



المملكة العربية السعودية  
وزارة التعليم  
جامعة الملك عبدالعزيز  
كلية الطب

QAAU

# كتيب وحدة الجودة والاعتماد الأكاديمي



٢٠٢٠ - ٢٠٢١



Allah says:

(وَقُلْ اَعْمَلُوا فَسَيَرَى اللّٰهُ عَمَلَكُمْ وَرَسُولُهُ وَالْمُؤْمِنُونَ وَسَتُرَدُّونَ اِلَىٰ عَالَمِ الْغَيْبِ وَالشَّهَادَةِ  
فَيُنَبِّئُكُمْ بِمَا كُنْتُمْ تَعْمَلُونَ) {التوبة 105}

The Messenger of God, peace be upon him, says:

(إِنَّ اللّٰهَ تَعَالَىٰ يُحِبُّ إِذَا عَمِلَ أَحَدُكُمْ عَمَلًا أَن يَتَّقِيَهُ).

### Abstract

The Quality and Academic Accreditation Unit believes that “Quality is never an accident; it is always the result of high intention, sincere effort, intelligent direction and skillful execution; it represents the wise choice of many alternatives.” William Foster.

Quality does not have limits. It is variable, renewable, and always aspires to the best.

Our ambition may sometimes be restricted by some regulations, but the Quality and Academic Accreditation Unit in the Faculty of Medicine always raises the ceiling with enthusiasm and intelligence, not only to the extent of meeting current standards, but to exceed those standards. We do not seek excellence but rather aspire to uniqueness through innovative methods of partnership with beneficiaries, which strengthens their commitment to reach the ambitious goals... Our limits are the stars.



### Vision:

To be a consultancy unit resorted to by all health professions faculties at the national and regional levels in the field of application of quality assurance concepts and standards.

### Mission:

The Quality and Academic Accreditation Unit, Faculty of Medicine, King Abdulaziz University is committed to disseminating quality and development culture, establish an internal quality assurance system through internal monitoring and reviewing, and ensuring compliance to academic standards to secure the quality of institutional capacity and educational effectiveness aiming at obtaining academic accreditation of the faculty.

### Goal:

Total compliance with the basic quality standards and reaching the standards of excellence.

### The organizational structure of the Quality and Academic Accreditation Unit:



figure (1)



## **Strategic Goals of the Quality and Academic Accreditation Unit:**

- 1. Develop a proposal on policies and procedures for the educational process and program management.**
- 2. Develop and implement a comprehensive evaluation plan based on the research manual Evidence-based Evaluation Model.**
- 3. Develop, follow-up, and review the reporting cycle of the educational program and academic courses.**
- 4. Disseminate the culture of using the evaluation results in designing development plans and following up their implementation.**
- 5. Conduct a comprehensive evaluation of the curriculum at the end of each academic year.**
- 6. Follow up KPIs and provide necessary recommendations as needed.**
- 7. Make sure that the requirements of the Quality Unit are met by the academic departments and curricula and build electronic and paper archiving for these requirements, especially with regard to the recommendations and reports of the academic courses.**
- 8. Meet the quality requirements as determined by the University Deanship of Quality and Academic Accreditation and the National Commission for Academic Accreditation and Assessment (NCAAA).**
- 9. Disseminate the culture of quality and ideal practices among faculty members and students, which contributes to the development of community participation.**



## Achievements:

Since its establishment decision on 19/04/1431 H, the Quality and Academic Accreditation Unit (QAAU) has been able, thankfully, to achieve a set of gains and achievements. Examples:

KINGDOM OF SAUDI ARABIA  
Ministry of Higher Education  
KING ABDULAZIZ UNIVERSITY  
Faculty of Medicine

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وزارة التعليم العالي  
جامعة الملك عبدالعزيز  
كلية الطب

الرقم: / /  
التاريخ: ١٤ / / ١٤١٠  
الرموز: / /

3- متابعة الخطة الاستراتيجية بالكلية وتحديثها وصياغتها .  
4- تنظيم برامج للتدريب المبرهن في مجال إدارة الجودة بالتنسيق مع وحدة التدريب والتطوير .  
5- اقتراح السياسة العامة للتقييم وتكوين الأداء .  
6- متابعة تطبيق نظام إدارة الجودة ( ISO ) وتحديثه .  
7- اجراء التقييم الذاتي واعداد الدراسة الذاتية للكلية سعياً للحصول على الاعتماد من الهيئة القومية لضمان جودة التعليم والاعتماد .  
8- اعداد وتحديث التقرير السنوي للكلية .  
9- تقديم الاستشارات في مجال ضمان الجودة والاعتماد .

خامساً : تكون مدة رئاسة الوحدة وعضويتها سنة واحدة .  
سادساً : على الجميع التقيد بما فيه وإنفاذه .

وأنه ولي التوفيق...

عميد الكلية  
أ.د/ محمود بن شاقين الأحول

صور مع الملحق:  
- نسخة وثيقة كلية  
- نسخة رخصة الأقسام العلمية  
- نسخة رئيس اللجنة الرئيسية لضمان الجودة الأكاديمي.  
- نسخة رسالة ضمان الجودة والاعتماد الأكاديمي.  
- ملف الجودة والتطوير .  
- ملف الاعتماد الأكاديمي .  
- ملف القرارات الصادرة .  
- الصادر .  
شادي / ٢٠١٠

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الرقم: ٥/٣١/٤١٣٤١  
التاريخ: ١٩ / ٤ / ١٤١٠  
الرموز: / /

قرار إداري

إن عميد كلية الطب  
بناء على ماله من صلاحيات  
ورغبة في نشر ثقافة الجودة والتطوير وتفعيل نظام الجودة الداخلي بالكلية بإجراء المراجعات والمتابعة الداخلية والتأكد من استيفاء المعايير لضمان جودة الخدمة المؤسسية والفاعلية سعياً للحصول على الاعتماد الأكاديمي للكلية ، ومتابعة المحافظة عليه .  
ونظراً لما تقتضيه مصلحة العمل .

يقرر ما يلي

أولاً : إنشاء وحدة الجودة والاعتماد الأكاديمي بكلية الطب برئاسة سعادة الأستاذة الدكتورة/ أمية أبو العلا حامد علي ، وتكون مرجعية الوحدة لسعادة وكيل الكلية للجودة والتطوير .

ثانياً : يكون الهيكل الإداري للوحدة كالتالي :

١- رئيس الوحدة .  
٢- نائب للرئيس  
٣- عضو للوحدة  
٤- عضو للوحدة  
٥- سكرتيراً

ثالثاً : يتم تسمية أعضاء الوحدة بالتنسيق فيما بين عميد الكلية ووكيل الكلية للجودة والتطوير ورئيسة الوحدة خلال أسبوعين من تاريخ هذا القرار .

رابعاً : أهداف الوحدة :

١- متابعة تطبيق المعايير الوطنية للاعتماد وضمان الجودة في التعليم العالي .  
٢- نشر الوعي بثقافة الجودة بالكلية عن طريق عقد الندوات والدورات التدريبية وورش العمل بالتنسيق مع وحدة التدريب والتطوير .

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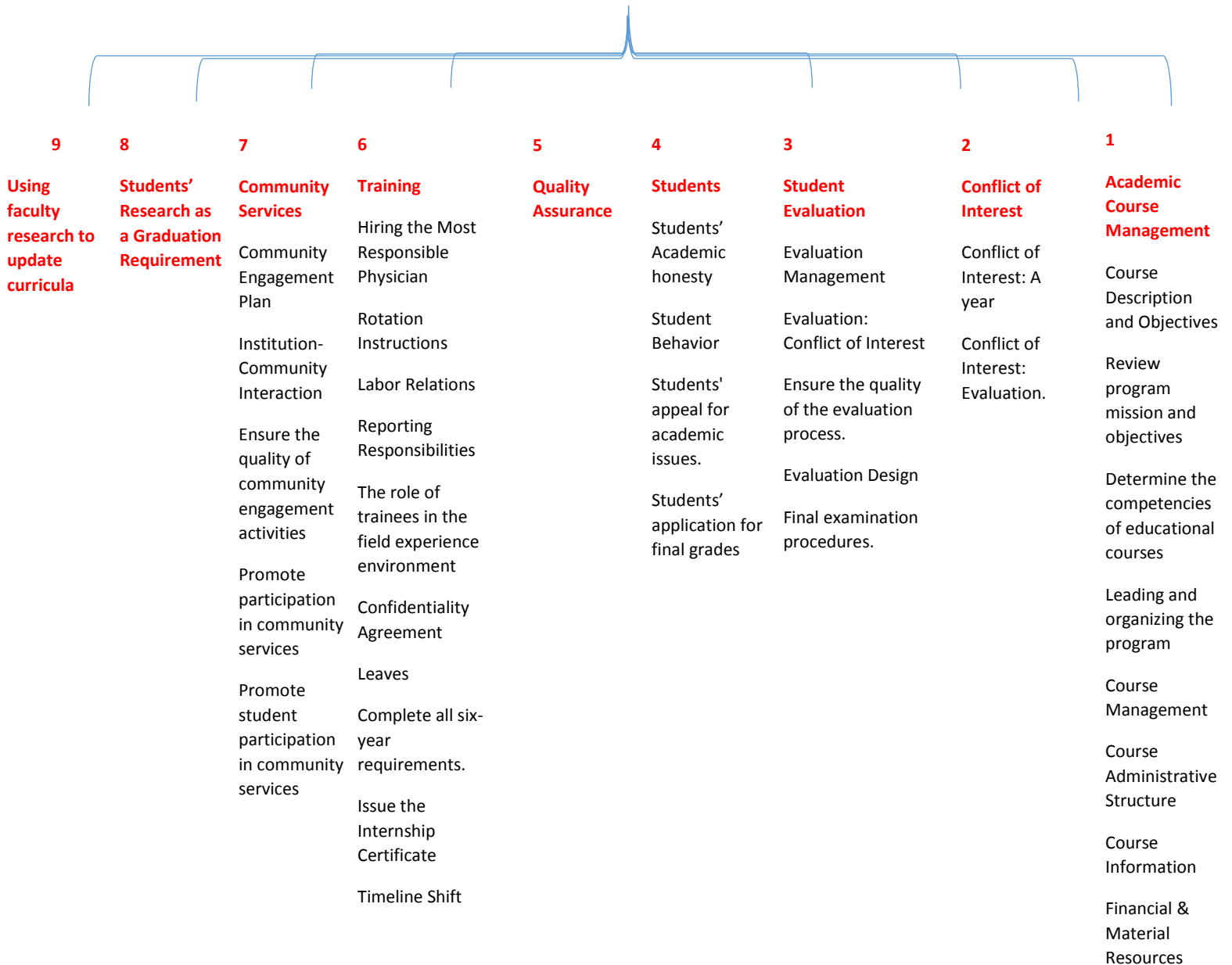
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**1. Adopting the policies and procedures of the program based on what has been proposed, including the approved policies and procedures:**



- Program management and effectiveness of the educational process axes
- Conflict of interest in research, evaluation, and the structured relationship between faculty member and students



## **2. Assessment of the Educational Process**

**A comprehensive review of the curriculum and a self-assessment of all national themes developed by the NCAAA was conducted in 2016.**

**This evaluation helped to stabilize and enhance the approved developed curriculum and also submit this evaluation to the National Commission for Academic Accreditation and Assessment in order for the Faculty to get the program accreditation.**

**3. Praise be to Allah, the full programmatic accreditation was obtained for the period November 2017 to October 2024.**

**4. Faculty of Medicine was ranked first among health colleges for quality indicators and academic accreditation for the academic year 2018-2019.**

**5. Faculty of Medicine was ranked third among health colleges for quality indicators and academic accreditation for the academic year 2019-2020.**

**6. Establishing an infrastructure to create an interactive electronic curriculum matrix that contributes to the designing of an overall map of the curriculum.**

**7. An integrated system of surveys investigating students and faculty members' opinions was developed and implemented, including:**

- Their opinion about the course**
- The extent to which they have acquired learning outcomes**
- The quality of tests**

**An electronic system to facilitate the compilation of these questionnaires was built simultaneously.**

**8. Also, a questionnaire to investigate graduates and interns' opinions was developed and implemented.**

**9. A mechanism has been set to evaluate the "student assessment process" according to the best practices and according to the validity and reliability of the results.**

**10. There is a complete database of all courses issued starting from 2009 to date.**



## The executive plan for conducting tests at the College premises:

An implementation plan for conducting the tests at the college has been approved. The plan goes through several stages according to Figure (2). These stages require coordination between the course coordinator or head of the course and the head of the examinations department with a number of other departments to ensure a complete quality cycle that includes several inputs measured scientifically and reported along with the improvement recommendations necessary to prepare and administer all College tests and then measure the results and outputs of these examinations. The plan begins with the adoption of the course objectives and its study plan by the department council followed by the preparation of the test plan by the head of the course or the exam official and its approval by the Assessment and Examination Unit. The course chairman then prepares the test questions in coordination with the course members, with the need to adhere to the quality of writing these questions based on the College examination policy, while adhering to the College rules and procedures of examination.

After the test has been administered, the technical analysis is sent to the Assessment and Examination Unit and the Quality and Academic Accreditation Unit, provided that the Assessment and Examination Unit performs an impartial technical analysis mentioning the necessary improvement recommendations, which must be studied and taken into account, while responding to what has been done regarding these recommendations.

The course leader completes the comprehensive report form at the end of the course and provides the Quality and Academic Accreditation Unit with the other quality assurance requirements:

1. General distribution of students' grades
2. The average of students' grades in each station of clinical or practical tests, with the need to set the number of educational goals that serve each station
3. Exceptional impediments, if any
4. Compare the degree of difficulty of each question to the degree adopted by the Question Review Committee before the test (based on the policy used).

The report is completed after the inclusion of the analysis of the student questionnaires and the calculation of the value of the results acquired for the CLOs





in coordination with the Quality and Academic Accreditation Unit, whose final recommendations will be issued at the end of the report. These recommendations are then sent to the Chairperson of the curriculum for consideration and response, which complements all the requirements of the comprehensive report. Upon completion of the report, the preparation of which shall not take more than seven working days, it shall be sent with a breakdown of students' grades to the Vice Dean for final approval. Upon the Vice Dean's approval, the procedures of ensuring the quality of course outcomes will be started. It should be noted that the full completion of the above plan simultaneously with the end of the course makes it easier to explore points for improvement and also to take corrective steps in a timely and effective manner. This contributes significantly to the quality control process and the effective and speedy writing of the course report. The delay in following some of the steps of the plan makes it difficult for the Chairperson of the curriculum to make the required improvements in a timely manner. Likewise, the provision of quality requirements will be more difficult and requires greater efforts when writing the report at the end of the year.

**Attached is a flowchart with the proposed duration of its implementation.**

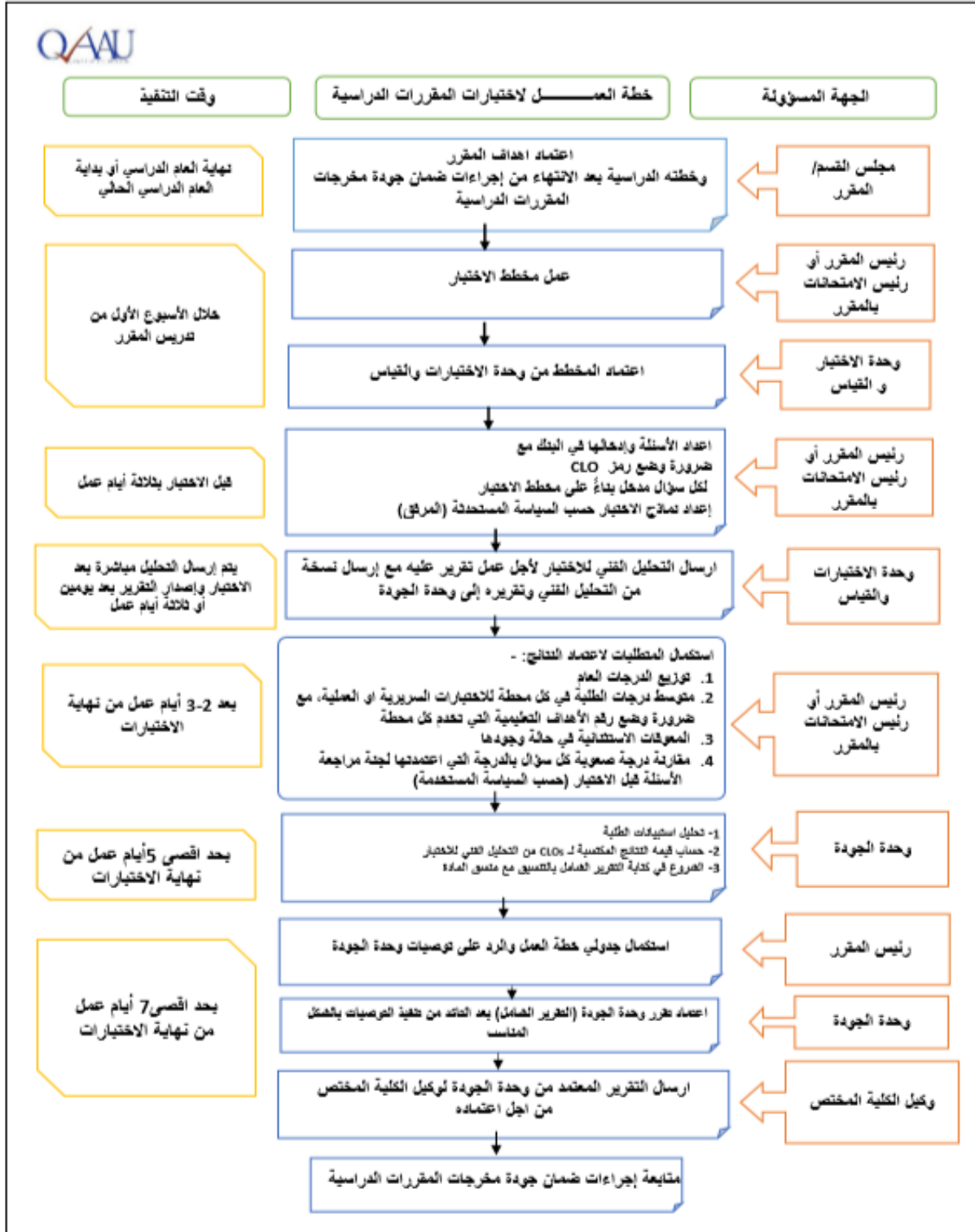


figure (2)



## Follow-up of the procedures for ensuring the quality of course outcomes:

These procedures aim to close the Quality circle by linking the outputs of the executive plan with its inputs. These procedures include the following:

### 1. Inputs:

In this procedure, the results of the faculty members and students' questionnaires are studied in addition to the report of the Assessment and Examination Unit and the Quality and Academic Accreditation Unit. These questionnaires include tools measuring the elements of the course such as course content, teaching methods, learning resources, and evaluation methods. The results are discussed by specialized committees within the course that submit their recommendations to the chairperson of the curriculum.

### 2. Operations:

The recommendations are categorized based on their type into the following:

**1-Recommendations that require improvement of faculty members' skills:** The recommendations are submitted to the Medical Education Department, and then the course or department members are asked to participate in the faculty members' development and refinement program carried out by the Medical Education Department. The number of participants is counted, making sure that the contents of these workshops are comprehensive for the required skills.

**2-Recommendations of the development of the question bank:** The department updates and upgrades the question bank based on scientific criteria, with the assistance of the Assessment and Examination Unit. The department monitors the number of faculty members attending the specialized workshops, the proportion of new questions in the tests, and the results of the technical analysis thereof.

**3-Recommendations of the simple development of the curriculum:** Simple changes in the curriculum are defined as any change in the curriculum of the course without affecting its basic components. These changes include the following:

- Any change in the formulation of educational goals without prejudice to their essence.
- Any modification in the order of topics, or addition or deletion of simple scientific content.
- Any minor modification in the student assessment plan without an essential change in the assessment method or a significant change in the percentage of distribution of assessment scores.
- Any small change in learning resources.
- Any small change in the teaching method.

The Curriculum Division of the course studies and implements these recommendations with the help of the members of the Medical Education Department in order to match the educational



goals with the required changes. The department ensures the continuity of the appropriate link between educational goals and teaching and evaluation methods. The Quality and Academic Accreditation Unit must ensure the continuity of this conformity.

**4- Recommendations of Fundamental Change:** They are recommendations of any substantial change in the educational goals or methods of teaching and learning. Both the Medical Education Department and the Quality and Academic Accreditation Unit must participate in the formulation of these recommendations and study their consequences on the curriculum before they are submitted to the College Curriculum Unit for accreditation after having ensured their conformity with the objectives of the program.

### **3- Outputs:**

The course coordinator shall present the annual report of the subject at the end of the academic year to the department council, including the results of the students, the results of the various questionnaires, and all the recommendations received. The course specification shall also be presented if updated.

After being approved by the department council, the course report and its specification are sent to the Quality and Academic Accreditation Unit for approval, with the need to send the updated Study guide. This step represents the first phase of the College's implementation plan of examination.

### إجراءات ضمان جودة مخرجات المقررات الدراسية

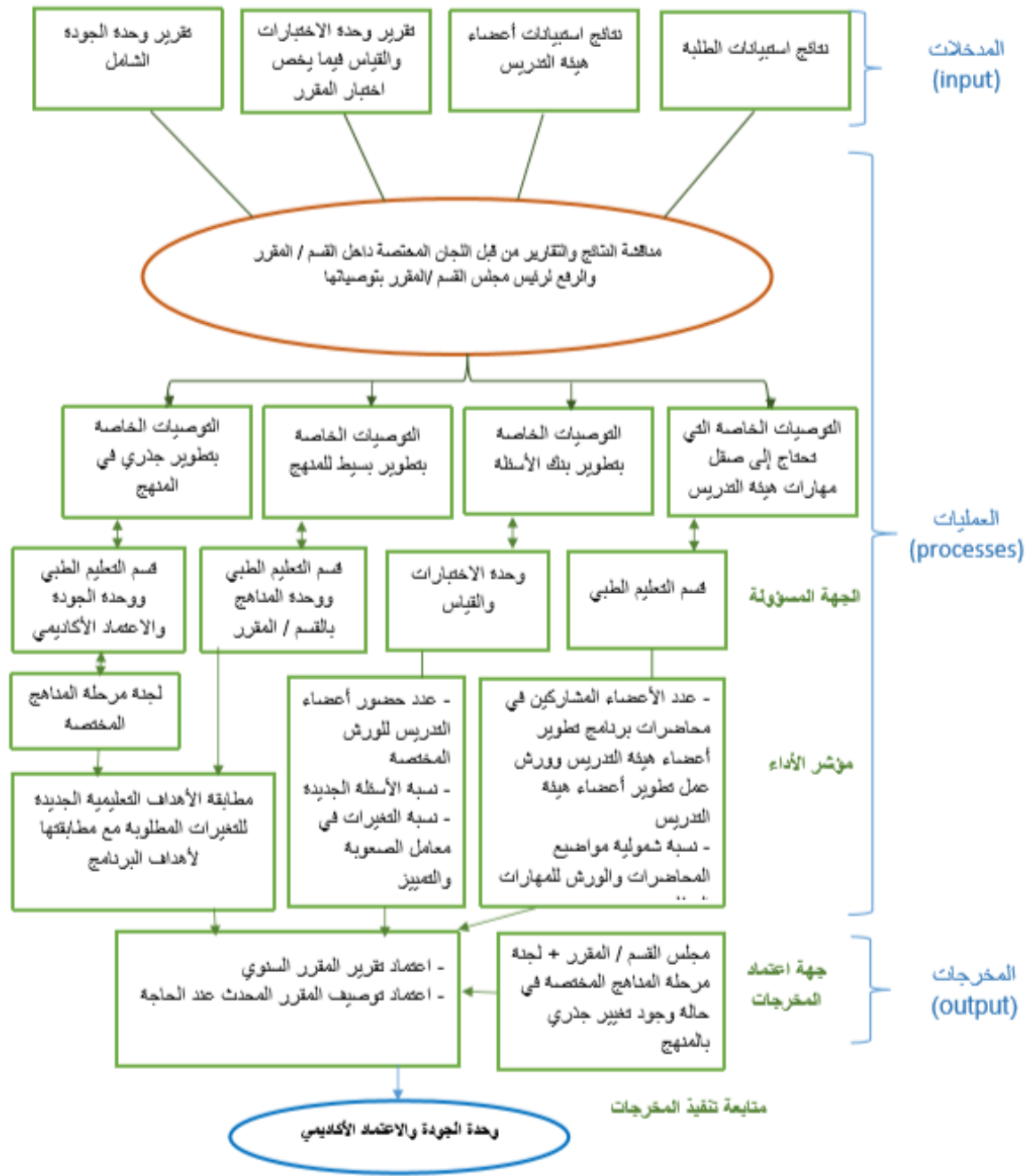


figure (3)

## **The reports issued by the Quality & Academic Accreditation Unit:**

1. A reporting cycle has been developed and implemented, including:

A- Approving the course reports in the forms of the National Authority for Evaluation and Accreditation after adding a matrix to measure the percentage of achievement of learning outcomes.

B- Reports on each course questionnaire.

C- The course report written on the NCAAA forms.

D- An annual report on the results of the survey investigating the graduates' opinions about the program and the year of internship.

E - Conducting a self-study of the College based on the standards of the National Commission for Academic Accreditation. The self-study should be accompanied by a development plan and the results of a three-to-five-year follow-up of the implementation of the previous plan.

### **• Statistics and performance indicators carried out by the Quality and Accreditation Unit:**

1. Statistical and graphical sequential analysis of performance indicators including:

KPI-01 Percentage of achieved indicators of the program's operational plan objectives

KPI-02 Student Quality Assessment of Program Learning Experiences

KPI-03 Student Evaluation of the Program Quality

KPI-04 Virtual Completion Rate

KPI-05 First Year Student Fulfillment Rate

KPI-06 Level of Student Performance in Occupational and/or National Tests

KPI-07 Recruitment and Enrollment of Graduates in Postgraduate Programs

KPI-08 Rate of Student Number per Class

KPI-09 Employers' Assessment of Program Graduate Competency

KPI-010 Student Satisfaction with Services Provided

KPI-011 Ratio of students to Teaching Staff

KPI-012 Percentage of Teaching Staff Distribution

KPI-013 Faculty Dropout from Program

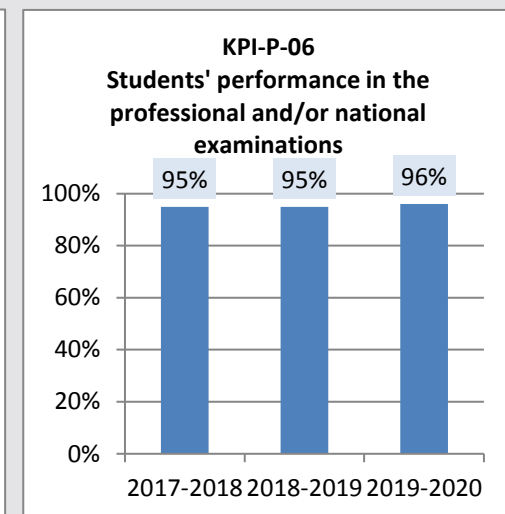
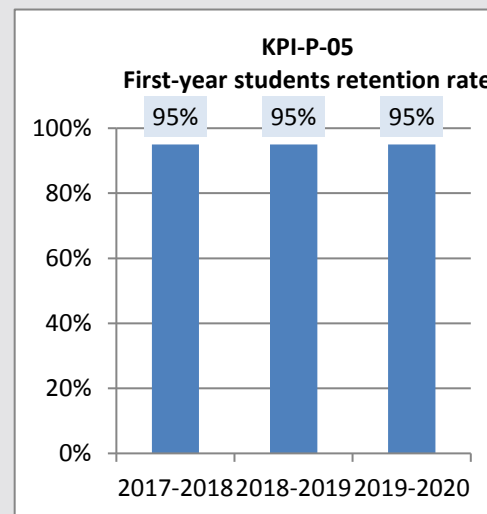
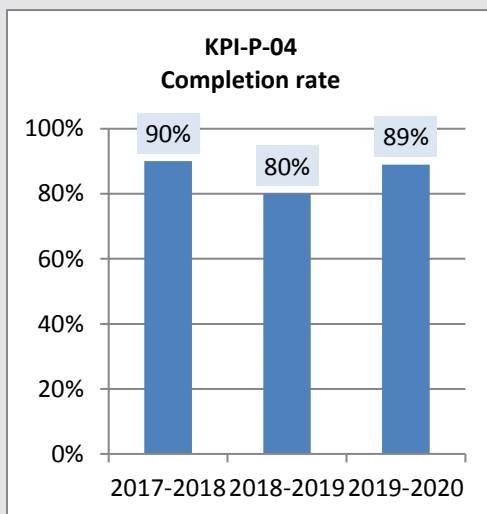
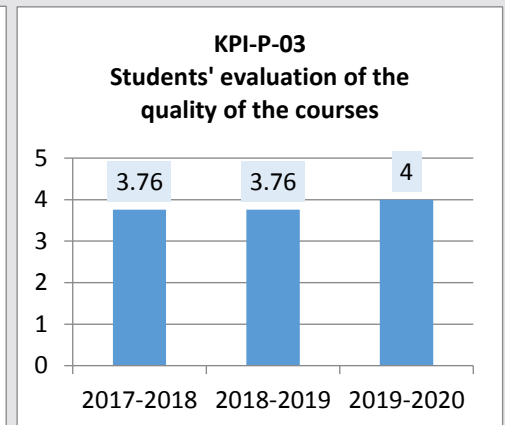
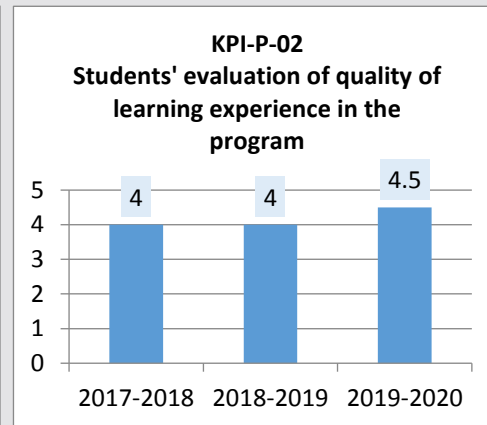
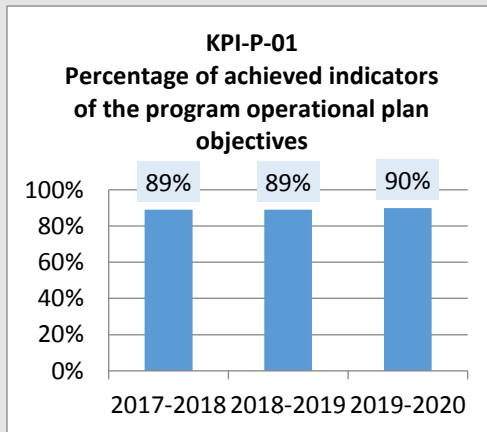


KPI-014 Publication Percentage of Faculty Members

KPI-015 Rate of Published Research per Faculty Member

KPI-016 Peer-Reviewed Journal Citation Rate per Faculty Member

KPI-017 Beneficiary Satisfaction with Learning Resources

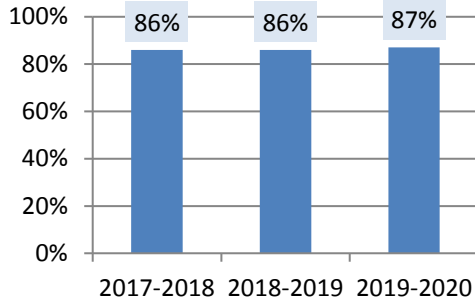




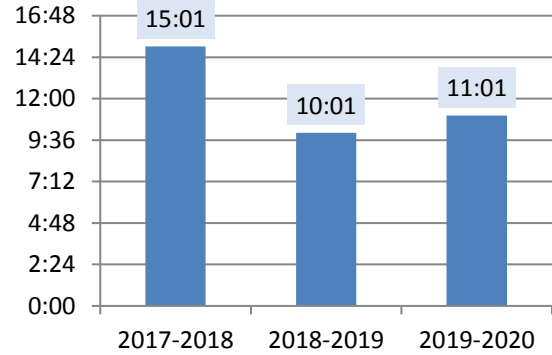
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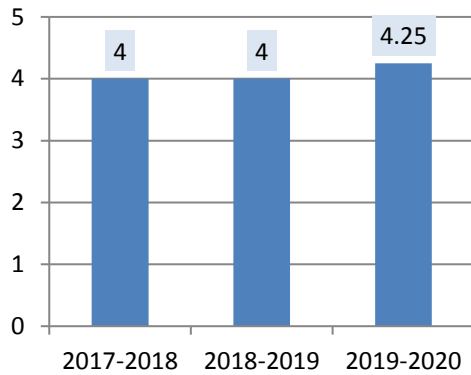
**KPI-P-07**  
**Graduates' employability and enrollment in postgraduate programs**



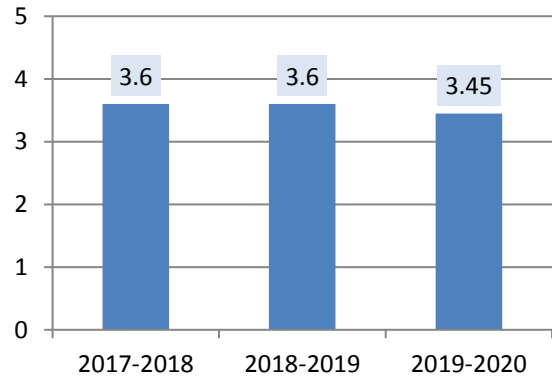
**KPI-P-08**  
**Average number of students in the class**



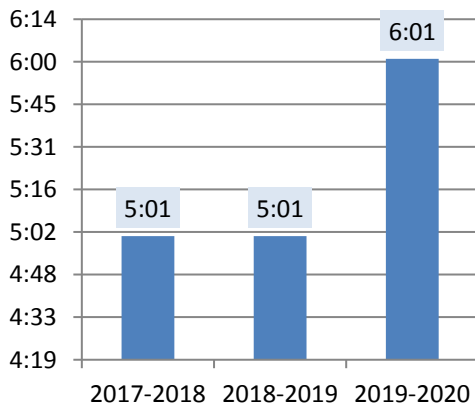
**KPI-P-09**  
**Employers' evaluation of the program graduates proficiency**



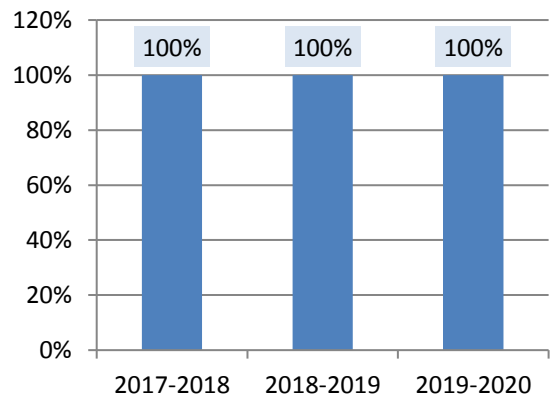
**KPI-P-10**  
**Students' satisfaction with the offered services**



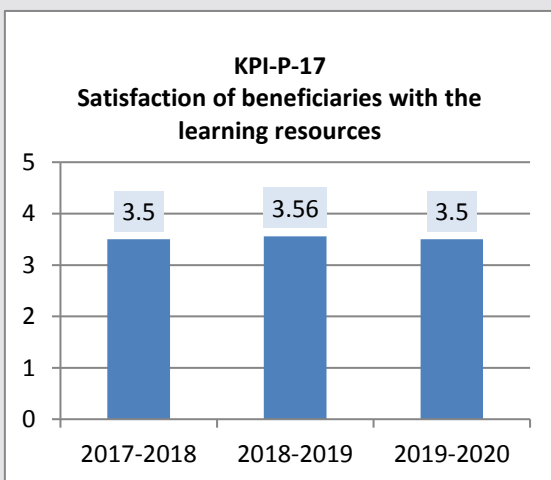
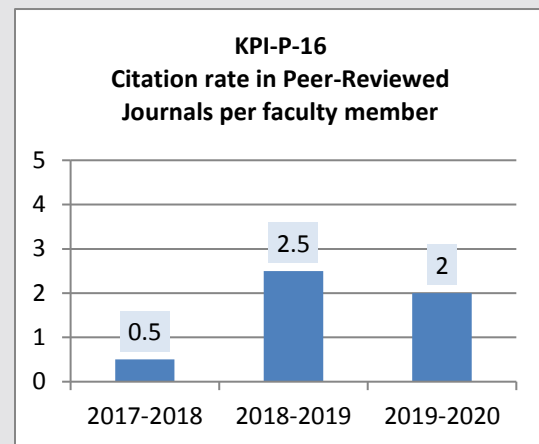
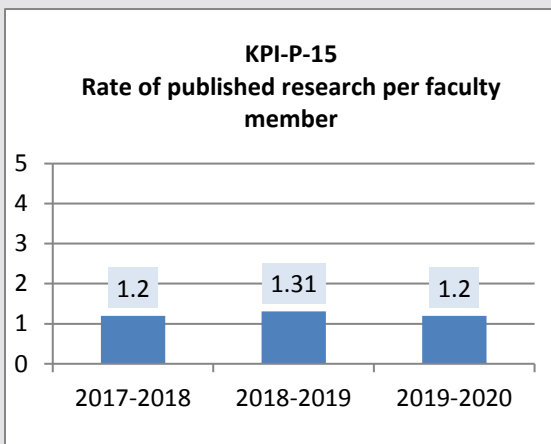
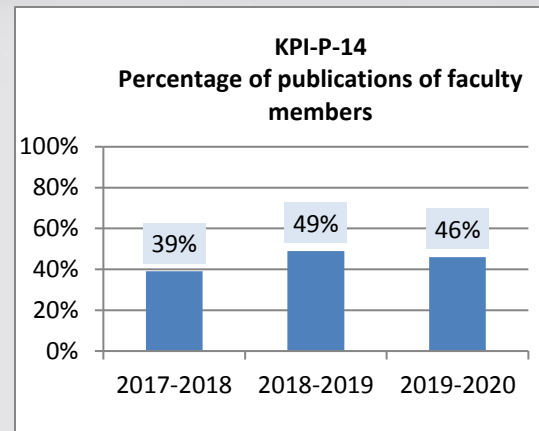
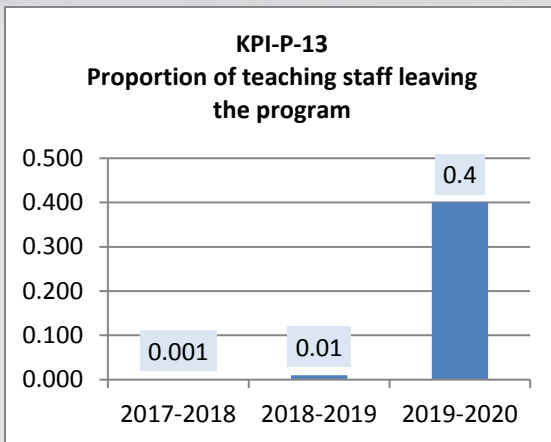
**KPI-P-11**  
**Ratio of students to teaching staff**



**KPI-P-12**  
**Percentage of teaching staff distribution**









2. Sequential analysis of the set of indicators of student questionnaires, such as:
  - Index of Student Satisfaction with courses
  - Index of Student Satisfaction with the extent of their acquisition of learning outcomes
  - Index of Faculty Satisfaction with courses
3. Statistics related to the performance of College graduates in the tests of the Saudi Commission for Health Specialties and the graduation test carried out by the College.

### **Establish a database for postgraduate studies**

- 1. Preparing profiles for postgraduate programs and what meets the requirements of the Deanship of Postgraduate Studies of the University and the National Commission for Academic Accreditation and Assessment. These profiles consist of the following:**
  - Study plan for each program
  - Program Specification
  - Course Specification
  - Course Report
  - Annual report of the progress of the program
- 2. Designing questionnaires to investigate opinions:**
  - Students in the course
  - Faculty members



## The Comprehensive report:

The comprehensive report is presented according to the operational plan described in the figure.

The report consists of the following parts:

King Abdul Aziz University Faculty of Medicine Quality & Academic Accreditation Unit		QAAU				
<b>Course Name:</b>						
<b>Final Exam Date:</b>						
<b>Exam Blueprint: - (Approved by Assessment &amp; Examination unit)</b>						
Topic	Importance	Weight <i>Grade of importance for each topic divided by the total grade of importance</i>	Student learning objectives (SLOs)	Learning domain  #	# of items needed <i>weight × Total number of exam items</i>	Exam method  (# of items/ method)

**Assessment unit comment and recommendation:**

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**Test Layout:** *This part is filled in based on what is received from the Assessment and Examination Unit of the College by the Quality and Accreditation Unit. So, Chairperson of the course must reaffirm his/her team in order to make the test plan and approve it by the Assessment and Examination Unit with an acceptable length of time.*

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**Test Analysis Report:** This part is filled in based on what is received from the Assessment and Examination Unit by the Quality and Accreditation Unit. So, Chairperson of the course must reaffirm his/her team in order to make the test plan and approve it by the Assessment and Examination Unit with an acceptable length of time.

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**Item Analysis Quality Summary Report for the Final Exam:**

Whole Test Statistics:

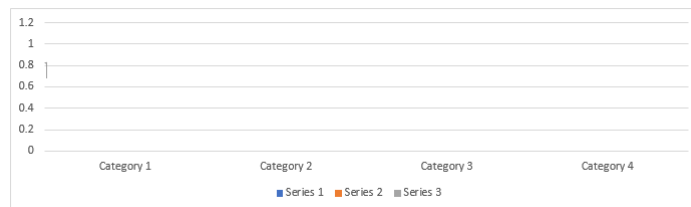
	Value	Comment
Test Reliability		<p>1. The reliability of the exam is satisfactory. Validity of results <u>could be judged</u> by matching exam blueprint with the actual exam.</p> <p>2. The assessment committee could be 95% confident that the students' scores, Which lie between [28.6 - 19.4] are borderline students. Those students on either side of the cut score (24), could shift from one side to the other if the exam is repeated.</p> <p>Those students require attention and observation. They constitute 85% of the failing students when 2SEM <u>is added</u> to the course, however this addition is recommended when there is extending of special circumstances that were affecting the validity of the exam.</p> <p>If there were minor special circumstances that were affecting the course deliver or assessment <math>\frac{1}{2}</math> SEM (Equal to mark) or 1 SEM ( ) can be added to the student score depending on the severity of these affects.</p>
Cut score (60%)		
Minimum achieved score		
Maximum achieved score		
Median		
Standard deviation		
Skew		
Kurtosis		
Standard Error Measurement (SEM)		

---

**Survey results:** A summary of the results of the faculty members and students' questionnaires is presented in this part by the Quality and Academic Accreditation Unit. However, the Chairperson of the course is asked to motivate students to participate in and enter these questionnaires in the Blackboard through the unified link sent to them.  
(<https://lms.kau.edu.sa/>)

---

Overall Survey Report:-	Last year	Current year
Overall		
Curriculum		
Team		
Assessment Method		
Educational Resources		
FACULTY		
ILOS		
Final Exam		



**Distribution of student results:** This table is filled by the subject teacher with a simple analysis on it and a graph that facilitates the distribution of grades, knowing that:

:(In Progress)

Number of students who take a resit exam

:( pass· fail)

:(Denied Entry)

It is placed for the students who have been denied from access to the final exam because of their absence from lectures and scientific lessons.

(Withdrawn):

It Includes the students who withdraw the subject in that term.

(Incomplete):

This code is not used in the Faculty of Medicine.

Letter Grade	Number of Students	Student Percentage	Analysis of Distribution of Grades
A+			
A			
B+			
B			
C+			
C			
D+			
D			
F			
Denied Entry			
In Progress			
Incomplete			
Pass			
Fail			
Withdrawn			



Counting the values of the learning outcomes: This table is prepared by the chairperson of the course or his representative so that all educational goals are coded in the **CLOs** field. Additionally, the result of the technical analysis of the practical and clinical tests carried out by the course is placed in order to measure these goals.

**Illustrative Example:** The course conducts a written midterm and a final test consisting of a practical part and a theoretical one. It also instructs the students to perform a task on which they were evaluated.

**1- midterm exam** The results of technical analysis are laid out for each question that served the objective of the article associated with it.

**For example:** The mid-term test had three questions that serve the educational objective **CLOs 1.1**. The technical analysis was **0.7, 0.6, 0.8**. These three numbers are placed in the written midterm exam on the same grade as the educational objective.

**2- Regarding** the final exam, the written part is treated in the same way of the written midterm exam.

**3- The practical or clinical test:** The average of student grades are calculated for each station and linked to one or more educational objectives.

For example: The average of students' grades in the first station is **70%**. This station serves **CLOs 1.1** and **1.3**. As for the second station, the average of students' grades is **80%**. This station serves **CLOs 1.2** and **1.3**. While the average of students' grades in the third station is **85%**. It only serves **CLO 1.1**. It is added according to the attached table:

Learning outcome assessment.

CLO	MID Exam	Final Exam		Assignments	Total (%)
	MICQ	MICQ	OSPE		
1.1	0.7, 0.6, 0.8	0.85,	0.7, 0.85	0.7	0.74
1.2		0.9, 0.7	0.8		0.80
1.3			0.7, 0.8	0.7	0.73
Total Knowledge Domain		Actual Achievement			0.76
2.1		0.65, 0.7			0.68
Total Cognitive Domain		Actual Achievement			0.68
		Total Achievement			0.72

\* The average outcome of each educational objective is calculated by collecting the results of the technical analysis for each station and then dividing them by their number.

**4- The mission** Includes any assessment procedure within the educational process such as

(SPP, Portfolio) The average of student s' grades is calculated and then linked to the educational objectives they serve.

For example: The student was asked to write a report of a and answered to write a report of a patient's condition, which was evaluated by the course teacher. The average of student's grades was **70%**. It was found that this assignment serve both CLOs 1.1 and 1.3. Thus, this number can be placed beside these two objectives.

**Learning outcome assessment.**

CLO	MID Exam	Final Exam		Assignments	Total (%)
	MICQ	MICQ	OSPE		
1.1	0.7, 0.6, 0.8	0.85,	0.7, 0.85	0.7	0.74
1.2		0.9, 0.7	0.8		0.80
1.3			0.7, 0.8	0.7	0.73
Total Knowledge Domain		Actual Achievement			0.76
2.1		0.65, 0.7			0.68
Total Cognitive Domain		Actual Achievement			0.68
Total Achievement					0.72



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*Any difficulties encountered in the course and were significantly influential and essential for the presentation or evaluation of the course should be listed . This includes any essential goal related to learning resources, academic facilities, or administrative issues, if any. The consequences of these difficulties and what needs to be done must be explained in order to avoid them.*

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**Resources and Facilities**

1. Difficulties in access to resources or facilities (if any)	2. Consequences of any difficulties experienced for student learning in the course, and <b>proposed action to overcome it.</b>
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**Administrative Issues**

1. Organizational or administrative difficulties encountered (if any)	2. Consequences of any difficulties experienced for student learning in the course, and <b>proposed action to overcome it.</b>
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*The previous development plan that was approved from the previous academic year is attached in addition to what has been implemented and what is being worked on, noting difficulties, if any.*

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*Develop a proposed plan based on what has been mentioned above, including the proposed period for implementation and the concerned persons.*

---

**Planning for Improvement**

Progress on actions proposed for improving the course in previous course reports (if any).			
Actions recommended from the most recent course report(s)	Actions Taken	Action Results	Action Analysis
a.			
b.			
c.			
d.			

Action Plan for Next Semester/Year <b>Start &amp; Completion Dates omitted</b>		
Actions Recommended for Further Improvement	Intended Action Points (should be measurable)	Person Responsible
a.		
b.		
c.		
d.		
e.		

---

*The Quality and Academic Accreditation Unit gives its general recommendations to the course.*

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*The Chairperson's agreement to the recommendations of the Quality Unit is presented and disagreement to one of these recommendations is justified.*

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---

*Approve the report by the chairperson of the course and then the concerned vice dean of the College.*

---

**Overall Quality unit recommendation:**

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**Response to the overall Quality unit recommended:**

<input type="checkbox"/> All recommended corrective management <u>were done</u> .
<input type="checkbox"/> All recommended corrective management were done except recommendation No # <u>xxxxxx</u> because .....
<input type="checkbox"/> None of the recommendation was done because .....
<input type="checkbox"/> No corrective management <u>was recommended</u> .

Course Director	Head of Department
Noted by: Vice Dean for clinical Sciences / Vice Dean for Basic Sciences	



## Course Specification:

Course specification, based on NCAAA's 2020 model, consists of the following paragraphs:

The table is filled based on the example shown.

Course Specifications	
Course Title:	Cells and Tissues
Course Code:	ANTM 211
Program:	MBBS / MED Program
Department:	Clinical Anatomy
College:	Medicine
Institution:	King AbdulAziz University

It is filled based on the example shown.

**A. Course Identification**

1. Credit hours: 2

2. Course type: University  College  Department  Others

3. Level/year at which this course is offered: 2<sup>nd</sup> year

4. Pre-requisites for this course (if any): Preparatory Year: BIO110

5. Co-requisites for this course (if any): None

Place the subject codes for the coming academic years are named.

The number and percentage of hours for each teaching method, with the need to focus on that the total of hours must be identical to the number of hours of the subject in the table A7 And C, so that the sum of hours corresponds to the number of hours (credit hour = 15 Contact hours). The method of teaching mentioned in (Others) should be explained in detail.

**6. Mode of Instruction (mark all that apply)**

No	Mode of Instruction	Contact Hours	Percentage
1	Traditional classroom	34	75%
2	Blended	9	20%
3	E-learning	2	5%
4	Distance learning		
5	Other		



Place the number of contact hours for each educational activity, with the need for a detailed explanation of the word **Others**, for example: (PBL, SPP) provided that the number of hours matches the schedule in **C** and **A6**.

**7. Contact Hours** (based on academic semester)

No	Activity	Contact Hours
1	Lecture	15
2	Laboratory/Studio	28
3	Tutorial	2
4	Others (specify)	
	<b>Total</b>	45

1- A general description of the course is given here along with a description of what distinguishes it from other courses, as well as its phase within the program of the Faculty of Medicine.

2- The general objectives of the course are provided here. There is no requirement for that specific verbs be used, for an objective be clearly measurable, or for a specific number of objectives must be adhered to.

**B. Course Objectives and Learning Outcomes**

<b>1. Course Description</b>
<b>2. Course Main Objective</b>

Write here the educational objectives of the course the number of which should be a maximum of **6** to **10**. 8 objectives divided by three main axes are preferred as approved by the National Commission for Academic Accreditation and Assessment (NCAAA).

Attention is given when choosing the appropriate verb for each educational goal according to the attached table. A goal should be clear, measurable, and linked with the program learning objectives.

**3. Course Learning Outcomes**

CLOs		Aligned PLOs
<b>1</b>	<b>Knowledge and Understanding</b>	
1.1		
1.2		
1.3		
1.4		
2...		
2.1		
2.2		
2.3		
<b>3</b>	<b>Values:</b>	
3.1		
3.2		
3.3		
3...		

NQF Learning Domains	SUGGESTED VERBS
<b>KNOWLEDGE &amp; UNDERSTANDING</b>	Understand, arrange, describe, name, define, identify, mention, choose, recite, explain, classify, summarize, classify, explicate, demonstrate, repeat...
<b>SKILLS</b>	Use , apply, show, discover, implement, change, perform, analyze, prove, compare, differentiate, measure, plan, synthesize, contrast, evaluate, justify, defend, argue, recommend, judge, develop, build, create, innovate, design, organize, modify, rearrange, establish, formulate, draw, print, practice, hold, install, give, bring, discuss, translate.
<b>Values</b>	Articulate the value of, Act, perform, Accept, Adopt, commit, Express, Approve, Establish, Endorse, Pursue, Create, Support, Practice, Embrace, Build, Deliver, Question, Challenge, Present a clear perspectives on, Demonstrate integrity in, Take a stance, Appraise, Assess, Rank, Rate.



## Knowledge and understanding

### At this level the graduate will have:

- A broad, in-depth, and integrated structure of knowledge and understanding of theories, principles, and concepts involved in one or more fields of specialty or work.
- An in-depth Knowledge and understanding of operations, materials, techniques, practices, postulates, and/or terminology.
- A broad collection of specialized knowledge and understanding built on modern developments in specialty, a profession, or a job.
- The knowledge and understanding of research methodology and survey methods

## Values, Independence, and Responsibility

### At this level, and within a range of complex and diverse contexts, a graduate can do the following:

#### Values and Ethics:

- Demonstrate commitment to professional and academic values and standards and the Code of Ethical Conduct, representing responsible citizenship and coexistence with others.

#### Independence and Responsibility:

- Build and work effectively on achieving plans for academic and/or professional self-development, evaluate learning and performance, and independently make decisions on self-development and/or tasks based on convincing evidence.
- Professionally and independently manage tasks and activities related to the specialization and/or job.
- Work collaboratively and constructively and lead various teams to perform a wide range of tasks responsibly and to play a leading role in the planning and evaluation of joint work.
- Participate effectively in the development of the specialization and society.

## Skills

### Physical, practical, and advanced communication and information technology skills to do the following:

#### Cognitive Skills:

- Apply the concepts, principles, and theories included and integrated in different contexts in the field of specialization, occupation, or work.
- Solve problems in complicated and diverse contexts in one or more areas of specialization or job.
- Apply critical thinking and offer creative solutions for current issues and problems in complicated and diverse contexts in an area of specialty, profession, or job.
- Practice the methods of investigation, verification, and research into complex issues and problems.

#### Practical and Physical Skills:

- Use and adapt advanced processes, techniques, tools, devices and/or materials in performing complex and diverse practical activities.
- Perform a set of complicated and diverse practical tasks and procedures associated with a specialization or the practicing of a profession or a job.

#### Communication skills and information technology:

- Communicate in suitable ways to show the understanding of theoretical knowledge and transfer specialized knowledge and skills and complex ideas to a diverse group of recipients.
- Use mathematical processes and quantitative methods to process data and information in complex and diverse contexts associated with an area of a specialization or a job.
- Choose a miscellaneous collection of tools and applications of basic and specialized digital, information, and communication technologies, use them, and adapt them to process and analyze data and information to support and promote specialized research and/or projects.



Place a list of the general topics that are explained within the course along with the number of contact hours for each topic, provided that their sum is the same as the total number of hours in the table A7.

For example: A subject of 7 Credit hours must have  $7 \times 15 = 105$  contact hours.

### C. Course Content

No	List of Topics	Contact Hours
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## F. Learning Resources and Facilities

### 1. Learning Resources

<b>Required Textbooks</b>	Gartner LP and Hiatt JL: <b>Colour Textbook of Histology</b> ; 3 <sup>rd</sup> ed.; Lippincott William and Wilkins, 2007.
<b>Essential References Materials</b>	Mohammed Badawoud, <b>General Histology for medical students</b> .1 <sup>st</sup> ed., 2010
<b>Electronic Materials</b>	<ul style="list-style-type: none"> <li>Try to access CD-ROM series about the human histology. The computer cluster is available in the medical library.</li> <li><a href="http://www.medicalstudent.com">http://www.medicalstudent.com</a></li> <li><a href="http://www.med.umich.edu/histology">http://www.med.umich.edu/histology</a></li> <li><a href="http://library.med.utah.edu/WebPath/HISTHTML/ANATOMY/ANATOMY.html">http://library.med.utah.edu/WebPath/HISTHTML/ANATOMY/ANATOMY.html</a></li> </ul>
<b>Other Learning Materials</b>	Eroschenko VP: <b>Di Fiore's Atlas of Histology with Functional Correlation</b> ; 12 <sup>th</sup> ed. Lippincott William and Wilkins, 2012.

List learning resources according to the provided example.

### 2. Facilities Required

Item	Resources
<b>Accommodation</b> (Classrooms, laboratories, demonstration rooms/labs, etc.)	<ul style="list-style-type: none"> <li>Lecture room that can accommodate more than 180 students.</li> <li>Tutorial roomsshould be provided by rounded tables.</li> </ul>
<b>Technology Resources</b> (AV, data show, Smart Board, software, etc.)	Maintenance of computers still needs more trained responsible personnel.
<b>Other Resources</b> (Specify, e.g. if specific laboratory equipment is required, list requirements or attach a list)	

List the course needed facilities equipment according to the examples provided in each category. It is to be noted that these meetings are feasible and necessary to present the course.

Provide a list of the course methods for quality assessment. The most common methods of quality assessment are:

- 1- The technical analysis carried out by the Assessment and Examination Unit
- 2- The Test Scheme (Blueprint) report carried out by the Assessment and Examination Unit.
- 3- The results of student questionnaires conducted by the Quality and Academic Accreditation Unit.
- 4- The results of faculty Members' questionnaires conducted by the Quality and Academic Accreditation Unit.

### G. Course Quality Evaluation

Evaluation Areas/Issues	Evaluators	Evaluation Methods

**Evaluation areas** (e.g., Effectiveness of teaching and assessment, Extent of achievement of course learning outcomes, Quality of learning resources, etc.)  
**Evaluators** (Students, Faculty, Program Leaders, Peer Reviewer, Others (specify))  
**Assessment Methods** (Direct, Indirect)

### H. Specification Approval Data

<b>Council / Committee</b>	Departmental committee
<b>Reference No.</b>	27-09-2020

The course specification is approved by the academic department or the committee. It is to be noted that the authorized body must be mentioned, such as the department council along with the number and date of the council's minutes.





**NOTE:**

The course specification should not be updated annually, but only when amendments are made to it or when a new form is issued by the National Commission for Academic Accreditation and Assessment. The course specification contains a plan for delivering and evaluating the course as approved regardless of what has already been delivered. Therefore, the specification must contain the objectives and teaching and assessment methods that are realistically implementable.

**Course Report:**

The annual report for each subject is made at the end of the last final exam based on the comprehensive report that works with each final test. All what has been done in the comprehensive assessments carried out during the academic year is compiled in this report along with an overall plan for the coming year.

The table is filled based on the example provided.

The names of the faculty members and their addresses are provided in this section. In case, the course is divided into departments, one or more faculty members are assigned to each particular department in an allotted time. The number of departments that each faculty member will deliver and the number of students who will study in each department are to be determined. In the absence of a complete division of the course, it is possible to put the numbers of all students in total with a list of the names of the faculty members participating in teaching the subject.

This table is derived from table A7 of Course Specification. Enlist all the numbers mentioned in this table in the specification document under Planned then provide what has already been delivered under the Actual.

A list of the teaching strategies is to be provided in table D1 of the Course Specification, mentioning that these methods have been implemented, as well as any difficulties encountered by or prevented the implementation of the teaching methods. A proposed plan should be mentioned in case there are difficulties in implementing any of the teaching strategies.

Enlist the topics that have not been fully taught accompanied by the reasons and their impact on educational objectives. Also mention the ways of compensation whether they have already been compensated within the same course or were proposed for compensation. In case there is no undelivered topic, write the phrase (There is no undelivered topic).

### Course Report

<b>Course Title:</b>	Pathology Core Course
<b>Code:</b>	PATM 201
<b>Program:</b>	MBBS/ Undergraduate Program
<b>Department:</b>	Pathology Department
<b>Institution:</b>	King Abdulaziz University
<b>Academic Year:</b>	2019/2020
<b>Semester:</b>	2nd Semester
<b>Course Coordinator:</b>	Dr Shadi Al Ahmadi/ Prof Wafaeq Gomaa
<b>Date:</b>	27/09/2020

**A. Course Identification**

No	Instructor(s)	Location	Number of Sections	Number of Students	
				Starting the course	Completing the course

**B. Course Delivery**

**1. Course Contact Hours (per semester)**

No.	Activity	Planned	Actual
1	Lecture	15	15
2	Laboratory	28	28
3	Tutorial	2	2
<b>Total</b>		<b>67</b>	<b>45</b>

**2. Topics not Covered**

Topics	Reason for Not Covering	Extent of their Impact on Learning Outcomes	Compensating Action*
Not Applicable			

\*Compensating actions already taken or suggested

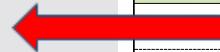
Planned Teaching Strategies	Were They Implemented?		Difficulties Experienced (if any) in Implementation	Suggested Action
	Yes	No		



A list of assessment methods is to be provided in table D2 of the Course Specification, mentioning that these methods have been implemented, as well as any difficulties encountered by or prevented the implementation of the assessment methods. A proposed plan should be mentioned in case there are difficulties in implementing any of the assessment methods.

#### 4. Activities/Assessment Methods

Activities/Planned Assessment Methods	Were They Implemented?		Difficulties Experienced (if any) in Implementation	Suggested Action
	Yes	No		



The mentioned methods are listed in table G of the Course Specification with a summary of the results of these methods.

#### 5. Verification of Credibility of Students' Results

Method(s) of Verification	Conclusions



General recommendations for everything mentioned in the tables are to be enlisted.

**(B1,B2,B3,B4,B5)**

#### 6. Recommendations




**Distribution of student results:** This table is filled by the subject teacher with a simple analysis on it and a graph that facilitates the distribution of grades, knowing that:

**(In Progress):**

Number of students who take a resit exam.

**(Pass, Fail):**

:(Denied Entry)

It is placed for the students who have been denied from access to the final exam because of their absence from lectures and scientific lessons.

**(Withdrawn):**

It Includes the students who withdraw the subject in that term.

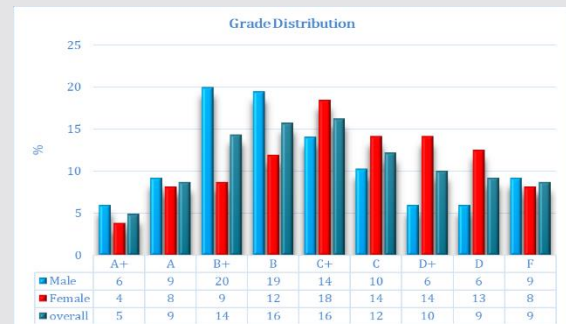
**(Incomplete):**

This code is not used in the Faculty of Medicine.

#### C. Student Results

##### 1. Distribution of Grades

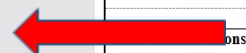
	Grades									Status Distributions						
	A+	A	B+	B	C+	C	D+	D	F	Denied Entry	In Progress	Incomplete	Pass	Fail	Withdrawn	
Number of Students																
Percentage																



1- Write a comment on the students' grades.

2- Provide special recommendations on what was mentioned in the distribution of scores.

#### 2. Comment on Student Results



General recommendations are to be offered on the questionnaires mentioned in the tables (E1 and E2) regarding what is observed or suggested.

**3. Recommendations:**

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Any difficulties encountered in the course and were significantly influential and essential for the delivery or evaluation of the course and associated with the learning resources, learning facilities, or administrative issues, if any, should be mentioned. The consequences of these difficulties and what needs to be done in order to avoid them must be explained.

**F. Difficulties and Challenges**

Difficulties and Challenges	Consequences	Actions Taken
<b>Administrative Issues</b>		
<b>Learning Resources</b>		
<b>Facilities</b>		

Provide general recommendations regarding the results of the table D1, especially if there is a large difference between the target value and the real value of one or more goals, or if there is a weak value for one or more of the achieved goals.

**2. Recommendations**

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Enlist the results of the students' evaluation and mention the date of the survey and the number and percentage of participants.

The department should also mention what considers as strengths or weaknesses based on these questionnaires with comments on them. Write the results of the questionnaires in clear sentences containing the meaning mentioned by the students in their questionnaires (Students' comments are to be transmitted as they are).

The table should also include what is observed regarding the level of students' satisfaction with one of the items in the questionnaire, whether it was high or low.

Usually a satisfaction level of less than 3 out of 5 is considered low, while above 4.5 out of 5 is considered excellent or high.

**2. Other Evaluations**

(e.g., Evaluations by faculty, program leaders, peer reviewers, others)

Evaluation method :	Date:		
<table border="1"> <thead> <tr> <th>Evaluator(s) Comments</th> <th>Course Coordinator/Instructor Comments/Response</th> </tr> </thead> </table>	Evaluator(s) Comments	Course Coordinator/Instructor Comments/Response	
Evaluator(s) Comments	Course Coordinator/Instructor Comments/Response		
Strengths:			
•			
•			
•			
Improvement:			
•			
•			
•			
Suggestions for Improvement:			
•			
•			
•			

\* Add separate table for each evaluation

Any additional questionnaire is to be added. In the Faculty of Medicine, for faculty members' questionnaire should be added in this paragraph in the same way as mentioned in table (E1). It is also possible to add any other assessment made by the course in a separate table, with the need to attach, and prove the details of the additional assessment.

**E. Course Quality Evaluation**

**1. Students Evaluation of the Quality of the Course**

Date of Survey:	Number of Participants:	Percentage of Participation:	Evaluation Result:
Students Feedback		Course Coordinator/Instructor Comments/Response	
Areas for improvement:			
Suggestions for Improvement:			
•			
•			



The previous development plan that was approved in the previous academic year is to be attached in addition to what has been implemented and what is being worked on, noting difficulties, if any.

Develop a proposed plan based on what has been mentioned above, including the proposed period for implementation and the concerned persons.

The course specification is approved by the academic department or the committee. It is to be noted that the authorized body must be mentioned, such as the department council along with the number and date of the council's minutes.

**G. Course Improvement Plan**

**1. Course Improvement Actions**

Recommended Actions	Actions Taken	Results	Comments
<b>a. Previous course Report Recommendations</b>			

\* (The developmental measures taken during teaching the course and not included in the development plan of it)

**2. Action Plan for Next Semester/Year**

Recommendations	Actions	Responsibility For Implementation	Time		Needed Support
			Start	End	
1.					
2.					
3.					
4.					

**H. Report Approval Data**

Council / Committee	Departmental committee		
Reference No.			
Date	27-09-2020		
Department number		Date	



### **Head, Quality & Academic Accreditation Unit**

Dr. Rani Ghazi Ahmed

### **Deputy Head, Quality & Academic Accreditation Unit**

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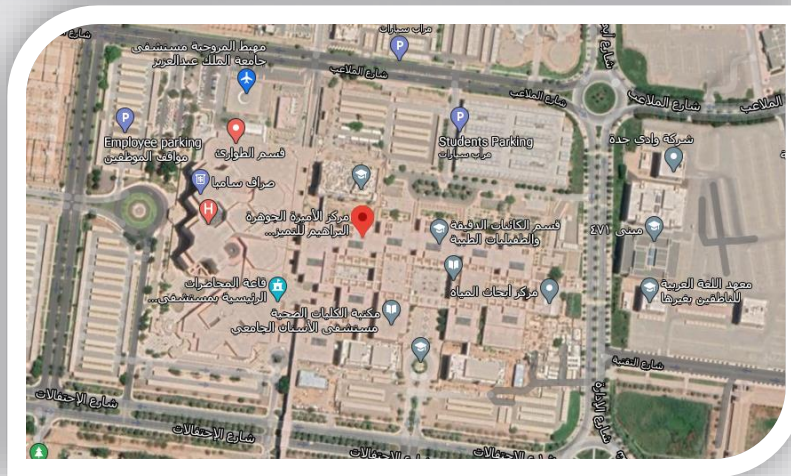
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