

Guidelines to Evaluation of Standards for COPPA Second Edition

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Malaysian Qualifications Agency

Mercu MQA

No. 3539, Jalan Teknokrat 7

Cyber 5

63000 Cyberjaya

Selangor

Tel +603-8688 1900

Fax +603-8688 1911

Website www.mqa.gov.my

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All Agency's publications are available on our portal: www.mqa.gov.my

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Section 1

Introduction

1.1 Overview

Since its introduction in 2008, the Code of Practice for Programme Accreditation (COPPA) has been the main reference of the MQA's accreditation processes for the Provisional Accreditation (PA), Full Accreditation (FA) and Compliance Evaluation (CE) of academic programmes. It was revised in 2017, and the version is also referred to as the COPPA second edition or COPPA 2.0.

Using the COPPA second edition structure, the Code of Practice for Programme Accreditation: Open and Distance Learning (COPPA-ODL) was revised in 2019 from its first edition issued in 2012 to be used for accreditation of ODL programmes. In the same year, in line with the nation's plans and ministries' blueprints to strengthen the agenda of Technical and Vocational Education and Training (TVET) in the country, the document to guide and regulate the implementation of accreditation process of TVET programmes, referred to as the Code of Practice for TVET Programme Accreditation (COPTPA) was developed. The first edition of COPTPA was then revised and its second edition was published in 2020.

The COPPA second edition document contains **98 standards** which need to be fulfilled by an academic programme undergoing an accreditation process. These standards are clustered into seven areas of evaluation, as follows:

- i. Programme Development and Delivery;
- ii. Assessment of Student Learning;
- Student Selection and Support Services;
- iv. Academic Staff;
- v. Educational Resources;
- vi. Programme Management; and
- vii. Programme Monitoring, Review and Continual Quality Improvement.

During the programme accreditation process, the panel of assessors (POA) evaluates the degree to which the programme fulfils all the stipulated standards, depending on the type of accreditation process undergone by the programme, whether its Provisional Accreditation, Full Accreditation or Compliance Evaluation process.

Provisional Accreditation (PA) is an accreditation exercise to determine whether a proposed programme meets the minimum quality standards prior to its launch. Full Accreditation (FA) is an accreditation exercise to ascertain that the teaching, learning and all other related activities of a provisionally accredited programme meet the quality standards; while Compliance Evaluation (CE) is an exercise to monitor and ensure the maintenance and enhancement of accredited programmes. Depending on its type, scope and nature, a standard may be assessed and evaluated as a stand-alone standard or holistically in combination with other related and complementary standards.

In principle, the fulfilment of all the stipulated standards is necessary for a programme to be recommended by the POA for an accreditation award. Hence, based on this principle, this document provides the rubrics for all standards either to be evaluated as a standalone standard or in combination with other related standards within the same cluster or sub-area of evaluation. By correctly interpreting the rubrics, the POA will be able to consistently apply and assign the appropriate attainment level (AL) to each area of evaluation. This will lead to increasing the validity and reliability of the accreditation evaluation.

1.2 General Evaluation Framework

Generally, the evaluation of a standard or a cluster of standards is developed based on a 5-point scale which is applicable for FA and CE. The **passing score** for both FA and CE are set at **AL3**. For PA, the highest rating is evaluated at AL 3 as PA seeks fulfilment of standards as a baseline attainment for the purpose of programme approval.

The generic descriptors of the attainment level are as follows:

- AL 1 Inadequate, non-fulfilment of the standard leading to major deficiency, and requiring major improvement to adequately address the standard.
- AL 2 Less adequate, non-fulfilment of the standard leading to minor deficiency, and requiring minor improvement to adequately address the standard.
- AL 3 Adequately addressing the standard and/or fulfilment of the standard as indicated directly by its statement(s).
- AL 4 Addressing the standard efficiently and/or effectively, the internal quality assurance (IQA) system of the higher education providers (HEP) is in control of the respective processes in maintaining its efficiency and effectiveness.
- AL 5 Addressing the standard to the extent that the respective process and/or system demonstrates good/best or exemplary practice which could be benchmarked by other parties.

Based on these generic descriptors, more specific descriptors are developed for all standards and/or clusters of standards to form assessment rubrics. These rubrics can guide the POA in their evaluation.

Section 2

Guide to Evaluation of Standards for Programme Accreditation: Provisional Accreditation

The following standards are applicable during the evaluation of Provisional Accreditation. The individual standards in each area of the COPPA have been clustered to better reflect the area of evaluation. Stakeholders, particularly the Higher Education Providers (HEP) will be able to use the rubrics as a self-assessment instrument and be better prepared for the submission of programmes for evaluation; while the Panel of Assessors (POA) are able to evaluate programmes based on the standards or cluster of standards identified in each area of the COPPA. The supporting documents listed are examples of evidence/documentation that could be provided by the HEP during the evaluation. Though not exhaustive, the HEP and the POA may refer to the examples as a guide.

Area 1: Programme Development and Delivery

1.1 Statement of Educational Objectives of Academic Programme and Learning Outcomes

Cluster 1.1A combines Standards 1.1.1, 1.1.2 and 1.1.3

Standard 1.1.1

The programme **must** be consistent with, and supportive of, the vision, mission and goals of the HEP.

Standard 1.1.2

The programme **must** be considered only after a needs assessment has indicated that there is a need for the programme to be offered.

(This standard must be read together with standards 1.2.2 in Area 1, and 6.1.6 in Area 6, COPPA)

Standard 1.1.3

The department **must** state its programme educational objectives, learning outcomes, teaching and learning strategies, and assessment, and ensure constructive alignment between them.

(This standard must be read together with standard 1.2.4 in Area 1, COPPA)

Attainment Level Rubrics (Cluster 1.1A)

Attainment Level	Description
1	The programme fulfils NONE of the following:
	 The programme is consistent with, and/or supportive of, the vision, mission and goals of the HEP.
	 The programme is considered based on a needs assessment that there is a need for the programme to be offered. The programme documents its programme educational objectives,
	learning outcomes, teaching and learning strategies, assessment, and/or information related to constructive alignment between them.

Attainment Level	Description
2	The programme fulfils AT LEAST ONE of the following:
	 The programme is consistent with, and/or supportive of, the vision, mission and goals of the HEP, The programme is considered based on a needs assessment that
	there is a need for the programme to be offered,
	 The programme documents its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and/or information related to constructive alignment between them.
3	The programme is consistent with, and supportive of, the vision, mission and goals of the HEP, is considered based on a needs assessment that there is a need for the programme to be offered, and documents its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and information related to constructive alignment between them.

Example of Supporting Documents:

- Working paper of curriculum development or curriculum review approved by the HEP's Senate or Academic Board, supported by the departmental meeting minutes.
- Needs analysis, programme benchmarking report, survey questionnaire and/or any documents that report feedback from stakeholders or interested parties.

Cluster 1.1B combines Standards 1.1.4 and 1.1.5

Standard 1.1.4

The programme learning outcomes **must** correspond to an MQF level descriptors and the five clusters of MQF learning outcomes:

- i. Knowledge and understanding
- ii. Cognitive skills
- iii. Functional work skills with focus on:
 - a. Practical skills
 - b. Interpersonal skills
 - c. Communication skills
 - d. Digital skills
 - e. Numeracy skills
 - f. Leadership, autonomy and responsibility
- iv. Personal and entrepreneurial skills
- v. Ethics and professionalism.

Standard 1.1.5

Considering the stated learning outcomes, the programme **must** indicate the career and further studies options available to the students on completion of the programme.

Attainment Level Rubric (Cluster 1.1B)

Attainment Level	Description
1	The programme learning outcomes DO NOT correspond to the MQF level descriptors and the five clusters of MQF learning outcomes. Considering the stated learning outcomes, the programme DOES NOT indicate the career and further studies options available to the students on completion of the programme.
2	The programme learning outcomes correspond to the MQF level descriptors and the five clusters of MQF learning outcomes. However, the programme DOES NOT clearly indicate the career and further studies options available to the students on completion of the programme.
3	The programme learning outcomes correspond to the MQF level descriptors and the five clusters of MQF learning outcomes. Considering the stated learning outcomes, the programme indicates the career and further studies options available to the students on completion of the programme.

Example of Supporting Documents:

 Working paper of curriculum development or curriculum review approved by the HEP's Senate or Academic Board, supported by the departmental meeting minutes.

1.2 Programme Development: Process, Content, Structure and Learning-Teaching Methods

Cluster 1.2A combines Standards 1.2.1, 1.2.2 and 1.2.3

Standard 1.2.1

The department **must** have sufficient autonomy¹ to design the curriculum and to utilise the allocated resources necessary for its implementation. (*Where applicable, the above*

¹ Sufficient autonomy relates to the freedom of the department to design (including the use of external experts or national curriculum) and propose curriculum for approval.

provision must also cover collaborative programmes and programmes conducted in collaboration with or from, other HEPs in accordance with national policies).

Standard 1.2.2

The department **must** have an appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP.

Standard 1.2.3

The department **must** consult the stakeholders in the development of the curriculum including educational experts as appropriate.

Attainment Level Rubric (Cluster 1.2A)

Attainment Level	Description
1	 The department fulfils NONE of the following: The department has sufficient autonomy to design the curriculum and to utilise the allocated resources necessary for its implementation. The department has appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP. The department consults the stakeholders in the development of the curriculum including educational experts as appropriate.
2	 The department fulfils AT LEAST ONE of the following: The department has sufficient autonomy to design the curriculum and to utilise the allocated resources necessary for its implementation. The department has appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP. The department consults the stakeholders in the development of the curriculum including educational experts as appropriate.
3	The department has sufficient autonomy to design the curriculum and to utilise the allocated resources necessary for its implementation, has appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP, and consults the stakeholders in the development of the curriculum including educational experts as appropriate.

Example of Supporting Documents:

 Policies, processes, and procedures on programme/curriculum design and delivery

- Minutes of meetings and the composition of the stakeholders involved in the process
- Programme outline with curriculum structure and content

Cluster 1.2B contains Standard 1.2.4

Standard 1.2.4

The curriculum **must** fulfil the requirements of the discipline of study, taking into account the appropriate programme standards, professional and industry requirements as well as good practices in the field.

Attainment Level Rubric (Cluster 1.2B)

Attainment Level	Description
1	The curriculum DOES NOT fulfil the requirements of the discipline of study, as stipulated in the appropriate programme standards, and by professional and industry requirements.
2	The curriculum PARTIALLY fulfils the requirements of the discipline of study, as stipulated in the appropriate programme standards, and by professional and industry requirements as well as as well as taking into account good practices in the field.
3	The curriculum fulfils the requirements of the discipline of study, taking into account the appropriate programme standards, professional and industry requirements as well as good practices in the field.

- Policies, processes, and procedures for the curriculum design.
- Minutes of meetings the committee involved in the curriculum design.
- Programme documentation with curriculum structure and content that consider programme standards, professional and industry requirements.
- Benchmarking reports on good practices in curriculum design delivery.

Cluster 1.2C contains Standard 1.2.5

Standard 1.2.5

There **must** be an appropriate teaching and learning methods relevant to the programme educational objectives and learning outcomes.

Attainment Level Rubric (Cluster 1.2C)

Attainment Level	Description
1	The programme DOES NOT SPECIFY ANY teaching and learning methods relevant to the programme educational objectives and learning outcomes.
2	The programme SPECIFIES teaching and learning methods that are LESS appropriate or relevant to the programme educational objectives and learning outcomes.
3	The programme specifies appropriate teaching and learning methods relevant to the programme educational objectives and learning outcomes.

Example of Supporting Documents:

 Programme documentation with curriculum structure and content that teaching and learning methods and their relation to the programme educational objectives and learning outcomes.

Cluster 1.2D contains Standard 1.2.6

Standard 1.2.6

There **must** be co-curricular activities to enrich student experience, and to foster personal development and responsibility.

Attainment Level Rubric (Cluster 1.2D)

Attainment Level	Description
1	There is NO co-curricular activities specified to enrich student experience, and to foster personal development and responsibility.

Attainment Level	Description
2	The specified co-curricular activities are LESS APPROPRIATE to enrich student experience, and to foster personal development and responsibility.
3	There are co-curricular activities to enrich student experience, and to foster personal development and responsibility.

Example of Supporting Documents:

 Programme documentation with curriculum structure and content that outlines the list of co-curricular activities available in the programme and the credit values involved.

1.3 Programme Delivery

Note: This section is intentionally left blank.

Area 2: Assessment of Student Learning

2.1 Relationship between Assessment and Learning Outcomes

Cluster 2.1A contains Standard 2.1.1

Standard 2.1.1

Assessment principles, methods and practices **must** be aligned to the learning outcomes of the programme, consistent with the levels defined in the MQF.

Attainment Level Rubric (Cluster 2.1A)

Attainment Level	Description
1	There is NO document on the assessment principles, methods and practices.
2	There are LIMITED documents or evidence on the use of on assessment principles, methods and practices but they are neither aligned to the learning outcomes of the programme, nor consistent with the levels defined in the MQF
3	Assessment principles, methods and practices are aligned to the learning outcomes of the programme, consistent with the levels defined in the MQF.

- Evidences on compliance with the Malaysian Qualifications Framework (MQF)
- Documents on assessment principles, methods and practices, such as policies, guidelines or university circulars.
- Course assessment plan that is constructively aligned to learning outcomes.

2.2 Assessment Methods

Cluster 2.2A combines Standards 2.2.1 and 2.2.2

Standard 2.2.1

There **must** be a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies.

Standard 2.2.2

There **must** be mechanisms to ensure, and to periodically review, the validity, reliability, integrity, currency and fairness of the assessment methods.

Attainment Level Rubric (Cluster 2.2A)

Attainment Level	Description
1	There is NO document on the availability of a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies.
2	There are LIMITED documents on the availability of a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies, BUT NO mechanism to ensure the validity, reliability, integrity, currency and fairness of the assessment methods.
3	There are a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies, and mechanisms to ensure the validity, reliability, integrity, currency and fairness of the assessment methods.

Example of Supporting Documents:

 Documents on security, credibility, validity, reliability, consistency, currency and fairness of the assessment tools in the form of policies, guideline or university circulars.

Cluster 2.2B contains Standard 2.2.3

Standard 2.2.3

The frequency, methods, and criteria of student assessment — including the grading system and appeal policies — **must** be documented and communicated to students on the commencement of the programme.

Attainment Level Rubric (Cluster 2.2B)

Attainment Level	Description
1	There is NO document on frequency, methods, and criteria of student assessment, including the grading system and appeal policies.
2	There are LIMITED documents on frequency, methods, and criteria of student assessment, including the grading system and appeal policies.
3	The frequency, methods, and criteria of student assessment, including the grading system and appeal policies, are documented on the commencement of the programme.

Example of Supporting Documents:

- Documents in the form of policies, guidelines or university circulars on students' assessment criteria, including, the grading system, appeal, frequency & methods of assessment, passing mark.
- Communication plan or policies on the dissemination of assessment results.

2.3 Management of Student Assessment

Cluster 2.3A contains Standard 2.3.2

Standard 2.3.2

There **must** be mechanisms to ensure the security of assessment documents and records.

Attainment Level Rubric (Cluster 2.3A)

Attainment Level	Description
1	There is NO mechanism to ensure the security of assessment documents and records.
2	There are INADEQUATE mechanisms to ensure the security of assessment documents and records.
3	There are mechanisms to ensure the security of assessment documents and records.

Example of Supporting Documents:

- Processes and procedures in ensuring the security of assessment documents and records.
- Standard Operating Procedures (SOP) on handling assessment documents and records.

Cluster 2.3B contains Standard 2.3.4

Standard 2.3.4

The department **must** have appropriate guidelines and mechanisms for students to appeal their course results.

Attainment Level Rubric (Cluster 2.3B)

Attainment Level	Description
1	The department has NO guideline or mechanism for students to appeal their course results.
2	The department has the guidelines and/or mechanisms for students to appeal their course results is available but the guidelines and/or mechanisms LACK clarity.
3	The department has appropriate guidelines and mechanisms for students to appeal their course results.

Example of Supporting Documents:

• Academic regulation and SOP that provide the guidelines and mechanisms for students to appeal their course results.

Area 3: Student Selection and Support Services

3.1 Student Selection

Cluster 3.1A combines Standards 3.1.1 and 3.1.2

Standard 3.1.1

The programme **must** have clear criteria and processes for student selection (including that of transfer students) and these must be consistent with applicable requirement.

Standard 3.1.2

The criteria and processes of student selection **must** be transparent and objective.

Attainment Level Rubric (Cluster 3.1A)

Attainment Level	Description
1	The programme has NO criterion or process for student selection (including that of transfer students).
2	The programme has criteria and/or processes for student selection (including that of transfer students) but the criteria and/or processes LACK clarity, transparency, objectivity and consistency with applicable requirement.
3	The programme has clear criteria and processes for student selection (including that of transfer students), which are transparent, objective and consistent with applicable requirement.

Example of Supporting Documents:

 Document on criteria and processes on student selection including transfer students.

Cluster 3.1B contains Standard 3.1.4

Standard 3.1.4

There **must** be a clear policy, and if applicable, appropriate mechanisms for appeal on student selection.

Attainment Level Rubric (Cluster 3.1B)

Attainment Level	Description
1	There is NO policy or mechanism for appeal on student selection.
2	The policy and/or mechanism for appeal on student selection are available but LACKS clarity.
3	There are a clear policy and/or appropriate mechanisms for appeal on student selection.

Example of Supporting Documents:

Document on appeal policy for student selection.

3.2 Articulation and Transfer

Cluster 3.2A contains Standard 3.2.1

Standard 3.2.1

The department **must** have well-defined policies and mechanisms to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border.

Attainment Level Rubric (Cluster 3.2A)

Attainment Level	Description
1	The department has NO policy or mechanism to facilitate student mobility,
2	The department has policies and/or mechanisms to facilitate student

Attainment Level	Description
	mobility, which may include student transfer within and between institutions as well as cross-border border, but the policies and/or mechanisms LACK clarity.
3	The department has well-defined policies and mechanisms to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border.

Example of Supporting Documents:

 Document on policies and mechanism on student mobility and transfer within and between institutions as well as cross-border.

3.3 Student Support Services

Cluster 3.3A contains Standard 3.3.1

Standard 3.3.1

Students **must** have access to appropriate and adequate support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services.

Attainment Level Rubric (Cluster 3.3A)

Attainment Level	Description
1	Students DO NOT have access to essential support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services.
2	Students have LIMITED access to essential support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services.
3	Students have access to essential support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services.

Example of Supporting Documents:

• Document on support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services.

Cluster 3.3B contains Standard 3.3.2

Standard 3.3.2

There **must** be a designated administrative unit, with a prominent organisational status in the HEP, responsible for planning and implementing student support services and staffed by individuals who have appropriate experience.

Attainment Level Rubric (Cluster 3.3B)

Attainment Level	Description
1	There is NO designated administrative unit responsible for planning and implementing student support services.
2	There is a designated administrative unit responsible for planning and implementing student support services, but the unit is LESS PROMINENT in the HEP.
3	There is a designated administrative unit, with a prominent organisational status in the HEP, responsible for planning and implementing student support services.

Example of Supporting Documents:

- Organisation chart of the unit that is responsible to provide student support services.
- Roles and responsibilities of the staff in the unit.
- · Report on the performance of the unit.

Cluster 3.3C contains Standard 3.3.6

Standard 3.3.6

The HEP **must** have clearly defined and documented processes and procedures in handling student disciplinary cases.

Attainment Level Rubric (Cluster 3.3C)

Attainment Level	Description
1	The HEP has NO process or procedure in handling student disciplinary cases.
2	The HEP has processes and/or procedures, with INSUFFICIENT CLARITY , in handling student disciplinary cases.
3	The HEP has clearly defined and documented processes and procedures in handling student disciplinary cases.

Example of Supporting Documents:

• Document on processes and procedures in handling student disciplinary cases.

3.4 Student Representation and Participation

Note: This section is intentionally left blank.

3.5 Alumni

Note: This section is intentionally left blank.

Area 4: Academic Staff

4.1 Recruitment and Management

Cluster 4.1A contains Standard 4.1.1

Standard 4.1.1

The department **must** have a clearly defined plan for its academic manpower needs consistent with institutional policies and programme requirements.

Attainment Level Rubric (Cluster 4.1A)

Attainment Level	Description
1	The department DOES NOT HAVE a plan for its academic manpower needs.
2	The department has a plan for its academic manpower needs, but the plan is NOT CONSISTENT with institutional policies and/or programme requirements.
3	The department has a clearly defined plan for its academic manpower needs, that is consistent with institutional policies and programme requirements.

Example of Supporting Documents:

- Staff job description, terms of reference and key performance indicators
- Academic manpower plan
- List of lecturers and their expertise matching programme requirements

Cluster 4.1B combines Standards 4.1.2, 4.1.6 and 4.1.7

Standard 4.1.2

The department **must** have a clear and documented academic staff recruitment policy where the criteria for selection are based primarily on academic merit and/or relevant experience.

Standard 4.1.6

The recruitment policy for a particular programme **must** seek diversity among the academic staff in terms of experience, approaches and backgrounds.

Standard 4.1.7

Policies and procedures for recognition through promotion, salary increment or other remuneration **must** be clear, transparent and based on merit.

Attainment Level Rubric (Cluster 4.1B)

Attainment Level	Description
1	The department DOES NOT HAVE any of the following:
	 An academic staff recruitment policy with criteria selection based on academic merit, relevant experience or diversity among the staff. Policy or procedure for recognition through promotion or
	remuneration.
2	The department has AT LEAST ONE of the following:
	 An academic staff recruitment policy with criteria selection based on academic merit, relevant experience and/or diversity among the staff. Policies and/or procedures for recognition through promotion and/or remuneration.
3	The department has a clear and documented academic staff recruitment policy with criteria selection based on academic merit and/or relevant experience. The recruitment policy for a particular programme seeks diversity among staff in terms of experience, approaches and backgrounds. The policies and procedures for recognition through promotion, salary increment or other remuneration are clear, transparent and based on merit.

- HR Handbook/policies recruitment, promotion and appraisal
- HR Development and Strategy plan and initiatives

4.2 Service and Development

Cluster 4.2A combines Standards 4.2.1 and 4.2.3

Standard 4.2.1

The department **must** have policies addressing matters related to service, development and appraisal of the academic staff.

Standard 4.2.3

The HEP **must** have clear policies on conflict of interest and professional conduct, including procedures for handling disciplinary cases among academic staff.

Attainment Level Rubric (Cluster 4.2A)

Attainment Level	Description
1	The HEP/department DOES NOT HAVE any of the following:
	 Policy addressing matters related to service, development and appraisal of the academic staff.
	Policy on conflict of interest and professional conduct.
2	The department has AT LEAST ONE of the following:
	 Policy addressing matters related to service, development and appraisal of the academic staff.
	Policy on conflict of interest and professional conduct.
3	The department has policies addressing matters related to service, development and appraisal of the academic staff. The HEP has clear policies on conflict of interest and professional conduct, including procedures for handling disciplinary cases among academic staff.

- Policy on academic integrity including plagiarism, and research ethics/disciplinary cases
- Policy on services, development and appraisal of academic staff.
- Policy on conflict of interest and professional conduct.
- Procedures for handling disciplinary cases.

Area 5: Educational Resources

5.1 Physical Facilities

Cluster 5.1A combines Standards 5.1.1 and 5.1.2

Standard 5.1.1

The programme **must** have sufficient and appropriate physical facilities and educational resources to ensure its effective delivery, including facilities for practical-based programmes and for those with special needs.

Standard 5.1.2

The physical facilities **must** comply with the relevant laws and regulations.

Attainment Level Rubric (Cluster 5.1A)

Attainment Level	Description
1	The programme DOES NOT fulfil any of the following:
	 Physical facilities and educational resources for programme delivery.
	 The physical facilities comply with the relevant laws and regulations.
2	The programme fulfils AT LEAST ONE of the following:
	 Physical facilities and educational resources for programme delivery. The physical facilities comply with the relevant laws and regulations.
3	The programme has sufficient and appropriate physical facilities and educational resources to ensure its effective delivery, including facilities for practical-based programmes and for those with special needs. The physical facilities comply with the relevant laws and regulations.

- List of physical facilities required for the programme.
- List of license certificates or related documents for software and eContent applications used by the programme

5.2 Research and Development

Note: This section is intentionally left blank.

5.3 Financial Resources

Cluster 5.3A combines Standards 5.3.1, 5.3.2 and 5.3.3

Standard 5.3.1

The HEP must demonstrate financial viability and sustainability for the programme.

Standard 5.3.2

The department **must** have clear procedures to ensure that its financial resources are sufficient and managed efficiently.

Standard 5.3.3

The HEP **must** have a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of the department.

Attainment Level Rubric (Cluster 5.3A)

Attainment Level	Description
1	 The HEP/department DOES NOT HAVE any of the following: Financial viability or sustainability plan for the programme. Procedure, or a provision to establish a set of procedures, at the department level to manage its financial resources. A clear line of responsibility and authority for budgeting or resource allocation that takes into account the specific needs of the department.
2	 The HEP/department has AT LEAST ONE of the following: Financial viability and/or sustainability plan for the programme. Procedure, and/or a provision to establish a set of procedures, at the department level to manage its financial resources. A clear line of responsibility and authority for budgeting and/or resource allocation that takes into account the specific needs of the department.

Attainment Level	Description
3	The HEP has a plan for financial viability or sustainability for the programme, and has a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of the department.
	The department has clear procedures, or a provision to establish a set of procedures, to manage its financial resources is managed efficiently.

- Audited financial statements or certified supporting documents for the last three consecutive years.
- Allocation of funds for training and education activities.

Area 6: Programme Management

6.1 Programme Management

Cluster 6.1A combines Standards 6.1.1 and 6.1.3

Standard 6.1.1

The department **must** clarify its management structure and function, and the relationships between them, and these must be communicated to all parties involved based on the principles of responsibility, accountability and transparency.

Standard 6.1.3

The department **must** have policies, procedures and mechanisms for regular review and updating of its structures, functions, strategies and core activities to ensure continual quality improvement.

Attainment Level Rubric (Cluster 6.1A)

Attainment Level	Description
1	The department DOES NOT HAVE any of the following:
	 Clear management structure or function, or the relationships between them, which are communicated to relevant parties involved based on the principles of responsibility, accountability and transparency. Policy, procedure or mechanism for review and updating of its structures, functions, strategies or core activities for continual quality improvement.
2	The department has AT LEAST ONE of the following:
	 Clear management structure and/or function, and/or the relationships between them, which are communicated to relevant parties involved based on the principles of responsibility, accountability and transparency. Policies, procedures and/or mechanisms for review and updating of its structures, functions, strategies and/or core activities for continual quality improvement.

Attainment Level	Description
3	The department has a clear management structure and function, and the relationships between them, which are communicated to all parties involved based on the principles of responsibility, accountability and transparency. There are policies, procedures and mechanisms for regular review and updating of its structures, functions, strategies and core activities to ensure continual quality improvement.

Example of Supporting Documents:

- Organisational and governance charts.
- Documents or policies on HEP's governance and quality management systems.

Cluster 6.1B contains Standard 6.1.4

Standard 6.1.4

The academic board of the department **must** be an effective decision-making body with an adequate degree of autonomy.

Attainment Level Rubric (Cluster 6.1B)

Attainment Level	Description
1	The department has NO academic board as a decision-making body.
2	The department has an academic board as a decision-making body with LIMITED scope within the given degree of autonomy.
3	The academic board of the department is an effective decision-making body with an adequate degree of autonomy.

- Appointment letters for academic board of the department signed by designated authority.
- Terms of reference for the appointment.
- Minutes of meeting of the HEP/department academic board.

6.2 Programme Leadership

Cluster 6.2A combines Standards 6.2.1 and 6.2.2

Standard 6.2.1

The criteria for the appointment and the responsibilities of the programme leader **must** be clearly stated.

Standard 6.2.2

The programme leader **must** have appropriate qualification, knowledge and experiences related to the programme he/she is responsible for.

Attainment Level Rubric (Cluster 6.2A)

Attainment Level	Description
1	There is NO criterion for the appointment and responsibilities of the programme leader AND NO appointment of a qualified programme leader.
2	The criteria for the appointment and/or responsibilities of the programme leader is NOT CLEARLY stated, and the appointed programme leader DOES NOT have the qualification, knowledge and experiences related to the programme he/she is responsible for.
3	The criteria for the appointment and the responsibilities of the programme leader are clearly stated, with the programme leader having appropriate qualifications, knowledge and experiences related to the programme he/she is responsible for.

Example of Supporting Documents:

- Appointment criteria for programme leader
- Job description and list of duties and responsibilities of programme leader
- CV of programme leader

6.3 Administrative Staff

Note: This section is intentionally left blank.

6.4 Academic Records

Cluster 6.4A combines Standards 6.4.1 and 6.4.3

Standard 6.4.1

The department **must** have appropriate policies and practices concerning the nature, content and security of student, academic staff and other academic records.

Standard 6.4.3

The department **must** implement policies on the rights of individual privacy and the confidentiality of records.

Attainment Level Rubric (Cluster 6.4A)

Attainment Level	Description
1	The department DOES NOT HAVE any of the following:
	 Policy and practices concerning the nature, content and security of student, academic staff or other academic records, or Policy on the rights of individual privacy or the confidentiality of records.
2	The department has or implements AT LEAST ONE of the following:
	 Policies and practices concerning the nature, content and security of student, academic staff and/or other academic records. Policies on the rights of individual privacy and/or the confidentiality of records.
3	The department has appropriate policies concerning the nature, content and security of student, academic staff and other academic records, and policies on the rights of individual privacy and the confidentiality of records.

- HEP's policies on security of documents, individual information, data and confidential records.
- HEP's quality management or quality assurance systems (manuals and/or selected documented procedures).
- HEP's and/or department's risk assessment/treatment plans for information systems and data security.

Area 7: Programme Monitoring, Review and Continual Quality Improvement

7.1 Mechanisms for Programme Monitoring, Review and Continual Quality Improvement

Cluster 7.1A contains Standard 7.1.1

Standard 7.1.1

The department **must** have clear policies and appropriate mechanisms for regular monitoring and review of the programme.

Attainment Level Rubric (Cluster 7.1A)

Attainment Level	Description
1	The department DOES NOT HAVE any policy and mechanism for regular monitoring and review of the programme.
2	The department has UNCLEAR policies and INAPPROPRIATE mechanisms for regular monitoring and review the programme.
3	The department has clear policies and appropriate mechanisms for regular monitoring and review of the programme.

Example of Supporting Documents:

 HEP's policies and documented procedures for regular monitoring and review of the academic programmes.

Cluster 7.1B combines Standards 7.1.2 and 7.1.9

Standard 7.1.2

The department **must** have a Quality Assurance (QA) unit for internal quality assurance of the department to work hand-in-hand with the QA unit of the HEP.

Standard 7.1.9

There **must** be an integral link between the departmental quality assurance processes and the achievement of the institutional purpose.

Attainment Level Rubric (Cluster 7.1B)

Attainment Level	Description
1	The department DOES NOT HAVE a Quality Assurance (QA) unit for internal quality assurance of the department to work with the QA unit of the HEP. There is NO link between the departmental quality assurance processes and the achievement of the institutional purpose.
2	The department forms an AD HOC Quality Assurance (QA) unit for internal quality assurance of the department that does not always work with the QA unit of the HEP. There is INCOHERENT link between the departmental quality assurance processes and the achievement of the institutional purpose.
3	The department has a Quality Assurance (QA) unit for internal quality assurance of the department to work hand-in-hand with the QA unit of the HEP, where this provides an integral link between the departmental quality assurance processes and the achievement of the institutional purpose.

Example of Supporting Documents:

- HEP's organisation chart showing the position of its QA unit.
- Department's organisation chart showing the position of its QA unit/personnel.
- List or appointment/assignment letters of the head and personnel/staff of the department's QA unit/role.
- · Meeting minutes of the department's QA unit.
- HEP's and/or Department's QA or quality reports.

Cluster 7.1C* contains Standard 7.1.7

*APPLICABLE FOR PROGRAMME WITH COLLABORATIVE
ARRANGEMENTS ONLY (see note below)

Standard 7.1.7*

In collaborative arrangements, the partners involved **must** share the responsibilities of programme monitoring and review.

(This standard must be read together with standard 6.1.5 in Area 6, COPPA)

Attainment Level Rubric (Cluster 7.1C*)

Attainment Level	Description
1	In <u>collaborative arrangements</u> *, the partners DO NOT involve or are NOT given any responsibility in programme monitoring and review.
2	In <u>collaborative arrangements</u> *, the partners involved SOME but INSIGNIFICANT responsibility, such as providing data only, in programme monitoring and review.
3	In <u>collaborative arrangements</u> *, the partners involved share the responsibilities of programme monitoring and review.

Note: The term "collaborative arrangements" in Standard 7.1.7 is applicable only for programme implemented with collaborative partners, such as joint-degree and dual-degree programmes. Therefore, this standard is only applicable for Provisional Accreditation (PA) if the HEP/department appoints its collaborative partners to implement the programme.

Example of Supporting Documents:

• Legal documents such as MOU or MOA with the collaborative partners, including clauses in MOU/MOA and supplementary documents outlining the partner's responsibilities in programme monitoring and review.

Section 3

Guide to Evaluation of Standards for Programme Accreditation: Full Accreditation and Compliance Evaluation

The following standards are applicable during the evaluation of Full Accreditation (FA) and Compliance Evaluation (CE). The individual standards in each area of the COPPA have been clustered to better reflect the area of evaluation. Stakeholders, particularly the Higher Education Providers (HEP) will be able to use the rubrics as a self-assessment instrument and be better prepared for the submission of programmes for evaluation; while the Panel of Assessors (POA) are able to evaluate programmes based on the standards or cluster of standards identified in each area of the COPPA. The supporting documents listed are examples of evidence/documentation that could be provided by the HEP during the evaluation. Though not exhaustive, the HEP and the POA may refer to the examples as a guide.

Area 1: Programme Development and Delivery

1.1 Statement of Educational Objectives of Academic Programme and Learning Outcomes

Cluster 1.1A combines Standards 1.1.1, 1.1.2 and 1.1.3.

Standard 1.1.1

The programme **must** be consistent with, and supportive of, the vision, mission and goals of the HEP.

Standard 1.1.2

The programme **must** be considered only after a needs assessment has indicated that there is a need for the programme to be offered.

(This standard must be read together with standards 1.2.2 in Area 1, and 6.1.6 in Area 6, COPPA)

Standard 1.1.3

The department **must** state its programme educational objectives, learning outcomes, teaching and learning strategies, and assessment, and ensure constructive alignment between them.

(This standard must be read together with standard 1.2.4 in Area 1, COPPA)

Attainment Level Rubric (Cluster 1.1A)

Attainment Level	Description
1	The programme fulfils NONE of the following:
	 The programme is consistent with, and/or supportive of, the vision, mission and goals of the HEP.
	 The programme is considered based on a needs assessment that there is a need for the programme to be offered.
	The programme documents its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and/or information related to constructive alignment between them.

Attainment Level	Description
2	 The programme fulfils AT LEAST ONE of the following: The programme is consistent with, and/or supportive of, the vision, mission and goals of the HEP, The programme is considered based on a needs assessment that there is a need for the programme to be offered, The programme documents its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and/or information related to constructive alignment between them.
3	The programme is consistent with, and supportive of, the vision, mission and goals of the HEP, is considered based on a needs assessment that there is a need for the programme to be offered, and documents its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and information related to constructive alignment between them.
4	The programme is considered based on an updated needs assessment that is used in formulating or reviewing the programme educational objectives and learning outcomes, and systematically documents its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and information related to constructive alignment between them.
5	The programme is considered based on an updated needs assessment that is benchmarked to ensure currency and relevance of its programme educational objectives, learning outcomes, teaching and learning strategies, assessment, and information related to constructive alignment between them.

- Working paper of curriculum development or curriculum review approved by the HEP's Senate or Academic Board, supported by the departmental meeting minutes.
- Needs analysis, programme benchmarking report, survey questionnaire and/or any documents that report feedback from stakeholders or interested parties.
- Ministry's approval of the programme.
- Programme advisory panel reports and/or meeting minutes.
- External advisor's report (for level MQF level 6 and above).
- Student's academic handbook.
- Programme information in the HEP's websites and official brochure (if any).

Cluster 1.1B combines Standards 1.1.4 and 1.1.5

Standard 1.1.4

The programme learning outcomes **must** correspond to an MQF level descriptors and the five clusters of MQF learning outcomes:

- i. Knowledge and understanding
- ii. Cognitive skills
- iii. Functional work skills with focus on:
 - a. Practical skills
 - b. Interpersonal skills
 - c. Communication skills
 - d. Digital skills
 - e. Numeracy skills
 - f. Leadership, autonomy and responsibility
- iv. Personal and entrepreneurial skills
- v. Ethics and professionalism.

Standard 1.1.5

Considering the stated learning outcomes, the programme **must** indicate the career and further studies options available to the students on completion of the programme.

Attainment Level Rubric (Cluster 1.1B)

Attainment Level	Description
1	The programme learning outcomes DO NOT correspond to the MQF level descriptors and the five clusters of MQF learning outcomes. Considering the stated learning outcomes, the programme DOES NOT indicate the career and further studies options available to the students on completion of the programme.
2	The programme learning outcomes correspond to the MQF level descriptors and the five clusters of MQF learning outcomes. However, the programme DOES NOT clearly indicate the career and further studies options available to the students on completion of the programme.
3	The programme learning outcomes correspond to the MQF level descriptors and the five clusters of MQF learning outcomes. Considering the stated learning outcomes, the programme indicates the career and further studies options available to the students on completion of the programme.

Attainment Level	Description
4	The programme learning outcomes explicitly address the five clusters of MQF learning outcomes. Considering the stated learning outcomes, the programme disseminates information about the career and further studies options available to the students on completion of the programme.
5	The programme learning outcomes constructively address the five clusters of MQF learning outcomes. Considering the stated learning outcomes, the programme publishes information about the career and further studies options available to the students on completion of the programme.

- Working paper of curriculum development or curriculum review approved by the HEP's Senate or Academic Board, supported by the departmental meeting minutes and Ministry's approval.
- Programme advisory panel reports and/or meeting minutes.
- External advisor's report (for MQF level 6 and above).
- Student's academic handbook.
- Programme information in the HEP's websites and official brochure (if any).

1.2 Programme Development: Process, Content, Structure and Learning-Teaching Methods

Cluster 1.2A combines Standards 1.2.1, 1.2.2 and 1.2.3

Standard 1.2.1

The department **must** have sufficient autonomy² to design the curriculum and to utilise the allocated resources necessary for its implementation.

(Where applicable, the above provision must also cover collaborative programmes and programmes conducted in collaboration with or from, other HEPs in accordance with national policies).

Standard 1.2.2

The department **must** have an appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP.

² Sufficient autonomy relates to the freedom of the department to design (including the use of external experts or national curriculum) and propose curriculum for approval.

Standard 1.2.3

The department **must** consult the stakeholders in the development of the curriculum including educational experts as appropriate.

Attainment Level Rubric (Cluster 1.2A)

Attainment Level	Description
1	 The department fulfils NONE of the following: The department has sufficient autonomy to design the curriculum and to utilise the allocated resources necessary for its implementation. The department has appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP. The department consults the stakeholders in the development of the curriculum including educational experts as appropriate.
2	 The department fulfils AT LEAST ONE of the following: The department has sufficient autonomy to design the curriculum and to utilise the allocated resources necessary for its implementation. The department has appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP. The department consults the stakeholders in the development of the curriculum including educational experts as appropriate.
3	The department has sufficient autonomy to design the curriculum and to utilise the allocated resources necessary for its implementation, has appropriate process to develop the curriculum leading to the approval by the highest academic authority in the HEP, and consults the stakeholders in the development of the curriculum including educational experts as appropriate.
4	The department effectively uses its autonomy, stakeholders' input and optimal resources in the implementation of the requirements.
5	The department has and implements sustainable policies and internal processes leading to continual improvement and good practices in fulfilling the requirements.

- Policies, processes, and procedures on programme/curriculum design and delivery
- Current Programme outline with curriculum structure and content

- Proof of programme implementation, e.g., minutes of meeting
- Proof of the effectiveness of the practice such as attainment of programme learning outcomes

Cluster 1.2B contains Standard 1.2.4

Standard 1.2.4

The curriculum **must** fulfil the requirements of the discipline of study, taking into account the appropriate programme standards, professional and industry requirements as well as good practices in the field.

Attainment Level Rubric (Cluster 1.2B)

Attainment Level	Description
1	The curriculum DOES NOT fulfil the requirements of the discipline of study, as stipulated in the appropriate programme standards, and by professional and industry requirements.
2	The curriculum PARTIALLY fulfils the requirements of the discipline of study, as stipulated in the appropriate programme standards, and by professional and industry requirements as well as taking into account good practices in the field.
3	The curriculum fulfils the requirements of the discipline of study, taking into account the appropriate programme standards, professional and industry requirements as well as good practices in the field.
4	The curriculum design and delivery consider the requirements of the discipline of study beyond the programme standards, professional and industry requirements, as well as implementing good practices.
5	The curriculum design and delivery involve collaborative initiatives with external local and/or global partners.

- Policies, processes, and procedures for the curriculum design and delivery.
- Minutes of meetings the committee involved in the curriculum delivery and programme management.
- Documents and records related to curriculum design and delivery, and its fulfilment of programme standards, and professional and industry requirements.
- Benchmarking reports on good practices in curriculum design and delivery.

Cluster 1.2C contains Standard 1.2.5

Standard 1.2.5

There **must** be appropriate teaching and learning methods relevant to the programme educational objectives and learning outcomes.

Attainment Level Rubric (Cluster 1.2C)

Attainment Level	Description
1	There is NO teaching and learning method implemented relevant to the programme educational objectives and learning outcomes.
2	The teaching and learning methods implemented are LESS appropriate or relevant to the programme educational objectives and learning outcomes.
3	There are appropriate teaching and learning methods relevant to the programme educational objectives and learning outcomes.
4	The teaching and learning methods implemented consider the learning ecosystem beyond classroom and incorporate good practices.
5	The teaching and learning methods involve collaborative initiatives with external local and/or global partners.

Example of Supporting Documents:

• Information about teaching and learning methods and their implementation in relation to the programme educational objectives and learning outcomes.

Cluster 1.2D contains Standard 1.2.6

Standard 1.2.6

There **must** be co-curricular activities to enrich student experience, and to foster personal development and responsibility.

Attainment Level Rubric (Cluster 1.2D)

Attainment Level	Description
1	There is NO co-curricular activities available to enrich student experience, and to foster personal development and responsibility.
2	The availability of co-curricular activities is LIMITED , or they are LESS APPROPRIATE to enrich student experience, and to foster personal development and responsibility.
3	There are co-curricular activities to enrich student experience, and to foster personal development and responsibility.
4	The co-curricular activities are implemented with integration with the learning ecosystem for holistic student learning experience.
5	The implementation of co-curricular activities involves collaborative initiatives with external local and/or global partners.

Example of Supporting Documents:

• Information on the implementation of the co-curricular activities specified in the programme documentation or reports and the related student achievements.

1.3 Programme Delivery

Cluster 1.3A combines Standards 1.3.1 and 1.3.3

Standard 1.3.1

The department **must** take responsibility to ensure the effective delivery of programme learning outcomes.

Standard 1.3.3

The programme **must** have an appropriate full-time coordinator and a team of academic staff (e.g., a programme committee) with adequate authority for the effective delivery of the programme.

Attainment Level Rubric (Cluster 1.3A)

Attainment Level	Description
1	The department DOES NOT take responsibility to ensure the effective delivery of programme learning outcomes. The programme DOES NOT have an appropriate full-time coordinator and a team of academic staff (e.g., a programme committee) with adequate authority for the effective delivery of the programme.
2	The department takes PARTIAL responsibility to ensure the effective delivery of programme learning outcomes. The programme has an appropriate full-time coordinator and a team of academic staff (e.g., a programme committee) with limited authority for the effective delivery of the programme.
3	The department takes responsibility to ensure the effective delivery of programme learning outcomes. The programme has an appropriate full-time coordinator appointed by the department and a team of academic staff (e.g., a programme committee) with adequate authority for the effective delivery of the programme.
4	The department takes full responsibility to ensure the effective delivery of programme learning outcomes. The programme has an appropriate full-time coordinator appointed by the HEP and a team of academic staff (e.g., a programme committee) with adequate autonomy for the effective delivery of the programme.
5	The department takes full responsibility and ownership to ensure the effective delivery of programme learning outcomes. The programme has an appropriate full-time coordinator appointed by the HEP and a team of academic staff (e.g., a programme committee) with adequate autonomy and fully committed for the efficient and effective delivery of the programme.

- Letter of appointment of the full-time coordinator and a team of academic staff appointed to form the programme committee
- Job description of the full-time coordinator

Cluster 1.3B contains Standard 1.3.2

Standard 1.3.2

Students **must** be provided with, and briefed on, current information about (among others) the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies.

Attainment Level Rubric (Cluster 1.3B)

Attainment Level	Description
1	Students are NOT provided with, AND NOT briefed on, information about (among others) the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies.
2	Students are NOT provided with, OR NOT briefed on, current information about (among others) the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies:
3	Students are provided with, and briefed on, current information about the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies.
4	Students are provided with, and briefed on, current information effectively and efficiently about the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies.
5	Students are provided with, and briefed on, current and updated information about the objectives, structure, outline, schedule, credit value, learning outcomes, and methods of assessment of the programme at the commencement of their studies.

- Course outlines
- Evidence of course information communicated to students

Cluster 1.3C contains Standard 1.3.4

Standard 1.3.4

The department **must** provide students with a conducive learning environment.

Attainment Level Rubric (Cluster 1.3C)

Attainment Level	Description
1	The department DOES NOT provide students with a conducive learning environment.
2	The department provides students with a PARTIALLY conducive learning environment.
3	The department provides students with a conducive learning environment.
4	The department provides students with an effective conducive learning environment.
5	The department provides students with an effective conducive learning environment, which is regularly reviewed and continually improved.

Example of Supporting Documents:

• List of physical facilities required for and used by the programme

Cluster 1.3D contains Standard 1.3.5

Standard 1.3.5

The department **must** encourage innovations in teaching, learning and assessment.

Attainment Level Rubric (Cluster 1.3D)

Attainment Level	Description
1	The department DOES NOT encourage innovations in teaching,
	learning and assessment.

Attainment Level	Description
2	The department PARTIALLY encourages innovations in teaching, learning and assessment.
3	The department encourages innovations in teaching, learning and assessment.
4	The department provides resources to encourage innovations in teaching, learning and assessment.
5	The department provides support and incentivisation to encourage innovations in teaching, learning and assessment

- Evidence of innovation in teaching and learning
- Evidence of innovation in assessment
- Evidence of resources, support or incentives provided.

Cluster 1.3E contains Standard 1.3.6

Standard 1.3.6

The department **must** obtain feedback from stakeholders to improve the delivery of the programme outcomes.

Attainment Level Rubric (Cluster 1.3E)

Attainment Level	Description
1	The department DOES NOT obtain feedback from stakeholders to improve the delivery of the programme outcomes.
2	The department obtains feedback from stakeholders, but the feedback is NOT UTILISED for improvement of the delivery of the programme outcomes.
3	The department obtains feedback from stakeholders to improve the delivery of the programme outcomes.
4	The department obtains feedback regularly from stakeholders to improve the delivery of the programme outcomes.

Attainment Level	Description
5	The department obtains feedback regularly and systematically from stakeholders to continually improve the delivery of the programme outcomes.

- Feedback from industry
- Student evaluation form
- Evidence of action taken on feedback obtained

Area 2: Assessment of Student Learning

2.1 Relationship between Assessment and Learning Outcomes

Cluster 2.1A combines Standards 2.1.1 and 2.1.2

Standard 2.1.1

Assessment principles, methods and practices **must** be aligned to the learning outcomes of the programme, consistent with the levels defined in the MQF.

Standard 2.1.2

The alignment between assessment and the learning outcomes in the programme **must** be systematically and regularly reviewed to ensure its effectiveness.

Attainment Level Rubric (Cluster 2.1A)

Attainment Level	Description
1	There is NO document or evidence on the use of on the assessment principles, methods and practices.
2	There are LIMITED documents or evidence on the use of on assessment principles, methods and practices but they are neither aligned to the learning outcomes of the programme, nor consistent with the levels defined in the MQF, and NOT systematically and regularly reviewed to ensure its effectiveness.
3	Assessment principles, methods and practices are aligned to the learning outcomes of the programme, consistent with the levels defined in the MQF, and are systematically and regularly reviewed to ensure its effectiveness.
4	There is analysis performed to ensure constructive alignment of assessments to the learning outcomes and competency levels.
5	The constructive alignment of assessments to the learning outcomes and competency levels has improved student learning experience.

- Evidences on compliance with the MQF
- Documents on assessment principles, methods and practices, such as policies, guidelines or university circulars.
- Course assessment plan that is constructively aligned to learning outcomes.
- Documentary evidence related to review process, stakeholder engagement, approval and communication to stakeholders.
- Measurement and evaluation of learning outcomes.
- CQI reports at course and programme levels.

2.2 Assessment Methods

Cluster 2.2A combines Standards 2.2.1 and 2.2.2

Standard 2.2.1

There **must** be a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies.

Standard 2.2.2

There **must** be mechanisms to ensure, and to periodically review, the validity, reliability, integrity, currency and fairness of the assessment methods.

Attainment Level Rubric (Cluster 2.2A)

Attainment Level	Description
1	There is NO document or evidence on the availability of a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies.
2	There are LIMITED documents or evidence on the availability of a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies, but no mechanism to ensure, and to periodically review, the validity, reliability, integrity, currency and fairness of the assessment methods.
3	There are a variety of methods and tools that are appropriate for the assessment of learning outcomes and competencies, and mechanisms to ensure, and to periodically review, the validity, reliability, integrity, currency and fairness of the assessment methods.
4	The outcomes and competencies were analysed and used to further improve the assessment tools.

Attainment Level	Description
5	There is a regular review of these documents and the innovative assessment tools to ensure constructive alignment to the domains of
	the learning outcomes being assessed.

- Documents on security, credibility, validity, reliability, consistency, currency and fairness of the assessment tools in the form of policies, guideline or university circulars.
- Evidences of staff attending courses/training innovative assessment tools.
- Evidences on review of tools used to ensure effectiveness and constructive alignment

Cluster 2.2B combines Standards 2.2.3 and 2.2.4

Standard 2.2.3

The frequency, methods, and criteria of student assessment — including the grading system and appeal policies — **must** be documented and communicated to students on the commencement of the programme.

Standard 2.2.4

Changes to student assessment methods **must** follow established procedures and regulations and be communicated to students prior to their implementation.

Attainment Level Rubric (Cluster 2.2B)

Attainment Level	Description
1	There is NO document on frequency, methods, and criteria of student assessment, including the grading system and appeal policies.
2	There are LIMITED documents on frequency, methods, and criteria of student assessment, including the grading system and appeal policies. Changes to the assessment methods, however, DO NOT follow established procedures and regulations and MAY NOT be communicated to students prior to their implementation.

Attainment Level	Description
3	The frequency, methods, and criteria of student assessment, including the grading system and appeal policies, are documented and communicated to students on the commencement of the programme. Changes to the assessment methods follow established procedures and regulations and are communicated to students prior to their implementation.
4	There is a regular review of these policies and its communication mechanism to students.
5	The review of these policies is done by getting feedback from stakeholders and by benchmarking against good practices.

- Documents in the form of policies, guidelines or university circulars on students' assessment criteria, including, the grading system, appeal, frequency & methods of assessment, passing mark.
- Evidences of documents being made available and accessible to students
- Evidences of documents undergoing reviews, records of engagement with stakeholders, reports on benchmarking exercises, minutes of meetings for approval and communication plans for informing stakeholders of any changes.
- Evidences that actions have been taken based of the reports.
- Communication plan or policies on dissemination of assessment results.

2.3 Management of Student Assessment

Cluster 2.3A combines Standards 2.3.1, 2.3.3, 2.3.4 and 2.3.5

Standard 2.3.1

The department and its academic staff **must** have adequate level of autonomy in the management of student assessment.

(This standard may not be applicable to certain programme arrangements).

Standard 2.3.3

The assessment results **must** be communicated to students before the commencement of a new semester to facilitate progression decision.

Standard 2.3.4

The department **must** have appropriate guidelines and mechanisms for students to appeal their course results.

Standard 2.3.5

The department **must** periodically review the management of student assessment and act on the findings of the review.

(For MQF level 6 and above, the review must involve external examiners.)

Attainment Level Rubric (Cluster 2.3A)

Attainment Level	Description
1	 The HEP/department DOES NOT have or implement any of the following: The department and its academic staff have adequate level of autonomy in the management of student assessment (not applicable to certain programme arrangements). The assessment results are communicated to students before the commencement of a new semester to facilitate progression decision. The department has appropriate guidelines and mechanisms for students to appeal their course results. The department periodically reviews student assessment.
2	 The HEP/department has or implements AT LEAST ONE of the following: The department has and its academic staff have adequate level of autonomy in the management of student assessment. The assessment results are communicated to students before the commencement of a new semester to facilitate progression decision. Appropriate guidelines and mechanisms are available for students to appeal their course results. The department periodically reviews student assessment.
3	The department and its academic staff have adequate level of autonomy in the management of student assessment (not applicable to certain programme arrangements). The assessment results are communicated to students before the commencement of a new semester to facilitate progression decision. Appropriate guidelines and mechanisms are available for students to appeal their course results. The management of student assessment is periodically reviewed with actions taken on the findings of the review (for MQF level 6 and above, the review involves external examiners). The department periodically reviews student assessment.
4	The department manages student assessment effectively and efficiently.
5	The department conducts benchmarking with other institutions and implements good practises in managing student assessment.

- Examination policy, process and procedures that shows academic staff has adequate level of autonomy in the management of student assessment.
- Evidence that shows the assessment results are communicated to students before the commencement of a new semester.
- Academic regulation and SOP that provide the guidelines and mechanisms for students to appeal their course results.
- Report on the review of management of student assessment.
- External examiner's report.
- Evidences that actions have been taken based of the reports.

Cluster 2.3B contains Standard 2.3.2

Standard 2.3.2

There **must** be mechanisms to ensure the security of assessment documents and records.

Attainment Level Rubric (Cluster 2.3B)

Attainment Level	Description
1	There is NO mechanism to ensure the security of assessment documents and records.
2	There are INADEQUATE mechanisms to ensure the security of assessment documents and records.
3	There are mechanisms to ensure the security of assessment documents and records.
4	The mechanisms for ensuring the security of assessment documents and records are implemented effectively.
5	The mechanisms for ensuring the security of assessment documents and records are regularly reviewed and continually improved for sustainable implementation.

- Process and procedure in ensuring the security of assessment documents and records.
- Standard Operating Procedures (SOP) on handling assessment documents and records.
- Evidence of Plan-Do-Check-Act (PDCA) implementation on the process of ensuring the security of assessment documents and records.

Area 3: Student Selection and Support Services

3.1 Student Selection

Cluster 3.1A combines Standards 3.1.1 and 3.1.2

Standard 3.1.1

The programme **must** have clear criteria and processes for student selection (including that of transfer students) and these must be consistent with applicable requirement.

Standard 3.1.2

The criteria and processes of student selection **must** be transparent and objective.

Attainment Level Rubric (Cluster 3.1A)

Attainment Level	Description
1	The programme has NO criterion or process for student selection (including that of transfer students).
2	The programme has criteria and/or processes for student selection (including that of transfer students) but the criteria and/or processes LACK clarity, transparency, objectivity and consistency with applicable requirement.
3	The programme has clear criteria and processes for student selection (including that of transfer students), which are transparent, objective and consistent with applicable requirement.
4	The criteria and processes for student selection (including that of transfer students) are effectively implemented.
5	The criteria and process for student selection (including that of transfer students) are regularly reviewed and updated for sustainable implementation.

Example of Supporting Documents:

 Document on criteria and processes on student selection including transfer students

- Application forms with relevant documents
- Evidence of review and updated documents

Cluster 3.1B contains Standard 3.1.3

Standard 3.1.3

Student enrolment **must** be related to the capacity of the department to effectively deliver the programme.

Attainment Level Rubric (Cluster 3.1B)

Attainment Level	Description
1	Student enrolment is NOT related to the capacity of the department for effective programme delivery.
2	Student enrolment is PARTIALLY related to the capacity of the department for effective programme delivery.
3	Student enrolment is related to the capacity of the department for effective programme delivery.
4	Student enrolment is directly related to the capacity of the department for effective programme delivery with a good staff-students ratio according to the discipline or regulatory requirement.
5	The department maintains an excellent staff-students ratio for effective programme delivery, which exceeds the discipline or regulatory requirement.

Example of Supporting Documents:

- Document on criteria and processes on student enrolment.
- Application forms with relevant documents.
- Staff-student ratio as per requirements of programme standards.
- Capacity and resources of department

Cluster 3.1C combines Standards 3.1.4 and 3.1.5

Standard 3.1.4

There **must** be a clear policy, and if applicable, appropriate mechanisms for appeal on student selection.

Standard 3.1.5

The department **must** offer appropriate developmental or remedial support to assist students, including incoming transfer students who are in need.

Attainment Level Rubric (Cluster 3.1C)

Attainment Level	Description
1	There is NO policy or mechanism for appeal on student selection and NO developmental or remedial support provided to assist students, including incoming transfer students who are in need.
2	The policy and/or mechanism for appeal on student selection are available but LACK clarity. Developmental or remedial support provided to assist students, including incoming transfer students who are in need, are available but INADEQUATE .
3	There are a clear policy and/or appropriate mechanisms for appeal on student selection. The department offers appropriate developmental or remedial support to assist new students, including incoming transfer students who are in need.
4	The policy and mechanisms for appeal on student selection are implemented effectively. Similarly, the developmental or remedial support to assist new students, including incoming transfer students who are in need, is provided efficiently.
5	The policy and mechanism for appeal on student selection and the developmental or remedial support to assist new students including incoming transfer students who are in need are regularly reviewed and continually improved for sustainable implementation.

- Document on appeal policy for student selection.
- Documents related to the implementation of the appeal policy on student selection including transfer students. It must be consistent with the entry requirement stated in the programme standard.
- Evidence of developmental or remedial support to assist new students
- Review and updated policy

3.2 Articulation and Transfer

Cluster 3.2A combines Standards 3.2.1 and 3.2.2

Standard 3.2.1

The department **must** have well-defined policies and mechanisms to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border.

Standard 3.2.2

The department **must** ensure that the incoming transfer students have the capacity to successfully follow the programme.

(The standard only applicable to the programme with transfer student)

Attainment Level Rubric (Cluster 3.2A)

Attainment Level	Description
1	The department has NO policy or mechanism to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border, AND DOES NOT ensure that the incoming transfer students, if any, have the capacity to follow the programme.
2	The department has policies and/or mechanisms to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border border, but the policies and/or mechanisms LACK clarity. The department is NOT ABLE to ensure that the incoming transfer students, if any, have the capacity to follow the programme.
3	There are well defined policies and mechanisms to facilitate student mobility, which may include student transfer within and between institutions as well as cross-border. They manage to ensure that the incoming transfer students, if any, have the capacity to follow the programme.
4	The policies and mechanisms to facilitate student mobility and student transfer within and between institutions as well as cross-border, and to ensure that the incoming transfer students, if any, have the capacity to follow the programme are effectively implemented.

Attainment Level	Description
5	The policies and mechanisms to facilitate student mobility and student transfer within and between institutions as well as cross-border, are regularly reviewed, benchmarked and continually improved for sustainable implementation.

- Document on the policies and mechanism on student mobility and transfer within and between institutions as well as cross-border in order to ensure that they have the capacity to successfully follow the programme.
- Evidence of monitoring transfer students

3.3 Student Support Services

Cluster 3.3A combines Standards 3.3.1, 3.3.4 and 3.3.8

Standard 3.3.1

Students **must** have access to appropriate and adequate support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services.

Standard 3.3.4

Academic, non-academic and career counselling **must** be provided by adequate and qualified staff.

Standard 3.3.8

Student support services **must** be evaluated regularly to ensure their adequacy, effectiveness and safety.

Attainment Level Rubric (Cluster 3.3A)

Attainment Level	Description
1	Students DO NOT have access to essential support services, such as physical, social, financial, recreational and online facilities, including academic and non-academic counselling, and health services. The HEP also DOES NOT provide academic, non-academic and career counselling.

Attainment Level	Description
2	Students have access to appropriate and adequate support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services. The staff providing academic and non-academic counselling are INADEQUATE and NOT qualified.
3	Students have access to appropriate and adequate support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling, and health services. Academic, non-academic and career counselling are provided by adequate and qualified staff. The student support services are evaluated regularly to ensure their adequacy, effectiveness and safety.
4	Students have access to all appropriate support services for their conducive learning and good wellbeing, provided by adequate and qualified staff.
5	The student support services regularly reviewed, benchmarked and continually improved for current and future sustenance.

- Document on support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling which must be provided by adequate and qualified staff, and health services.
- Report on student support services and its evaluation.

Cluster 3.3B contains Standard 3.3.2

Standard 3.3.2

There **must** be a designated administrative unit, with a prominent organisational status in the HEP, responsible for planning and implementing student support services and staffed by individuals who have appropriate experience.

Attainment Level Rubric (Cluster 3.3B)

Attainment Level	Description
1	There is NO designated administrative unit responsible for planning and implementing student support services.

Attainment Level	Description
2	There is a designated administrative unit responsible for planning and implementing student support services, staffed by individuals with NO appropriate experience and/or the unit is LESS PROMINENT in the HEP.
3	There is a designated administrative unit, with a prominent organisational status in the HEP, responsible for planning and implementing student support services and staffed by individuals who have appropriate experience.
4	The designated administrative unit responsible for planning and implementing student support services delivers the services effectively and efficiently.
5	The designated administrative unit responsible for planning and implementing student support services evaluates, reviews, benchmarks and continually improves the services provided for current and future sustenance.

- Organisation chart of the unit that is responsible to provide student support services.
- Roles and responsibilities of the staff in the unit.
- Report on the performance of the unit.

Cluster 3.3C contains Standard 3.3.3

Standard 3.3.3

An effective induction to the programme **must** be available to new students with special attention given to out of state and international students as well as students with special needs.

Attainment Level Rubric (Cluster 3.3C)

Attainment Level	Description
1	There is NO induction programme for new students.

Attainment Level	Description
2	The induction programme for new students (including out of state and international students as well as students with special needs) is available BUT it is NOT EFFECTIVE .
3	There is an EFFECTIVE induction programme available to new students (including those who are out of state and international students as well as students with special needs).
4	Induction to the programme is implemented effectively to new students, addressing specific needs of different groups of students, including those who are out of state and international students as well as students with special needs.
5	The effectiveness of the programme induction is regularly reviewed and continually improved.

- Document on induction to the programme to new students with special attention given to out of state and international students as well as students with special needs.
- Report on the induction implementation to new student and its evaluation.

Cluster 3.3D combines Standards 3.3.5 and 3.3.7

Standard 3.3.5

There **must** be mechanisms that actively identify and assist students who are in need of academic, spiritual, psychological and social support.

Standard 3.3.7

There **must** be an effective mechanism for students to voice their grievances and seek resolution on academic and non-academic matters.

Attainment Level Rubric (Cluster 3.3D)

Attainment Level	Description
1	There is NO mechanism to identify and assist students who are in need of academic, spiritual, psychological and social support OR for students to voice their grievances and seek resolution on academic and non-academic matters.

Attainment Level	Description
2	There are, but INADEQUATE , mechanisms to identify and assist students who are in need of academic, spiritual, psychological and social support AND for students to voice their grievances and seek resolution on academic and non-academic matters.
3	There are adequate mechanisms to identify and assist students who are in need of academic, spiritual, psychological and social support and for students to voice their grievances and seek resolution effectively on academic and non-academic matters.
4	The mechanisms to identify and assist students who are in need of academic, spiritual, psychological and social support and for students to voice their grievances and seek resolution on academic and non-academic matters are implemented effectively and efficiently.
5	The mechanisms to identify and assist students who are in need of academic, spiritual, psychological and social support and for students to voice their grievances and seek resolution on academic and non-academic matters are regularly reviewed and continually improved.

- Document on mechanism to identify and assist students who are in need of academic, spiritual, psychological and social support and to voice their grievances and seek resolution on academic and non-academic matters.
- Report on the implementation of student support services and its evaluation.

Cluster 3.3E contains Standard 3.3.6

Standard 3.3.6

The HEP **must** have clearly defined and documented processes and procedures in handling student disciplinary cases.

Attainment Level Rubric (Cluster 3.3E)

Attainment Level	Description
1	The HEP has NO processes and procedures in handling student disciplinary cases.
2	The HEP has processes and procedures, with INSUFFICIENT CLARITY , in handling student disciplinary cases.

Attainment Level	Description
3	The HEP has clearly defined and documented processes and procedures in handling student disciplinary cases.
4	The HEP has clearly defined and documented processes and procedures in handling student disciplinary cases, which are efficiently implemented.
5	The HEP has clearly defined and documented processes and procedures in handling student disciplinary cases, which are regularly reviewed and continually improved.

• Document on processes and procedures in handling student disciplinary cases

3.4 Student Representation and Participation

Cluster 3.4A combines Standards 3.4.1 and 3.4.2

Standard 3.4.1

There **must** be well-disseminated policies and processes for active student engagement especially in areas that affect their interest and welfare.

Standard 3.4.2

There **must** be adequate student representation and organisation at the institutional and departmental levels.

Attainment Level Rubric (Cluster 3.4A)

Attainment Level	Description
1	There is NO policy and process for active student engagement especially in areas that affect their interest and welfare. The department also DOES NOT have student representation or organisation at the institutional or departmental levels.

Attainment Level	Description
2	The HEP/department has AT LEAST ONE of the following:
	 Policies and/or processes for active student engagement especially in areas that affect their interest and/or welfare. Student representation and/or organisation at the institutional and/or departmental levels.
3	There are well-disseminated policies and processes for active student engagement especially in areas that affect their interest and welfare, and adequate student representation and organisation at the institutional and departmental levels.
4	The policies and processes for active student engagement are implemented efficiently and effectively. Student representation, organisation and activities are well supported at the institutional and departmental levels.
5	The policies and processes for active student engagement and for student representation and organisation are regularly reviewed, benchmarked and continually improved.

- Policy for student engagement
- Student council appointment letter
- Sample of student activities with industry (workshops, seminars, corporate social responsibility, knowledge sharing session etc)

Cluster 3.4B combines Standards 3.4.3 and 3.4.4

Standard 3.4.3

Students **must** be facilitated to develop linkages with external stakeholders and to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace.

Standard 3.4.4

Student activities and organisations **must** be facilitated to encourage character building, inculcate a sense of belonging and responsibility, and promote active citizenship.

Attainment Level Rubric (Cluster 3.4B)

Attainment Level	Description
1	The HEP/department DOES NOT facilitate students to develop linkages with external stakeholders OR to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace. The HEP/department also DOES NOT facilitate student activities or organisations to encourage character building, inculcate a sense of belonging and responsibility, and promote active citizenship.
2	 The HEP/department has AT LEAST ONE of the following: Students are facilitated to develop linkages with external stakeholders AND to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace. Student activities and/or organisations are facilitated to encourage character building, inculcate a sense of belonging and responsibility, and promote active citizenship.
3	Students are facilitated to develop linkages with external stakeholders and to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace. Student activities and organisations are facilitated to encourage character building, inculcate a sense of belonging and responsibility, and promote active citizenship.
4	There are systematic and effective mechanisms provided for students to develop linkages with external stakeholders and to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace. Student activities and organisation are effectively facilitated to support the development of the desired character as envisaged by the HEP's graduate attributes.
5	There are dedicated platforms for students to develop sustainable linkages with external stakeholders and to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace. Student activities and organisation are well supported are well resourced, leading to good achievement of the HEP's graduate attributes.

- Documents of linkages with external stakeholders
- Student activities organised
- Evidence of linkages with external stakeholders such as Memorandum of Understanding (MOU)/ Memorandum of Agreement (MOA)

3.5 Alumni

Cluster 3.5A* contains Standard 3.5.1 *APPLICABLE FOR COMPLIANCE EVALUATION ONLY

(see note below)

Standard 3.5.1*

The department **must** foster active linkages with alumni to develop, review and continuously improve the programme.

Attainment Level Rubric (Cluster 3.5A*)

Attainment Level	Description
1	The HEP/department DOES NOT foster any linkage with <u>alumni</u> * to develop, review and continuously improve the programme.
2	The HEP/department DOES NOT consistently foster linkages with <u>alumni</u> * to develop, review and continuously improve the programme.
3	The department fosters active linkages with <u>alumni</u> * to develop, review and continuously improve the programme.
4	The department maintains consistent and effective linkages with <u>alumni</u> * by involving them in the development, review and continuously improvement of the programme.
5	With clear governance and processes as well as close monitoring, the department maintains sustainable linkages with <u>alumni</u> * in the development, review and continuously improvement of the programme.

Note: This standard is applicable for Compliance Evaluation (CE) only since it can be assessed after the programme produces at least one cohort of graduates, who will then become the "alumni" of the programme.

Example of Supporting Documents:

• Evidence of alumni's involvement in programme development, review and continuous quality improvement initiatives.

Area 4: Academic Staff

4.1 Recruitment and Management

Cluster 4.1A combines Standards 4.1.1, 4.1.3 and 4.1.4

Standard 4.1.1

The department **must** have a clearly defined plan for its academic manpower needs consistent with institutional policies and programme requirements.

Standard 4.1.3

The staff–student ratio³ for the programme **must** be appropriate to the teaching-learning methods and comply with the programme standards for the discipline.

(This standard must be read together with Guidelines: Academic Staff Workload)

Standard 4.1.4

The department **must** have adequate and qualified academic staff responsible for implementing the programme.

Attainment Level Rubric (Cluster 4.1A)

Attainment Level	Description
1	 The department/programme DOES NOT HAVE any of the following: A plan for its academic manpower needs. Adequate academic staff responsible for implementing the programme. The staff-student ratio appropriate to the teaching-learning methods and in compliance with the programme standards for the discipline.
2	 The department/programme has AT LEAST ONE of the following: A plan for its academic manpower needs. Adequate academic staff responsible for implementing the programme. The staff-student ratio appropriate to the teaching-learning methods and in compliance with the programme standards for the discipline.

³ In computing the staff-student ratio, the department must convert part-time staff to full-time equivalent using a normal full-time staff workload (hours per week).

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Attainment Level	Description
3	The department has a clearly defined plan for its academic manpower that is consistent with institutional policies and programme requirements, and has adequate and qualified academic staff and appropriate full-time and part-time ratio, with at least 60% are full-time staff. The staff-student ratio for the programme is appropriate to the teaching-learning methods and complies with the programme standards for the discipline.
4	The plan for the department's academic manpower, adequacy of qualified academic staff for implementing the programme and the programme's staff-student ratio are regularly evaluated and reviewed for continual improvement.
5	The department has demonstrated good and sustainable practices such as benchmarking towards enhancing the academic manpower plan and the programme's staff-student ratio.

- Data on staff-student ratio per programme/semester
- Table of staff qualification levels
- Percentage of staff with PhD
- Percentage of full-time staff and turnover rate
- Staff job description, terms of reference and key performance indicators
- Staff workload per semester
- Data showing trend of academic productivity

Cluster 4.1B combines Standards 4.1.2, 4.1.5, 4.1.6 and 4.1.7

Standard 4.1.2

The department **must** have a clear and documented academic staff recruitment policy where the criteria for selection are based primarily on academic merit and/or relevant experience.

Standard 4.1.5

The policy of the department **must** reflect an equitable distribution of responsibilities among the academic staff.

Standard 4.1.6

The recruitment policy for a particular programme **must** seek diversity among the academic staff in terms of experience, approaches and backgrounds.

Standard 4.1.7

Policies and procedures for recognition through promotion, salary increment or other remuneration **must** be clear, transparent and based on merit.

Attainment Level Rubric (Cluster 4.1B)

Attainment Level	Description
1	The department DOES NOT HAVE any of the following:
	 An academic staff recruitment policy with criteria selection based on academic merit, relevant experience or diversity among the staff.
	 An equitable distribution of responsibilities among the academic staff.
	 Policy or procedure for recognition through promotion and remuneration that is based on merit.
2	The department has AT LEAST ONE of the following:
	 An academic staff recruitment policy with criteria selection based on academic merit, relevant experience and/or diversity among the staff.
	 An equitable distribution of responsibilities among the academic staff.
	 Policies and/or procedures for recognition through promotion and remuneration that is based on merit.
3	The department has a clear and documented academic staff recruitment policy with criteria selection based on academic merit and/or relevant experience. The recruitment policy for a particular programme seeks diversity among staff in terms of experience, approaches and backgrounds.
	The implementation of these policies is reflected in an equitable distribution of responsibilities among the academic staff. The policies and procedures for recognition through promotion, salary increment or other remuneration are clear, transparent and based on merit.
4	The policies and procedures for the academic staff recruitment, recognition and rewards are evaluated and reviewed for continual improvement.
5	The department has demonstrated good and sustainable practices such as benchmarking towards enhancing the academic staff recruitment, recognition and rewards.

Example of Supporting Documents:

- HR Handbook/policies recruitment, promotion and appraisal
- HR Development and Strategy Plan and initiatives

• Performance analysis report and revised policies/procedures

Cluster 4.1C contains Standard 4.1.8

Standard 4.1.8

The department **must** have national and international linkages to provide for the involvement of experienced academics, professionals and practitioners in order to enhance teaching and learning in the programme.

Attainment Level Rubric (Cluster 4.1C)

Attainment Level	Description
1	The department DOES NOT HAVE national and/or international linkages to provide for the involvement of experienced academics, professionals and practitioners in order to enhance teaching and learning in the programme.
2	The department has LIMITED national and/or international linkages to provide for the involvement of experienced academics, professionals and practitioners in order to enhance teaching and learning in the programme.
3	The department has national and international linkages to provide for the involvement of experienced academics, professionals and practitioners in order to enhance teaching and learning in the programme.
4	The established linkages are regularly evaluated and reviewed to maintain their effectiveness.
5	The department has demonstrated good and sustainable practices, such as benchmarking towards enhancing the linkages.

Example of Supporting Documents:

 Evidence representing national and/or international collaborative efforts such as Memorandum of Understanding (MOU)/ Memorandum of Agreement (MOA) on enhancement of teaching and learning in programme.

4.2 Service and Development

Cluster 4.2A combines Standards 4.2.1, 4.2.3 and 4.2.4

Standard 4.2.1

The department **must** have policies addressing matters related to service, development and appraisal of the academic staff.

Standard 4.2.3

The HEP **must** have clear policies on conflict of interest and professional conduct, including procedures for handling disciplinary cases among academic staff.

Standard 4.2.4

The HEP **must** have mechanisms and processes for periodic student evaluation of the academic staff for quality improvement.

Attainment Level Rubric (Cluster 4.2A)

Attainment Level	Description
1	The HEP/department DOES NOT HAVE any of the following:
	 Policy addressing matters related to service, development and appraisal of the academic staff. Policy on conflict of interest and professional conduct. Mechanism or process for periodic student evaluation of the academic staff for quality improvement.
2	The HEP/department has AT LEAST ONE of the following:
	 Policy addressing matters related to service, development and appraisal of the academic staff. Policy on conflict of interest and professional conduct. Mechanism and/or process for periodic student evaluation of the academic staff for quality improvement.
3	The department has policies addressing matters related to service, development and appraisal of the academic staff.
	The HEP has clear policies on conflict of interest and professional conduct, including procedures for handling disciplinary cases among academic staff, as well as mechanisms and processes for periodic student evaluation of the academic staff for quality improvement.

Attainment Level	Description
4	The policies on service, development and appraisal of the academic staff, and on conflict of interest and professional conduct as well as mechanisms and processes for periodic student evaluation of the academic staff are regularly evaluated and reviewed for continual improvement to maintain their effectiveness.
5	The HEP/department has demonstrated good and sustainable practices, such as benchmarking towards enhancing policies on service, development and appraisal of the academic staff, and on conflict of interest and professional conduct as well as mechanisms and processes for periodic student evaluation of the academic staff.

- Policy on academic integrity including plagiarism, and research ethics, disciplinary cases.
- Analysis of Annual Appraisal Report
- Staff Awards research, teaching, publication, etc.
- Statistics on staff promotion

Cluster 4.2B combines Standards 4.2.2, 4.2.5, 4.2.6 and 4.2.7

Standard 4.2.2

The department **must** provide opportunities for academic staff to focus on their respective areas of expertise.

Standard 4.2.5

The department **must** have a development programme for new academic staff and continuous professional enhancement for existing staff.

Standard 4.2.6

The HEP **must** provide opportunities for academic staff to participate in professional, academic and other relevant activities, at national and international levels to obtain professional qualifications to enhance teaching-learning experience.

Standard 4.2.7

The department **must** encourage and facilitate its academic staff to play an active role in community and industry engagement activities.

Attainment Level Rubric (Cluster 4.2B)

Attainment Level	Description
1	 The HEP/department DOES NOT HAVE or provide any of the following: Opportunities for academic staff to focus on their respective areas of expertise. A development programme for new academic staff and continuous professional enhancement for existing staff. Opportunities for academic staff to participate in professional, academic and other relevant activities, at national and international levels to obtain professional qualifications to enhance teaching-learning experience. Encouragement and facilitation for its academic staff to play an active role in community and industry engagement activities.
2	 The HEP/department has or provides AT LEAST ONE of the following: Opportunities for academic staff to focus on their respective areas of expertise. A development programme for new academic staff and continuous professional enhancement for existing staff. Opportunities for academic staff to participate in professional, academic and other relevant activities, at national and international levels to obtain professional qualifications to enhance teaching-learning experience. Encouragement and facilitation for its academic staff to play an active role in community and industry engagement activities.
3	The department provides opportunities for academic staff to focus on their respective areas of expertise, and has a development programme for new academic staff and continuous professional enhancement for existing staff. It also encourages and facilitates its academic staff to play an active role in community and industry engagement activities. The HEP provides opportunities for academic staff to participate in professional, academic and other relevant activities, at national and international levels to obtain professional qualifications to enhance teaching-learning experience.
4	The HEP/department regularly evaluates and reviews for continual improvement of the development programmes for academic staff and the policy for their continuous professional enhancement in order maintain their effectiveness.
5	The HEP/department has demonstrated good and sustainable practices, such as benchmarking towards enhancing the development programmes for academic staff and the policy for their continuous professional enhancement.

- List of trainings offered to staff based on needs analysis
- Data on staff active in research external grant, publication, postgraduate students, collaboration/linkages with other institution/industry
- Data on staff professional membership and external engagement
- Evidence of support given for participation in community and industry engagement activities

Area 5: Educational Resources

5.1 Physical Facilities

Cluster 5.1A combines Standards 5.1.1, 5.1.2 and 5.1.4

Standard 5.1.1

The programme **must** have sufficient and appropriate physical facilities and educational resources to ensure its effective delivery, including facilities for practical-based programmes and for those with special needs.

Standard 5.1.2

The physical facilities **must** comply with the relevant laws and regulations.

Standard 5.1.4

The educational resources, services and facilities **must** be maintained and periodically reviewed to improve the quality and appropriateness.

Attainment Level Rubric (Cluster 5.1A)

Attainment Level	Description
1	 The programme DOES NOT HAVE or FULFILL any of the following: Physical facilities and educational resources for programme delivery. The physical facilities comply with the relevant laws and regulations. The educational resources, services and facilities are maintained to improve the quality and appropriateness.
2	 The programme has or fulfills AT LEAST ONE of the following: Physical facilities and educational resources for programme delivery. The physical facilities comply with the relevant laws and regulations. The educational resources, services and facilities are maintained to improve the quality and appropriateness.

Attainment Level	Description
3	The programme has sufficient and appropriate physical facilities and educational resources, that comply with the relevant laws and regulations, to ensure its effective delivery, including facilities for practical-based programmes and for those with special needs. The educational resources, services and facilities are maintained and periodically reviewed to improve the quality and appropriateness.
4	The physical facilities and the educational resources, services and facilities provide quality services, demonstrated by high satisfaction level by the respective users or customers.
5	The physical facilities and the educational resources, services and facilities are benchmarked with and/or certified/recognised by external parties.

- List of physical facilities required for the programme.
- List of license certificates or related documents for software and eContent applications used by the programme
- Evidence of maintenance and periodical review of education resources, services and facilities.

Cluster 5.1B contains Standard 5.1.3

Standard 5.1.3

The library or resource centre **must** have adequate and up-to-date reference materials and qualified staff that meet the needs of the programme and research amongst academic staff and students.

Attainment Level Rubric (Cluster 5.1B)

Attainment Level	Description
1	The library or resource centre DOES NOT HAVE any of the following:
	 Adequate and/or up-to-date reference materials. Qualified staff that meet the needs of the programme or research amongst academic staff and students.

Attainment Level	Description
2	 The library or resource centre has AT LEAST ONE of the following: Adequate and/or up-to-date reference materials. Qualified staff that meet the needs of the programme and/or research amongst academic staff and students.
3	The library or resource centre has adequate and up-to-date reference materials and qualified staff that meets the needs of the programme and research amongst academic staff and students
4	The library or resource centre has comprehensive and up-to-date reference materials and provides services that effectively meets all needs of the programme and research amongst academic staff and students
5	The library or resource centre is benchmarked for currency and relevance of its services and/or certified/recognised by external parties.

- Library and resource centre facilities
- Database system used in the library and resource centre
- Number of staff in the library and resource centre and their qualifications.

5.2 Research and Development

Cluster 5.2A* contains Standard 5.2.1 and 5.2.3
*LARGELY DIRECTED TO UNIVERSITIES AND UNIVERSITY
COLLEGES ONLY

Standard 5.2.1

The department **must** have a research policy with adequate facilities and resources to sustain them.

Standard 5.2.3

The department **must** periodically review its research resources and facilities and take appropriate action to enhance its research capabilities and to promote a conducive research environment.

Attainment Level Rubric (Cluster 5.2A)

Attainment Level	Description
1	The department DOES NOT HAVE a research policy and inadequate facilities and resources to sustain them.
2	The department has a research policy but has INADEQUATE facilities and resources to sustain them. The policy may be periodically reviewed but with ineffective action to improve its research capabilities.
3	The department has a research policy with adequate facilities and resources to sustain them. The policy is periodically reviewed and appropriate action is taken to enhance its research capabilities and to promote a conducive research environment.
4	Through the implementation of its research policy, the department enhances its capability in producing research outputs and innovations.
5	The implementation of its research policy has led the department gaining recognitions good reputation on its achievements in research and innovation.

Example of Supporting Documents:

- Research policy
- Evidence of periodically review of research resources and facilities

Cluster 5.2B contains Standard 5.2.2

Standard 5.2.2

The interaction between research and learning **must** be reflected in the curriculum, influence current teaching, and encourage and prepare students for engagement in research, scholarship and development.

Attainment Level Rubric (Cluster 5.2B)

Attainment Level	Description
1	There is NO interaction between research and learning; that is clearly reflected in the curriculum, influence current teaching, or DOES NOT encourage or prepare students for engagement in research, scholarship and development.

Attainment Level	Description
2	There is LIMITED interaction between research and learning, which is NOT clearly reflected in the curriculum, influence current teaching, or DOES NOT encourage or prepare students for engagement in research, scholarship and development.
3	The interaction between research and learning is reflected in the curriculum, influences current teaching, and encourages and prepares students for engagement in research, scholarship and development.
4	There are effective interactions between research and learning that are reflected in the curriculum, influenced current teaching, and managed to encourage students for an active engagement in research, scholarship and development, which improve student learning experience or increase the research and innovation outputs.
5	The constructive and well-connected interaction between research and learning as reflected in the curriculum delivery, leads to a good synergy between research and learning in the programme delivery.

 Documents showing interaction between research and learning reflected in the curriculum, teaching and learning and engaging students in research, scholarship and development.

5.3 Financial Resources

Cluster 5.3A combines Standards 5.3.1, 5.3.2 and 5.3.3

Standard 5.3.1

The HEP **must** demonstrate financial viability and sustainability for the programme.

Standard 5.3.2

The department **must** have clear procedures to ensure that its financial resources are sufficient and managed efficiently.

Standard 5.3.3

The HEP **must** have a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of the department.

Attainment Level Rubric (Cluster 5.3A)

Attainment Level	Description
1	 The HEP/department DOES NOT have, or is NOT ABLE to demonstrate, any of the following: Financial viability or sustainability for the programme. Procedures at the department level to manage its financial resources. A clear line of responsibility and authority for budgeting or resource allocation that takes into account the specific needs of the department.
2	 The HEP/department has or is able to demonstrate AT LEAST ONE of the following: Financial viability and/or sustainability for the programme. Procedures at the department level to manage its financial resources. A clear line of responsibility and authority for budgeting and/or resource allocation that takes into account the specific needs of the department.
3	The HEP demonstrates financial viability and sustainability for the programme, and has a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of the department. The department has clear procedures to ensure that its financial resources are sufficient and managed efficiently.
4	With clear procedures for management of its financial resources and clear line of responsibility and authority for budgeting and resource allocation that takes into account is specific needs, the department manages its financial resources efficiently and effectively to ensure that all the programme needs are met.
5	The department's business model is implemented successfully in ensuring that the programme is well-resourced, leading to its financial sustainability.

Example of Supporting Documents:

- Audited financial statements or certified supporting documents for the last three consecutive years
- Allocation of funds for training and education activities.

Area 6: Programme Management

6.1 Programme Management

Cluster 6.1A combines Standards 6.1.1 and 6.1.3

Standard 6.1.1

The department **must** clarify its management structure and function, and the relationships between them, and these must be communicated to all parties involved based on the principles of responsibility, accountability and transparency.

Standard 6.1.3

The department **must** have policies, procedures and mechanisms for regular review and updating of its structures, functions, strategies and core activities to ensure continual quality improvement.

Attainment Level Rubric (Cluster 6.1A)

Attainment Level	Description
1	The department DOES NOT HAVE any of the following:
	 Clear management structure or function, or the relationships between them, which are communicated to relevant parties involved based on the principles of responsibility, accountability and transparency. Policy, procedure or mechanism for review and updating of its structures, functions, strategies or core activities for continual quality improvement.
2	The department has AT LEAST ONE of the following:
	 Clear management structure and/or function, and/or the relationships between them, which are communicated to relevant parties involved based on the principles of responsibility, accountability and transparency. Policies, procedures and/or mechanisms for review and updating of its structures, functions, strategies and/or core activities for continual quality improvement.

Attainment Level	Description
3	The department has a clear management structure and function, and the relationships between them, which are communicated to all parties involved based on the principles of responsibility, accountability and transparency. There are policies, procedures and mechanisms for regular review and updating of its structures, functions, strategies and core activities to ensure continual quality improvement.
4	The department clarifies its management structure and function and the relationships between them and periodically communicated the updated structures and functions to the stakeholders and all parties involved. The department has excellent policies, procedures, and mechanisms for regular review and updating of its structures, functions, strategies, and core activities evident from the culture of continual quality improvement.
5	The department clarifies its management structure and function and relationship bet them and periodically communicated the updated structures and functions to the stakeholders and all parties involved. The dept has excellent policies, procedures, and mechanisms for regular review and updating of its structures, functions, strategies, and core activities which is benchmarked by others.

- Organisational and governance charts.
- Documents or policies on HEP's governance and quality management systems.

Cluster 6.1B contains Standard 6.1.2

Standard 6.1.2

The department **must** provide accurate, relevant and timely information about the programme which are easily and publicly accessible, especially to prospective students.

Attainment Level Rubric (Cluster 6.1B)

Attainment Level	Description
1	The department DOES NOT provide information about the programme, especially to prospective students.

Attainment Level	Description
2	The department provides LIMITED information about the programme, especially to prospective students.
3	The department provides accurate, relevant and timely information about the programme which is easily and publicly accessible, especially to prospective students.
4	The information about the programme that is publicly accessible, including to prospective students, has been regularly updated, with updates clearly identified/highlighted.
5	The information about the programme that are publicly accessible, including to prospective students, has sustained/increased the enrolment of students to the programme.

• Publicly disseminated information on website or any other digital and/or conventional platform to prospective students.

Cluster 6.1C contains Standard 6.1.4

Standard 6.1.4

The academic board of the department **must** be an effective decision-making body with an adequate degree of autonomy.

Attainment Level Rubric (Cluster 6.1C)

Attainment Level	Description
1	The department has NO academic board as a decision-making body.
2	The department has an academic board as a decision-making body with LIMITED scope within the given degree of autonomy.
3	The academic board of the department is an effective decision-making body with an adequate degree of autonomy.
4	The decisions made in the academic board are duly recorded and conveyed to relevant parties in a timely manner and actions needed are systematically followed through.
5	Decisions made in the academic board includes matters relating to actions needed to address current and future needs.

- Appointment letters for academic board of the department signed by designated authority.
- Terms of reference for the appointment.
- Minutes of meeting of the HEP/department academic board.

Cluster 6.1D* contains Standard 6.1.5
*APPLICABLE FOR PROGRAMMES CONDUCTED IN DIFFERENT
CAMPUSES OR PARTNER INSTITUTIONS ONLY (see note below)

Standard 6.1.5*

Mechanisms to ensure functional integration and comparability of educational quality **must** be established for programmes conducted in different campuses or partner institutions.

(This standard must be read together with standard 7.1.7 in Area 7, COPPA)

Attainment Level Rubric (Cluster 6.1D*)

Attainment Level	Description
1	There is NO mechanism for functional integration and comparability of educational quality for programmes <u>conducted in different campuses or partner institutions</u> *.
2	There are LIMITED established mechanisms that allow functional integration and comparability of educational quality for programmes conducted in different campuses or partner institutions*.
3	Mechanisms to ensure functional integration and comparability of educational quality are established for programmes conducted in different campuses or partner institutions*.
4	There is regular review of the procedures for effective functional integration and comparable educational quality for programmes conducted in different campuses or partner institutions*.
5	Review of the procedures for functional integration and comparability of educational quality for programmes <u>conducted in different campuses or partner institutions</u> * is undertaken by involving stakeholder consultation and benchmarking.

Note: The term "conducted in different campuses or partner institutions" in Standard 6.1.5 is applicable only for programme implemented in different campuses within the same HEP or in partner institutions. Therefore, this standard is only applicable for Full Accreditation (FA) and

Compliance Evaluation (CE) if the HEP/department has arrangements with its collaborative partners in implementing the programme.

Example of Supporting Documents:

- Document outlining governance of programmes at different locations
- Appointment of person-in-charge together with terms of reference and limits of authority
- Documents related to coordination activities of programmes at different locations
- Internal audit mechanisms and reports on QA of programmes at different locations

Cluster 6.1E* contains Standard 6.1.6 *APPLICABLE FOR FULL ACCREDITATION WITH LIMITED SCOPE (see note below)

Standard 6.1.6*

The department **must** conduct internal and external consultations, and market needs and graduate employability analyses.

Attainment Level Rubric (Cluster 6.1E*)

Attainment Level	Description
1	The department DOES NOT conduct internal or external consultations, and/or market needs and graduate employability analyses*.
2	The department conducts internal and/or external consultations, but DOES NOT carry out adequate market needs and <u>graduate</u> <u>employability analyses</u> *.
3	The department conducts internal and external consultations, and market needs and graduate employability analyses*.
4	The regular internal and external consultations have resulted in the programme maintaining its competitiveness.
5	The regular internal and external consultations as well as <u>graduate</u> <u>employability analyses</u> * have resulted in improved graduate attributes.

Note: The term "graduate employability analyses" in Standard 6.1.6 is applicable only for Compliance Evaluation (CE) since such analyses could only be carried out after the programme produces at least one cohort of graduates. Therefore, the evaluation of this standard during Full Accreditation (FA) should be limited not to include graduate employability analyses.

- Reports/minutes of meeting of engagements with internal/external stakeholders.
- Analysis report and action plan on graduate employability.
- Market analysis and report on relevancy of the programme.

6.2 Programme Leadership

Cluster 6.2A combines Standards 6.2.1 and 6.2.2

Standard 6.2.1

The criteria for the appointment and responsibilities of the programme leader **must** be clearly stated.

Standard 6.2.2

The programme leader **must** have appropriate qualification, knowledge and experiences related to the programme he/she is responsible for.

Attainment Level Rubric (Cluster 6.2A)

Attainment Level	Description
1	There is NO criterion for the appointment and responsibilities of the programme leader AND NO appointment of a qualified programme leader.
2	The criteria for the appointment and/or responsibilities of the programme leader is NOT CLEARLY stated, and/or the appointed programme leader DOES NOT have the qualification, knowledge and experiences related to the programme he/she is responsible for.
3	The criteria for the appointment and the responsibilities of the programme leader are clearly stated, with the programme leader having appropriate qualifications, knowledge and experiences related to the programme he/she is responsible for.
4	The criteria and the responsibilities of the programme leader are reviewed regularly, and the programme leader has been engaging with continuous professional development in areas related to programme management.

Attainment Level	Description
5	The review of the criteria and the responsibilities of the programme leader involves benchmarking, updating the curriculum with regulators' requirement and employing good practices from other institutions. In addition, the programme leader is recognised and referred to with regards to curriculum development and delivery.

- Appointment criteria for programme leader
- Job description, list of duties and responsibilities of programme leader
- CV of programme leader

Cluster 6.2B contains Standard 6.2.3

Standard 6.2.3

There **must** be mechanisms and processes for communication between the programme leader, department and HEP on matters such as staff recruitment and training, student admission, allocation of resources and decision-making processes.

Attainment Level Rubric (Cluster 6.2B)

Attainment Level	Description
1	There is NO mechanism or process for communication between the programme leader, department and HEP on matters such as staff recruitment and training, student admission, allocation of resources and decision-making processes.
2	There are LIMITED mechanisms and/or processes for communication between the programme leader, department and HEP in relation to, among others, staff recruitment and training, student admission, allocation of resources and decision-making processes.
3	There are mechanisms and processes for communication between the programme leader, department and HEP on matters such as staff recruitment and training, student admission, allocation of resources and decision-making processes.

Attainment Level	Description
4	The mechanisms and processes for communication between the programme leader, department and HEP on matters such as staff recruitment and training, student admission, allocation of resources and decision-making processes are evaluated and reviewed, resulting in a more effective communication between them.
5	The effective mechanisms and processes for communication between the programme leader, department and HEP on matters such as staff recruitment and training, student admission, allocation of resources and decision-making processes, results in enculturation of continual quality improvement.

- Evidence / document / excerpts of planning for staff recruitment and training
- Evidence / document / excerpts on student admission
- Evidence / document / excerpts on allocation of resources
- HEP's communication plan

6.3 Administrative Staff

Cluster 6.3A combines Standards 6.3.1, 6.3.2 and 6.3.3

Standard 6.3.1

The department **must** have sufficient number of qualified administrative staff to support the implementation of the programme and related activities.

Standard 6.3.2

The HEP **must** conduct regular performance review of the administrative staff of the programme.

Standard 6.3.3

The department **must** have an appropriate training scheme for the advancement of the administrative staff as well as to fulfil the specific needs of the programme.

Attainment Level Rubric (Cluster 6.3A)

Attainment Level	Description
1	The HEP/department DOES NOT have any of the following:

Attainment Level	Description
	 Sufficient number of qualified administrative staff to support the implementation of the programme and related activities. Conduct performance review of the administrative staff of the programme. A training scheme for the advancement of the administrative staff.
2	 The HEP/department has AT LEAST ONE of the following: Sufficient number of qualified administrative staff to support the implementation of the programme and related activities. Conduct performance review of the administrative staff of the programme. A training scheme for the advancement of the administrative staff.
3	The HEP/department has sufficient number of qualified administrative staff to support the implementation of the programme and related activities. The staff are subjected to regular performance review conducted by the HEP. There is also an appropriate training scheme for the advancement of the staff as well as to fulfil the specific needs of the programme.
4	There is a well-developed training scheme for the advancement of the staff that would motivate them to be resourceful, resulting in improved performance and increasing their capability in meeting their job description and key performance indicators.
5	There is a comprehensive training scheme for the advancement of the staff, which is regularly reviewed and continually improved, that would motivate them to be innovative and inspire others, leading to superior performance.

- List or appointment/assignment letter of the administrative staff of the programme.
- Training and development plans of the administrative staff of the programme.
- Records of annual performance review or appraisal for the administrative staff of the programme.

6.4 Academic Records

Cluster 6.4A combines Standards 6.4.1, 6.4.2, 6.4.3 and 6.4.4

Standard 6.4.1

The department **must** have appropriate policies and practices concerning the nature, content and security of student, academic staff and other academic records.

Standard 6.4.2

The department **must** maintain student records relating to their admission, performance, completion and graduation in such form as is practical and preserve these records for future reference.

Standard 6.4.3

The department **must** implement policies on the rights of individual privacy and the confidentiality of records.

Standard 6.4.4

The department **must** continually review policies on the security of records, including the increased use of electronic technologies and safety systems.

Attainment Level Rubric (Cluster 6.4A)

Attainment Level	Description
1	 The department DOES NOT have or implement any of the following: Policy or practice concerning the nature, content and security of student, academic staff or other academic records; Maintenance of student records relating to their admission, performance, completion or graduation; Policy on the rights of individual privacy or the confidentiality of records.
2	 The department has or implements AT LEAST ONE of the following: Policies and/or practices concerning the nature, content and security of student, academic staff and/or other academic records; Maintenance of student records relating to their admission, performance, completion and/or graduation; Policies on the rights of individual privacy and/or the confidentiality of records.

Attainment Level	Description
3	The department has appropriate policies and practices concerning the nature, content and security of student, academic staff and other academic records, maintain student records relating to their admission, performance, completion and graduation and preserve these records for future reference. There are policies on the rights of individual privacy and the confidentiality of records implemented. The policies on the security of records are continually reviewed, including the increased use of electronic technologies and safety systems.
4	The department has and implements policies and practices concerning the nature, content and security of student, academic staff and other academic records, including policies on the rights of individual privacy and the confidentiality of records. These records are well-maintained and preserved, and the policies are continually reviewed to ensure that the systems and technologies are always secured in protecting the records, and their risks are identified and well managed.
5	The student, academic staff and other academic records are recoverable in the events of loss and disaster, the storage and archives are reliable, and the policies are continually reviewed to ensure the use of up-to-date technologies and systems to protect the records.

- HEP's policies on security of documents, individual information, data and confidential records.
- HEP's quality management or quality assurance systems (manuals and/or selected documented procedures).
- HEP's and/or department's staff, student and academic records/information systems (manuals and/or selected documented procedures).
- HEP's and/or department's risk assessment/treatment plans for information systems and data security.

Area 7: Programme Monitoring, Review and Continual Quality Improvement

7.1 Mechanisms for Programme Monitoring, Review and Continual Quality Improvement

Cluster 7.1A combines Standards 7.1.1 and 7.1.3

Standard 7.1.1

The department **must** have clear policies and appropriate mechanisms for regular monitoring and review of the programme.

Standard 7.1.3

The department **must** have an internal programme monitoring and review committee with a designated head responsible for continual review of the programme to ensure its currency and relevancy.

Attainment Level Rubric (Cluster 7.1A)

Attainment Level	Description
1	The department DOES NOT HAVE any policy and mechanism for regular monitoring and review of the programme. There is NO internal programme monitoring and review committee for continual review of the programme.
2	The department has UNCLEAR policies for regular monitoring and review of the programme AND/OR INAPPROPRIATE mechanisms for regular monitoring and review the programme.
3	The department has clear policies and appropriate mechanisms for regular monitoring and review of the programme and has an internal programme monitoring and review committee with a designated head responsible for continual review of the programme to ensure its currency and relevance.
4	Guided by clear policies and documented guidelines and/or procedures for monitoring and review of the programme, the department, through its internal monitoring and review committee, performs regular programme monitoring and review to ensure its currency and relevance.

Attainment Level	Description
5	Guided by clear policies and documented guidelines, procedures and/or plans for monitoring and review of the programme, the department, through its internal monitoring and review committee, performs thematic and/or overall programme monitoring and review at periodical intervals with action plans for continuous improvement to ensure currency and relevance of the programme.

- HEP's policies and documented procedures for regular monitoring and review of the academic programmes.
- List or appointment letters of the head and the members of the internal programme monitoring and review committee.
- Meeting minutes of the internal programme monitoring and review committee

Cluster 7.1B combines Standards 7.1.2 and 7.1.9

Standard 7.1.2

The department **must** have a Quality Assurance (QA) unit for internal quality assurance of the department to work hand-in-hand with the QA unit of the HEP.

Standard 7.1.9

There **must** be an integral link between the departmental quality assurance processes and the achievement of the institutional purpose.

Attainment Level Rubric (Cluster 7.1B)

Attainment Level	Description
1	The department DOES NOT HAVE a Quality Assurance (QA) unit for internal quality assurance of the department to work hand-in-hand with the QA unit of the HEP. There is NO link between the departmental quality assurance processes and the achievement of the institutional purpose.
2	The department forms an AD HOC Quality Assurance (QA) unit for internal quality assurance of the department that does not always work with the QA unit of the HEP. There is INCOHERENT link between the departmental quality assurance processes and the achievement of the institutional purpose.

Attainment Level	Description
3	The department has a Quality Assurance (QA) unit for internal quality assurance of the department to work hand-in-hand with the QA unit of the HEP, where this provides an integral link between the departmental quality assurance processes and the achievement of the institutional purpose.
4	The department's Quality Assurance (QA) forms an integrated link with the HEP's QA unit to provide smooth coordination between the departmental quality assurance processes and the achievement of the institutional purpose.
5	The department's Quality Assurance (QA), led by a certified QA officer, manages to foster an integrated link with the HEP's QA unit has provided smooth coordination and synergy between, resulting in a more sustainable IQA ecosystem of the HEP, which is benchmarked or recognised by other institutions and external parties.

- HEP's organisation chart showing the position of its QA unit.
- Department's organisation chart showing the position of its QA unit.
- List or appointment/assignment letters of the head and personnel/staff of the department's QA unit/role.
- · Meeting minutes of the department's QA unit.
- HEP's and/or Department's QA or quality reports.

Cluster 7.1C* combines Standards 7.1.4 and 7.1.5 *APPLICABLE FOR FULL ACCREDITATION WITH LIMITED SCOPE (see note below)

Standard 7.1.4*

The department's review system **must** constructively engage stakeholders, including the alumni and employers as well as the external experts, whose views are taken into consideration.

Standard 7.1.5

The department **must** make the programme review report accessible to stakeholders.

Attainment Level Rubric (Cluster 7.1C*)

Attainment Level	Description
1	The department's review system DOES NOT engage stakeholders, and the programme review report is NOT shared with them.
2	The department's review system engages stakeholders, which may include the <u>alumni</u> *, <u>employers</u> * or external experts, whose views may be taken into consideration, and LIMITED content of the programme review report may be shared with them. However, the practice is NOT CONSISTENT .
3	The department's review system constructively engages stakeholders, including the <u>alumni</u> * and <u>employers</u> * as well as the external experts, whose views are taken into consideration, and the programme review report is made accessible to them.
4	The department's review system constructively engages all relevant stakeholders, whose views are taken into consideration. Their views have been considered in curriculum review.
5	The department's review system engages a wider spectrum of stakeholders, and their collective views have contributed to improvement of the graduate attributes.

Note: As the term "alumni" and "employers" refer to the graduates of the programme and their employers, respectively, Standard 7.1.4 can be evaluated in totality during Compliance Evaluation (CE). Hence, the scope of Standard 7.1.4 for the Full Accreditation (FA) should not include engagements with the alumni and employers. On the contrary, Standard 7.1.5 is applicable for both FA and CE as per statement.

Example of Supporting Documents:

- List or appointment letters of members of programme advisory panel (PAP) among external experts, alumni, employers and/or from industry/stakeholder representatives.
- Minutes of meetings between the HEP/department and the PAP.
- Working paper of the curriculum review and approval by HEP's Senate/Academic Board.
- Report from Industrial Advisory Panel (IAP) / External Examiner (EE)
- Report on action taken by programme on recommendations by IAP/EE

Cluster 7.1D* combines Standards 7.1.6 and 7.1.8 *APPLICABLE FOR FULL ACCREDITATION WITH LIMITED SCOPE

(see note below)

Standard 7.1.6*

Various aspects of student performance, progression, attrition, graduation and employment **must** be analysed for the purpose of continual quality improvement.

Standard 7.1.8

The findings of a programme review **must** be presented to the HEP for its attention and further action.

Attainment Level Rubric (Cluster 7.1D*)

Attainment Level	Description
1	The department DOES NOT perform any of the following:
	 Analysing aspects of student performance, progression, attrition, graduation* or employment*; Presenting the findings of a programme review to the HEP.
2	The department performs AT LEAST ONE of the following:
	 Analysing various aspects of student performance, progression, attrition, <u>graduation</u>* and/or <u>employment</u>*; Presenting the findings of a programme review to the HEP.
3	Various aspects of student performance, progression, attrition, graduation* and employment* are analysed for the purpose of continual quality improvement, and the findings of the review are presented to the HEP for its attention and further action.
4	Various aspects of programme assessment not limited to student performance, progression, attrition, graduation* and employment* are analysed for the purpose of continual quality improvement.
5	Various aspects of programme assessment not limited to student performance, progression, attrition, <u>graduation</u> * and <u>employment</u> * are analysed for the purpose of continual quality improvement and quality enhancement, leading to good or best practices.

Note: As the analyses on "graduation" and "employment" could only be performed after the first cohort of the programme graduates, who then enter into employment afterwards, Standard 7.1.6 can be assessed and evaluated in totality during Compliance Evaluation (CE) only. Hence, the scope of Standard 7.1.6 for the Full Accreditation (FA) should be limited to analyses on student performance, progression and attrition only. On the contrary, Standard 7.1.8 is applicable for both FA and CE as per statement.

- Meeting minutes of the internal programme monitoring and review committee.
- Programme monitoring and assessment review, programme periodical reports (semesterly, annually or based on programme's own cycle or HEP's QA cycle), including self-review/assessment reports.
- Programme's action plans and/or quality improvement reports.

Cluster 7.1E* contains Standard 7.1.7 *APPLICABLE FOR PROGRAMMES WITH COLLABORATIVE ARRANGEMENTS ONLY (see note below)

Standard 7.1.7*

In collaborative arrangements, the partners involved **must** share the responsibilities of programme monitoring and review.

(This standard must be read together with standard 6.1.5 in Area 6, COPPA)

Attainment Level Rubric (Cluster 7.1E*)

Attainment Level	Description
1	In <u>collaborative arrangements</u> *, the partners DO NOT involve or are not given any responsibility in programme monitoring and review.
2	In <u>collaborative arrangements</u> *, the partners involved SOME but INSIGNIFICANT responsibility, such as providing data only, in programme monitoring and review.
3	In <u>collaborative arrangements</u> *, the partners involved share the responsibilities of programme monitoring and review.
4	In <u>collaborative arrangements</u> *, the partners involved participate actively in programme monitoring and review.
5	In <u>collaborative arrangements</u> *, the partners involved participate responsibly in programme monitoring and review, including implementation and joint monitoring of action plans.

Note: The term "collaborative arrangements" in Standard 7.1.7 is applicable only for programme implemented with collaborative partners, such as joint-degree and dual-degree programmes. Therefore, this standard is only applicable for Full Accreditation (FA) and Compliance Evaluation (CE) if the HEP/department has arrangements with its collaborative partners in implementing the programme.

- Legal documents such as MOU or MOA with the collaborative partners, including clauses in MOU/MOA and supplementary documents outlining the partner's responsibilities in programme monitoring and review.
- Meeting minutes of the internal programme monitoring and review committee.
- Programme's action plans and/or quality improvement reports.

Section 4

Methodology for Ratings and Final Recommendation

4.1 General Framework

The COPPA document contains **98 standards** which need to be fulfilled by an academic programme undergoing an accreditation process. For the purpose of document preparation and evaluation, only 48 standards are applicable for Provisional Accreditation; 97 standards for Full Accreditation and all 98 standards for Compliance Evaluation.

In general, each standard or cluster of standards shall be evaluated and given an attainment level (AL) between 1 to 5, with AL 3 designated as the baseline attainment in fulfilling the standard. The determination of the appropriate AL during an evaluation of a standard or a cluster of standards should be based on incremental fulfilment. In this manner, a higher AL should only be considered after all the lower AL have been fulfilled. Based on this principle, the standards and clusters of standards listed in Section 2 and Section 3 shall be determined accordingly.

In order to maintain consistency between the content of the report and the AL ratings given for all standards or clusters of standards, the values shall correspond to the level of findings classified in the form of commendations, affirmations, recommendations and suggestions for improvement. As such, a commendation should be reflected with an AL 5. Likewise, an AL of 1 or 2 could correspond to a recommendation due to non-fulfilment of a standard or cluster of standards. In doing so, the validity and reliability of the ratings can be maintained, and their consistency with the content of the report and the findings can be ensured.

4.2 Methodology for Computing an Overall Attainment for Provisional Accreditation

The calculation of the overall attainment starts by assigning all the standards and clusters of standards with values of 1-3. Denoting the attainment level for the ith standard or cluster of standards for Area j as $\mathrm{AL}_{i,j}$, the average attainment level of Area j, $\overline{\mathrm{AL}}_j$, can be calculated as follows:

$$\overline{\mathrm{AL}}_{j} = \sum_{i=1}^{m_{j}} \mathrm{AL}_{i,j} \tag{i}$$

where m_i is the total number of standards and clusters of standards in Area j.

To compute the overall attainment, \overline{AL} , the seven values of the average attainment level for all areas of evaluation calculated using Equation (i) can be combined with their respective weights using the following formula:

$$\overline{\overline{AL}} (\%) = \left(\frac{1}{30} \sum_{j=1}^{n} w_j \cdot \overline{AL}_j\right) \times 100\% = \left[\frac{1}{30} \sum_{j=1}^{n} w_j \cdot \left(\sum_{i=1}^{m_j} AL_{i,j}\right)\right] \times 100\%$$
 (ii)

where n is the total number of areas, which is equal to 7, and the weights, w_j , can be referred to Table 4.1 for each area j.

Table 4.1: List of areas of evaluation and weights for the overall attainment (Provisional Accreditation)

Area of Evaluation	Number of Standards	Number of Applicable Standards	Number of Clusters, m_j	Weights, w_j
Area 1: Programme Design and Delivery	17	11	6	2.5
Area 2: Assessment of Student Learning	11	6	5	2.5
Area 3: Student Selection and Support Services	20	7	6	1.0
Area 4: Academic Staff	15	6	3	1.0
Area 5: Educational Resources	10	6	2	1.0
Area 6: Programme Management	16	7	4	1.0
Area 7: Programme Monitoring, Review and Continual Quality Improvement	9	4	3	1.0
Total	98	47	29	10.0

The overall attainment computed using Equation (ii) can be used for consideration of the final recommendation for the accreditation decision. The consideration for the final recommendation can also take into account the holistic evaluation of all areas which is best represented by a radar graph illustrated in Figure 4.1.

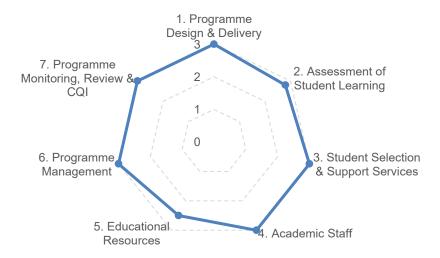


Figure 4.1: A radar graph for holistic evaluation for programme achievement in all areas for Provisional Accreditation

4.3 Methodology for Computing an Overall Attainment for Full Accreditation and Compliance Evaluation

The calculation of the overall attainment starts by assigning all the standards and clusters of standards with values of 1-5. Denoting the attainment level for the ith standard or cluster of standards for Area j as $\mathrm{AL}_{i,j}$, the average attainment level of Area j, $\overline{\mathrm{AL}}_j$, can be calculated as follows:

$$\overline{\mathrm{AL}}_{j} = \sum_{i=1}^{m_{j}} \mathrm{AL}_{i,j} \tag{iii}$$

where m_i is the total number of standards and clusters of standards in Area j.

To compute the overall attainment, $\overline{\overline{AL}}$, the seven values of the average attainment level for all areas of evaluation calculated using Equation (iii) can be combined with their respective weights using the following formula:

$$\overline{\overline{AL}} (\%) = \left(\frac{1}{50} \sum_{j=1}^{n} w_j \cdot \overline{AL}_j\right) \times 100\% = \left[\frac{1}{50} \sum_{j=1}^{n} w_j \cdot \left(\sum_{i=1}^{m_j} AL_{i,j}\right)\right] \times 100\%$$
 (iv)

where n is the total number of areas, which is equal to 7, and the weights, w_j , can be referred to Table 4.2 for each area j.

Table 4.2: List of areas of evaluation and weights for the overall attainment (Full Accreditation)

Area of Evaluation	Number of Standards	Number of Applicable Standards	Number of Clusters*, m_j	Weights, w_j
Area 1: Programme Design and Delivery	17	17	11	2.0
Area 2: Assessment of Student Learning	11	11	5	2.0
Area 3: Student Selection and Support Services	20	19	11	1.0
Area 4: Academic Staff	15	15	5	1.0
Area 5: Educational Resources	10	10	5	1.0
Area 6: Programme Management	16	16	9	1.0
Area 7: Programme Monitoring, Review and Continual Quality Improvement	9	9	5	2.0
Total	98	97	51	10.0

Table 4.3: List of areas of evaluation and weights for the overall attainment (Compliance Evaluation)

Area of Evaluation	Number of Standards	Number of Applicable Standards	Number of Clusters*, m_j	Weights, w_j
Area 1: Programme Design and Delivery	17	17	11	2.0
Area 2: Assessment of Student Learning	11	11	5	2.0
Area 3: Student Selection and Support Services	20	20	12	1.0
Area 4: Academic Staff	15	15	5	1.0
Area 5: Educational Resources	10	10	5	1.0
Area 6: Programme Management	16	16	9	1.0
Area 7: Programme Monitoring, Review and Continual Quality Improvement	9	9	5	2.0
Total	98	98	52	10.0

The overall attainment computed using Equation (iv) can be used for consideration of the final recommendation for the accreditation decision. The consideration for the final recommendation can also take into account the holistic evaluation of all areas which is best represented by a radar graph illustrated in Figure 4.2.

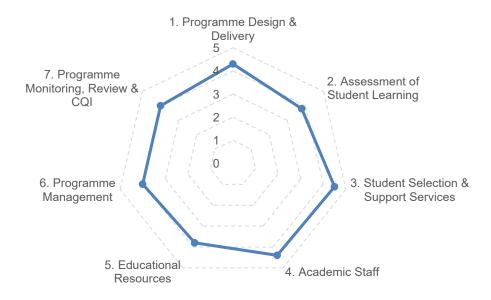


Figure 4.2: A radar graph for holistic evaluation for programme achievement in all areas for Full Accreditation and Compliance Evaluation

4.4 Considerations for Final Recommendation

Based on the percentage of overall attainment rating computed using Equation (ii) or Equation (iv) for provisional or full accreditation, respectively, the final recommendation for the accreditation decision can be proposed by the Panel of Assessors.

For consideration of the Provisional Accreditation (PA), the final recommendation may be selected from one of the following:

- (a) Grant the Provisional Accreditation without condition;
- (b) Grant the Provisional Accreditation with conditions;
- (c) Denial of Provisional Accreditation (with reasons).

For consideration of the Full Accreditation (FA), the final recommendation may be selected from one of the following:

- (a) Grant the Accreditation without condition;
- (b) Grant the Accreditation with conditions;
- (c) Denial of Accreditation (with reasons).

For the case of Compliance Evaluation (CE), the final recommendation may be selected from one of the following:

- (a) Continue the Accreditation without condition;
- (b) Continue the Accreditation with conditions;
- (c) Withdrawal of the Accreditation (with reasons).

The guiding criteria leading to the final recommendation for PA, FA and CE are summarised in Table 4.4, Table 4.5 and Table 4.6, respectively. For PA, the decision for accreditation is based on the attainment level for each standard or cluster of standards.

Table 4.4: Guiding criteria for proposing the final recommendation for Provisional Accreditation

Final Recommendation for Provisional Accreditation	Criteria for Overall Attainment	Criteria for Fulfilment of Clusters of Standards
Grant the Provisional Accreditation without condition	100%	 All clusters are fulfilled with AL 3. No area of concern (recommendation).
Grant the Provisional Accreditation with conditions	≥ 85%	 All clusters in Area 1 and Area 2 are fulfilled with AL 3. All clusters in Areas 3-7 attain at least AL 2. Unattained standards within clusters are to be stated as recommendations to be addressed.
Denial of Provisional Accreditation (with reasons)	< 85%	 One or more clusters attain AL 1. Unattained standards within clusters are to be stated as reasons to deny accreditation.

Table 4.5: Guiding criteria for proposing the final recommendation for Full Accreditation

Final Recommendation for Full Accreditation	Criteria for Overall Attainment $\overline{\overline{\mathrm{AL}}}$	Criteria for Fulfilment of Clusters of Standards
Grant the Accreditation without condition	≥ 60%	 ALL clusters are fulfilled with AT LEAST AL 3. No area of concern (recommendation).
Grant the Accreditation with conditions	≥ 60%	 MOST clusters are fulfilled (minimum AL 3). One or more clusters attain AL 2. Unattained standards within clusters are to be stated as recommendations to be addressed.
Denial of Accreditation (with reasons)	< 60%	 SOME clusters in one or more areas of evaluation attain AL 1, and/or one or more area-level ratings are below 3.0. Unattained standards within clusters are to be stated as reasons to deny accreditation.

Table 4.6: Guiding criteria for proposing the final recommendation for Compliance Evaluation

Final Recommendation for Compliance Evaluation	Criteria for Overall Attainment $\overline{\overline{\mathrm{AL}}}$	Criteria for Fulfilment of Clusters of Standards
Continue the Accreditation without condition	≥ 70%	 ALL clusters are fulfilled with AT LEAST AL 3, and in combination with AL 4 and/or AL 5. No area of concern (recommendation).
Continue the Accreditation with conditions	≥ 70%	 MOST clusters are fulfilled (minimum AL 3). One or more clusters attain AL 2. Unattained standards within clusters are to be stated as recommendations to be addressed.
Withdrawal of the Accreditation (with reasons)	< 70%	 SOME clusters in one or more areas of evaluation attain AL 1, and/or one or more area-level ratings are below 3.0. Unattained standards within clusters are to be stated as reasons to withdraw accreditation.

LIST OF PANEL MEMBERS

NO.	PANEL MEMBER	ORGANISATION
1.	Prof. Ir. Dr. Shahrir Abdullah (Chairman)	Universiti Kebangsaan Malaysia (UKM)
2.	Mdm. Lilian Kek Siew Yick (Standard Writer)	UCSI University
3.	Sr. Ir. Dr. Suhaimi Abdul Talib	Formerly, Universiti Teknologi MARA (UiTM)
4.	Prof. Ts. Dr. Titik Khawa Abdul Rahman	Asia e University (AeU)
5.	Associate Prof. Ts. Dr. Muhammad Fahmi Miskon	Universiti Teknikal Malaysia Melaka (UTeM)
6.	Dr. Mad Ithnin Salleh	Universiti Pendidikan Sultan Idris (UPSI)