end of academic year)
	KPI-P-15	Rate of published research per faculty member	Statistical data	Annually (end of academic year)
	KPI-P-16	Citations rate in refereed journals per faculty member	Statistical data (Google Scholar and similar)	Annually (end of academic year)
-6- Learning Resources, Facilities, and Equipment	KPI-P-17	Satisfaction of beneficiaries with the learning resources	Questionnaires: -Alumni questionnaire -Program evaluation questionnaire -Library services resolution	Annually (end of academic year)

2. KPIs Required by Qassim University

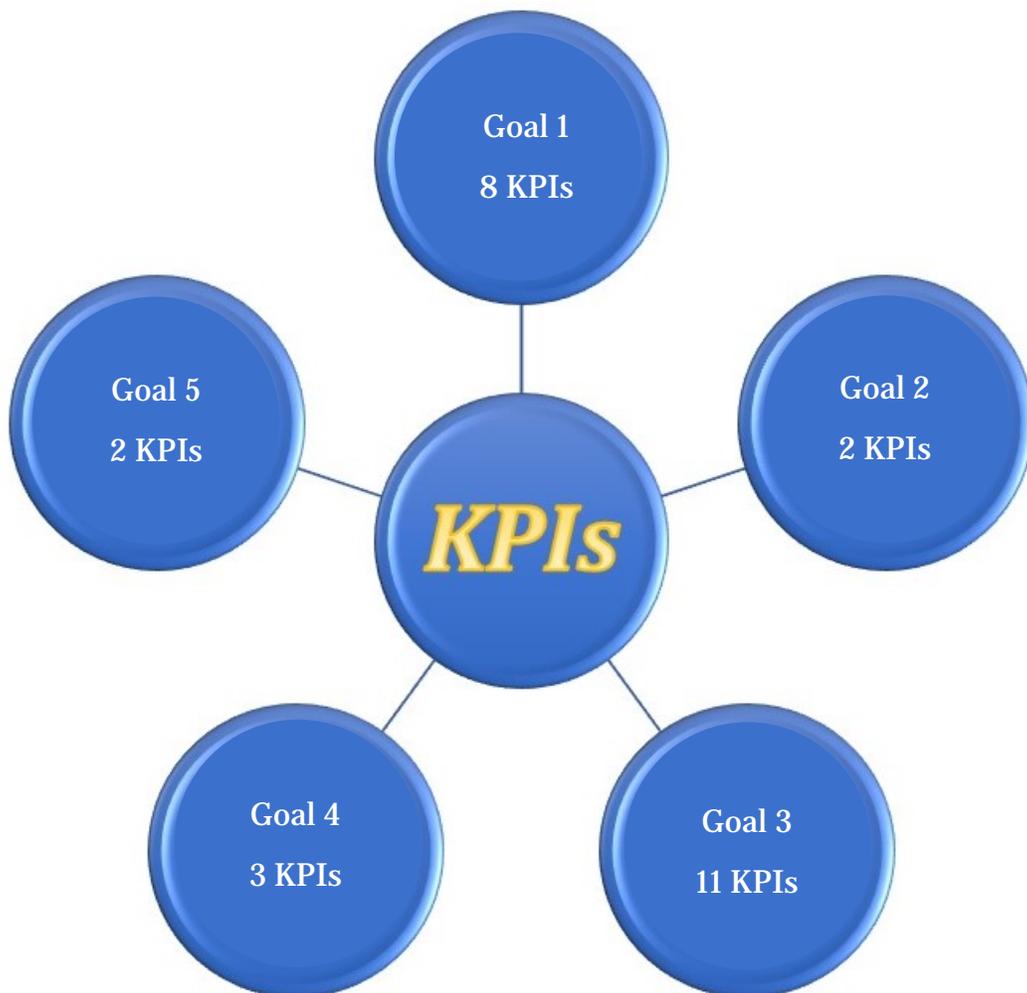


Figure 7: KPIs Required by Qassim University

Quality Assurance, Information & Documentation Unit

Goal	KPIs Code	KPIs Approved by the Institution	Measurement Source	Measurement Time
Goal 1 Teaching the students the concepts, principles, basic theories, and research methodologies in the fields of dentistry.	QU01	The average clarity of the message for all segments of beneficiaries	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU02	The average level of awareness of all segments of the beneficiaries of the program's message	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU61	The average degree of clarity and realism of the program goals for all segments of beneficiaries	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU20	The average student evaluation of the fairness of the program in applying the criteria and conditions for admission and registration in it.	Standardized Central Questionnaires	First Semester of the academic year
	QU22	Average student evaluation for ease of obtaining information about the program before registering for it.	Standardized Central Questionnaires	First Semester of the academic year
	QU23	Average student evaluation of new student orientation programs.	Standardized Central Questionnaires	First Semester of the academic year
	QU25	Student satisfaction with academic advising services.	Standardized Central Questionnaires	First Semester of the academic year
	QU15	The extent of the beneficiaries' awareness of the characteristics of program graduates and learning outcomes.	Standardized Central Questionnaires	First and Second Semesters of the academic year
Goal 2 Enabling students to apply the dental conceptual perception, skills of critical thinking, problem-solving and decision-making in the fields of dentistry to fulfill the requirements of the labor market.	QU18	The average student evaluation of the question items at the beginning of the course, which includes the extent to which students are provided with comprehensive information about the course at the beginning of the semester and familiarize them with the requirements for success and assessment methods	Standardized Central Questionnaires	First Semester of the academic year
	QU11	Average satisfaction of beneficiaries with the comprehensiveness and adequacy of the description and information announced by the program	Standardized Central Questionnaires	First and Second Semesters of the academic year

Quality Assurance, Information & Documentation Unit

Goal	KPIs Code	KPIs Approved by the Institution	Measurement Source	Measurement Time
Goal 3 Providing the students with the ability and competency in motor skills necessary for different methods in dentistry.	QU36	Percentage of PhD holders from the faculty	Program records	Annually (end of academic year)
	QU06	The average evaluation of the program's employees of the climate, organizational and academic environment within the program	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU55	The extent of the beneficiaries' satisfaction with the adequacy, quality, modernization, maintenance and ease of access to laboratories and laboratories and the availability of their instructions and instructions	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU45	The percentage of achievement of the training plan for the teaching staff	Report on the achievement of the training plan for the program (Form C-D-10)	Annually (end of academic year)
	QU46	The percentage of faculty participation and enrolment in the planned training programs	Report on the achievement of the training plan for the program (Form C-D-10)	Annually (end of academic year)
	QU16	Percentage of faculty participation in training programs on teaching strategies and methods of evaluating outcomes	Report on the achievement of the training plan for the program (Form C-D-10)	Annually (end of academic year)
	QU17	The percentage of faculty participation in training programs on the use of modern technologies in teaching and student assessment	Report on the achievement of the training plan for the program (Form C-D-10)	Annually (end of academic year)
	QU05	Ratio of students to technicians (including laboratory and laboratory operators)	Programme records	Annually (end of academic year)
	QU09	The percentage of achievement of the training plan for technicians and administrators within the program	Report on the achievement of the training plan for the program (Form C-D-10)	Annually (end of academic year)
	QU10	Percentage of technicians and administrators enrolled in training programs during the year	Report on the achievement of the training plan for the program (Form C-D-10)	Annually (end of academic year)

Quality Assurance, Information & Documentation Unit

Goal	KPIs Code	KPIs Approved by the Institution	Measurement Source	Measurement Time
	QU66	Average student evaluation of course professors	Standardized Central Questionnaires	Second Semester of the academic year
Goal 4 Providing the students with the essential skills to apply the information technology, basic quantitative skills and problems management skills, developing the student's competency in oral and written communications in the field of dentistry while considering the production and quality improvement of applied research.	QU51	The extent of the beneficiaries' satisfaction with the availability, adequacy and accessibility of electronic resources and digital information bases	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU52	Average satisfaction of the beneficiaries with the technical services provided to them in terms of their suitability, safety, confidentiality, maintenance and periodic updating	Standardized Central Questionnaires	First and Second Semesters of the academic year
	QU62	The number of research published by students of the program during the year	Programme records	Annually (end of academic year)
Goal 5 Providing students with the basics of teamwork, applying ethical issues, personal and social responsibilities for the provision of community services.	QU44	Faculty participation rates in community activities	Programme records	Annually (end of academic year)
	QU64	Number of volunteer hours for students in the program (during the year)	Programme records	Annually (end of academic year)

PART III

CRITERIA FOR CHOOSING BENCHMARKS IN THE COLLEGE OF DENTISTRY

Criteria for Choosing Benchmarks in the College of Dentistry

Benchmarking is a systemic and continuous process for measuring the program performance by comparing it to other equivalent program within or outside the University, that helps in identifying the causes of the gaps and addressing them to reach the best performance.

Benchmarking is a vital process for maintaining high quality performance of any program. It ensures comparing the performance of various aspects of the program with respect to good practices recommended by NCAAA. The College of Dentistry program selected both national and international benchmarks those were approved by the college council.

- Main Criteria in choosing National Benchmarks
 1. The corresponding universities/programs fulfill the three main functions: teaching and learning, scientific research, and community service.
 2. Similar in the educational system (offering BDS Degree)
 3. Similar culture, social and economic conditions (offering Dentistry program for both male and females in KSA)
 4. Similarity of mission and goals
 5. Convergence in the number and efficiency of faculty members.

It is also highly recommended that the benchmark is nationally (or internationally) accredited and it has a positive reputation of high-quality services.

- Main Criteria for Choosing International Benchmarks
 1. Academic rank
 2. Similarity of mission and goals
 3. Number of credit hours
 4. Degree type

The Importance of benchmarking:

Because the benchmarking is one of the methods that helps the organizations to know its performance level compared to the performance of its competitors, and because it is a method of continuous improvement, its importance is highlighted through what it achieves from benefits that can be identified through the following points:

1. Rationalization of expenditures.
2. Providing continuous learning opportunities.
3. Provide an opportunity for the organization to move - internally and externally - towards better models.
4. Improving the creative and innovative capabilities of the team.
5. Providing cooperation opportunities between local organizations or units.

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6. Enabling senior management to answer a set of questions.
7. Adopting an organizational culture aimed at solving problems.
8. Assisting the foundation in precisely defining the gap between its performance and that of the leading institutions in its field of work.
9. It helps to provide the appropriate climate, and enhances the desire for leadership of the institution and its employees to adopt a policy of change towards all that is better and new.
10. Help define critical processes, give them the necessary attention and priority in implementation, and actively contribute to developing individual and group creativity.
11. It actively contributes to increasing the chances of achieving additional benefits for the organization.
12. The external focus of the benchmarking method creates external competitive measures that necessarily increase the efficiency and effectiveness of internal performance quality measures, and makes them more competitive.

The BDS program carries out regularly benchmarking with peer programs in local Universities using the key performance indicators described in “Key Performance Indicators Guide in Qassim University”, and in accordance with the procedures explained in “Benchmarking of Academic Programs Manual”.

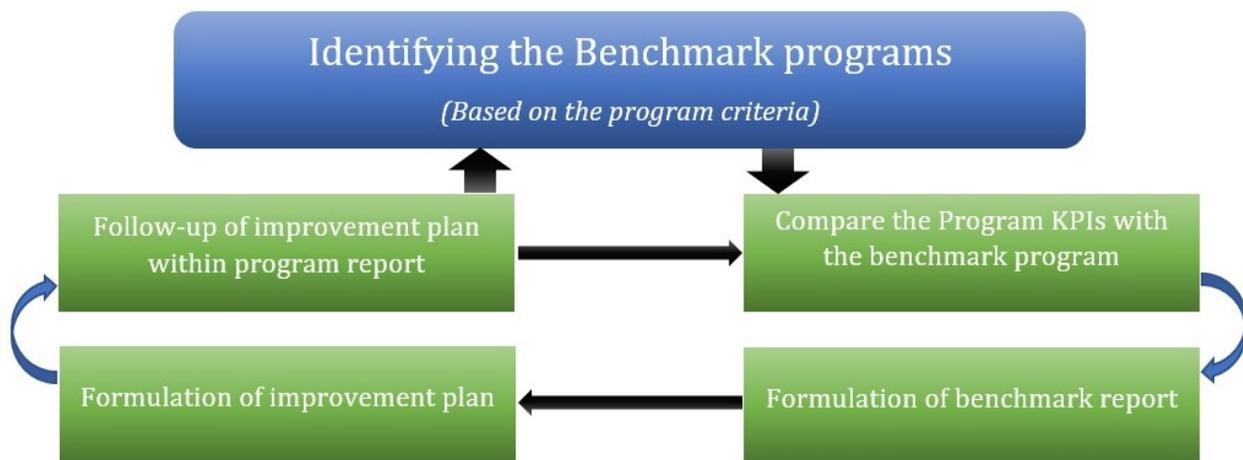


Figure 8: Cycle of Improvement based on benchmark

PART IV

THE MECHANISMS USED IN THE PROGRAM TO ACHIEVE QUALITY

1. Periodic review of the mission and the role of beneficiaries.

The program mission and goals are periodically reviewed to ensure that they are aligned with the current program purposes and activities.

This review is conducted through the following mechanism:

- 1- Submitting questionnaires to the beneficiaries (students, graduates, and faculty members).
- 2- Analyzing the results of the beneficiaries' opinions regarding the clarity of the program mission and goals as well as their consistency together.
- 3- Based on the surveys analysis results, the Quality Unit reviewed the program mission and goals and raise a recommendation to the Study Plan Committee to conduct the periodic review for the program's mission and goals.
- 4- In turn, the Study Plan Committee does what is necessary towards the periodic review of the program's mission and goals, then submits a recommendation to the College Council regarding the discussion and approval of the Program missions and goals.
- 5- Also, the Quality Unit recommendations are presented to the program's professional advisory committee to periodically review the mission and goals of the BDS program, to be sure that the mission of the Program is in line with its goals as shown in the study plan.

2. Consistency of the quality system within the program with the institutional quality system.

As the provision of an advanced and accredited program is one of the priorities of the program management and is consistent with the policy of the institutional quality system, this is evident through the strategic goals of the Program and the College, which have been linked with the strategic goals of the University, as the first and second strategic goals of the program have been related to the strategic goal of the University "Emphasizing the quality of education and achieving excellence in targeted disciplines", which is the first strategic goal in the College's strategic plan 2021-2025. Also, the first and second strategic goals of the program were connected to the first strategic program in the University's plan "Education and Student Competencies" and the strategic projects in the University's plan "The academic accreditation of all programs nationally and internationally for excellence". Furthermore, the third strategic goal of the program has also been linked to the University's strategic goal of "Raising students' competency and professional ability", which is the second strategic goal in the college's strategic plan 2021-2025, which was associated to a project related to the College, that is "Spreading a culture of quality among students", this confirms the consistency of the quality policy in the program with university quality policy. Additionally, the program administration follows quality policies that are consistent with the quality standards specified by the NCAAA. The program administration is fully committed to sustain its position as an NCAAA accredited program, and

Quality Assurance, Information & Documentation Unit

to assure that all aspects of the program comply with NCAAA quality standards, and this also confirms the consistency of the quality policy in the program with University quality policy.

The College Quality Unit:

The Quality Assurance, Information and Accreditation Unit is affiliated with the Vice Dean, which is consistent with the organization structure of the University.

The program calculates its performance indicators according to what is mentioned in the guide to periodic opinion polls and standardized performance indicators for academic programs that is announced on the Quality Deanship website.

Additionally, the decision to form the professional advisory committee for the program was issued in accordance with the guide for organizing professional advisory committees announced on the website of the Deanship of Development and Quality.

Based on Circular No. 51520 dated 18/7/1442 regarding activating the role of the faculty member to serve the educational and academic policy of the University in the faculty advisory council, a faculty member has been nominated to represent the faculty in the university faculty advisory council.

Also, the program's annual operational plan has been updated and linked to the program's strategic goals based on the forms developed by the Deanship of Development and Quality, as well as all the forms issued by the Deanship of Development and Quality were followed.

3. Periodic reviewing of the graduates' attributes and learning outcomes.

The graduates' attributes and the program learning outcomes revision

- 1- It is important to periodically provide feedback and conduct a thorough and accurate review of the relevance and effectiveness of the Program operations. Periodic review should be comprehensive and include a re-examination of the environment in which the program operates and any changes or expected developments of program activities.
- 2- According to Qassim University policy for periodic reviewing of the academic programs, the BDS Program prepared the following documents that show the necessary details based on the quality planning and review process that is applicable to the academic programs and submit them annually to the Deanship of Development and Quality:
 - The program specifications for defining the program development plans (using NCAAA templates), and includes the Program Learning Outcomes and graduates' attributes.
 - The courses specifications for each course using NCAAA templates, and including the Course Learning Outcomes.
 - The field experience specifications to determine planning, organizational arrangements and processes for evaluation.

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- The courses reports that identifies what happened during the course, and provide a summary of the students' results.
 - The Program report, which includes the main information on the program delivery in the year concerned, and the achievements of the Program Learning Outcomes, with notes on any recommendations for improvement to be made to the specifications.
 - A report about the results and analyses of the key performance indicators.
 - The Annual Operational Plan of the Program.
 - The achievement report of the annual operational plan of the program.
- 3- The intended learning outcomes of the BDS Program and the graduate attributes are reviewed more than once since the establishment of the College and the transformation of the education process in the College from content-based to learning-outcome-based education and the development of the Saudi Arabian Qualifications Framework's learning domains, this is in addition to changes in the professional needs. Furthermore, the PLOs are reviewed every five years according to the University system of quality assurance for academic programs, which is currently implemented in all programs at Qassim University. The graduate attributes and the program learning outcomes have been reviewed by the Quality Unit and the Study Plan Committee.
- 4- The achievements of the program's ILOs are reported annually in the program's annual report, and in the report on the results of measuring graduate attributes and learning outcomes (Form C-D-6). The latest approved version of the program's ILOs and graduate's attributes are publicized to the College's students through the program specification, and the College's manual.
- #### 4. Tools for measuring the graduates' attributes, Program Learning Outcomes, and the mechanism of graduation test (exit exam).
- 1- Appropriate tools have been identified to measure graduate attributes and Program Learning Outcomes (PLOs). Effective program evaluation is a structured, ongoing process that provides a more thorough understanding of the program being evaluated. At Qassim University, the program courses are evaluated and reported annually. Details of changes made and the reasons for those changes are retained in course files where quality indicators are identified and used for all courses. Quality indicators include student completion rate and are reviewed by the Quality Unit, the Study Plan Committee, and the Program Director. The selection of the quality indicators, including progression and completion rates, is compared across the institution and by Reference to appropriate external benchmarks, where the action is taken when problems are identified.
 - 2- Furthermore, the following effective tools are applied for assessment and used as a core for planning for improvement, based on timeframe action plans:

Quality Assurance, Information & Documentation Unit

- The use of KPIs as well as internal and external benchmarking covering all NCAAA standards.
 - Revising the KPIs and the achievements of the PLOs to monitor students' performance.
- 3- The BDS program's graduate attributes and PLOs assessment plan:
It is essential to measure the learning outcomes of the Program at the course level. Accordingly, a certain methodology is used to enable these measurements:
- At first, a matrix between the Course Learning Outcomes (CLOs) and their assessment tools is prepared. This is followed by calculating the weight of each assessment tool in certain CLO.
 - A customized template is sent to the course organizers to calculate average student performance in each learning outcome using all the assessment tools employed to evaluate the course.
 - Each learning outcome of the course is aligned with that of the program and plotted in a matrix covering all attributes and learning outcomes.
 - The course credit hours are used as a factor multiplied by student performance to serve as a tool for adjusting the weight of each course.
 - Finally, the data are imported in an Excel sheet especially designed to calculate the average student performance for each program learning outcome to be compared to the expected performance of the students.
- 4- The achievements of graduate attributes and the Program Learning Outcomes are reported yearly in the annual program report. Moreover, all the recommended surveys by NCAAA are conducted to evaluate indirectly the quality of learning outcomes and learning experience in the Program. Knowledge and understanding outcomes are measured through assessment methods in the form of exams, discussion forums and tutor evaluation, debates session assessment, etc. However, skills outcomes are assessed through problem solving sessions evaluations, treatment planning reports, critical thinking reports, laboratory and clinical requirements assessment, practical exams, etc. While the values outcomes are evaluated through formative assessment (OSCE), competency reports, professionalism reports, patient portfolio, and others. Measuring the outcomes of the three learning domains is conducted at both course and program levels.
- 5- The program has a comprehensive plan for evaluating the graduates' attributes and the learning outcomes that has been prepared in accordance with what was stipulated in the program specifications, and of teaching strategies for each learning outcome and the appropriate assessment methods. The Graduate attributes form (Form C-D-5) has included a plan to measure the learning outcomes of the program (Table 3) in which the following are included in detail:

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1. The learning outcome symbol and the associated teaching strategies stipulated in the course specifications related to the learning outcome (specifically in section (d) of each course specification) and the use of curricular and extracurricular activities.
 2. Direct and indirect assessment methods that are consistent with what is stipulated in the course specifications related to the learning outcome (specifically in section (d) of each course specification).
 3. The timing and responsibility of the evaluation that are distributed over the study weeks in the first and second semesters, according to the completion of each course/block.
 4. The method and source of assessment, as several tools are used to measure each educational outcome.
 5. The target performance for each learning outcome, which is determined according to the actual performance of the students during the preparation of the plan in previous years, and the opinions of the professional advisory committee.
- 6- Additionally, a plan to measure the extent to which the graduates' attributes are achieved (Table 4) has been included in the graduate attributes form (Form C-D-5), that includes:
1. Graduate attribute code
 2. Method of measurement
 3. Target performance
 4. The timing and responsibility of the evaluation
 5. Graduates' attributes and learning outcomes are evaluated annually according to the set plan.

The Exit Exam mechanism, and its description

- 1- The Exam Exit is a tool used by the College to measure the expected level of its students' graduation and to give the College an analysis of the strengths and weaknesses in the educational process so as to work on improving the performance and improving the level of its graduates.
- 2- The comprehensive test (Exam Exit) is based on the following controls:
 - Successful passing of the test is mandatory and is one of the requirements for joining the Interns Year Program at the College.
 - Each student has only three chances to pass the test.
 - The examination is held three times in one academic year, and the dates are announced at the beginning of the academic year, and it is unified for male and female students alike.
 - The academic departments in the College are responsible for setting all exam questions.
 - The Assessment and Evaluation Unit is the unit that is responsible for preparation and conducting the exit exam, as well as announcing the students' results.

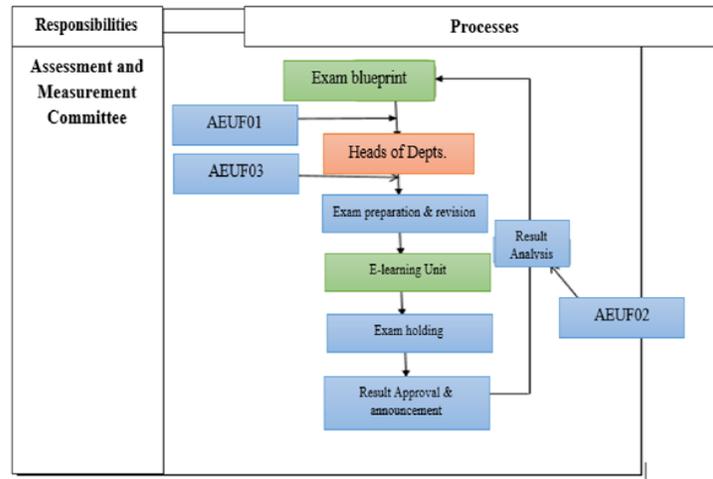
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The steps followed for preparing the exit exam are as follows:

For the theoretical part of the exam, the following documents are e-mailed by the Assessment and Evaluation Unit (AEU) to the Heads of the Departments

- 1- Exam Blue Print (Basic Sciences Exam and Discipline Based Exam) that is prepared according to the guidance of Saudi Commission for Health Specialties and is in line with blue print of Saudi Dental Licensing Exam.
- 2- MCQs Preparation Checklist that is prepared by the AEU.
- 3- Guideline on how to align the Assessment tool - Course Learning outcome and Program Learning Outcomes.
- 4- The email is sent at least 6 weeks before the proposed date of the Exit Exam. Subsequently, three weekly reminders are sent to the Heads of Departments (HODs), if they do not respond.
- 5- After receiving the MCQs from the HODs, the members of AEU verify that they are prepared in accordance with the MCQs format checklist and assessment tool-PLO-CLO alignment guidelines. If any discrepancy is noted during the verification process the questions are sent back to the respective HODs for necessary modification.
- 6- After receiving the questions from the HODs in correct format the AEU prepare the basic sciences exit exam and discipline-based exit exam. Both the exams in the exam view format (password protected files) are emailed to the E-exam Unit at least three days before the exit exam. The password for the exam files is sent to the head of the E-exam unit via WhatsApp.
- 7- After the exam is completed, the AEU interpret the students' results by using the "Moodle" program and in coordination with the E-learning Unit results' analyses and release detailed and separate reports for each academic department that includes analyses of the following indicators:
 - Content Validity
 - Facility Index
 - Discrimination Index
 - Discriminative Efficiency
 - Distractor Efficiency
 - Internal Consistency Reliability
- 8- Reports are sent to all concerned academic departments in order to amend the questions or replace them to be in line with the attached analyses.
- 9- With each new comprehensive exam (Exam Exit), 20% of the total exam questions are changed. This is done by addressing the heads of the relevant academic departments to supply the AEU with new questions.
- 10- The success rate is 60% or more.
- 11- The results and special analyses are collected after each exam and submitted to the Program Administration for approval and announce it to the student.

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Steps for preparing the exit exam

5. Study plan development and updating.

- 1- Regular updating, reviewing and development of study plans for the Bachelor of Dental Surgery program .The review is conducted annually for a minor review and every five years for a major review.
- 2- Mechanisms, procedures, and standards for developing the study plan based on changes in the program's mission and goals, results of measuring learning outcomes, performance indicators, program reports, and periodic courses, results of beneficiaries' questionnaires and requirements of the labor market.
- 3- Regular evaluations from each academic department for its academic programs. Such assessments cover curricula, learning outcomes, study plan, admission criteria, course delivery, and learning resources.
- 4- A plan for course development according to students' recommendations and those suggested by the block organizer based on course learning outcomes results.
- 5- periodic questionnaires that put by the quality system in the program to evaluate courses for students and faculty members and to determine strengths and weaknesses, as well as recommendations for improvement that are included in reports submitted to the program administration and the relevant committees to discuss these proposals and take them into account when developing and reviewing the study plan.
- 6- Reviewing any changes or updates to the academic/study plan by the College study plan Committee, in accordance with the Academic Departments and Quality Unit. These periodic reviews are conducted in accordance with College and University regulations.

6. Periodic review of the study plan and its controls, starting points and time frames.

- 1- In accordance with the approved policy and University guidelines for major and minor curricular review, the review is conducted annually for the minor review and every five years for the major review. Any changes to the curriculum is overseen by the study plan Committee.
- 2- These procedures are consistent with the mechanisms for developing the study plan stipulated in the general framework of the study plan, which requires update and development after the graduation of the first group.
- 3- Based on a directive from the Quality Unit reviews are conducted for the program's mission and learning outcomes. Contacts are taking place between the Courses organizers and all scientific departments to collect and discuss proposals for developing curricula and reviewing the study plan to make amendments that add to the graduate professional skills and help in keeping pace with changes in the labor market, which are consistent with the program mission and goals and help the graduate to be familiar with everything that is new in the field of dentistry with regard to the knowledge and skill side.

7. Determining the courses learning outcomes.

- 1- The program contains an approved matrix that links the learning outcomes of the courses with the learning outcomes of the program in line with the program's mission and goals and in line with the requirements of the National Qualifications Framework, taking into account the fulfillment of the needs of students from each Course.
- 2- The matrix included in the program specification and also within the specification of each course.
- 3- Concerning the coverage of the learning outcomes of the courses for the three learning domains, the learning outcomes of some courses cover the aspect of knowledge and understanding according to the content of the course, while some cover the skill domain, especially in the courses that depend on the skills of the laboratory or clinical training, in addition to teamwork and presentation skills. Furthermore, some courses cover the learning outcomes in the field of values. whereas, some courses can cover two domains and sometimes three; knowledge and understanding, skills, and values.
- 4- With regard to linking the learning outcomes of the courses with the learning outcomes of the program and including them in the course specification, the learning outcomes for each course are identified and included within the course specification, and each of these outcomes is linked to the learning outcomes of the program according to the matrix included in the program specification.
- 5- As for the number of learning outcomes for the course, the number of learning outcomes for each course is proportional to its content. Whereas, some courses contain four and some increase according to the content of each course. The number of learning outcomes for each

course is shown in the matrix linking the learning outcomes of the courses with the learning outcomes of the program, as well as in the description of each course.

8. Define teaching strategies based on students' active learning.

- 1- Student-centered active learning is one of the teaching methods that has been transformed into an educational policy to replace traditional education around the world in the past two decades. It is the way in which the educational situation depends on the positivity of the learner and it includes all educational practices and procedures that aim to activate the role of the learner, where learning takes place through research and self-adoption on the part of the learner to acquire information and skills.
- 2- The College of Dentistry, Qassim University, was the first dental college in Saudi Arabia and the second dental college in the Arab world, after the University of Sharjah in the United Arab Emirates – to implement the PBL system. Furthermore, it has recently been expanded by integrating critical thinking and group learning (TBL) processes. The syllabus of the college Bachelor of Dentistry program is supported by the implementation of some traditional lectures (Hybrid Curriculum) to avoid flaws in other education systems that rely solely on the use of (PBL, TBL, and Critical Thinking) and to ensure the full success of the system as a whole.
- 3- The application of student-centered learning strategies and active learning leads to self-directed learning to develop problem-solving and critical thinking skills, as well as preparing students for the types of problems they will encounter as professionals. Students become better self-directed learners and increase their confidence and sense of belonging in dental school. In addition, their scores on some tests may be higher. Some have suggested that the work environment for students and faculty is much better. Discusses and agrees on teaching strategies within the program and courses.

9. Teaching strategies and assessment methods for the program.

- 1- Teaching and learning strategies and assessment methods of the BDS program are well-planned and identified according to the learning outcomes of the courses that are aligned with the learning outcomes of the program. Furthermore, the choice of the teaching strategies and assessment methods is based on the type of skills that need to be developed in view of the National Qualifications Framework learning domains. Additionally, both the program specification as well as all the course specifications include a detailed description for the plans of the program delivery, including teaching and learning strategies, assessment methods and ways of verifying the effectiveness of these strategies and methods.
- For the Learning Strategies, the program used the following:
1. Lectures

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2. Problem-Based Learning (PBL) and Team-Based Learning (TBL)
 3. Self-Directed Learning (SDL)
 4. Videos/dialogues
 5. Debate
 6. Lab demonstrations
 7. Class work and in class discussions
 8. Assignments
 9. Individual and group discussion
 10. Individual and group presentation
 11. Critical thinking
 12. Case studies
 13. Simulation
 14. Lab sessions
 15. Small group work
 16. Hands-on student learning activities
 17. Clinical demonstrations and clinical training
 18. Community based learning
 19. Case presentation
 20. Cooperative learning
- 2- Some of these strategies are designed to impart knowledge and cognitive skills such as lectures and discussions. Regarding the skills aspect, the outcomes must be appropriate for the teaching strategies that depend on solving problems, practical activities and practical application, extra-curricular activities, and so on, for example, preclinical and clinical experience, demonstration and practice, and role-play for clinical competencies (practice). Role-play, topic presentation, and case studies are assigned to develop autonomy and responsibility. Finally, topic presentation, case studies, research projects, e-learning, and basic computer operations are chosen as the strategies to develop attributes such as information technology and numerical skills.
- For assessment methods, the following are used in the BDS program:
1. Summative exams
 - MCQs
 - Short essays
 2. Formative assessment
 - OSCE
 - OSPE
 3. Discussion forums and tutor evaluation (Rubric)
 4. Debates sessions Assessment (Rubrics)
 5. Extended written work (Project report) Assessment (Rubric)

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6. Individual and group presentations Assessment (Rubric)
 7. Self-evaluations (Rubric)
 8. Professionalism reports (Rubric)
 9. Competency reports (Rubric)
 10. Problem solving sessions evaluations (Rubric)
 11. Treatment planning reports (Rubric)
 12. Critical thinking reports (Rubric)
 13. Laboratory and clinical requirements Assessment (Rubric)
 14. Checklist
 15. Patient portfolio
 16. Case presentation Assessment (Rubric)
 17. Direct observation of performance/behavior (Oral presentation) Assessment (Rubric)
 18. Mentor reports (Rubric)
 19. Peer evaluation (Rubric)
 20. Direct observation of procedural skills (DOPS) Assessment (Rubric)
- 3- Course coordinators are keen on the diversity of teaching strategies as well as assessment methods among the learning outcomes of the course in proportion to the nature of each output and the most appropriate ways to present it as well as evaluate it.
 - 4- Teaching strategies and assessment tools in the program are compatible with the bachelor's level in the field of dentistry. The teaching strategies and assessment methods varied according to the different learning domains (knowledge – Skills- values) represented in the diversity of teaching strategies and assessment methods used in the courses which are compatible with their learning outcomes. The teaching strategies and assessment methods of the program are also in line with the requirements of the National Qualifications Framework in the Kingdom of Saudi Arabia and internationally comparable programs.
 - 5- In addition to the active learning strategies used in the College and the variety of assessment methods that also include a student's self-evaluation of their work, students in the Bachelor of Dental Surgery program participate in two major research projects that they must complete in order to graduate. These projects are included in the assessment of students, and some courses are concerned with developing students' scientific research skills, starting with the research proposal, passing through the steps of conducting the research, and ending with the scientific publication of the research paper in international refereed journals with impact factors. This is under the supervision of faculty members and their participation in these research and during these research activities.
 - 6- The student's skill is developed in preparing distinguished presentations, which develops his self-confidence and desire to participate in scientific conferences later. The first project is implemented during the students' clinical years and begins with a research proposal in the third year. The project must be completed through an oral or poster presentation at the end of the fifth year. The second research project is a project that the student undertakes during the

year of field training or internship. These research projects not only enhance and enrich students' skills but also assist them in their entry into postgraduate programs.

10. Determining the learning outcomes of the field experience course.

- 1- The learning outcomes of the field experience course are determined based on the mission and vision of the program, and in line with the educational outcomes of the program.
- 2- In the field experience course description, reference was made to the course learning outcomes and the associated program learning outcomes.

11. Follow up the commitment of all parties related to field training to the responsibilities and tasks stipulated in the description of the field experience course.

- 1- The field experience course description includes an organizational structure of responsibilities that includes all units and departments responsible for field training as evidence of the organizational relationship between them.
- 2- It includes a table specifying the distribution of the course's responsibilities to units, departments, trainees, and supervisors
- 3- It also includes a description of the mechanism of supervision, follow-up and guidance for internship doctors, as these responsibilities are assigned to training centers to be then submitted to the Internship Affairs Unit.
- 4- Additionally, it contains a definition of the controls and qualifications of each of the training centers and the supervisory staff to follow up the training of internship doctors.
- 5- Internship Doctors Training Centers are accredited training centers in the Kingdom for graduates of colleges of health sciences. Communication takes place between the Internship Affairs Unit and the training centers to determine the possibility of internship doctors accepting training
- 6- Compliance with field training responsibilities is monitored by supervisors and departments in training centers and by the Internship Affairs Unit. This is done through questionnaires and direct contact between those responsible for the field experience course.

12. The program ensures a unified application of its study plan as well as the program and the course specifications offered at more than one site (sections of male and female students and different branches).

- 1- Course organizing committees usually manage similar courses in the male and female sections with the presence of a female coordinator who communicates regularly with the course organizing team.
- 2- Special attention is paid to ensuring that the same content is taught in both sections and that teaching, training, and assessment methods are similar in both sections.
- 3- Both sections share the same e-learning websites (Blackboard) for all courses. Furthermore, in each department, there is efficient coordination between both sections regarding updating the course syllabi, modifying teaching strategies, and arranging for training needs and settings.
- 4- Female faculty members participate in Departmental Councils with their male counterparts and share in decision-making. Additionally, female section representation is ensured in all program units to ensure equality. Similarly, when the college organizes events, both sections are represented on organizing committees and in planning and participation.

13. Follow up the commitment of the faculty to the teaching strategies and assessment tools included in the course specifications.

- 1- The teaching and learning system in the BDS program revolves around the policies and procedures of the Educational Timetables and Classroom Care Unit (ETU), the Dental Education Unit, the Assessment and Evaluation Unit, the Quality Assurance, Information and Documentation Unit, and the Vice Dean for Academic Affairs.
- 2- In accordance with these policies, at the beginning of each semester after the issuance of the administrative decision to form course committees:
 - The organizers of these courses send their course files including specifications and proposed timetables as well as the appointed faculty members for each educational activity and the filled in Approval form for assessment tools (Item # 6 in the course file) to Quality Assurance, Information and Documentation Unit. The Quality Unit reviews the files and then perform the necessary coordination and modification of the activities.
 - These files are approved by the Vice Dean for Academic Affairs and the College Council (when needed). Any future change in the status (place or time of offering courses, or any modification in assessment methods) must first be approved by the relevant unit and the Vice Dean for Academic Affairs.
 - At the end of the course, each block organizer submits the whole course file to the Quality Assurance, Information and Documentation Unit including the results and course reports which contains the analysis of the students' evaluation survey of these

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courses. The block organizers submit a report & implementation plan for improvement recommendations suggested from the students' recommendations in the course evaluation surveys that are conducted at the end of each block/course. Quality Assurance, Information and Documentation Unit reviews these files and follows up the implementation of the improvement suggestions.

- 3- Through this mechanism, the program monitors the extent to which faculty members adhere to learning and teaching strategies and assessment methods. Faculty members are informed about this mechanism and are well aware of it, as all faculty members are actually course coordinators at both male and female sides.
 - 4- As a way for monitoring the commitment of the faculty members to teaching strategies and assessment methods, it is included as a section in the faculty evaluation forms which confirms the program administration's follow-up to the commitment of the faculty members to the teaching strategies and the assessment methods contained in the courses specifications. Furthermore, the heads of the departments randomly access the lectures, to make sure that the faculty members commit to the teaching strategies.
- 14. Following up the use of modern technology in teaching and student assessment.**
- 1- The use of modern technology in teaching and student assessment is a combined work of the faculty members, block organization committee, Educational Timetables and Classroom Care Unit (ETU), dental education unit, and e-learning unit.
 - 2- The program is monitoring the faculty members' use of modern technologies in teaching and their suitability in the educational process through student assessment questionnaires and the follow-up by the e-learning unit, as well as the dental education unit for the use of these technologies.
 - 3- The e-Learning unit creates a page for each course on the Blackboard, and the organizer of each course continues to upload the course contents through this page so that students can access it on an ongoing basis.
 - 4- The dental education unit is responsible for preparing the electronic content of problem-based learning. Then, upload the content of problem-based learning for different academic years, as well as provides pages for student discussions and presentations of the PBL objectives.
 - 5- The Dental education unit uploads it to the Blackboard on a weekly basis, while providing electronic resources for each scenario before the session of this scenario.
 - 6- As well, the e-learning unit enables faculty members to access the problem scenarios, student discussion pages, as well as the assessment pages at the end of each problem. The faculty members' evaluation of these student works through the PBL assessment pages on the Blackboard.

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- 7- Also, the e-learning unit is also responsible for preparing the electronic exams through a highly advanced computer assessment that is active, safe, and effective.
 - 8- This work is done through the e-learning unit in collaboration with the dental education unit, and in coordination with the course organizers and Educational Timetables and Classroom Care Unit.
 - 9- The dental education unit collects individual and group tests for team-based learning from the course coordinators and prepare for the team-based learning sessions in coordination with the Educational Timetables and Classroom Care Unit and e-learning unit.
 - 10- Also, the dental education unit continuously prepares workshops for faculty members to familiarize themselves with the mechanisms of problem-based learning and team-based learning.
 - 11- The Quality Assurance, Information and Documentation Unit measures the extent of students' satisfaction with the diversity and effectiveness of teaching methods used, as well as their satisfaction with the use of the Blackboard system in teaching and ensures the use of modern technologies in teaching.
- 15. Ensuring that students are supplied with all data relevant to the course at its beginning.**
- 1- The program implements clear procedures to ensure adequate awareness of the students about the learning materials and resources at the beginning of each course, and all are appropriate to ensure the availability of a high quality level of support for student learning, and the program is committed to applying them at a high level on a regular basis, and there is sufficient and varied evidence. All of them are subject to periodic assessment and development with the existence of high results for improvement.
 - 2- All course files are uploaded to the Blackboard at the beginning of each semester, which include the course specifications, the course book, the approved course timetable, the approved distribution of grades and the assessment methods used in the course.
 - 3- A lecture is also held in the first week in courses to discuss the course syllabus, its content, schedules, guidelines, course requirements, assessment methods and grade distribution. Sufficient information is provided to students about the nature of the learning outcomes and opportunities available, including the activities and resources available to enable learning.
 - 4- Implementation of all courses is carried out according to the course outline and specifications. In case of any deviation from the course plan, a report is submitted to the Educational Timetables and Classroom Care Unit (ETU), which in turn submits it to the College's Vice Dean for Academic Affairs. The deviation is mentioned in the course report as well as the annual program report with its justification. Appropriate action is taken.

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- 5- All required textbooks and reference materials are available and can be accessed through the electronic library using this link: <http://ezp.uod.edu.sa/login>. To facilitate this, each student was provided with their own username and password. In addition, some course coordinators upload key reference books and related books to the Blackboard for student use.
- 6- Attendance/absence and other academic policies are explained to students upon admission to the College and then reinforced at the beginning of each course. Student attendance is regularly monitored through the University system, where the course organizer uploads information about attendance on a daily basis. Further, attendance details are forwarded to the Office of the Vice Dean for Academic Affairs. Compliance is monitored and absence reports are submitted to the College Vice Dean for Academic Affairs periodically (10%, 15%, 20%, 25% absence), where warning letters to students are issued followed by denial letter if the student exceeds the absence rate. Students are followed up and ensure that they obtain sufficient information about the courses through the questionnaires that are submitted to them, as well as through the Quality Assurance, Information and Documentation Unit at the College.
- 7- This is the mechanism for providing students at the beginning of each semester with comprehensive information about the course and its specification as expected learning outcomes, teaching strategies and assessment methods.
- 8- The first section of the Courses Evaluation Surveys (CES) constituted two questions concerning the start of the course). The Survey is conducted at the end of each course by all students, through google forms, following the accredited program questionnaires 2018 announced on the website of the Deanship of the Quality Assurance and Accreditation. The questionnaire was given to the students in both English and Arabic.
- 9- The first section of CES consists of 2 Questions in:
 - a. The course outline (including the knowledge and skills the course was designed to develop) was made clear to me.
 - b. The things I had to do to succeed in the course, including assessment tasks and criteria for assessment, were made clear to me.

16. Mechanism and procedures for evaluating courses and courses reports.

- 1- At the end of the course, all compulsory courses in the BDS program submit a report evaluating the effectiveness of teaching and learning strategies and assessment methods, and an analysis of learning outcomes for this course according to NCAAA/ETEC models. Moreover, at the end of each course, a course evaluation questionnaire is conducted on the basis of the questionnaire to indirectly assess performance in the course with regard to course specifications and organization, teaching and learning, learning outcomes, teaching support services, and learning resources.

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- 2- This mechanism includes a description of the procedures for evaluating teaching strategies and assessment methods. These reports and surveys are evaluated by the Quality Assurance, Information and Documentation Unit, and appropriate action is usually taken if any weaknesses are found and a report is written on the most prominent strengths, weaknesses and opportunities for improvement for each course

17. Mechanism and procedures for evaluating the field experience course and its periodic reports.

- 1- The field experience report is prepared by the Interns Affairs Unit based on the following points:
 - a. Training activities, methods of their evaluation, and a mechanism for verifying evaluation results, in which difficulties encountered in implementation and proposals for improvement are presented.
 - b. Outcomes of the field experience course learning, in which assessment methods and results are developed.
 - c. Evaluation of the quality of the field experience course by supervisors and interns.
- 2- An improvement plan for the field experience course is drawn up in the report, based on the opinions of the training supervisors and on the field experience course questionnaires for internship doctors. All data are collected by the Intern Affairs Unit to complete the preparation of the report.

18. Awards offered to the faculty, and their standards and models.

- 1- Awards for Excellence in Scientific Research, which are represented in material prizes in the form of publication incentives granted by the university to distinguished people in the field of scientific research and participants in publishing in refereed scientific journals with an impact factor to honor the distinguished faculty member and encourage him to undertake further research and progress in the field of scientific publishing, in addition to Financial support provided by the university for research projects, as well as support provided by participating in publishing costs for research in journals with an impact factor. The application for these incentives shall be by submitting a request from the applicant to the Deanship of Scientific Research for consideration and approval, if a faculty member meets the conditions for advancement and the advanced research has criteria announced by the Deanship of Scientific Research.
- 2- At the program level, the distinguished faculty member in the field of scientific research is honored by assigning the Dean of the faculty to the faculty's research center to conduct a census of the scientific publication rate and the citation rate for each faculty member individually.

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Then the first three centers are determined according to the citation rate to be honored on the scientific research day held by the college annually and organized by the Students' Research and Presentation Skills Supervision committee (SRPSSC) in collaboration with the dental research center by presenting honorary certificates and shields in their names to encourage them and motivate the rest of the faculty to publish scientifically and choose international journals with an impact factor to raise citation rates. This mechanism does not depend on candidacy requests submitted within the program, but rather depends on periodic statistics conducted by the dental research center of the college using Google Scholar accounts for faculty members.

- 3- On the other hand, faculty are honored according to their teaching performance, participation in the different units and committees and their general performance in the program. Each faculty is evaluated annually by his/her department head and the evaluation forms are submitted to the faculty evaluation unit to complete the evaluation according to the general performance in the program. Ten faculties with the best performance are selected to be honored and they are given certificates of excellence.

19. Procedures for verifying the quality and credibility of evaluation methods.

The program implements different strategies to ensure the quality and validity of the assessment methods. These strategies are available in policies and procedures in relevant units (Assessment and Evaluation Unit, Exam Control Unit, and E-Learning and E-Exam Unit) and can be summarized by three stages of the examination process as follows:

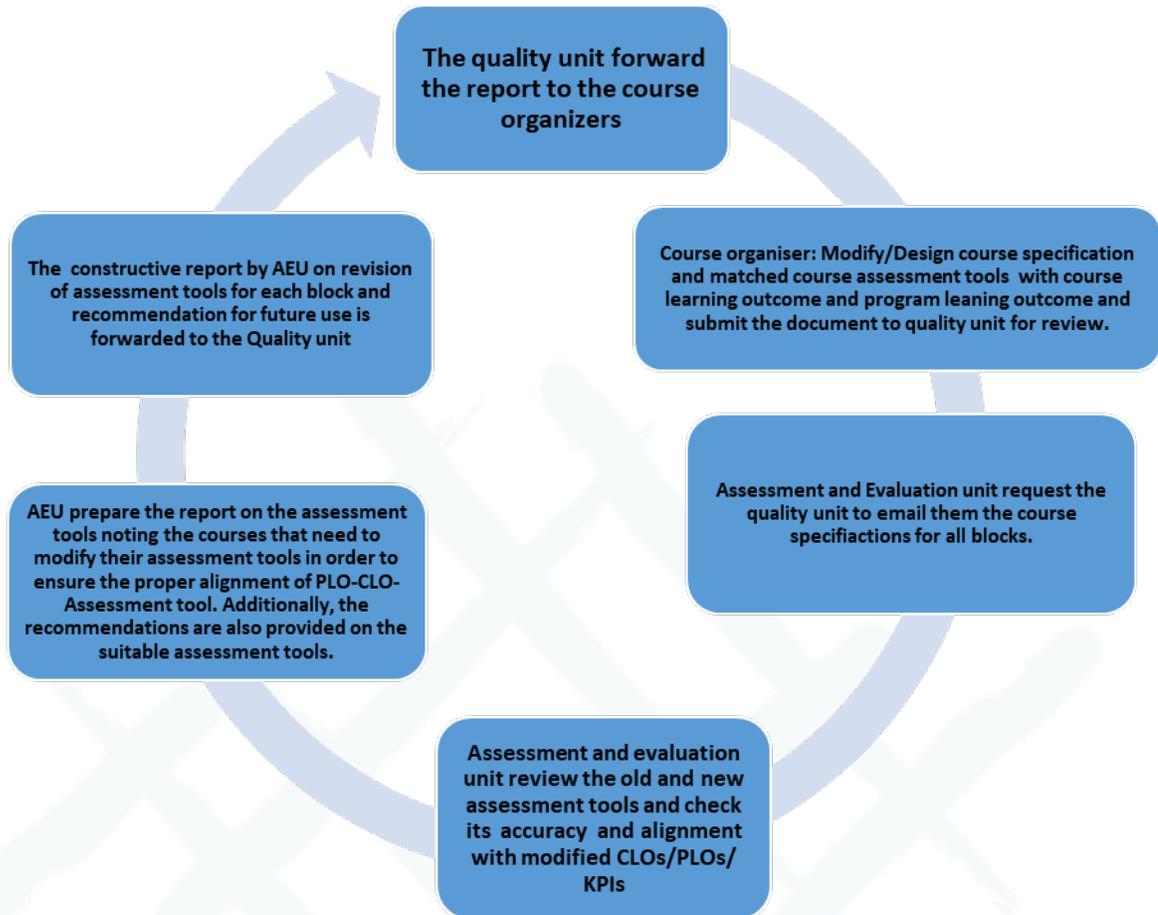
- 1- Prior review procedures for each test or exam:
All course/block organizers keep the blueprint of the written exams. The blueprints align the course ILOs/content with the percentage of questions assessing specific knowledge levels. This helps in the proper matching of questions to the learning outcomes and ensures that the planned learning outcomes are addressed
- 2- After receiving questions from the contributors, the organizing committee will review the examination or test to ensure:
- 3- Exam coverage for all learning outcomes.
- 4- There are no errors in the questions.
- 5- Clarity of questions.
- 6- The duration of the exam corresponds to the nature and number of questions.
- 7- No questions were repeated.
- 8- Follow-up procedures after each test or exam
- 9- The department and the mechanism it deems appropriate will review the examination or test to ensure:

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- 10- The ability of the examination to The BDS curriculum is organized in a way that ensures a balance between the general and specialty requirements. This distribution of curriculum hours is according to the general university requirements for curriculum design.
- 11- Moreover, according to general course sequencing, the knowledge and dedicated courses should precede the practical courses and successful completion of preclinical skill labs makes the students eligible to enroll in clinical courses. Therefore, the BDS curriculum contains prerequisite and co-requisite courses to ensure proper sequencing and integration between the program's courses and achieve the desired goals and intended learning outcomes
- 12- Distinguish between those who scored high on the total test and those who scored low. (Analyze the results of discrimination treatments for questions).
- 13- The convenience of the exam for students (analyzing the results of difficulty coefficients for questions).
- 14- That the targeted learning outcomes that the test results showed were not achieved as required for continuous development.
- 15- Student review procedures for test or exam results
- 16- In the case of a mid-term exam, the student reviews the relevant faculty member and obtains feedback from him. If no result is reached, the student returns to the Vice-Dean for Academic Affairs.
- 17- In the event of a final examination, the student will fill out the form for reviewing the final exam mark from the Student Care Office.
- 18- The dean forms a review committee composed according to the college's policies and procedures.
- 19- The committee reviews the student's final paper, explains its views, and sends it to the dean.
- 20- The dean declares his opinion and sends it to the admission and registration unit. The student is provided with the feedback.

Regarding the assessment and evaluation unit role for verification of the suitability of the assessment methods through the following diagram

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20. Procedures for verifying the credibility of the works submitted by students (homework, scientific projects, research papers, etc.).

The College has two main pathways to verifying that students' work and assignments are their own:

- 1- The first track is that the college has an official policy for student academic misconduct, including plagiarism. The College of Dentistry at Qassim University is committed to eliminating plagiarism in all its forms. Any case of plagiarism is dealt with in accordance with applicable regulations.
 - To ensure fairness to students, regulations regarding plagiarism policy have been included in the Student Handbook. Furthermore, faculty members inform students of the consequences of plagiarism.
 - Plagiarism can be defined as copying or paraphrasing other people's works or ideas into one's own work without explicit acknowledgment.

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- Plagiarism is one of the most common actions which is an indication of lack of knowledge or misunderstanding on behalf of both students and teachers.
 - **Examples of plagiarism:**
 - Using references such as books, newspapers, encyclopedias, the Internet and others without documentation.
 - Present the work of other students as the work of the individual.
 - Submit the same work to different classes.
 - Purchasing academic work or submitting work done by someone else.
 - Presenting the work without taking into account the idiosyncrasies when documenting quotations within the text.
 - Faculty members take specific steps to check plagiarism for any assignments/projects of 500 words or more. These assignments must be submitted through the program (Plagiarism Checker Program, provided by the Deanship of Library Affairs, Qassim University) to ensure that no more than 24% of the project consists of cited material .
- 2- The second track validates students' clinical work through Clinical Patient Management Programs (Apex)
- All cases assigned to the student as part of their clinical experience cases are recorded in their account after referral from the student group student guidance. All case records, including photographs, radiographs, progress notes, and clinical procedures, are documented in the patient's electronic file, which can be checked at any time by the student's teacher, clinical coaches, or the clinical course organizing committee.

21. Program policy that ensures adequate timely feedback to students on the results of their assessment.

- 1- Student assessment refers to the processes in which evidence of learning is collected in a planned and systematic way to make a judgment about student learning. The college used assessment for both aggregated and formative purposes. Furthermore, these assessments are designed and implemented internally within the college and outside through standardized assessments during the training year (field experience).
- 2- The college emphasized assessment for formative purposes, which aims to identify aspects of learning as it develops in order to deepen and shape subsequent learning among college students. Students receive assessment results and feedback about their performance while allowing them to improve their performance. Furthermore, most students agreed in the program evaluation questionnaire that “the teachers in the program have given me helpful feedback on my work. This is in order for them to make me progress in the program.

- 3- The college uses different strategies to implement this in the didactic, practical (skills) and clinical courses. In theoretical courses, the continuous assessment score includes quizzes, and mid-term exams, etc. The scores for these assessment activities are usually uploaded by the course organizer to the course's e-learning webpage (Blackboard) within two weeks of the assessment event.
- 4- The practical skill courses (blocks) continue the students' feedback about direct instruction and guidance from the supervisor during the performance of the required task. Self-assessment sheets are provided to the students through the skills booklet. Finally, the supervisors' assessments of the skills requirements usually occur against the assessment rubrics, which are typically distributed with the skills booklet at the beginning of the skills course
- 5- In the clinical courses (clinical practice I and II and total patient care), different formative assessment strategies and timely feedback to the students are usually provided through the use of competency evaluation sheets for the minimal clinical experience, self-assessment, and mentors' and students' interviews by clinical organizing committee.

22. Mechanism and procedures ensures justice in the application of the standards and criteria for the admission and registration of students.

The BDS Program is based on a set of practices that support the fairness of accepting its students. For students' admission in the BDS program, it goes through the well-established and computerized system that is provided by the University. Student records are well maintained and secured in the University computer center. These records are fully computerized and can be accessed by administrators and registrars easily from within the network. Data can be withdrawn and analyzed from these records. Attendance requirements for students are made clear to them, as they can be monitored and enforced.

The procedures for accepting students in the program are consistent with the regulations and procedures of the University and the Deanship of Admission and Registration as follows:

- Students are specialized in the College of Dentistry after passing the PYP according to the following rules:
 - o Successfully passing all the courses of the study plan of the PYP.
 - o The student's GPA should not be less than 2.00 out of 5.00.
 - o Specialization in the college of dentistry is announced at the end of every semester.
- Specialization is executed among students competitively according to the following standards.
 - The sequence of the student's desired colleges.
 - The student's GPA in only the courses of the PYP study plan.
 - The number of vacancies available in the college of dentistry.

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- PYP students in the core program and the other branches compete for the targeted college on its campus. No student (whether a core program student or a branch student) can compete for the college that are not on his/her PYP's campus.
- Students enter the college of dentistry on the university website during a certain period that is announced at the time. The students' desires are deemed final and impossible to change after the deadline.
- The Deanship of Admission and Registration announces the results of specialization on the university website.
- A student's GPA in the PYP is merely a competitive average between the PYP students used to specialize them in.
- After a PYP student joins the college of dentistry, his/her GPA starts from zero unless he has originally transferred to the PYP from a college that does not require passing the PYP. If so, his/her GPA continues with him/her in the college he/she specializes in after passing the PYP.

23. A mechanism that matches the number of students accepted into the program with the resources available to it.

- 1- At the end of each academic year, the program management is keen to limit the number of faculty members available to it in different disciplines in order to ensure the quality of the educational process in the program and its adaptability to the numbers of students admitted in the following academic year, where the program has an appropriate number of teaching staff in both the male and female students' parts.
- 2- The Timetable and Classrooms Unit provides the program management with a detailed report on the appropriateness of the numbers of students admitted to the program with the resources available to it.
- 3- The program ensures that the numbers of students admitted are appropriate to the resources available to it by measuring the KPI-P-08 performance indicator and comparing it to its value from the previous two years.

24. Mechanism for providing a comprehensive orientation program for new students, and how to evaluate and benefit from them.

Student Orientation programs when enrolling in the University are divided into University-Level Orientation programs and Program-Level Orientation Programs.

1- University-Level Orientation Program:

The Department of Guidance and Counseling in the Deanship of Student Affairs educates and informs newly accepted students at the university of the services and facilities available to them, their obligations and responsibilities. The student is provided with some important and necessary instructions that the student needs to understand before starting his studies.

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The program for receiving the new students since their admission to the University is arranged. The students are given an invitation to attend the reception with notice of admission to the University. In addition to some important and necessary instructions that the student needs to understand before starting their studies. The program aims to prepare the student for a new university life. Introducing the support systems for the students of the university, as well as introducing the students to the faculty they will be attending and what they offer them. The university's essential facilities, such as the library, restaurants, gyms, photographic centers, bookstores, laboratories, etc. The reception is organized over two days. The reception program starts on the first day of each semester and is graciously sponsored by the University Rector. Moreover, the Student advisors are also familiar with details of course requirements and are available to provide assistance prior to and during the student registration process.

2- **Program-Level Orientation Program of the Faculty of Dentistry:**

The academic advising committee of the program introduces the new students to their rights and duties by organizing a number of workshops and lectures under the sponsor of the committee and the student club of the college as well as introducing the student to dental clinics to get acquainted with the various departments of the college and use the latest technologies in the field of dentistry and how to interact with the structure of clinics and the receiving of patients.

The student orientation and preparation programs are evaluated periodically by surveying students' opinions through different questionnaires of the program where the results of these surveys are used to continuously improve these programs.

25. Academic Advising and guidance in the program.

The academic Advising Committee in the program is one of the most important committees related to the orientation of students helping students in academic or even non-academic activities, with the aim of raising the student's level of achievement and graduating within the specified period without delay or decline, overcoming any difficulties that may affect the academic achievement of students. The following is a description of the committee's working mechanism and its distinctive role in guiding the student through the periodic meetings carried out by faculty members that reflect the extent to which faculty members are trained in the skills of academic advising and guidance for students:

- 1- The faculty member (Academic Advisor) specified to a selected group of students (Male / Female) always keen at their meeting on a regular basis (the fourth week of each month) at his/her office during office hours specified and declared for all.

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- 2- Discuss the students on an individual basis (Every student alone & not in front of the group) with respect to the academic process and to undergo scholastic obstacles.
- 3- The academic advisor will record students' problems and their observations during the meeting in a specific prepared as well as an Online form.
- 4- The academic advisor raises periodic reports on its performance with the students to the relevant committee (Committee of Academic Advising)
- 5- The Committee examines all reports received from members of the faculty (academic advisors) and what was stated by the study and look at some of the problems that could not have access to the academic advisor resolved and decision.
- 6- The Committee in turn raises periodic reports to Dean College, including the recommendations of the concluded reports.
- 7- Policies and regulations are established for fair and consistent processes of student management, with effective safeguards for independent consideration of disputes and appeals.
- 8- There is adequate provision for academic advising and counseling services to assist students in planning their participation in the program and in seeking subsequent employment.
- 9- Provision is made for academic counseling and for career planning and employment advice within the department. Adequate protection is provided, and supported by regulations or codes of conduct, to protect the confidentiality of academic or personal issues discussed with teaching or other staff or students.
- 10- Effective mechanisms are well established for follow up to ensure student welfare and to evaluate quality of service.
- 11- An effective student support system is available to identify students in difficulty and provide help with personal, study related, financial, family, and psychological or health problems.

26. Professional guidance in the program.

The Alumni's Affairs Unit & The intern's Affairs unit responsible for the development of the professional activities of the students and graduates each of them organizes a lot of activities and workshops through which the student and graduates develops his skills and professional experience in proportion to the labor market.

Interns Affairs Unit empower interns to discover, develop, evaluate, and implement their unique professional goals as they prepare for careers in an evolving global workforce.

The intern's Affairs unit responsible for

-Coordinates with the Affiliated Health Institutions (AHIs) and provides them the interns training manual and the required forms.

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-Receives interns' research proposals and forward them to the Dental Research Centre.

Regarding the Alumni's Affairs Unit, it responsible for Provide valued services to alumni and contribution in communication between alumni and the college.

The Alumni's Affairs Unit carry out many programs and mechanisms to prepare graduates to enter the labor market and refine their abilities and train them in the required skills.

As the following actions has been executed as follows:

- 1-Providing resources for employment & postgraduate required exams
- 2-Aiding graduates to apply for multiple programs through reminder emails of application opening dates
- 3-Honing newly graduates' clinical and academic knowledge & skills through further training.

27. Psychological and social guidance mechanism in the program.

Deanship of Student Affairs aims to provide services for male and female students including subsidies, financial loans, the student employment program, and the peer education program. Moreover, the fund also supervises the service centers for students, such as bookstores, photography centers, and food services. All of this is done according to the tasks and programs assigned to the Deanship of Student Affairs. The fund put all its efforts for achieving everything in Student service including the facilitation for the progress in his university studies, and psychological stability.

The academic advising committee of the program is one of the most important committees related to the orientation of students and helping them in academic or even non-academic activities, with the aim of raising the student's level of achievement and graduating within the specified period without delay or decline.

Discuss the student's problems that may affect the level of scientific achievement and find solutions to them.

-Consider the students' complaints about any courses and find solutions and lifting it to the Vice-Dean.

-Awareness of the importance of academic advising, the importance of communication with the academic advisors and the publication of brochures, leaflets and the use of the college website for this purpose.

-Supervision of orientation programs for new students and the system of study and exams in college.

28. Program mechanisms in identifying talented, creative, outstanding, and stumbled students.

-The program follows two mechanisms to identify outstanding students through cumulative marks and other mechanism through the Academic advising committee.

For cumulative marks

- 1- The accumulated marks should not be less than 4.25 out of 5.
- 2- The student must have passed six semesters in the colleges where the system of study is eight semesters and eight semesters in the colleges where the system of study more than eight semesters.
- 3- Must not have previously failed in any course.

-As for stumbled students, the dental program has a range of procedures and mechanisms to deal with students who are troubled.

- 1- The student receives a warning if his GPA falls below 2.00 out of 5.00, and it is shown in his academic record.
- 2- If the student received three warnings in a row, he is academically suspended until a college council decision is issued as follows:

The College Council may grant the student a fourth chance; and if he was unable to raise his GPA after this chance, the College Council recommends him to the Standing Committee of Student Academic Problems.

- The Standing Committee of Student Academic Problems has to grant the student the fifth chance according to the recommendation by the College council, provided that there is improvement in the student performance in the previous term that his GPA is no less than 2.00 out of 5.00. If the student was unable to raise his GPA after giving him the fifth chance, the committee may, if necessary, recommend an exception for a final sixth chance thereon to the University Council.
 - The University Council -as an exception – may grant the student the final sixth chance based on recommendation of the Standing Committee of Student Academic Problems.
- 3- As far as the colleges that apply the annual academic system, the student is academically suspended if the actual GPA is below (2.00) two for two consecutive years until the College Council issues a decision as follows:
The College Council shall grant the student a first chance. If the student was unable to raise his GPA after that the College Council recommends thereon to the Standing committee (Student Book).
 - The “Standing Committee” of Student Academic Problems must grant the student second chance if that is the recommendation of the College Council. If he was unable to raise his GPA after that, the committee can, if necessary, recommend him to the “University Council”.

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- The University Council may not give the student the final third chance unless recommended by the Standing Committee of Student Academic Problems.
- 4- If the student has not finished the graduation requirements during the period prescribed for graduation his problem should be addressed as follows:
 - If the student has not finished the graduation requirements in the maximum period the full duration of the program in addition to half of the required period for the program, the College Council is to give an additional chance to the student to fulfill the graduation requirements up to the maximum that does not exceed twice the original duration assigned for graduation, provided that the cause of non- achievement is acceptable to the College Council.
 - The University Council may grant the dismissed students due to depletion of twice the duration of the program the chance for no more than two semesters based on their recommendation of the Standing Committee of the Students' Academic Problems.
- 5- The College shall collect all the cases it receives and present them to the councils concerned and notify the Deanship of Admissions and Registration of the decisions within a period not exceeding two weeks from the start of the study. In the event of delay, the student is eligible for registration in the following semester.

There are also other mechanism proposed by the Student Support Center to detect stumbled students in cooperation with the Student Registration Unit by reviewing the academic records of male students and female students and identify students who are stumble in accordance with the definition of deanship of admission and registration, and is raised to the Student Support Center to guide the Academic Advising Committee to communicate with academic advisors for students who are troubled to discuss problems and try to find appropriate solutions in accordance with the regulations and rules adopted by the Deanship.

29. Program mechanism and procedures to follow up students' progress and verify their completion of graduation requirements.

Since the Faculty of Dentistry is one of the Medical Colleges with an annual system in registration, the registration of students in courses is done through the Students Registration Unit within the specified period in accordance with the academic calendar announced by the Deanship of Admissions and Registration at the University as follows:

- All compulsory and elective courses for students are registered according to their compatibility with the academic year assigned to them and the student's responsibility is to register the free courses taught from outside the College.
- All academic records are reviewed through members of the Students Registration Unit to ensure that the courses registered are consistent with each student's study plan according to their respective academic year.

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- It is confirmed that all students in the fifth year of the College had completed the registration of all courses required to graduate before the end of the registration period specified by the Deanship of Admission and Registration at the University.
- All students are linked to academic advisors on the academic system, allowing each faculty member in charge of academic advising to follow up each student assigned to him through the professor's register on the University site, allowing him to see the student's plan and grades.
- Regular meetings are held between the academic advisors and the students assigned to them and check the number of hours registered to them and report if there are problems specific to registration. They also guide student for different courses within the program and helping them in difficulties faced and raising these issues to the Academic Advising Committee to solve these problems if any.
- It is requested that each Staff member prepare a student file containing the student's plan and periodic meeting minutes with the academic advisor to follow the student by the academic advisor until graduation.

A student graduate after successfully completing all graduation requirements according to the degree plan, provided that his/her cumulative GPA is not less than pass. If student has passed the required courses but his/her cumulative GPA is low, the College Council, on the basis of recommendations of the council of department concerned, is entitled to specify the appropriate courses that students must complete in order to improve his/her GPA.

Students also follow University study plan and complete all requirements before graduation. They maintain a GPA between 2:00 in a 5:00 scale to graduate. Student only graduates after granting of degree from University Council.

Each student is given a certificate of graduation which bears all his information and is signed and sealed from enrollment and registration Dean.

- Academic system
 - The Portal academic system of the University allows the process of registering students' courses within the specified period in accordance with the academic calendar announced by the Deanship of Admissions and Registration at the University.
 - Through it, the courses are linked to the coordinators of the courses.
 - The authority can follow up the student's "effective-apologetic-interrupted" status as well as to carry out all procedures for the Deanship of Admission and Registration.
 - The system allows to link students to their academic advisors to and allowing them to follow students through the professor's page.
 - Grading for the final courses results of courses in accordance with the academic calendar.
 - Preparing new courses for the new academic year by the end of each academic year.

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- Through it, the student can follow up his academic status in everything that matters to his University career.
- There are also many Units that are concerned with monitoring the progress of students and intervening in case there is something that hinders the student's progress in his studies, including:
 - Academic Advising Unit
 - Students' Mentorship Unit
 - Students' Clinics Organization Unit

30. Mechanism of the program in evaluating the adequacy and quality of services provided to students and measuring their satisfaction with them.

- The BDS program is committed to develop itself and implement a quality assurance system. The program evaluates the adequacy and quality of the services provided to its students (males and females), such as academic, professional, psychological and social counseling services, facilities including religious and sports facilities and equipment in general, restaurants, transportation, library services, and electronic services through periodic questionnaires for students' opinions, such as the Courses Evaluation Survey, that are offered at the end of each block/course, the Students' Experience Survey and the Program Evaluation Survey which are offered at the end of the second semester of each academic year.
- Recently, the Deanship of Development and Quality launched standardized questionnaires for students to be presented to students in the first and second semesters (PO_SU_1 and PO_SU_2), to assess the quality and adequacy of the services provided to students. The program applies the following mechanism for the standardized questionnaires:
 - 1- The Quality Unit at the College receives the links of the standardized questionnaires from the Deanship of Development and Quality through an official circular addressed to the College, in the eighth week of each semester.
 - 2- The Unit sends emails to distribute the link of each questionnaire to the target groups.
 - 3- During the twelfth week, the college receives from the Deanship of Development and Quality detailed reports for each questionnaire to be used in preparing the program's periodic questionnaire report (Form C-D-11).

31. Services provided by the program for people with physical disabilities

- For students with physical disabilities, this type of student does not meet the requirements for admission to the BDS program as one of the most essential conditions for admission to the program is that the student is physically fit to be able to meet the program requirements for admission. Despite that, the left-handed students, are considered to be students with special conditions as they need some modifications in the dental units to suit their special

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circumstances. The BDS Program is keen to create the appropriate atmosphere for left-handed students to complete the educational process at best.

- Meanwhile psychological and social guidance is provided to student with special needs like psychological help. It extends a hand to those who suffer under psychological pressures or turbulences that may cause a student to drop out. In addition, it helps the students who need to deal with study problems. It also offers moral support and courses on developing personal skills. The Department of Guidance and Counseling has developed a program to study student cases. It prepared a form with the names of many disabilities, which is filled out by the social worker. It also set a timetable to be followed up by the specialist in which the student will execute according to his instructions.
- Psychological and social guidance is also provided to students through different Committees and Units in the program including the Academic Advising Committee. This aims to guide the students to get the best results and adapt them to the University environment and to seize the available opportunities by providing them with academic skills that are required to raise the level of achievement & overcoming any difficulties that may affect their academic achievement.
- The services provided for students with special needs in the BDS Program are consistent with that offered to their counterparts at the University level, as the program has the ability to deal with special cases, who are left-handers and provide for their needs, as this is the only type of physical special needs that is in line with the admission criteria in the program and which requires financial exemption of the student as a result of the psychological problems he/she faced. Some students are supported and their problems are resolved through the Academic Counseling Unit, while others require contacting a psychiatrist to take the support, and this is done through the University's Support and Counseling Office.

32. Mechanism and procedures of the program to employ the outcomes of student advisory council in quality processes, improvement, and development.

The program benefits from the recommendations of the Student Advisory Council, and has developed a clear mechanism for how to employ the opinions and recommendations of the Council in developing and improving the program as follows:

- 1- One advisory council for male and female students is formed by a decision of the college council, and the composition is as follows:
 - Dean of the College (President)
 - Vice Dean of Academic Affairs (Vice President)
 - Supervisor of the Student Club of the College (Secretary)
 - Leaders of students at different educational levels
- 2- The Council meets periodically twice per semester during the academic year.

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- 3- The Council may be invited to meet exceptionally if:
 - There is a written request by at least half of the members of the Council.
 - The Vice President receives an issue necessary for discussion.
- 4- If the circumstances do not allow the president to attend the meetings, the vice president presides over the council.
- 5- The recommendations of the advisory board are implemented through the College-related Committees and Units as for example the Educational Timetables and class room care Unit, the Dental Education Unit, the Academic Advising Unit, and the Exam Control and E-Exams unit, etc...
- 6- Students are invited to attend most of the committees and units of the program to express their opinion on educational matters concerning them and they present some problems or suggestions that concern them. They are also invited to attend college department councils to express their opinions on some matters related to the educational process and to present some ideas, proposals, and the obstacles they face.

33. Surveying the opinions of the faculty about the quality and adequacy of the services provided to them.

The services provided by the Program and the College to the Faculty members vary, such as:

- 1- Providing induction and support programs for new Faculty members, which are carried out at the University level through the Center for Leadership and Talent Development, that are supported by an induction program provided by the BDS program so that these programs help the Faculty members to adapt quickly to the new work environment and engage in it.
- 2- Providing training programs for new and existing Faculty members to develop their professional and academic skills within the training plan and professional development activities for the Faculty members in the program that is prepared by the Faculty Development Unit.
- 3- Providing training courses and workshops to develop the administrative and technical skills of the employees, technicians and nursing staff within the training plan and professional development activities for the administrative body in the College.
- 4- Providing scientific research resources from the digital library through the Deanship of Libraries at the University and providing statistical analysis as well as language editing services.
- 5- Providing ways to cooperate with all other faculties and Colleges to facilitate the scientific research work for all Faculty members and assistants.
- 6- Motivating Faculty members for international publication in international journals approved for publication by rewarding and providing material and moral support.

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- 7- Providing comprehensive health care for all Faculty members and their families in the University Medical City as well as governmental hospitals.
- 8- All aspects of the Program are evaluated and reviewed regularly by senior administrators and Quality Unit based on quality indicators.
- 9- The teaching staff feedback collected to evaluate the adequacy and quality of the services provided by either direct feedback of teaching staff to the Heads of Departments and through yearly questionnaire-based surveys.
- 10- Using feedback results, the strengths and weaknesses of the program and quality of the services provided is analyzed and action plans are prepared to overcome weak areas that require improvements.
- 11- The program's mechanism in surveying the opinions of the Faculty about the adequacy and quality of services provided to them by the College and the Program either through the direct feedback of the Faculty members to the Heads of Departments and through the annual questionnaires as Job Satisfaction Survey. Using the results of the feedback, the strengths and weaknesses of the program and the quality of services provided are analyzed and action plans are prepared to overcome weak areas that require improvement.

34. Faculty members' evaluation.

- 1- To improve the quality of teaching and the performance of Faculty members in the BDS program, the performance of the Faculty members is evaluated annually according to the teaching tasks and the research activities they conduct as well as their participation in community services. The full evaluation procedure is organized by the Dean and the Faculty Evaluation Unit and the final evaluation is only conducted after analyzing the comments received from the Heads of the departments.
- 2- The mechanism of the Faculty members' evaluation, the procedures and the forms of evaluation are consistent with the University mechanisms in the evaluation of the faculty applying for academic promotion to a higher academic degree through evaluating the teaching performance, research activities and community service activities within the faculty member's application forms for promotion.
- 3- The evaluation part belonging to the head of the department includes:**
 1. Academic Aspects, in the form of:
 - Evaluation of teaching methods
 - Participation in conferences, seminars and research projects
 - Ability for cooperation and teamwork
 - Commitment to teaching strategies and assessment methods for various courses
 2. Research in the form of:
 - Research productivity level
 - Supervision of students' research).

3. Performance of academic advising tasks.

As for the other part of the assessment, which is related to the Faculty Evaluation Unit, it includes:

4. Program Administrative Aspects, in the form of:

- participation in the work of Units and committees, at the Program, College and University levels.
 - Participation in quality processes.
 - Participation in training programs that develop the skills of the faculty members.
 - Participation in the implementation of the program's goals related to community services and community partnership.
 - In addition to, the faculty member's ability to withstand work pressures and the extra burdens that work may require at times.
- 4- The evaluation forms include the evaluation of teaching and academic tasks, the extent to which they participate in quality activities as part of the administrative work attributed to them, such as preparing courses reports, analyzing the results of student opinion surveys, participating in the evaluation of the quality of the Program as well as in the preparation of internal audit requirements.
- 5- Assessment procedures follow the formal delivery of routine and recorded notes in the evaluation form on the performance of the Faculty member, including strengths, and opportunities for improvement to benefit from, this is done by the feedback given through the Heads of the departments. These evaluation results and feedback are used to improve the performance of the Faculty members in the program, which is reflected in the achievement of the mission and goals of the program.

35. Procedures and policies that ensure the adequacy and appropriateness of the resources of learning available to students and Faculty.

The BDS program implements clear policies and procedures regarding learning resources and reference materials which are sufficient and appropriate for the nature of the program.

The program has several mechanisms to verify the adequacy of learning sources:

1. At the end of each academic year, questionnaires are presented to the beneficiaries of the program (students and faculty members) to ensure the adequacy of the learning resources, from which the results of the questionnaires are analyzed to determine whether or not these resources are sufficient. The Learning Resources Unit also, conducts questionnaires to detect how satisfied students and faculty are with the adequacy of current learning resources.
2. Faculty members are consulted by the Heads of the Departments at the beginning of the budget cycle to ensure that the materials and equipment required meet the needs of their courses and departments. The heads of the Departments then submit an application to the Dean's office. Upon delivery of the purchased items, a technical inspection report is prepared

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- and sent to the relevant department for verification. The department also checks the quality of the items purchased after delivery of the item.
3. If there are requirements for purchasing learning resources and equipment, the program implements clear policies and procedures. All purchase orders for equipment for teaching, learning and preclinical activities are submitted to the program management, following government and university policies. Each application is made on the basis of an official purchase order to the University with specifications and identification of quality brands. On the approved request, the General Procurement Department delivers the required equipment and educational materials to the College.
 4. These procedures include periodic review of the courses needs for learning resources where the course evaluation surveys are submitted to the students at the end of each course and for the Faculty members, the surveys are submitted at the end of each academic year. Additionally, the academic departments periodically communicate with the Faculty members to ensure the adequacy of learning resources to identify the needs of each department.
 5. As for the classrooms and lecture hall facilities, these facilities are adequate, and new buildings are being constructed to enhance these facilities. A research facility is currently under construction and, once completed, could provide a major opportunity to expand the research achievements of the QU College of Dentistry. The administration has a clear plan to continue to improve and expand the facilities to enhance the learning environment (Annex (4) Strategic Plan). The facilities are and will continue to be an area of strength of the QU College of Dentistry. The College is equipped for both male and female sections with adequate lecture halls, problem-based learning (PBL) discussion rooms, video conference rooms, and E-learning classrooms. Simulation and prosthodontics labs are present in the Dental College clinics, where students undergo their preclinical work. All lecture halls at the male and female sections are equipped with SMART Board technology or computer with LCD screen. The Dental College also has up-to-date dental technologies, such as CAD/CAM systems and a cone-beam CBCT machine. Long-term planning and appropriate policies have paved the way for such enormous growth.
 6. The program also ensures the adequacy and appropriateness of learning sources through reference comparisons with local corresponding programs by measuring the KPI-P-17 performance indicator for learning sources and services.
 7. There are many competent Units and Committees in the program assigned to review and meet the needs of all departments of the College and the adequacy of learning resources in accordance with its mission and goals:
 - Learning Resources Unit
 - Dental Skills Committee
 - Technical Committee for Educational Activities
 - Planning and Evaluation for Buildings, Facilities, and Equipment

36. Procedures and mechanism managing and applying the necessary resources and reference materials.

The program follows the following procedures in providing the necessary resources and reference materials that have been stipulated in the course specifications in which the Faculty members and the students need to accomplish the educational process and to conduct the scientific researches, as the Learning Resources Unit is the party that is responsible for the management of resources and reference materials in the program, and following procedures that are usually used for the management of resources. This Unit also correlates the learning resource with teaching and learning needs.

The procedures are as follows:

1. The College's Dean, Program Director and the Head of Learning Resources Unit discuss with the course/ block organizers' the updated criteria and guidelines of the textbooks and the other learning resources that are needed for their courses (as mentioned in the blocks/courses specifications).
2. The textbooks that support each course are classified as selected reading textbooks, which are essential books required for the learning process and recommended textbooks used that are supplementary to the first category. The selected reading textbooks should be comprehensive, widely used in International Dental Schools and can stand alone as a learning resource for selected topics.
3. The course directors start to communicate with all contributors assigned to the course to discuss the guidelines for the textbook selection that will fulfil the teaching topics and their learning outcomes.
4. The course director starts to collect the full list of textbook items required, as well as the media, teaching models or simulators for practical courses.
5. The list is sent to the Learning Resources Unit to confirm the availability of such resources, whether in the Central Library or the College inventory.
6. If some of these resources are not available, and after the advisory board gives permission, a request is sent to the Deanship of Library Affairs using the book request template found on the Deanship Website. This template includes the book name, author, ISBN and publication data.
7. If the book request is not urgent, the list is prepared and sent on an annual basis. This list is arranged by the Deanship of Library Affairs.
8. All educational models are requested by the course director as a formal bi-annual request to the Dean of the College of Dentistry who sends it to the responsible personnel.
9. Once the items required are delivered to the main store, a final request is sent and the teaching aids are made ready for use.

Furthermore, the Learning Resources Unit has developed electronic links to the scientific journals in the Blackboard learning system to ensure easy access to the needed information.

The entry and registration mechanisms at the Saudi Digital Library has also been explained to access the important references for both students and Faculty members.

TERMINOLOGY

Accreditation

Formal verification by a recognized authority that a program or an institution meets required standards.

Assessment

A process of measuring performance in relation to established standards or criteria.

Benchmarks

Points of comparison or levels of performance used for establishing objectives and evaluating performance.

Credits

Points or hours allocated by an institution to specify the work requirements, or the volume or amount of learning expected for a unit, subject or program of study.

Domains of Learning

Broad categories of types of learning expected in a program of study.

Evaluation

The process of assessing and assigning value to a facility or activity.

External Quality Assurance

Processes of review and evaluation of institutions and their programs and activities by an independent external person or agency.

Goals or Aims

General statements of desired developments, which apply a mission to broad areas of activity and provide a guide for establishing objectives and detailed planning.

Higher Education

Formal programs of education provided for students at postsecondary level, normally leading to an academic degree or diploma.

Inputs

The resources available to and used by an institution to provide its programs.

Institutional Approval

The approval of an institution based on recognition that its resources, processes and learning outcomes meet required standards for an institution of its type and the level of its programs.

Internal Quality Assurance

Processes of quality assurance carried out within and by or for a higher education institution.

International Accreditation

Accreditation of an institution or of its programs by an accreditation agency established in another country.

Key Performance Indicators (KPIs)

Selected performance indicators regarded as particularly important for the purpose of assessing performance.

Learning Outcomes

The learning that results from participation in a course or program.

Level

The intellectual standard and complexity of learning expected as students' progress through a program of study.

License

Formal approval, normally by a government or a government agency, to operate or carry out certain activities.

Major Change in a Program

A major change in a program is one that affects the basis for its accreditation.

Mission

A brief general statement setting out the principal policy objectives for development of an institution.

Mode of Instruction

The form of instruction such as lecture, tutorial, laboratory, individual assignment, etc.

Objectives

Specific statements that apply the mission and goals to particular areas of activity and indicate intended results.

Outcomes

The results of teaching, learning and research processes of an institution.

Outputs

The products of an institution's activities, normally expressed in quantitative terms.

Partner Institution

An institution with which a higher education institution has established a formal, contractual relationship for provision of services.

Peer Review

Evaluation and report on a program, institution or part of an institution by expert evaluators from similar institutions or professions who are specialists in the field concerned or with the organization and management of higher education institutions.

Performance Indicators

Specific (and normally pre-selected) forms of evidence used by an institution or other agency to provide evidence about quality of performance.

Postgraduate Education

Education provided at advanced levels of complexity and intellectual demand for students who have completed requirements for a first degree and wish to proceed to more advanced studies.

Processes

The administrative arrangements, policies, and organizational procedures carried out by an institution in planning, reviewing, and delivering its programs.

Professional Accreditation

The accreditation of a program to prepare students for a profession, certifying that it develops the knowledge and skills needed to practice in the profession concerned at the standard of proficiency required.

Program

A coherent course of study followed by students in an academic or professional field or leading to a professional qualification, the successful completion of which qualifies them for an academic award.

Program Accreditation

Accreditation of a program of study certifying that it meets standards required for the delivery of a program in that field at the level concerned.

Qualifications Framework

A document setting out the nature, amount, and levels or standards of learning required for academic or technical awards.

Quality

The value, worth, or standard of an institution or program in relation to generally accepted standards for an institution or program of its type.

Quality Assurance

Processes of assessment, evaluation, and follow-up relating to quality of performance, which serve two distinct purposes:

- To ensure that desired levels of quality are maintained and improved; and
- To assure stakeholders that quality is being maintained at levels comparable to good practice in highly regarded institutions elsewhere in the world. Stakeholders in this context include students, the government, and the wider community, including parents, professional associations, and industry.

Quality Improvement

Changes in inputs, processes, and outcomes that improve the quality of performance, usually across the whole range of an institution's activities. The term may be used to describe the strategies used by an institution or other organization to bring about these changes and verify their results.

Teaching Strategies

The strategies used by an instructor to develop student learning.

Value-Added

The process of adding value (normally applied to the value of students' knowledge and skill) because of the teaching and learning activities of an institution or program.

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