



Agensi Kelayakan Malaysia  
Malaysian Qualifications Agency

# **CODE OF PRACTICE FOR PROGRAMME ACCREDITATION: OPEN AND DISTANCE LEARNING [COPPA:ODL]**

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## FOREWORD

With the advent of technology, higher education institutions no longer confined to the traditional brick and mortar learning and teaching methods. Open and Distance Learning (ODL) is gaining its momentum and is the new frontier of learning which will revolutionise the landscape of higher education. ODL presents a potpourri of benefits where it transforms education to be more flexible and accessible to meet the needs of the 21<sup>st</sup> century learners.

As the number of institutions that will be launching the ODL programmes is expected to increase further in the future, quality assurance of ODL programmes is crucial. Hence to safeguard the integrity and credibility of ODL, the Code of Practice for Programme Accreditation:ODL (COPPA:ODL) has been developed specifically to meet the increasing demand of ODL programmes offered by full-fledged open universities, traditional and dual mode institutions in Malaysia. The COPPA:ODL contains clear, specific indicators and benchmark standards that will guide the institutions in the development, delivery, assessment as well as the monitoring and review of the ODL programme.

I am sure that the COPPA:ODL will be discussed and deliberated by the stakeholders in their respective contexts, and that the standards outlined in this document will reaffirm the QA in ODL provisions. Finally, it is hoped that this document will serve as another milestone in the collective effort to make Malaysia as a hub for excellence education in the region.

The success of this publication is the result of the contribution, commitment and enthusiasm of the panel members and the MQA officers. My heartfelt gratitude goes to them and all the relevant stakeholders who have provided their constructive feedback and input.

Thank you.

**Dato' Dr. Rahmah Mohamed**  
**Chief Executive Officer**  
**November 2019**

## GLOSSARY

No.	Terms	Description
1.	Academic Staff	Personnel engaged by Higher Education Providers who are involved in teaching, training and supervision.
2.	Adequate	Satisfactory or acceptable in quality or quantity.
3.	Administrative Staff	Non-academic personnel engaged by Higher Education Providers.
4.	Alumni	Graduates of a Higher Education Provider.
5.	APEL	A systematic process that involves the identification, documentation and assessment of prior experiential learning, i.e. knowledge, skills and attitudes, to determine the extent to which an individual has achieved the desired learning outcomes for access to a programme of study and/or for the award of credit.
6.	Approving Authority	Ministry/Organisation with legal authority to approve the conduct of a programme.
7.	Assessment	A systematic mechanism to measure a student's attainment of learning outcomes.
8.	Co-curricular Activities	Activities conducted outside the classroom that may or may not form part of the credits.
9.	Collaborative Programme	Programme offered by a Higher Education Provider but the curriculum is owned, and the award is conferred, by its partner.
10.	Community Services	Services volunteered by individuals or organisations to benefit a community.
11.	Competency	A student's knowledge, skills and attitude which enable the student to successfully and meaningfully complete a given task or role.
12.	Conducive	A favourable surrounding or condition or environment with a positive effect on the students – can determine how and what the person is learning.
13.	Continuous Assessment	Assessments conducted throughout the duration of a course/module for the purpose of determining student attainment.

No.	Terms	Description
14.	Constructive Alignment	A principle used for devising learning and teaching activities and assessment task that are in line with the intended learning outcome.
15.	Coordinator	The person responsible for providing organisation of different groups to work together to achieve the goals of a programme.
16.	Courses	Components of a programme. The term courses are used interchangeably with subjects, units or modules.
17.	Course Coordinator	A full-time academic staff responsible for the individual course content, delivery, assessment, selection of tutor/facilitator/instructor (if any), monitoring and review. Lecturer can also serve as course coordinator.
18.	Co-requisite	Refers to a formal course of study required to be taken simultaneously with another course(s).
19.	Department	The entity of Higher Education Providers responsible for the programme. Examples are college, faculty, school, institute, centre and unit.
20.	Education Experts	Specialised staff from various disciplines who have been trained or who have considerable experience in effective learning-teaching methodologies and related matters of higher education.
21.	e-Learning	Learning facilitated and supported through the use of information and communications technology.
22.	Electronic Learning Platform	Electronic learning platform (e.g., Learning Management System (LMS), Learning Content Managements system (LCMS) or learning portals) serves as an online repository for various digital learning materials, tests, assignments and administrative information that is accessible to instructors and learners. It also serves as an avenue for online interaction between the instructors/tutors and students/learners using various web tools. A standard LMS should have tools, i.e. user management, course management, communication and collaborative learning tools, and reporting tools.
23.	Enrolment	Registered and active students.



No.	Terms	Description
24.	External Advisor	An acknowledged expert in the relevant field of study external to the Higher Education Providers, tasked to assist in reviewing the programme.
25.	External Examiner	An acknowledged expert in the relevant field of study external to the Higher Education Providers, tasked to evaluate the programme's assessment system and the candidates.
26.	External Programme	Programme developed and/or qualification awarded by a certification body, e.g. ACCA, CIMA, external University of London.
27.	External Stakeholders	Parties external to the Higher Education Providers who have interest in the programme. Examples are alumni, industries, parents, collaborators, fund providers and professional associations.
28.	Face-to-face	Face-to-face refers to the actual physical interaction or other electronically mediated communication that displays the learner(s) and tutor/facilitator/instructor in real time enabling immediate response.
29.	Formative Assessment	The assessment of student's progress throughout a course, in which the feedback from the learning activities are used to improve student attainment.
30.	Formative Guidance	Continuous guidance, which has an important influence on the development of an academic staff.
31.	Full-time Equivalent	A measure to convert part-time staff workload to full-time equivalent using a normal full-time staff workload. This is only used for the purpose of computing staff-student ratio.
32.	Full-time Staff	Staff with permanent appointment or contract appointment (minimum one year) who works exclusively for a Higher Education Provider.
33.	Good Practices	A set of internationally accepted norms which is expected to be fulfilled to maintain high quality.
34.	Governance	Describes the organisational structure used to ensure that its constituent parts follow established policies, processes and procedures.

No.	Terms	Description
35.	Higher Education Provider	A body corporate, organisation or other body of persons which conducts higher education or training programmes leading to the award of a higher education qualification.
36.	Home-grown Programme	Programme awarded by Malaysian Higher Education Provider.
37.	Industrial/Practical Training	An activity within the programme where students are required to be placed in the workplace to experience the real working environment.
38.	Internal Quality Audit	A self-review exercise conducted internally by a Higher Education Provider to determine whether it is achieving its goals, to identify strengths and areas of concern, and to enhance quality. The internal quality audit generates a self-review report.
39.	Longitudinal Study	A study which involves repeated observations of the same variables or phenomena over a long period of time.
40.	Malaysian Qualifications Framework	An instrument that classifies qualifications based on a set of criteria that are approved nationally and benchmarked against international best practices.
41.	Malaysian Qualifications Framework Level	A qualification level described with generic learning outcomes and descriptors.
42.	Moderator	In the context of ODL, a moderator is an academic staff from the HEP or appointed from any other recognised institution/organization/industry responsible for moderating, and refining examination questions or assignments.
43.	Modules/Content Writers	A member of academic staff from the university or appointed from any other recognised institution/organization/industry, responsible for developing the content of the learning materials.
44.	Needs Assessment	An analysis carried out to identify needs (e.g., the training needs of staff and the market demand of a programme).
45.	Open and Distance Learning (ODL)	a) The term open and distance learning (ODL) reflects both the fact that all or most of the teaching is conducted by someone removed in time and space from the learner, and that the mission aims to include greater dimensions of openness and flexibility, whether in terms of access, curriculum or

No.	Terms	Description
		<p>other elements of structure (UNESCO, 2002).</p> <p>b) Most definitions of open and distance learning pay attention to the following characteristics: separation of teacher and learner in time and place; institutional accreditation; use of mixed-media courseware, involves two-way communication, possibility of face-to-face meetings and use of industrialised processes (Commonwealth of Learning, 1999).</p> <p>c) Open distance learning refers to education and training in which using the learning resources, rather than attending classroom sessions, is the central feature of the learning experience (Commonwealth of Learning, 2003).</p>
46.	Part-time Staff	Staff with temporary or short-term appointment with less than normal hours of work and may not work exclusively for a Higher Education Provider.
47.	Pre-requisite	A course or other requirement that a student must have taken prior to enrolling in a specific course or programme.
48.	Professional Body	A body established under a written law (or any other body recognised by the Government) for purposes of regulating a profession and its qualifications.
49.	Programme	An arrangement of courses/subjects/modules that is structured for a specified duration and learning volume to achieve the stated learning outcomes, which usually leads to an award of a qualification.
50.	Programme Accreditation	<p>An assessment exercise to determine whether a programme has met the quality standards and is in compliance with the Malaysian Qualifications Framework. There are three stages of programme accreditation:</p> <p><b>Provisional Accreditation</b> is an accreditation exercise to determine whether a proposed programme meets the minimum quality standards prior to its launch.</p> <p><b>Full Accreditation</b> is an accreditation exercise to ascertain that the teaching, learning and all</p>

No.	Terms	Description
		<p>other related activities of a provisionally accredited programme meet the quality standards.</p> <p><b>Compliance Evaluation</b> is an exercise to monitor and ensure the maintenance and enhancement of accredited programmes.</p>
51.	Programme Educational Objectives	Broad statements that describe the career and professional accomplishments that the programme is preparing graduates to achieve after they graduated.
52.	Programme Leader/Coordinator	A full-time academic staff responsible for the overall implementation and management of the programme from the development of the curriculum content, delivery, assessment, delegation of academic staff to manage the individual courses, monitoring and review of the programme.
53.	Programme Learning Outcomes	Statements that describe the specific and general knowledge, skills, attitude and abilities that the programme graduates should demonstrate upon graduation. The graduates are expected to acquire the outcomes upon completion of all the courses in their programme.
54.	Programme Self-Review Report	A report submitted by a Higher Education Provider to demonstrate whether it has achieved the quality standards for purposes of a full accreditation exercise.
55.	Programme Standards	Refers to programme standards approved by Malaysian Qualifications Agency.
56.	Qualification	An affirmation of achievement which is awarded by a Higher Education Provider or any party that is authorised to confer it.
57.	Quality Assurance	A planned and systematic process to ensure that acceptable standards of education, scholarship and infrastructure are being met, maintained and enhanced.
58.	Quality Enhancement	A process where steps are taken to bring about continual improvement in quality.
59.	Quality Partners	Quality partners are usually better established universities which attest to the quality of a programme through the involvement or oversight of curriculum design, learning and teaching, or

No.	Terms	Description
		assessment.
60.	Regional Centre	A centre established by the main campus to reach out to learners at different regions or even countries. This centre serves as a support centre for learners where various learning and teaching activities take place. Sometimes, the regional centre is also referred to as learning centre. A regional centre would have a minimum requirement in terms of infrastructure that has to be approved by MOE.
61.	Quality Assurance	A planned and systematic process to ensure that acceptable standards of education, scholarship and infrastructure are being met, maintained and enhanced.
62.	Relevant Stakeholders	The parties (individuals and organisations) involved in assisting and complementing the development and improvement of the programme. The key relevant stakeholders are students, alumni, academic staff, professional bodies, the industry, parents, support staff, the government and funding agencies, and civil society organisations.
63.	Scholarly Activities	Activities that apply systematic approaches to the development of knowledge through intellectual inquiry and scholarly communication (e.g., learning and teaching, research, publications, and creative and innovative products).
64.	Self-Instructional Materials (SIM)	An educational material that facilitate personalised learning. SIM is developed based on sound instructional design principles (namely it should be learner-friendly, written in conversational writing style and use simple language, include learning activities, self-assessment and feedback). The material may be in various forms; print-based, web-based, multimedia, etc. Study guide can be an integral part of SIM.
65.	Student Learning Time	The amount of time that a student is expected to spend on the learning-teaching activities, including assessment to achieve specified learning outcomes.
66.	Summative Assessment	The assessment of learning which summarises the student progress at a particular time and is

No.	Terms	Description
		used to assign the student a course grade.
67.	Synchronous & Asynchronous Learning	<p>Synchronous learning is learning that happens in real-time, where a group of learners are collectively engaged in learning process. Learning can occur through physical or virtual session.</p> <p>Asynchronous learning is learner-centric which frees the learners from the constraints of time and space. Usually, this form of asynchronous interaction occurs in delayed electronic mode.</p>
68.	Tutor/Facilitator/Instructor	An academic staff from the HEP or appointed from any other recognised institution/organization/industry responsible for the learning and teaching process, and conducts physical or virtual face-to-face sessions.

## **ABBREVIATIONS**

APEL	Accreditation of Prior Experiential Learning
COPPA	Code of Practice for Programme Accreditation
CPD	Continuous Professional Development
HEP	Higher Education Provider
LCMS	Learning Content Management System
LMS	Learning Management System
MOE	Ministry of Education
MQA	Malaysian Qualifications Agency
MQF	Malaysian Qualifications Framework
ODL	Open and Distance Learning
RC	Regional Centre

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## Section 1

# Introduction

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This document is intended to serve as a guideline for Higher Education Providers (HEPs) that offer programmes via Open and Distance Learning (ODL) for accreditation and programme audit purposes.

ODL refers to the provision of **flexible** educational opportunities in terms of **access** and **multiple modes** of knowledge acquisition.

- **Flexible** means the availability of choices for educational endeavours anywhere, anytime and anyhow.
- **Access** means opportunity made available to all, freeing them from constraints of time and place.
- **Multiple modes** mean the use of various delivery systems and learning resources.

ODL is becoming an accepted and indispensable part of mainstream education prompted by the need to make learning more flexible and accessible to a wider population, the growing need for continual skills upgrading and reskilling; and advances in technology that have made it possible for teaching to be conducted at a distance. The government is cognisant of the potential of ODL in fulfilling the fundamental rights of all people to learning and the need to incorporate it within the framework of human capital development. To produce good learning outcomes and graduate competencies, student engagement is the key element in the design of ODL programmes.

The terms and language used to describe ODL may vary across geographical divide. Among the more commonly used terms related to ODL are the following: correspondence education, home study, independent study, external studies, continuing education, distance teaching, adult education, technology-based or mediated education, e-learning, mobile learning, learner-centered education, open learning, open access, flexible learning and distributed learning.

Advances in the information and communication technology (ICT) have opened up new possibilities and opportunities in ODL. The number of established open universities worldwide is indicative of this trend. Similarly, more and more traditional universities are

transforming from single mode to dual mode universities, recognising the importance of distance education in providing greater flexibility, accessibility and up-to-date educational resources. Through ODL we are witnessing the mushrooming of Massive Open Online Courses (MOOCs), modular short courses and customized company training. Worldwide, there is an increase in the number of students enrolling into ODL programmes

## **SCOPE OF THE CODE OF PRACTICE FOR PROGRAMME ACCREDITATION-OPEN AND DISTANCE LEARNING**

A programme of study is deemed as an ODL programme if **more than 60% of the courses** offered in the programme are conducted via open and distance learning. In order for a course to be considered as an ODL course, **at least 80%<sup>1</sup> of the student learning time (SLT)** must be delivered via open and distance mode. This must be supported through regular and substantive interaction between the learner and the instructor synchronously or asynchronously via an electronic learning platform, the provision of self-instructional learning materials and other learning support services. The face to face contact sessions between the learner and instructor can be conducted in various modalities which may include physical or virtual sessions.

The HEPs that intend to offer ODL programmes must adhere strictly to the standards outlined in the COPPA:ODL as well as relevant programme standards, where appropriate. In discipline where a programme standards exists, specific requirements stipulated in programme standards will take precedence. The seven areas of the COPPA:ODL will serve as the guidelines for the HEPs and the Malaysian Qualification Agency (MQA) in assuring the quality of the ODL programmes.

The code of practice serves many parties namely

- dedicated ODL HEPs;
- dual mode HEPs offering both conventional and distance learning programmes; and
- conventional HEPs offering individual distance learning programmes.

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<sup>1</sup> Courses with specific or regulatory requirements to fulfil certain quantum of physical face to face contact hours can be exempted from the 80% ODL component ruling at the course level.

## Section 2

# Criteria and Standards for Open and Distance Learning (ODL) Programme Accreditation

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### INTRODUCTION

This Code of Practice for Programme Accreditation-Open and Distance Learning (COPPA:ODL) which has seven areas of evaluation for quality assurance guides the Higher Education Providers (HEPs) and the Malaysian Qualifications Agency (MQA) in assuring the quality of educational programmes. The HEP is responsible for designing and delivering programmes that are appropriate to its educational purpose.

The seven areas of evaluation for quality assurance will be adjusted accordingly to fit their distinct purposes in the provision of ODL programmes. For example, while the item on vision is crucial at the institutional level, its relevance at the programme level is more directed to see how a specific programme supports the larger institutional vision of providing quality ODL programmes. In short, COPPA:ODL outlines the descriptions, content and delivery of a particular programme.

This section discusses guidelines on criteria and standards for ODL programme accreditation. It outlines practices that are in line with internationally recognised good practices. These guidelines on criteria and standards are aimed to assist HEPs achieve the standards in each of the seven areas of evaluation and stimulate the HEPs to continually improve the quality of their ODL programmes. All these are in support of the aspiration to make Malaysia a centre of educational excellence through globalised online learning in widening access and meeting the manpower needs of a high-income nation.

The document defines standards for higher education in broad terms, within which an individual HEP can creatively design its ODL programme of study and appropriately allocate resources in accordance with its stated educational purpose and learning outcomes.

The seven areas of evaluation for ODL programme accreditation are:

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

The criteria and standards define the expected level of attainment of each criterion and serve as performance indicators.

These standards, which are benchmarked against international good practices, are the minimum requirements that must be met and compliance must be demonstrated during a ODL programme accreditation exercise. In principle, the HEP must establish that it has met all the standards for its ODL programme to be fully accredited, taking into account flexibility and recognition of diversity to facilitate the creative growth of education through ODL.

In the remaining pages of this section, the standards are spelt out for each of the seven areas of evaluation. These serve, and are defined, as indicators of quality.

## **AREA 1: PROGRAMME DEVELOPMENT AND DELIVERY<sup>2</sup>**

The vision, mission and goals of the HEP guide its academic planning and implementation as well as bring together its members to strive towards a tradition of excellence. The general goal of higher education is to produce broadly educated graduates ready for the world of work and active citizenship through the:

- i. provision of knowledge and practical skills based on scientific principles;
- ii. inculcation of attitudes, ethics, sense of professionalism and leadership skills for societal advancement within the framework of the national aspiration;
- iii. nurturing of the ability to analyse and solve problems as well as to evaluate and make decisions critically and creatively based on evidence and experience;

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<sup>2</sup> For the purpose of this Code of Practice, the term 'programme development and delivery' is used interchangeably with the term 'curriculum design and delivery'. This area is best read together with Guidelines to Good Practices: Curriculum Design and Delivery, which is available on the MQA Portal: [www.mqa.gov.my](http://www.mqa.gov.my).

- iv. development of the quest for knowledge and lifelong learning skills that are essential for continuous upgrading of knowledge and skills that are parallel to the rapid advancement in global knowledge; and
- v. consideration of other imperatives that are needed by society and the marketplace as well as those relevant to the local, national and international contexts.

Academic programmes are the building blocks that support the larger institutional purpose of the HEP. Hence, it must take into consideration these larger goals when designing programmes to ensure that one complements the other.

Outcome-Based Education (OBE) specifies the desirable outcomes or abilities which students should be able to demonstrate upon completion of an educational programme. The five clusters of learning outcomes cover knowledge and understanding, cognitive skills, functional work skills, personal and entrepreneurial skills, and ethics and professionalism. The quality of a programme is ultimately assessed by the ability of its graduates to carry out their expected roles and responsibilities in society. In order to fulfil this, a clear statement of the competencies and outcomes that are expected to be achieved by the student at the end of the programme should be spelt out. The level descriptors of these learning outcomes are defined in the Malaysian Qualifications Framework (MQF).

Learning and teaching can only be effective when the curriculum content and the programme structure are kept abreast. Intended outcomes should be achieved by the end of the programme and supported by appropriate instructional approaches and assessment mechanisms (constructive alignment). Information on the programme has to be made up to date and available to all students. Input from stakeholders through continuous consultation and feedback must be considered for the betterment of the programme.

Transforming the curriculum of a programme requires not only academic expertise in the entire suite of courses that makes up a programme, but also education experts from various disciplines who have been trained or who have considerable experience in effective ODL learning-teaching methodologies including associated technologies that make the learning environment a very rich one. These experts would deal with the challenges of instruction and provide training as well as advice on ODL learning-teaching processes and practices. Such expertise can be provided by a educational technology unit or division at the HEP or can be acquired from external sources.

A HEP is expected to have sufficient autonomy, especially over academic matters. Such autonomy must be reflected at the departmental level where the programme is being designed and offered.

An ODL programme has to be appropriately delivered and managed to achieve its intended outcomes. This is achievable through the allocation of adequate resources, including technology infrastructure and infostructure within a conducive environment in widening accessibility and guided by an appropriate authority in the planning and monitoring of the ODL programme. Linkages with stakeholders outside of the department, particularly at the operational level, are crucial to identify, clarify and improve key aspects of the ODL programme and their interrelationships in the planning and implementation processes. The linkages should be developed and maintained at local, national, regional and global levels.

### **STANDARDS FOR AREA 1**

#### **1.1 Statement of Educational Objectives of Academic Programme and Learning Outcomes**

1.1.1 The programme must be consistent with, and supportive of, the vision, mission, goals and ODL policy of the HEP, in promoting democratisation of education through globalised online learning.

1.1.2 The programme must be considered only after a needs assessment has indicated that there is a demand for the programme to be offered via ODL mode.

*(This standard must be read together with Standard 1.2.2 in Area 1 and 6.1.6 in Area 6.)*

1.1.3 The department must state its programme educational objectives, learning outcomes, learning and teaching strategies that focus on student engagement and assessment, and ensure constructive alignment between them.

*(This standard must be read together with Standard 1.2.4 in Area 1.)*

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.

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.

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

1.2.1 The department must have sufficient autonomy<sup>3</sup> to design the curriculum and to utilise<sup>4</sup> 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.)*

1.2.2 The department must have an appropriate process to design and develop the curriculum leading to the approval by the highest academic authority in the HEP.  
*(This standard must be read together with Standard 1.1.2 in Area 1 and 6.1.6 in Area 6.)*

1.2.3 The department must consult the stakeholders in the development of the curriculum including education and ODL experts.  
*(This standard must be read together with Standard 7.1.4 in Area 7.)*

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<sup>3</sup> 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.

<sup>4</sup> To utilise means the expenditures of allocated resources according to HEP's financial procedures. To be read together with standard 5.3.2.

- 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, good practices as well as future needs in the field.
- 1.2.5 There must be appropriate learning and teaching methods relevant to the programme educational objectives and learning outcomes which covers the following:
- i. The department must establish a mechanism/system where all forms of interaction and delivery are integrated.
  - ii. The programme must involve the provision of appropriate self-instructional materials (SIM) for self-directed learners.
  - iii. There must be a unit or section devoted to the design and development of SIM.
  - iv. SIM for the ODL programme must be provided in the following ways: adopting existing materials; adapting existing materials; or creating original materials; or any other appropriate approaches. The department should consider having intellectual property rights and licensing policies for learning materials, learning objects and innovations. Copyright laws and best practices must be in place and observed.
  - v. The department must provide an electronic/online learning platform to conduct learning and teaching activities.
  - vi. The department must decide on the nature of interaction between learners and instructors which may be synchronous or asynchronous or a combination of both. However, the scheduled face-to-face sessions must be carried out synchronously which can be physically or electronically mediated.

### **1.3 Programme Delivery**

- 1.3.1 The department must take responsibility to ensure the effective delivery of programme learning outcomes.
- 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. This information can be made available in the learning portal and/or learning management system.

- 1.3.3 The programme must have a full-time programme leader/coordinator and a team of course coordinators and/or instructors with adequate authority for the effective delivery of the programme.

*(This standard must be read together with related Programme Standards and Guidelines to Good Practices, and with Standards 6.1.1 and 6.2.2 in Area 6.)*

- 1.3.4 The department must provide students with a conducive learning environment and proper facilities for the execution of practical based training in line with the requirement of the programme.

*(This standard must be read together with Standard 5.1.1 in Area 5.)*

- 1.3.5 The department must encourage innovations in teaching, learning and assessment and include tools (i.e. analytics) to monitor student learning activities.

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

## **AREA 2: ASSESSMENT OF STUDENT LEARNING<sup>5</sup>**

Assessment of student learning is a key aspect of quality assurance and it is one of the most important measures to show the achievement of learning outcomes. Hence, it is crucial that an appropriate assessment method and mechanism is in place. Assessment must ensure sufficient interactions and engagement for group dynamics while supporting a holistic online ecosystem. Assessment activities should leverage on the functionality and availability of learning technologies. The methods of student assessment must be clear, consistent, effective, reliable and in line with current practices. They must clearly measure the achievement of the intended learning outcomes. Qualifications are awarded based on the

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<sup>5</sup> Standards in this area are best read together with Guidelines to Good Practices: Assessment of Students, which is available on the MQA Portal: [www.mqa.gov.my](http://www.mqa.gov.my).

achievement of learning outcomes which are measured through well designed assessment instruments.

The management of the assessment system is directly linked to the HEP's responsibility as a body that confers qualifications. The robustness and security of the processes and procedures related to student assessment as well as appropriate documentation of learning achievement are important in building credibility for the qualifications awarded by the HEP. Policies which govern online assessments must be put in place, including academic integrity, moderation (by a qualified moderator) and progression. In addition, specialised needs have to be taken into consideration to cater for students that may be distributed over various geographical locations due to the nature of ODL.

## **STANDARDS FOR AREA 2**

### **2.1 Relationship between Assessment and Learning Outcomes**

- 2.1.1 Assessment principles, methods and practices must be aligned to the learning outcomes, consistent with the levels defined in the MQF.
- 2.1.2 The alignment between assessment and the learning outcomes in the programme must be systematically and regularly reviewed to ensure the attainment of the intended learning outcomes.

### **2.2 Assessment Methods**

- 2.2.1 A variety of assessment methods and tools including innovative techniques must be used appropriately to assess the learning outcomes and competencies.
- 2.2.2 There must be policies and mechanisms to ensure the security, credibility, validity, reliability, consistency, currency and fairness of the assessment methods. Specific procedures to cater for the assessment of ODL students must be put in place which could involve distant locations and simultaneous processes in many locations.
- 2.2.3 The frequency, methods, and criteria of student assessment – including the

grading criteria and appeal policies – must be documented and communicated to students on the commencement of the programme.

- 2.2.4 Changes to student assessment methods must follow the established procedures and regulations and communicated to the student prior to their implementation.

## **2.3 Management of Student Assessment**

- 2.3.1 The department and its academic staff must have an adequate level of autonomy in the management of student assessments.

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

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

- 2.3.3 The result of the coursework component must be announced to the students before the final examination, while the final assessment results must be communicated to students before the commencement of a new semester to facilitate progression decision.

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

- 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.)*

## **AREA 3: STUDENT SELECTION AND SUPPORT SERVICES<sup>6</sup>**

In general, admission to a programme needs to comply with the prevailing policies of the Ministry of Education and if specified by the relevant programme standards. There are varying views on the best method of student selection. Whatever the method used, the HEP

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<sup>6</sup> Standards in this area are best read together and must be aligned with related Programme Standards.

must be able to defend the consistency of the method it utilises. The number of students to be admitted to a programme is determined by the capacity of the HEP and the number of qualified applicants. HEP's admission and retention policies must not be compromised for the sole purpose of maintaining a desired enrolment. If a HEP operates in geographically separated campuses or if the programme is a collaborative one, the selection and assignment of all students must be consistent with national policies.

The admission and selection of students have to be conducted based on up-to-date and accurate information, and according to published criteria and processes. The process has to be structured, objective and transparent with periodic monitoring and review. Consultations with national and international stakeholders are to be considered.

Articulation and transfer are two major components in the area of student selection. In this age of increased cross-border education and student mobility, nationally and globally, the transfer of students and credits and the articulation of accumulated learning have become very important aspects of higher education. Thus, sufficient attention must be given to ensure that transfer students are smoothly assimilated into the institution without undue disruption to their studies. Well-defined policies and methods aligned to the latest development are to be established to support student mobility, exchanges and progression, as well as to promote lifelong learning and recognition of prior experiential learning.

Student support services and co-curricular activities facilitate learning and wholesome personal development and contribute to the achievement of learning outcomes. The role of student support with academic staff for ODL learners is as important as face-to-face experiences. Co-curricular activities may be organised to enrich student experience, and to foster personal development and responsibility, where appropriate.

ODL learners may face specific and different learning challenges compared to other conventional students and support for ODL learners must take into consideration a broad range of services including technical, academic and personal. They value immediate and personal interactions with academic staff through the online learning platform.

All ODL learners must have access to clear information about the requirements and demands of pursuing a study programme through an ODL mode. Support services and co-curricular activities include physical amenities and services where relevant such as

recreation, arts and culture, accommodation, counselling, transport, safety, food, health, finance and academic advice.

Students with special needs can be assisted through special-purpose facilities and support services. Those facing personal, relationship or identity problems must be handled by professional counsellors. Career counselling can help students make more informed programme and career choices by examining students' approach to career planning and suggesting appropriate resources to guide them.

In most institutions, many of the student support services and co-curricular activities apply at the institutional level. However, it is expected that students at the departmental level have common access to these central services and facilities.

The participation of students in various departmental activities inculcates self-confidence and provides experience in organisational activities and related matters. By involving students, it will also be easier for the department to obtain their feedback. Student publications can also contribute to an atmosphere of responsible intellectual discourse.

Linkages with the alumni should be established by the HEP. These linkages play a role in preparing and equipping students with knowledge, exposure and networking in preparation for their professional future or career advancement. They also serve as a reference point for continual programme improvements.

### **STANDARDS FOR AREA 3**

#### **3.1 Student Selection**

- 3.1.1 The programme must have clear criteria and processes for student selection (including that of transfer students and APEL candidates) which must be consistent with applicable requirements.
- 3.1.2 The criteria and processes of student selection must be transparent and objective.
- 3.1.3 Student enrolment must be related to the capacity of the department to effectively deliver the programme.

- 3.1.4 There must be a clear policy, and if applicable, appropriate mechanisms, for appeal on student selection.
- 3.1.5 The department must offer appropriate orientation, developmental or remedial support to assist all ODL students, including new students, incoming transfer students and students with special needs.

### **3.2 Articulation and Transfer <sup>7</sup>**

- 3.2.1 The department must have well-defined policies and mechanisms to facilitate credit transfer/exemption and student mobility, which may include student transfer within and between institutions as well as cross-border.
- 3.2.2 The department must ensure that the incoming transfer students have the capacity to successfully follow the programme.

### **3.3 Student Support Services**

- 3.3.1 Students must have access to appropriate, adequate and continuous support services, such as physical (main campus, regional centres), social, financial, recreational and online facilities, and counselling (academic and/or non-academic). All student support services must be designed to cater for the non-residential nature of ODL learners.
- 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 staffed by individuals who have appropriate experience.
- 3.3.3 An effective induction to the programme must be made available to new students to promote self-directed learning/self-managed learning and familiarise themselves to all the learning support services of ODL.
- 3.3.4 Academic and career counselling must be provided by adequate and

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<sup>7</sup> Standards in this area must be read together with policies by Ministry of Education (MOE).

qualified staff, who have undergone periodic, structured training and development in the area of expertise.

- 3.3.5 There must be mechanisms that actively identify and assist students who are in need of academic and/or career counselling.
- 3.3.6 The department must have clearly defined and documented processes and procedures in handling student disciplinary cases.
- 3.3.7 There must be an effective mechanism for students to voice their grievances and seek resolution on academic and non-academic matters.
- 3.3.8 Student support services must be evaluated regularly to ensure their adequacy, effectiveness and student well-being and safety.

### **3.4 Student Representation and Participation**

- 3.4.1 There must be policies and procedures to actively engage student through appropriate channel/platform in areas that affect their interest and welfare.
- 3.4.2 Students must be facilitated to develop linkages with external stakeholders and to participate in activities to gain or enhance managerial, entrepreneurial and leadership skills in preparation for the workplace or enhancing their current skills in the workplace.

### **3.5 Alumni**

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

## **AREA 4: ACADEMIC STAFF<sup>8</sup>**

As the quality of the academic staff is one of the most important components in assuring the quality of higher education, an HEP is expected to search for and appoint the best-suited

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<sup>8</sup> Standards in this area are best read together with Guidelines to Good Practices: Academic Staff and Guidelines: Academic Staff Workload, which is available on the MQA Portal, [www.mqa.gov.my](http://www.mqa.gov.my).

candidates to serve its programmes in an open, transparent and fair manner. ODL teaching requires specific skill sets that differ from traditional face-to-face teaching, including appropriate technological and communications skills. To achieve this, HEPs are expected to design and implement an academic staff search and recruitment practice that is as efficient as it is effective to achieve the desired results.

It is important that every programme has appropriately qualified and sufficient number of academic staff working in a conducive environment that attracts talented individuals. The numbers recruited have to be adequate for, and appropriate to, the needs of the programmes. Processes for periodic student evaluations of the academic staff should be put in place for quality improvement.

The role of the academic staff in various activities has to be clarified in order to reflect a fair distribution of responsibilities. It is important for the HEP to provide a formal staff induction and continual staff professional development programme, for them to be current in their knowledge and skills, both in their chosen discipline as well as in their pedagogical, andragogical and technical skills related to ODL.

Teaching, research, consultancy and community engagement are core interrelated academic activities. It is recognised that the degree of engagement of academics in these areas vary from institution to institution. In doing so, it is vital for the HEP to ensure that the distribution of work is fair and equitable. There should also be a robust and open system for proper recognition and reward which acknowledges and appreciates excellence in learning and teaching as well as student engagement in an ODL setting.

There must be policies in the HEP to support the provision of professional services rendered by the academics to share their expertise with the community towards enhancing national economic agenda.

## **STANDARDS FOR AREA 4**

### **4.1 Recruitment and Management**

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



- 4.1.2 The department must have a clear and documented academic staff recruitment policy where the criteria for selection are based on academic merit (*from bona fide institutions*) and/or relevant work experience. The recruitment policy for a particular programme must seek diversity where there is a balance between senior and junior academic staff, between academic and non-academic staff, between academic staff with different approaches, ODL experiences and backgrounds. Academic staff recruited must be directly related to the fields/areas of discipline of the courses offered.
- 4.1.3 The staff (instructor/facilitator/tutor) –student ratio for the programme must be appropriate to the learning-teaching methods and comply with the programme standards (where applicable) for the discipline, taking into consideration the uniqueness and flexibility of the ODL.
- 4.1.4 The department must have an adequate and qualified academic staff (ODL course coordinator, programme coordinator/leader and instructor/facilitator/tutor) responsible for implementing the programme. At least 60% of the academic staff in a specific programme (only inclusive of course coordinator) must be employed in a full-time basis. The department must have a policy on the use of part-time academics from other institutions for learning and teaching purposes. This policy must address academic qualification, specialisation and overall workload.
- 4.1.5 The policy of the department must reflect an equitable distribution of responsibilities among the academic staff.
- 4.1.6 Policies and procedures for recognition through promotion, salary increment or other remuneration such as incentives to reward innovation in ODL must be clear, transparent and based on merit.
- 4.1.7 The department must have national and international linkages to provide for the involvement of experienced academics, professionals and practitioners in order to enhance learning and teaching in the programme.

- 4.1.8 Training and continuous professional development (CPD) programmes related to ODL must be done for all new and existing full-time/part-time academic staff and academic support staff, and the process is evaluated.

## **4.2 Service and Development**

- 4.2.1 The department must have policies addressing matters related to service, development and appraisal of the academic staff.
- 4.2.2 The academic staff must be given sufficient autonomy to focus on areas of their expertise.
- 4.2.3 The HEP must have clear policies on conflict of interest and professional conduct, including procedures for handling disciplinary cases among full-time and part-time academic staff.
- 4.2.4 The HEP must have mechanisms and processes for periodic student evaluation of the academic staff for quality improvement.
- 4.2.5 The department 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 learning-teaching experience.
- 4.2.6 The department must encourage and facilitate its academic staff to play an active role in community and industry engagement activities.

## **AREA 5: EDUCATIONAL RESOURCES**

Adequate educational resources are necessary to support the learning and teaching activities of an ODL programme. These resources include finance, expertise, physical infrastructure, ICT facilities, learning resources and if relevant, also research facilities. There must be a strong commitment by the HEP to provide sufficient resources to plan, manage, deliver and support the programmes. HEP must ensure that sufficient physical/virtual

facilities and resources are put in place where appropriate for programmes which have clinical/practical/internship component in them.

The physical facilities to support an ODL programme are slightly different from facilities for face-to-face programmes. The normal facilities and space to house the necessary equipment for administration and classroom sessions would be similar to conventional programmes. There is a need to have an appropriate and reliable technical infrastructure to support the ODL delivery. Other facilities such as libraries, resource centres, lecture halls, auditoriums, tutorial rooms, science and computer laboratories, workshops, studios and in case of clinical learning, hospitals and clinics may be needed to support the delivery of the programme. For institutions offering ODL programme, regional centres (RCs) will be helpful to support learning and teaching activities which encompass courses with practical-based components and the conduct of the proctored on-site examination. However, if those aspects can be addressed via technology or other means, then the establishment of RC become optional.

Institutional learning management systems and other technology-based learning tools, including non-institutional propriety systems should be made available for the provision of the ODL programme like eContent (digital learning content/lesson). Other supporting facilities which are essential for supporting learning and teaching activities in ODL are digital library, counseling/advisory facilities. It is highly desirable to maintain a well-stocked digital/physical library of text and reference books/e-books, scholarly journals, periodicals and electronic databases.

The HEP should provide research opportunities either as part of the curriculum or ensuring a research conducive environment for staff and students who wish to embark on research endeavour. All of these activities help in continuous updating of knowledge. Where appropriate, research facilities must be included as part of educational resources because a research-active environment improves the quality of higher education and attracts grants. Sufficient and recent resources are to be allocated to support and sustain research.

The HEP must have appropriate, safe and adequate physical facilities that comply with relevant laws and regulations, including care for the needs of persons with disabilities.

The HEP must demonstrate adequate availability of financial resources to ensure the sustainability of an educational programme.

Equally, if not more importantly, is the quality, relevance, accessibility, availability and delivery of such resources and services, and their actual utilisation by students. These considerations must be taken into account in evaluating the effectiveness of educational resources.

## **STANDARDS FOR AREA 5**

### **5.1 Physical and Virtual Facilities**

- 5.1.1 The HEP must have a policy regarding the selection and effective use of electronic devices, internal and external networks, eContent and other effective means of using information and communication technology in the programme.
- 5.1.2 The programme must have sufficient and appropriate physical and virtual facilities (electronic learning platform) and educational resources to ensure its effective delivery, including facilities for practical-based and research programmes and for those with special needs.
- 5.1.3 The department must put in place an appropriate LMS to facilitate ODL programme delivery.
- 5.1.4 The physical facilities, system and eContent must comply with the relevant laws, regulations and copyright.
- 5.1.5 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.
- 5.1.6 The educational resources, online platform, subscribed learning resources services and facilities must be maintained and periodically reviewed to improve the quality and appropriateness.

### **5.2 Research and Development**

*(Please note that the standards on Research and Development are largely directed to universities and university colleges.)*

- 5.2.1 The faculty/department/unit must have clear policy and procedure on research and development, and adequate facilities to sustain them.
- 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.
- 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.

### **5.3 Financial Resources**

- 5.3.1 The HEP must demonstrate financial viability and sustainability for offering the programme.
- 5.3.2 The department must have clear procedures to ensure that its financial resources are sufficient and managed efficiently.
- 5.3.3 The HEP must have a clear line of responsibility and authority for budgeting and resource allocation that take into account the specific needs of the faculty/department/unit.

## **AREA 6: PROGRAMME MANAGEMENT**

There are many ways of administering an educational institution and the methods of management differ between HEPs. Nevertheless, governance that reflects the collective leadership of an academic organisation must emphasise on excellence and scholarship. At the departmental level, it is crucial that the leadership provides clear guidelines and directions, builds relationships amongst the different constituents based on collegiality and transparency, manages finances and other resources with accountability, forges partnerships with significant stakeholders in educational delivery, research and consultancy, and dedicates itself to academic and scholarly endeavours. While formalised arrangements

can protect these relationships, they are best developed by a culture of reciprocity, mutuality and open communication.

Sufficient autonomy is to be granted to the department for the purpose of policy making to incorporate feedback, consultation and analysis. The policies and practices have to be made clear to all parties concerned.

An appropriate programme leader is necessary for the success and sustainability of a programme. A leader should be visionary, capable of action that guides an organisation into the future as stipulated in its vision, mission, goals, and objectives. The ODL leadership does not only guide the organisation, but at the same time s/he has the competency in knowing, developing, implementing, managing, leading, and visioning the ODL programme. Criteria for the selection of programme leaders and their responsibilities have to be made clear and transparent. Appropriate and sufficient administrative staff are important to support the programme. Proper training should be provided to equip the programme leaders and staff with knowledge, skills and attitude.

Systematic record management is required to ensure the right handling of privacy and confidentiality. It has to be in line with the general privacy and confidentiality policy of the HEP and the government.

## **STANDARDS FOR AREA 6**

### **6.1 Programme Management**

- 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.
- 6.1.2 The department must provide accurate, relevant and timely information about the programme which are easily and publicly accessible including prospective students.

- 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 continuous quality improvement.
- 6.1.4 The academic board of the department must be an effective decision-making body with an adequate degree of autonomy.
- 6.1.5 Mechanisms to ensure functional integration and comparability of educational quality must be established for programmes conducted in different regional centres or partner institutions.  
*(This standard must be read together with Standard 7.1.7 in Area 7.)*
- 6.1.6 The department must conduct periodic internal and external consultations as well as graduate employability analyses to ensure currency and relevancy of the programme in meeting market demand.  
*(This standard must be read together with Standard 1.1.2, 1.2.2 in Area 1 and Standard 7.1.6 in Area 7.)*

## **6.2 Programme Leadership**

- 6.2.1 The criteria for the appointment and the responsibilities of the programme leader must be clearly stated. The programme leader must be a full-time staff of the HEP.
- 6.2.2 The programme leader must possess the appropriate qualifications, technological knowledge and experience, and have sufficient authority for curriculum design, delivery and review.
- 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.

### **6.3 Administrative Staff**

- 6.3.1 The HEP must have sufficient number of qualified administrative and academic support staff including instructional designers, editors, graphic designers and ICT support personnel to support the implementation of the programme and related activities.
- 6.3.2 The HEP must conduct regular performance review of the administrative and academic support staff of the programme.
- 6.3.3 The department must have an appropriate training scheme which include ODL related training for the advancement of the administrative and academic support staff as well as to fulfil the specific needs of the programme.

### **6.4 Academic Records**

- 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.
- 6.4.2 The department must maintain student records relating to their admission, performance, completion and graduation in physical or digital format to preserve these records for future reference.
- 6.4.3 The department must implement policies on the rights of individual privacy and the confidentiality of records.
- 6.4.4 The department must continually review policies on the security of records, including the increased use of electronic technologies and safety systems.



## **AREA 7: PROGRAMME MONITORING, REVIEW AND CONTINUAL QUALITY IMPROVEMENT<sup>9</sup>**

Increasingly, society demands greater accountability from HEPs. Expectations are constantly changing as globalisation imposes more pressures on economic development, as science and innovations in technology create more opportunities for individuals and business corporations, and as knowledge generally becomes more easily and quickly available to the public at large. In facing these challenges, HEPs have to become dynamic learning organisations that need to systematically monitor the various issues so as to meet the demands of a constantly changing environment.

In the final analysis, quality is the responsibility of the HEP. It must have in place an effective and strong internal quality assurance mechanism to ensure and sustain a quality culture. Quality enhancement calls for programmes to be regularly monitored, reviewed and evaluated. Monitoring and review for ODL programme should encompass elements such as the ODL system / structure, self-instructional learning materials, delivery system, communication system, student support services, financial strength, assessment system, teaching strategies and physical facilities. It is the responsibility of the department to also monitor, review and evaluate the curriculum components as well as student progress, employability and performance.

Feedback from multiple sources - students, alumni, academic staff, employers, professional bodies and informed citizens - assists in enhancing the quality of the programme. Feedback can also be obtained from an analysis of student performance and from longitudinal studies.

Measures of student performance would include the average study duration, assessment scores, passing rate at examinations, success and dropout rates, students' and alumni' reports about their learning experience, as well as time spent by students in areas of special interest. Evaluation of student performance in examinations can reveal very useful information. For example, if student selection has been correctly done, a high failure rate in a programme indicates something amiss in the curriculum content, learning-teaching activities or assessment system. The programme committees need to monitor the performance rate in each course and investigate if the rate is too high or too low.

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<sup>9</sup> Standards in this area are best read together with Guidelines to Good Practices: Monitoring, Reviewing and Continually Improving Institutional Quality, which is available on the MQA Portal: [www.mqa.gov.my](http://www.mqa.gov.my).

Student feedback, for example through questionnaires and representation in programme committees, is useful for identifying specific problems and for continual improvement of the programme.

One method to evaluate programme effectiveness is longitudinal study of the graduates. The department should have mechanisms for monitoring the performance of its graduates and for obtaining the perceptions of society and employers on the strengths and weaknesses of the graduates, and to respond appropriately.

Comprehensive monitoring and review of the programme for its improvement is to be carried out with a proper mechanism, considering feedback from various parties. The committee responsible for this should be granted adequate autonomy to carry out its responsibility effectively. It is desirable that the departments work in association with the HEP's central Quality Assurance Unit to ensure objectivity.

The HEP must have strong linkages with its stakeholders to ensure that the programmes offered are relevant to the needs of the market, the industry and society as a whole. These stakeholders are the main players that will determine public acceptance of the graduates produced by the programme. Their views and feedback must be taken into account to improve the quality of the programme.

The HEP should have a policy and associated procedures to assure the quality of their programmes. They should also commit themselves explicitly to the development of a culture that recognises the importance of quality, and quality assurance, in their work. The department is then expected to embrace the spirit of continual quality improvement based on prospective studies and analyses that leads to the revision of its current policies and practices, taking into consideration past experiences, present conditions, and future possibilities.

## **STANDARDS FOR AREA 7**

### **7.1 Mechanisms for Programme Monitoring, Review and Continual Quality Improvement**

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

- 7.1.2 The department must have a Quality Assurance (QA) unit/personnel for internal quality assurance of the department to work hand-in-hand with the QA unit of the HEP.
- 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 content and ODL learning support services to ensure its currency and relevancy.
- 7.1.4 The department's review system must constructively engage stakeholders including ODL or technology experts, alumni and employers, whose views are taken into consideration.  
*(This standard must be read together with Standard 1.2.3 in Area 1.)*
- 7.1.5 The department must make the programme review report accessible to stakeholders.
- 7.1.6 The department must show that the programme monitoring and review are conducted periodically, using proper mechanisms and resources, including benchmarked data (student performance, progression, attrition, graduation and employment/career advancement), learning methods and technologies, administration and related educational services.
- 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.)*
- 7.1.8 The findings of a programme review by the department must be presented to the highest academic board of the institution for its attention and further action.
- 7.1.9 There must be an integral link between the departmental quality assurance processes and the achievement of the institutional purpose.

## Section 3

# Submission for Open and Distance Learning, (ODL) Programme Accreditation

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## INTRODUCTION

This section is intended to assist the Higher Education Provider (HEP) in the preparation of its submission for Provisional and Full Accreditation, and Compliance Evaluation of a programme that will be conducted via ODL mode.

### 3.1 Provisional and Full Accreditation

The Provisional and Full Accreditation submission guidelines cover all the seven areas of evaluation with illustrative examples. The HEP is required to provide appropriate information with evidence that support and best illustrate their specific case. Specifically, for PA, the evidence provided by the HEPs must reflect the readiness in terms of policies, procedures, systems, processes, mechanisms etc. The HEP is also invited to furnish additional information that may not be specifically covered in these guidelines but useful in the evaluation. The information provided by the HEP for its submission should be truthful and concise.

#### 3.1.1 The Documentation Required

HEPs are required to submit the documents listed below for consideration of Provisional or Full Accreditation.

For **Provisional Accreditation**, the HEP must submit the **MQA-01-ODL documentation**, while for **Full Accreditation**, the HEP must submit the **MQA-02-ODL documentation**. Both MQA-01-ODL and MQA-02-ODL share the common sections of Part A, B and C. However, in Part C of MQA-02-ODL, it requires a self-review exercise using the **evaluation instrument**.

Submissions for both Provisional and Full Accreditation must be accompanied by relevant attachments, appendices and supporting documents as indicated in the submission template.

The latest template for MQA-01-ODL and MQA-02-ODL as well as the manual for evaluation instrument are available in the MQA portal at [www.mqa.gov.my](http://www.mqa.gov.my).

The following sections briefly described the information required in Part A, B and C:

### **Part A: General Information on the HEP**

This is an institutional profile of the HEP.

### **Part B: Programme Description**

Part B requires the HEP to furnish information on the programme. The information required includes the name of the programme, the Malaysian Qualifications Framework (MQF) level, the graduating credits, the duration of study, entry requirement, mode of delivery and the awarding body.

### **Part C: Programme Standards**

Part C requires the HEP to furnish information on all the standards in the seven areas of evaluation for quality assurance of the programme to be accredited.

However, for **Full Accreditation**, HEP would have to submit a Self-Review Report which is generated through the evaluation instrument, which should include the following **in each of the seven areas of evaluation**:

- i. Strength/Commendation;
- ii. Steps taken to maintain and enhance the strength/Current practices;
- iii. Areas of concern/Weakness/Condition; and
- iv. Steps taken to address the problem areas.

## 3.2 Compliance Evaluation of Full Accreditation Programme

Compliance Evaluation is an exercise to monitor and to ensure the maintenance and enhancement of programmes that have been fully accredited. The Compliance Evaluation is crucial given that the accreditation status of a programme is continual and will be carried out at least once in five years. In the event where the HEP fails to maintain the quality of an accredited programme, the accreditation status of the programme may be revoked and a cessation date shall be recorded in the Malaysian Qualifications Register (MQR).

HEPs should conduct a self-assessment exercise using **MQA-04** to ensure all fully accredited programmes are in compliance with the MQF, programme standards, the condition of Full Accreditation for the purpose of continually improving programme quality. In brief, the MQA-04 documentation comprises four main parts as outlined below:

### 3.2.1 The Documentation Required

HEPs have to submit **MQA-04** for the Compliance Evaluation which require the following information:

#### **Declaration**

HEP will verify that the information and evidence provided are correct and have been endorsed by its management.

#### **Part A: HEP General Information**

This is an institutional profile of the HEP.

#### **Part B: Programme Information**

This section will describe the information of the programme such as name of the programme, the MQF level, the graduating credit, the duration of study, entry requirement, mode of delivery and the awarding body.

#### **Part C: The Compliance Status of Full Accreditation Conditions**

The HEP must provide feedback with evidence for each of the specific conditions imposed by MQA when the full accreditation was awarded. Failure to comply with these conditions may result in revocation of the accreditation status.

#### **Part D: Self-Review Report**

This section requires HEP to provide a Self-Review Report based on the prescribed standards.

All evidence submitted must be reliable and endorsed by the HEP's management. In the event if there is more than one evidence for a particular standard, all the evidence must be appended collectively.

The template for MQA-04 is available in the MQA Portal: [www.mqa.gov.my](http://www.mqa.gov.my).

### **3.3 Detailed Information of MQA-01-ODL and MQA-02-ODL**

The information required in Part A, B and C for MQA-01-ODL and MQA-02-ODL is presented as follows.

## PART A: GENERAL INFORMATION ON THE HIGHER EDUCATION PROVIDER

Part A of the MQA-01-ODL and MQA-02-ODL of this Code of Practice for Programme Accreditation – Open Distance Learning (COPPA:ODL) seeks general information on the Higher Education Provider (HEP).

1. Name of the Higher Education Provider (HEP):
2. Date of establishment:
3. Date of registration (if applicable):
4. Reference no. of registration (if applicable):
5. Name of the chief executive officer (however designated):
6. Address:
  - i. Address:
  - ii. Correspondence (if different from above):
7. Tel:
8. Fax:
9. Email:
10. Website:
11. Names and addresses of Faculties/Schools/Departments/MOE-approved Regional Centres (if located outside the main campus):
  - i.
  - ii.
  - iii.

Note: HEP must attach the MOE approval letter for the said regional centre.

12. Names and addresses of branch campuses (if applicable):
13. List of Faculties/Schools/Departments/MOE-approved Regional Centres in the HEP (and its branch campuses) and no. of programmes offered:

No.	Name of Faculties/Schools/ Departments/MOE-approved Regional Centres	Location	No. of Programmes Offered



14. Details of all programmes currently conducted by the HEP (and its branch campuses/ MOE-approved regional centres, including any offshore arrangements):

No.	Name of Programme	Mode of Delivery (conventional /ODL)	MQF Level	Awarding Body	Location conducted	Type of Programme (collaboration/ own/ external programme/ joint award/ joint degree)	Approving Authority and Date of Approval	Date and Duration of Accreditation by MQA/ Professional Body	Student Enrolment	Programme Status*

\* For public university, indicate status of each programme as follows: active, *jumud*, *beku*, *lupus* or *penawaran semula*.

\* For private HEP, indicate status of each programme as follows: active or inactive (approved but currently not conducted).

15. Total number of academic staff (including part-time tutors/facilitators/instructors in main campus and regional centres):

Status	Academic Qualification	Number of Staff		
		Malaysian	Non-Malaysian	Total
Full-time (all types of designation, including those on one year contract or more)	Doctorate (Level 8)			
	Master (Level 7)			
	Bachelor (Level 6 - including professional qualification)			
	Diploma (Level 4)			
	Others			
	<b>Sub-total</b>			
Part-time	Doctorate (Level 8)			
	Master (Level 7)			
	Bachelor (Level 6 - including professional qualification)			
	Diploma (Level 4)			
	Others			
	<b>Sub-total</b>			
	<b>Total</b>			

16. Total number of students:

	Number of students		Total	Disabled Student
	Local	International		
Male				
Female				
Total				

17. Student attrition:

	Year	Total students (A)	Number of students leaving the institution without graduating (B)	Attrition Rate (%) (B/A)*100	Main reasons for leaving
Past 1 year					
Past 2 years					
Past 3 years					

**Note:** The attrition rate should be provided for each individual year.

18. Total number of administrative and support staff:

No.	Classification by Function (e.g.: educational technology, technical, counselling, financial, IT, human resource, etc.)	Number of Staff

**Note:** Any equivalent unit/centre/department that manages the delivery of programmes via ODL/online learning.

19. Provide audited financial statement for the last three consecutive years:

Year	Financial statement (RM)	
	Profit/Surplus	Loss/Deficit
Past 1 year		
Past 2 years		
Past 3 years		

**Note:** Profit and loss reporting is based on after tax.

20. Provide the latest, dated and signed organisational chart of the HEP.

21. Contact person for the submission:

- i. Name and Title:
- ii. Designation:
- iii. Tel.:
- iv. Fax:
- v. Email:

## PART B: PROGRAMME DESCRIPTION

1. Name of the Higher Education Provider (HEP):
2. Name of the programme (as in the scroll to be awarded):
3. MQF level:
4. Graduating credit:
5. Has this programme been accredited by MQA for other premises? If yes, please provide the following details:

No.	Name and Location of the Premises (main campus / branch campuses / regional centre)	Mode of Delivery	Accreditation Status	
			Provisional	Full
1.				
2.				
3.				

6. Type of award (e.g., single major, double major, etc.):
7. Field of study and National Education Code (NEC):
8. Language of instruction:
9. Type of programme (e.g., own, collaboration, external, joint award/joint degree, etc.):
10. Mode of study (e.g., full-time/part-time):
11. Mode of offer (please (/) where appropriate):

Undergraduate Programme		Postgraduate Programme	
Coursework		Coursework	
Industry Mode (2u2i)		Mixed mode	
		Research	

12. Method of learning and teaching (e.g. lecture/tutorial/lab/field work/studio/blended learning/e-learning, etc.):
13. Mode of delivery: Open and Distance Learning (ODL)

14. Duration of study:

	Full-time			Part-time		
	Long Semester	Short Semester	Industrial Training	Long Semester	Short Semester	Industrial Training
No. of Weeks						
No. of Semesters						
No. of Years						

**Note:** Number of weeks should include study and exam week.

15. Entry requirements:

16. Estimated date of first intake: month/year (applicable for provisional accreditation)

17. Projected intake and enrolment (applicable for provisional accreditation):

Year	Intake	Enrolment
Year 1	e.g.: 100	e.g.: 100
Year 2	e.g.: 100	e.g.: 200
Year 3	e.g.: 100	e.g.: 300
Total	e.g.: 300	e.g.: 300

18. Total student enrolment (applicable for full accreditation):

Year	Intake	Enrolment
Year 1	e.g.: 60	e.g.: 60
Year 2	e.g.: 70	e.g.: 130
Year 3	e.g.: 90	e.g.: 220
Total	e.g.: 220	e.g.: 220

19. Estimated date of first graduation: month/year

20. Types of job or position for graduates (at least two types):

21. Awarding body:

- Own
- Others (Please name)

*(Please attach the relevant documents, where applicable.)*

- i. Proof of collaboration between HEP and the collaborative partner such as copy of the Validation Report\* of the collaborative partner\*\* and the Memorandum of Agreement (MoA).
  - ii. Approval letter from the Higher Education Department (Jabatan Pendidikan Tinggi, JPT) of the Ministry of Education for programmes in collaboration with Malaysian public universities.
  - iii. Proof of approval and supporting letter to conduct the programme from certification bodies/awarding bodies/examination bodies.
  - iv. A copy of the programme specification as conducted by the collaborative partner (eg. Handbook).
  - v. Proof of collaboration with Quality Partners\*\*\* for the programme, where applicable.
  - vi. For programmes which require clinical training, please attach proof of approval from the relevant authority.
  - vii. Any other documents where necessary.
22. A sample of scroll to be awarded should be attached.
23. Address(s) of the location(s) where the programme is/to be conducted:
24. Contact person for the submission:
- i. Name and Title:
  - ii. Designation:
  - iii. Tel.:
  - iv. Fax:
  - v. Email:

**Note:**

\* Validation report is an evaluation by the collaborative partner on the readiness and capability of the institution to offer the programme.

\*\* Collaborative partner is the institution who owns the curriculum of the programme and confers the award (franchisor) while the programme delivery is conducted by another institution (franchisee).

\*\*\* Quality partners are usually better established universities which attest to the quality of a programme through the involvement or oversight of curriculum design, learning and teaching, or assessment.

## **PART C: PROGRAMME STANDARDS**

Part C of the MQA-01-ODL and MQA-02-ODL requires the HEP to furnish information on all the standards in the seven areas of evaluation for quality assurance on the programme to be accredited. The following pages provide a series of questions and statements that guide the HEP in furnishing such information.

In Area 1 (Programme Development and Delivery), there are 30 questions and statements related to the 16 standards.

In Area 2 (Assessment of Student Learning), there are 16 questions and statements related to the 11 standards.

In Area 3 (Student Selection and Support Services), there are 27 questions and statements related to the 18 standards.

In Area 4 (Academic Staff), there are 23 questions and statements related to the 14 standards.

In Area 5 (Educational Resources), there are 19 questions and statements related to the 12 standards.

In Area 6 (Programme Management), there are 19 questions and statements related to the 16 standards.

In Area 7 (Programme Monitoring, Review and Continual Quality Improvement), there are 15 questions and statements related to the nine standards.

## INFORMATION ON AREA 1: PROGRAMME DEVELOPMENT AND DELIVERY

### 1.1 Statement of Educational Objectives of Academic Programme and Learning Outcomes

#### Information on Standards

- 1.1.1 (a) Explain how the programme is in line with, and supportive of, the vision, mission and goals of the HEP, and also how this ODL programme is able to democratise access to education through globalised online learning.
- (b) Outline the overarching Open and Distance Learning (ODL) policy of the HEP. Provide evidence and explain how the department has considered market and societal demand for the programme. In what way is this proposed programme an enhancement of the others?
- 1.1.2 Provide evidence and explain how the department has considered market and societal demand for the programme to be offered via ODL mode. In what way is this proposed programme an enhancement of the other programmes in the related discipline or field?
- (To be read together with information on Standard 1.2.2 in Area 1 and 6.1.6 in Area 6.)*
- 1.1.3 (a) State the programme educational objectives, learning outcomes, learning and teaching strategies, and assessment.
- (b) Map the programme learning outcomes against the programme educational objectives. (Provide information in Table 1).
- (To be read together with information on Standard 1.2.4 in Area 1.)*

**Table 1:** Matrix of Programme Learning Outcomes (PLO) against the Programme Educational Objectives (PEO).

Programme Learning Outcomes (PLO)	Programme Educational Objectives (PEO)			
	PEO1	PEO2	PEO3	PEO4
PLO 1				
PLO 2				
PLO 3				
PLO 4				
PLO 5				

- (c) Describe the strategies for the attainment of Programme Learning Outcomes in term of constructive alignment of learning and teaching strategies, and assessment.

1.1.4 Map the programme learning outcomes to an MQF level descriptors and the five clusters of MQF learning outcomes.

- 1.1.5
- (a) How are the learning outcomes related to the career and further studies options of the student on completion of the programme?
  - (b) Do the learning outcomes relate to the existing and emergent needs of the profession, industry and the discipline? How was this established?

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

### Information on Standards

1.2.1 Describe the provisions (including availability of a unit devoted to the design and development of learning materials for ODL delivery) and practices that indicate the autonomy of the department in the design of the curriculum, and its utilisation of the allocated resources.

1.2.2 Describe the processes to design, develop and approve the curriculum of the programme. State the highest academic authority involved in the approval to offer the programme.

*(To be read together with information on Standard 1.1.2 in Area 1 and 6.1.6 in Area 6.)*

1.2.3 Who and how are the stakeholders including education and ODL experts consulted in the development of the curriculum?

*(To be read together with information on Standard 7.1.4 in Area 7.)*

1.2.4 (a) Describe how the curriculum fulfils the requirements of the discipline of study in line with the programme standards (if applicable) and good



practices in the field.

(b) Provide the necessary information in Table 2.

**Table 2.** Components of the programme and its credit value

	Course Classification	Credit Value	Percentage (%)
1.	Compulsory courses/modules*		
2.	<b>Core**/Major(s)***/Specialisation:</b> • Courses • projects/thesis/dissertation		
3.	Optional/elective courses****		
4.	Minor courses (if applicable)		
5.	Industrial training/Practicum		
6.	Others (specify)		
	<b>Total Credit Value</b>		<b>100</b>

Note:

\* Compulsory courses/modules refer to *Mata Pelajaran Umum* (MPU) and other courses required by the HEP.

\*\* Core courses also include common courses of faculty.

\*\*\* Provide information on major, including double major, if applicable. Optional/elective courses refer to courses where students can exercise choice.

(c) Provide a brief description of each course offered in the programme. Please arrange courses by year and semester as in Table 3.

**Table 3.** Brief description of courses offered in the programme

No	Semester/ Year Offered	Name and Code of Course	Classification (Compulsory Major/ Minor/ Elective)	Credit Value	Programme Learning Outcomes (PLO)					Pre- requisite/Co- requisite	Name(s) of Academic Staff / Course coordinator in main campus
					P L O 1	P L O 2	P L O 3	P L O 4	P L O 5		
1.											
2.											
3.											
4.											
5.											

Note: HEP must provide the details of the tutors/facilitators/instructors employed to conduct tutorial classes at the regional centre during full accreditation exercise.

(d) Provide information for each course, where applicable in Table 4.

**Table 4.** Summary of Course information

1.	Name and Code of Course:																																																																															
2.	Synopsis:																																																																															
3.	Name(s) of Academic Staff:																																																																															
4.	Semester and Year offered:																																																																															
5.	Credit Value:																																																																															
6.	Pre-Requisite/Co-Requisite (if any):																																																																															
7.	Course Learning Outcomes (CLO): CLO 1 - .... CLO 2 - .... CLO 3 - ....																																																																															
8.	Mapping of the Course Learning Outcomes to the Programme Learning Outcomes, Teaching Methods and Assessment Methods: <table border="1" data-bbox="320 952 1430 1328"> <thead> <tr> <th rowspan="2">Course Learning Outcomes</th> <th colspan="11">Programme Learning Outcomes (PLO)</th> <th rowspan="2">Teaching Methods</th> <th rowspan="2">Assessment Methods</th> </tr> <tr> <th>PLO 1</th> <th>PLO 2</th> <th>PLO 3</th> <th>PLO 4</th> <th>PLO 5</th> <th>PLO 6</th> <th>PLO 7</th> <th>PLO 8</th> <th>PLO 9</th> <th>PLO 10</th> <th>PLO 11</th> </tr> </thead> <tbody> <tr> <td>CLO 1</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> <td></td> </tr> <tr> <td>CLO 2</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> <td></td> </tr> <tr> <td>CLO 3</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Indicate the primary causal link between the CLO and PLO by ticking “✓” in the appropriate box.  <i>(This description must be read together with Standards 2.1.2, 2.2.1 and 2.2.2 in Area 2)</i></p>													Course Learning Outcomes	Programme Learning Outcomes (PLO)											Teaching Methods	Assessment Methods	PLO 1	PLO 2	PLO 3	PLO 4	PLO 5	PLO 6	PLO 7	PLO 8	PLO 9	PLO 10	PLO 11	CLO 1														CLO 2														CLO 3													
Course Learning Outcomes	Programme Learning Outcomes (PLO)											Teaching Methods	Assessment Methods																																																																			
	PLO 1	PLO 2	PLO 3	PLO 4	PLO 5	PLO 6	PLO 7	PLO 8	PLO 9	PLO 10	PLO 11																																																																					
CLO 1																																																																																
CLO 2																																																																																
CLO 3																																																																																
9.	Transferable Skills (if applicable): <i>(Skills learned in the course of study which can be useful and utilised in other settings.)</i>																																																																															

10.	Distribution of Student Learning Time (SLT):											
	Course Content Outline	CLO*	Learning and Teaching Activities								Total SLT	
			F2F									
			Physical				Online / Technology-mediated (Synchronous)					NF2F Independent Learning (Asynchronous)
			L	T	P	O	L	T	P	O		
	1											
	2											
	3											
	4											
	Total SLT											
	Continuous Assessment	%	F2F				NF2F Independent Learning for Assessment (Asynchronous)					
			Physical				Online / Technology- mediated (Synchronous)					
	1											
	2											
	Final Assessment	%	Physical				Online / Technology- mediated (Synchronous)				NF2F Independent Learning for Assessment (Asynchronous)	
	1											
	2											
	Total SLT											
	SLT for Assessment											
	Grand Total SLT											
	% SLT for Open and Distance Learning											
	% SLT for Practical Component											
<p>* Indicate the CLO based on the CLO's numbering in Item 8.</p> <p>L = Lecture, T = Tutorial, P = Practical, O = Others, F2F = Face to Face, NF2F = Non-Face to Face</p>												
11.	Identify special requirement or resources to deliver the course (e.g., software, nursery, computer lab, simulation room):											
12.	References (include required and further readings, and should be the most current):											
13.	Other additional information (if applicable):											

\* Can be conducted through physical or online or combination of both

Note: Number of PLO indicated is purely for illustration purposes only and the number is subjected to programme standards (if applicable) and curriculum design.

- 1.2.5 Explain the appropriateness of learning and teaching methods applied to achieve the objectives and learning outcomes of the programme which covers the following:
- (a) A mechanism/system where all forms of interaction and delivery are integrated.
  - (b) The provision of appropriate self-instructional material (SIM) for ODL learners.
  - (c) The establishment of this unit or section (to manage the design and development of SIM) within the institutional organisation structure and outline the roles and responsibilities in this unit.
  - (d) The design (adapt/adopt/create) of the SIM including licensing and copyright matters.
  - (e) Online learning platform used.
  - (f) Mode of interactions between learners.
  - (g) Face-to-face synchronous sessions (physical or virtual).
- (To be read together with information on Standard 1.1.3 in Area 1.)*

### 1.3 Programme Delivery

#### Information on Standards

- 1.3.1 Provide evidence on how the department ensures the effectiveness of delivery in supporting the achievement of course and programme learning outcomes.
- 1.3.2 Show evidence (including those available in the learning portal and/or the learning management system) that the students are provided with, and briefed on, the current information about the programme, for example, Student Handbook and Student Project Handbook.
- 1.3.3
- (a) Provide details of the leader/coordinator of the programme and members of the team responsible for the programme. State the manner in which the above mentioned team manages the programme explaining their line of authority and responsibilities. What are the procedures that guide the planning, implementation, evaluation and improvement of the programme?
  - (b) Does the programme team have access to adequate resources?

Provide evidence.

*(To be read together with information on Standard 6.1.1 and 6.2.2 in Area 6.)*

- 1.3.4 Describe how the department provides favourable conditions for learning, teaching and the execution of practical based training, both in the virtual and/or physical environment, based on the requirements of the programme.  
*(To be read together with information on Standard 5.1.2 in Area 5.)*
- 1.3.5 Describe the department's initiatives to encourage innovations in learning, teaching and assessment, including the use of tools such as analytics to monitor student activities.
- 1.3.6 State how the department obtains feedback and uses it to improve the delivery of the programme outcomes. Provide evidence.

## **INFORMATION ON AREA 2: ASSESSMENT OF STUDENT LEARNING**

### **2.1 Relationship between Assessment and Learning Outcomes**

#### Information on Standards

- 2.1.1 Explain how assessment principles, methods and practices are aligned to the achievement of learning outcomes of the programme consistent with MQF level.  
*(The information given for this standard must be consistent with that of Standard 1.2.4 in Area 1.)*
- 2.1.2 Describe how the alignment between assessment and learning outcomes are regularly reviewed to ensure its effectiveness (please provide policy on the review, if any). Provide evidence.

### **2.2 Assessment Methods**

#### Information on Standards

- 2.2.1 Describe how a variety of assessment methods and tools (including innovative techniques) are used in assessing learning outcomes and

competencies. Show the utilisation of both summative and formative assessment methods within the programme.

*(The information given for this standard must be consistent with that of Standard 1.2.4 in Area 1.)*

- 2.2.2
  - (a) Explain how the department ensures the validity, reliability, integrity currency and fairness of student assessment over time and across sites, i.e. ODL environment (if applicable).
  - (b) Indicate the authority and processes for verification and moderation of summative assessments.
  - (c) Indicate the guidelines and mechanisms which have been put in place to address plagiarism among students.
  - (d) State how often is the assessment methods reviewed.
  - (e) Describe the review of the assessment methods in the programme conducted (e.g., the existence of a permanent review committee on assessment and consultation with external assessors and examiners, students, alumni and industry).
- 2.2.3
  - (a) Describe how the frequency, methods, and criteria of student assessment – including the grading criteria and appeal policies – are documented and communicated to students on the commencement of the programme.
  - (b) Append a copy of the rules, regulation, policies on assessment which will outline the duration, diversity, weightage, criteria and coverage of the assessment.
- 2.2.4 Explain the processes in making changes to the assessment method. How are the changes made known to the students?

## **2.3 Management of Student Assessment**

### Information on Standards

- 2.3.1 Explain the roles, and autonomy of the department and the academic staff in the management of student assessment.
- 2.3.2 Describe how the security of student assessment documents and records

are ensured.

- 2.3.3 Explain when the continuous and final assessments' results are made available and communicated to students to facilitate progression decision.
- 2.3.4 Show and elaborate on the guidelines and mechanisms on students' appeal against course results.
- 2.3.5 Explain how the department periodically reviews the management of student assessment and measures it takes to address the issues highlighted by the review.

## **INFORMATION ON AREA 3: STUDENT SELECTION AND SUPPORT SERVICES**

### **3.1 Student Selection**

#### Information on Standards

- 3.1.1
  - (a) State the criteria and the mechanisms for student selection including candidates with prior experiential learning (accreditation of prior experiential learning, APEL), transfer students and any other additional requirements.
  - (b) Provide evidence that the students selected fulfil the admission policies that are consistent with applicable requirements. If it is a new programme submission, outline only the admission policies and the entry requirements.
- 3.1.2
  - (a) Explain how the selection criteria are accessible to the public. If other additional selection criteria are utilised, describe them.
  - (b) Show evidence that the admission policy and mechanisms are free from unfair discrimination and bias.
- 3.1.3
  - (a) Provide information on student intake for each session since commencement and the ratio of the applicants to intake. If it is a new programme show the projected figures for three years.
  - (b) Describe how the size of student intake is determined in relation to the

capacity of the department and explain the mechanisms for adjustments, taking into account the admission of visiting, auditing, exchange and any transfer students.

- 3.1.4 Describe the policies and mechanisms for appeal on student selection, if applicable.
- 3.1.5 (a) State and describe the support provided covering the orientation, developmental or remedial support for ODL students including new students, incoming transfer students and students with special needs.  
(b) Show how these support systems are evaluated regularly.

### **3.2 Articulation and Transfer**

#### Information on Standards

- 3.2.1 (a) Describe how the department facilitates and manages credit transfer/exemptions and student mobility which may include student transfer within and between institutions as well as cross-border.  
(b) Explain how the department keeps abreast of the latest development on the processes of credit transfer/exemption through networking with other parties, including cross-border collaborative provisions.
- 3.2.2 Indicate how students accepted for transfer could successfully follow the current programme and demonstrate comparable achievements with their previous programme of study.

### **3.3 Student Support Services**

#### Information on Standards

- 3.3.1 (a) Describe the learning support services that are provided by the department to the students.  
(b) Show evidence that those who provide the counselling services are qualified personnel.
- 3.3.2 (a) Describe the roles and responsibilities of those responsible for student support services.



- (b) Describe the organisation and management of the student support services and maintenance of related student support services records.
- 3.3.3 Describe how are students orientated into the programme where they are exposed to the requirements of ODL and trained to cultivate self-directed learning.
- 3.3.4
  - (a) Describe the provision of the academic and career counselling services to students.
  - (b) Describe how the effectiveness of the provision of the academic and career counselling services are measured, monitored, reviewed and improved.
- 3.3.5 Describe the mechanisms that exist to identify and assist students who are in need of academic and career counselling.
- 3.3.6 Describe the processes and procedures in handling student disciplinary cases.
- 3.3.7 Describe the mechanism and avenues available for students to raise their complaints and appeal on academic and non-academic matters.
- 3.3.8 Describe how the student support services are evaluated regularly for their adequacy and effectiveness to ensure student well-being and safety.

### **3.4 Student Representation and Participation**

#### Information on Standards

- 3.4.1 Describe the policy and procedures to actively engage students in areas that affect their interest and welfare during their duration of studies.
- 3.4.2
  - (a) Describe the efforts undertaken by the department to help students to develop linkages with external stakeholders.
  - (b) Describe how the department facilitate students to gain managerial, entrepreneurial and leadership skills in preparation for the workplace or enhancing their current skills in the workplace. Describe the

organisation and management of the student support services and maintenance of related student support services records.

### 3.5 Alumni

#### Information on Standards

- 3.5.1 (a) Describe how the department establishes linkages with the alumni.
- (b) Describe the role of the alumni in the development, review and continuous improvement of the programme.

## INFORMATION ON AREA 4: ACADEMIC STAFF<sup>10</sup>

### 4.1 Recruitment and Management

#### Information on Standards

- 4.1.1 Explain how the department's academic staff plan is consistent with HEP's policies and programme requirements.
- 4.1.2 (a) State the policy, criteria, procedures, terms and conditions of service and/or relevant work experience in ODL as well as in the field related to the course for the recruitment of academic staff.
- (b) Explain the due diligence exercised by the department in ensuring that the qualifications of academic staff are from *bona fide* institutions.
- (c) Describe how the recruitment policy for a particular programme seeks diversity among the academic staff such as balance between senior and junior academic staff, between academic and non-academic staff, between academic staff with different approaches to the subject, and academic staff with multi-disciplinary backgrounds and ODL experiences.
- 4.1.3 Provide data on the staff–student ratio<sup>11</sup> appropriate to the learning-teaching methods and consistent with the requirements in the programme

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<sup>10</sup> Standards in this area are best read together with Guidelines to Good Practices: Academic Staff and Guidelines: Academic Staff Workload, which is available on the MQA Portal: [www.mqa.gov.my](http://www.mqa.gov.my).

<sup>11</sup> 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). For example, two part-time staff, each with half the workload of a full-time staff will be equated to one full-time staff.

standards (where applicable).

- 4.1.4 (a) Provide summary information on every academic staff involved in conducting the programme in Table 5.

**Table 5.** Summary information on academic staff (course coordinator) involved in the programme

No.	Name and Designation of Academic Staff	Appointment Status (full-time, part-time, contract, etc.)	Nationality	Courses Taught in This Programme	Courses Taught in Other Programmes	Academic Qualifications		Research Focus Areas (Bachelor and above)	Past Work Experience		
						Qualifications, Field of Specialisation, Year of Award	Name of Awarding Institution and Country		Positions Held	Employer	Years of Service (start and end)
1											
2											
3											
4											
5											
6											

- (b) Provide curriculum vitae of each academic staff teaching in this programme, which contains the following:

- i. Name
- ii. Academic Qualifications
- iii. Current Professional Membership
- iv. Current Teaching and Administrative Responsibilities
- v. Previous Employment
- vi. Conferences and Training
- vii. Research and Publications
- viii. Consultancy
- ix. Community Service
- x. Other Relevant Information

- (c) Provide information and details on the policy related to the appointment of part-time academics from other institutions for learning and teaching purposes.
  - (d) Provide information on turnover of full-time academic staff for the programme (for Full Accreditation only).
- 4.1.5 Describe how the department ensures equitable distribution of duties and responsibilities of the academic staff which ranges from content preparation, teaching (including facilitating student learning in the online learning platform), research and scholarly activities, consultancy, community services and administrative functions.
- 4.1.6
  - (a) State the policies, procedures and criteria (including involvement in professional, academic and other relevant activities, at national and international levels) for recognising academic staff for promotion, salary increment or other remuneration of academic staff such as incentives to reward innovation in ODL.
  - (b) Describe how are the above information made known to the academic staff.
- 4.1.7 Describe the nature and extent of the national and international linkages to enhance learning and teaching in the programme.
- 4.1.8
  - (a) Describe how the department conducts training and continuous professional development (CPD) programmes related to ODL to all full-time/part-time academic staff or academic support staff.
  - (b) State the policies for training, professional development and career advancement (e.g., study leave, sabbatical, advanced training, specialised courses, re-tooling, etc.) for the new and existing academic staff.
  - (c) Describe the mentoring system, tools, support and technology for self-learning and formative guidance for new academic staff as part of its staff development programme.

## 4.2 Service and Development

#### Information on Standards

- 4.2.1 Provide information on the departmental policy on service, development and appraisal of the academic staff.
- 4.2.2 Describe how does the department ensure that the academic staff are given opportunities to focus on their respective areas of expertise such as curriculum development, curriculum delivery, academic supervision of students, research and writing, scholarly and consultancy activities, community engagement and academically-related administrative duties.
- 4.2.3
  - (a) State the policies for training, professional development and career advancement (e.g., study leave, sabbatical, advanced training, specialised courses, re-tooling, etc.) of the academic staff.
  - (b) State the HEP procedures for handling staff disciplinary cases.
- 4.2.4 Describe the mechanisms and processes for periodic student evaluation of the academic staff. Indicate the frequency of this evaluation exercise. Show how this evaluation is taken into account for quality improvement.
- 4.2.5
  - (a) Describe the opportunities available to academic staff to obtain professional qualifications and to participate in professional, academic and other relevant activities at national and international levels.
  - (b) Describe how through this participation the results are utilises to enhance the learning-teaching experience of the students.
- 4.2.6 Describe how the department encourages and facilitates academic staff in community and industry engagement activities and how they are rewarded.

### **INFORMATION ON AREA 5: EDUCATIONAL RESOURCES**

#### **5.1 Physical and Virtual Facilities**

##### Information on Standards

- 5.1.1 Explain the policy regarding the selection and effective use of electronic devices, internal and external networks, eContent and other effective

means of using information and communication technology in the programme.

- 5.1.2 (a) List the infrastructure and infostructure facilities required for the programme in Table 6.

**Table 6.** List of physical and virtual facilities required for the programme

No.	Learning and teaching activities	Infrastructure and infostructure provided by HEP	PA						FA	
			Available for Year 1		To be provided				No.	Capacity
					In Year 2		In Year 3			
			No.	Capacity	No.	Capacity	No.	Capacity		
1	Lecture & Tutorial									
2	Discussion/ Forum									
3	Learning Resources Development									
4	Learning Resources Delivery									
5	Laboratory/ Practical session									
6	Self-directed/online Learning (eContent)									
	Assessment (continuous and final assessments)									
7	Data storage									
8	Others									

- (b) Describe the adequacy of the infrastructure and infostructure facilities and equipment (e.g., workshop, studio and laboratories) as well as human resources (e.g., laboratory professionals and technicians).
- (c) Provide information on the clinical and practical facilities for programmes which requires such facilities. State the location and provide agreements if facilities are provided by other parties. How are these physical facilities user friendly to those with special needs? Provide a copy of any technical standards that have been deployed for students with special needs.
- (d) Provide information on the arrangement for practical and industrial training.

- (e) Explain how the infrastructure and infostructure facilities are user friendly to those with special needs. Provide a copy of any technical standards that have been deployed for students with special needs.
- 5.1.3 Provide evidence that the department has put in place a LMS to support and facilitate the learning of students through ODL.
- 5.1.4 Show that the infrastructure and infostructure facilities, system and eContent comply with the relevant laws and regulations including issues of licensing.
- 5.1.5
- (a) Describe how the HEP maintains, reviews and improves the adequacy, currency and quality of its educational resources and the role of the department in these processes.
  - (b) Provide information on, and provision for, the maintenance of the physical learning facilities.
  - (c) Describe resource sharing and access mechanisms that are available to extend the library's capabilities. Comment on the extent of use of these facilities by academic staff and students. Comment on the adequacy of the library to support the programme.
  - (d) State the number of reference materials related to the programme in Table 7.

**Table 7.** Reference materials supporting the programme

Resources supporting the programme (e.g., books, online resources, etc)		Journals		State other facilities such as CD ROMs, Video and electronic lessons/reference materials
Number of Title	Number of Collection	Number of Title	Number of Collection	

- 5.1.6
- (a) Describe how the HEP maintains, reviews and improves the adequacy, currency and quality of its educational resources (including ICT resources and facilities such as learning management system, digital/virtual library, video conferencing, virtual labs, online helpdesk)

eContent and the role of the department in these processes.

- (b) Provide the information on, and provision for, the maintenance of the learning facilities.

## **5.2 Research and Development**

*(Please note that the standards on Research and Development are largely directed to universities and university colleges.)*

### Information on Standards

- 5.2.1
  - (a) Describe the policies, facilities and budget allocation available to support research.
  - (b) Describe the research activities of the department and the academic staff involved in them.
- 5.2.2
  - (a) Describe how the HEP encourages interaction between research and learning. Show the link between the HEP's policy on research and the learning-teaching activities in the department.
  - (b) State any initiatives taken by the department to engage students in research.
- 5.2.3 Describe the processes by which the department review its research resources and facilities and the steps taken to enhance its research capabilities and environment, where a link between research, development and the industry could be created.

## **5.3 Financial Resources**

### Information on Standards

- 5.3.1 Provide audited financial statements or certified supporting documents for the last three consecutive years. Explain the financial viability and sustainability based on the provided statements/documents.
- 5.3.2 Demonstrate that the department has clear budgetary and procurement procedures to ensure that its financial resources are sufficient and managed efficiently to maintain high standards of quality.



- 5.3.3 (a) Indicate the responsibilities and lines of authority in terms of budgeting and resource allocation in the HEP with respect to the specific needs of the department.
- (b) Describe the HEP's financial planning for the programme in the next two years.

## INFORMATION ON AREA 6: PROGRAMME MANAGEMENT

### 6.1 Programme Management

#### Information on Standards

- 6.1.1 (a) Describe the management structure and functions, and the main decision-making components of the department, as well as the relationships between them. How are these relationships made known to all parties involved?
- (b) Indicate the structure and composition of the committees in the department and provide the frequency of the meetings.
- 6.1.2 Describe how the department ensure accuracy, relevancy and timeliness of disseminating the information about the programme which are easily and publicly accessible, especially to prospective students.
- 6.1.3 Describe the policies, procedures and mechanisms for regular review and updating of the department's structures, functions, strategies and core activities to ensure continuous quality improvement. Identify person(s) responsible for continuous quality improvement within the department.
- 6.1.4 Show evidence (such as terms of reference, minutes of meeting) that the academic board of the department is an effective decision-making body with adequate autonomy.
- 6.1.5 Describe the arrangements agreed upon by the HEP and its different regional centres or partner institutions to assure functional integration and comparability of educational quality.
- (To be read together with information on Standard 7.1.7 in Area 7.)*
- 6.1.6 Show evidence that the department has conducted periodic internal and

external consultations as well as graduate employability analyses to ensure currency and relevancy of the programme in meeting market demand.

*(To be read together with information on Standard 1.1.2, 1.2.2 in Area 1 and 7.1.6 in Area 7.)*

## 6.2 Programme Leadership

- 6.2.1 Outline the criteria for the appointment and job description of the programme leader.
- 6.2.2 Name the academic leadership of this programme. State the qualifications, experiences, tenure, and responsibilities of the programme leader. Prove that the programme leader has sufficient authority for curriculum design, delivery and review.
- 6.2.3 Describe the mechanism and processes to ensure the relationship between the programme leader, department and HEP on matters such as staff recruitment and training, student admission, allocation of resources and decision-making processes.

## 6.3 Administrative Staff

### Information on Standards

- 6.3.1 (a) Describe the structure of the administrative and academic support staff which support the programme.
- (b) Explain how the number of administrative and academic support staff is determined in accordance to the needs of the programme and other activities. Describe the recruitment processes and procedures. State the terms and conditions of service.
- (c) State (in Table 8) the numbers required and that are available, job category and minimum qualification for administrative and academic support staff of the programme.

**Table 8.** Administrative and academic support staff for the programme

No.	Job Category	Minimum qualification	Number of staff required	Current number
1				

2				
3				

- 6.3.2 State the mechanisms and procedures for monitoring and appraising the performance of the administrative and academic support staff of the programme.
- 6.3.3 Describe the training scheme including ODL related training for the advancement of the administrative and academic support staff and show how this scheme fulfils the current and future needs of the programme.

#### **6.4 Academic Records**

- 6.4.1 (a) State the policies and practices on the nature, content and security of student, academic staff and other academic records at the departmental level and show that these policies and practices are in line with those of the HEP.
- (b) Explain the policies and practices on retention, preservation and disposal of student, academic staff and other academic records.
- 6.4.2 Explain how the department maintains student records (including the information and data in the electronic Learning Management System) relating to their admission, performance, completion and graduation.
- 6.4.3 Describe how the department ensures the rights of individual privacy and the confidentiality of records.
- 6.4.4 Describe the department's review policies on security of records and safety systems and its plans for improvements.

### **INFORMATION ON AREA 7: PROGRAMME MONITORING, REVIEW AND CONTINUAL QUALITY IMPROVEMENT**

#### **7.1 Mechanisms for Programme Monitoring, Review and Continual Quality Improvement**

##### Information on Standards

- 7.1.1 Describe the policies and mechanisms for regular monitoring and review

including its structures, functions, strategies, policies, standard operating procedures (SOPs) and core activities to ensure continual quality improvement complements the department's effort in continual quality improvement.

- 7.1.2 Describe the roles and the responsibilities of the Quality Assurance (QA) unit/personnel responsible for internal QA of the department.
- 7.1.3
- (a) Describe the structure and the workings of the internal programme monitoring and review committee in ensuring the continual review of the programme content and ODL learning support services.
  - (b) Describe the frequency and mechanisms for monitoring and reviewing the programme.
  - (c) Describe how the department utilises the feedback from a programme monitoring and review exercise to further improve the programme.
  - (d) Explain how the monitoring and review processes help ensure that the programme keeps abreast with scientific, technological and knowledge development of the discipline, and with the needs of society.
  - (e) Describe how the learning support services (including the online system, learning materials, assessment, administration/management of the programmes, ICT system including bandwidth management, physical facilities) are reviewed periodically.
- 7.1.4 Explain who and how are the stakeholders involved (including ODL or technology experts) in the programme review and show how their views are taken into consideration.  
*(To be read together with information on Standard 1.2.3 in Area 1.)*
- 7.1.5 Explain how the department informs the stakeholders the result of a programme assessment as well as review and how their views on the report are taken into consideration in the continuous improvement and development of the programme.
- 7.1.6 Explain how the said benchmark data, learning-teaching methods and technologies, and administration related educational services are analysed as part of the programme monitoring and review as well as for the purposes

of continual quality improvement. Provide evidence.

- 7.1.7 Describe the responsibilities of the parties involved in collaborative arrangements in programme monitoring and review.

*(To be read together with information on Standard 6.1.5 in Area 6.)*

- 7.1.8 Describe how the findings of the review are presented to the HEP and its further action therefrom.

- 7.1.9 Show how the departmental quality assurance processes are integrated with the achievement of the institutional purpose.

## Section 4

# Programme Accreditation

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### INTRODUCTION

Programme accreditation is carried out through three stages of evaluation, namely Provisional Accreditation, Full Accreditation and Compliance Evaluation. Each stage has a different quality focus depending on the state of development, delivery and progression of the programme.

Provisional Accreditation emphasises on the design of curriculum and the preparatory arrangements for programme delivery. Full Accreditation verifies the delivery of the programme and the availability of support systems, while Compliance Evaluation examines the programme sustainability based on quality maintenance and enhancement.

#### 4.1 The Programme Self-Review<sup>12</sup>

HEP must periodically conduct a Programme Self-Review (PSR) through its internal quality assurance system for individual programme or a group of programmes. The PSR is integral to the accreditation process as its findings form part of the submission for Full Accreditation. Following the conferment of the Full Accreditation of a programme, the department is required to carry out a PSR once within five years, or as specified in the conditions of the programme accreditation. This is for the purpose of continual quality improvement as well as for the Compliance Evaluation which is an audit conducted by the MQA to maintain the accredited status of the said programme. A copy of the Programme Self-Review Report (PSRR) must be submitted to the MQA as and when required.

The self-review must be widely understood and owned so that the results and implications of the review are followed through. The departmental head and other senior staff involved in the running of the programme must be totally committed to, and supportive of, the self-review and its purposes.

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<sup>12</sup> This subsection is to be read together with Guidelines to Good Practices: Monitoring, Reviewing and Continually Improving Institutional Quality, which is available on the MQA Portal: [www.mqa.gov.my](http://www.mqa.gov.my).

A PSR is concerned with the objectives of the programme and with the success of the department in achieving the objectives and learning outcomes based on the requirements described in Section 2. The department should employ a variety of methods, and use the results for the improvement of the programme and its support activities. The PSR builds as much as possible on current relevant activities and materials.

The following questions should be considered in addressing the seven areas of evaluation:

- i. What actions are undertaken in relation to these quality areas? Why were these actions chosen? Are these actions appropriate?
- ii. How do we check their effectiveness? What performance indicators do we have? Are the indicators appropriate?
- iii. What do we do as a result of the review?
- iv. Can we measure the degree of achievements? What are the actual outcomes?
- v. Can we improve on the existing actions, even on those that are already effective?

## **4.2 The Programme Self-Review Committee**

A Programme Self-Review Committee (PSRC) must be formed with a senior person with appropriate experience as the chairperson. Members of the PSRC should include people who are able to make objective assessments and give useful information on the programme. They may include external advisors and examiners, head of departments, programme coordinators, senior and junior academics, administrative staff, students and alumni, and others associated with the programme.

For each of the seven areas of evaluation, it is recommended that a person most familiar with the relevant area be appointed as the head of that area. The chairperson is responsible for coordinating the PSR exercise and writing the final report. The department and the HEP generally must ensure that the views of everyone concerned, especially that of the students, are appropriately included in the PSRR.

PSRC is responsible to:

- i. comply with the applicable audit requirements;
- ii. plan and carry out assigned responsibilities effectively and efficiently;
- iii. communicate and clarify audit requirements;
- iv. document the observations;
- v. analyse and report the audit results;

- vi. retain and safeguard documents pertaining to the audit;
- vii. submit the report as required;
- viii. ensure the report remains confidential and to treat privileged information with discretion; and
- ix. liaise with the department for further information.

The PSRC should also:

- i. work within the audit scope;
- ii. exercise objectivity;
- iii. collect data that is relevant;
- iv. analyse evidence that is relevant and sufficient to draw conclusions regarding the internal quality system;
- v. remain alert to any indications of evidence that can influence the audit results that may require further inquiry;
- vi. act in an ethical manner at all times;
- vii. constantly evaluate the observations and personal interactions during the audit;
- viii. treat all personnel involved in a way that will best achieve the audit purpose; and
- ix. arrive at objective conclusions based on the audit observations.

#### **4.2.1 The Programme Self-Review Process**

The PSR process involves two main activities, namely data collection and data analysis.

The PSRC should gather data that provide overall factual description and reflection of the programme, and should ensure the accuracy and consistency of data across the seven areas of evaluation. Wherever possible, references should be made to documents which could be attached or made available to the Panel of Assessors (POA) during the programme accreditation or compliance evaluation.

The PSRC should analyse the strengths, weaknesses, and opportunities of the programme and assess them against the quality standards.

#### **4.2.2 Guidelines to Writing the Programme Self-Review Report**

The PSRR outlines the findings of the PSRC that covers seven areas of evaluation and includes commendations, affirmations and recommendations. The PSRC comes to its conclusions through its interpretation of the evidence gathered. The extent and



weight of the recommendations are determined by the observed facts.

The PSRR should contain objective and substantiated statements. It should focus on the policies, processes, documentation, strengths and weaknesses related to the programme.

The PSRR should address issues, identify the areas of concern, and determine the most appropriate activities that need to be undertaken. Areas for improvement should be prioritised and stated briefly and concisely. It will make constructive comments on aspects of the department's plans to achieve its programme objectives.

### **4.3 The External Programme Evaluation**

All applications for programme accreditation will be subjected to an independent external evaluation coordinated by the MQA.

The MQA expects each programme provider to develop its own context and purpose within the larger quality framework of MQA, and to use the purpose statement as the foundation for planning and evaluation of the programme. The quality of the programme will be judged by how effectively the programme achieves its stated objectives. The POA will make judgments based on the evidence provided by the department as well as its own evaluations.

The following describes the role players, processes and stages involved in the conduct of a programme accreditation.

#### **4.3.1 The Parties to the Accreditation Process**

There are typically five parties involved in the accreditation process, namely MQA officer, the liaison officer, the representatives of the HEP, the Chairperson and the panel members.

##### **4.3.1.1 MQA Officer**

MQA will assign an accreditation officer for every application received from the HEP. The MQA officer has the following responsibilities:

- i. To act as a resource person on policy matters;
- ii. To coordinate and liaise with the panel members;

- iii. To liaise with the department liaison officer;
- iv. To ensure that the panel conducts itself in accordance with its responsibilities;
- v. To ensure that the accreditation process is conducted effectively and in a timely manner;
- vi. To keep copies of handouts, evaluation reports, organisational charts, for incorporation, as appropriate, in the Final Report; and
- vii. To provide other relevant administrative services.

#### **4.3.1.2 The Liaison Officer**

The HEP should appoint a liaison officer to coordinate with MQA in the programme accreditation. The liaison officer has the following responsibilities:

- i. To act as a resource person on behalf of the HEP;
- ii. To coordinate and liaise with MQA officer;
- iii. To assist in arranging the tentative schedule for the visit and informing all the relevant people of the audit plan;
- iv. To provide the evaluation team with the necessary facilities;
- v. To provide copies of relevant documents and records; and
- vi. To provide other relevant administrative services.

#### **4.3.1.3 Representatives of the HEP**

The HEP will be advised as to the groups of people the POA will want to interview for the purpose of the evaluation visit. The POA may request to meet the following people or categories of people:

- i. The Chief Executive Officer;
- ii. Senior management of the HEP, which may include the Registrar;
- iii. The head of Internal Quality Unit;
- iv. The head of department;
- v. The programme leader;
- vi. Members of the internal review committee;
- vii. Members of the board of the department;
- viii. Student leaders;
- ix. Academic staff and a cross-section of students in the programme;
- x. A selection of graduates, where appropriate;
- xi. Representatives of the industry and government relevant to the programme; and

xii. Others as appropriate.

It is important for the POA to meet representatives of each of the above categories to obtain a cross-sectional perspective of the programme and its quality. Students and the academic staff are two key constituents in getting feedback on the effectiveness of learning-teaching and the attainment of learning outcomes.

Students' opinion will be sought regarding the quality and adequacy of the academic programme and the provision of student support services, as well as their role in providing feedback to the department on these matters. Students can also be requested to serve as guides in the visits to the library, classroom, laboratories and other learning-teaching facilities.

Academic staff's opinion is sought regarding staff development, promotion and tenure, workload distribution, teaching skills, understanding of the programme educational objectives and learning outcomes. In addition, POA will obtain their perception of the programme, students, the academic culture of the department, and the appropriateness and sufficiency of available facilities.

#### **4.3.1.4 The Chairperson**

MQA will appoint a chairperson for the POA who will be responsible for the overall conduct of the external programme evaluation exercise. Further details on the roles and responsibilities of the chairperson are provided in Section 5.

#### **4.3.1.5 The Panel Members**

MQA will appoint the members of the POA. Further details on the roles and responsibilities of the panel members are provided in Section 5.

### **4.4 The Programme Evaluation Process**

Although all the three stages of evaluation share many common processes, there are nevertheless many differences. The following description of the process and timeline takes into consideration these differences.

When the HEP submits the relevant documents for purposes of evaluation, MQA will scrutinise the documents to ensure that they are complete. MQA will then appoint a POA and commence the evaluation exercise based on the stipulated timeline and process.

#### 4.4.1 Provisional Accreditation

Upon receipt of a complete application for Provisional Accreditation of a programme from a HEP, MQA will commence the evaluation process. At the successful completion of the evaluation process, the MQA will grant the Provisional Accreditation to the programme. A flow chart for Provisional Accreditation process is provided in **Appendix 1**.

A typical timeline for a Provisional Accreditation process is shown in Table 9.

**Table 9.** Typical process for provisional accreditation

Activities and Responsibilities
<ul style="list-style-type: none"> <li>• HEP notifies MQA of its intention to submit application</li> </ul>
<ul style="list-style-type: none"> <li>• HEP submits a complete application to MQA</li> </ul>
<ul style="list-style-type: none"> <li>• MQA: <ul style="list-style-type: none"> <li>- records the application</li> <li>- checks whether the information submitted is complete</li> <li>- assigns the application to the relevant officer</li> <li>- notifies the HEP that the evaluation process will commence</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• MQA: <ul style="list-style-type: none"> <li>- appoints members of panel of assessors (POA)</li> <li>- forwards the application to the POA</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• POA prepares the evaluation report</li> </ul>
<ul style="list-style-type: none"> <li>• Coordination meeting between MQA and the POA (If a site visit is necessary, the visit will be carried out)</li> <li>• Chairperson of the POA collates the report of the panel member and submits the evaluation report to MQA at the end of the coordination meeting</li> </ul>
<ul style="list-style-type: none"> <li>• MQA verifies the evaluation report and sends it to the HEP</li> </ul>
<ul style="list-style-type: none"> <li>• HEP sends feedback on the evaluation report to MQA</li> </ul>
<ul style="list-style-type: none"> <li>• MQA sends the feedback to Panel Chairperson</li> </ul>
<ul style="list-style-type: none"> <li>• Chairperson evaluates the feedback</li> </ul>
<ul style="list-style-type: none"> <li>• MQA Vetting Committee reviews the report for purposes of submission to the Accreditation Committee</li> </ul>
<ul style="list-style-type: none"> <li>• MQA tables the report and the recommendation to the Accreditation Committee</li> </ul>

Activities and Responsibilities
<ul style="list-style-type: none"> <li>MQA: <ul style="list-style-type: none"> <li>notifies the HEP the decision of the Accreditation Committee to grant or deny Provisional Accreditation</li> </ul> </li> </ul>

#### 4.4.2 Full Accreditation and Compliance Evaluation

An application for Full Accreditation is made when the first cohort of students reaches final year. Full Accreditation requires a site visit by the POA. The Full Accreditation process can be divided into three main components: before, during and after the site evaluation visit. A flow chart for Full Accreditation process is provided in **Appendix 2**.

Compliance Evaluation applies a process similar to Full Accreditation. Its evaluation focuses on the relevancy and sustainability of accredited programmes. The flow chart for Compliance Evaluation process is provided in **Appendix 3**.

##### 4.4.2.1 Before the Evaluation Visit

Table 10 describes the preparatory stage before the evaluation visit by POA.

**Table 10.** Typical pre-visit evaluation process

Activities and Responsibilities
<ul style="list-style-type: none"> <li>HEP notifies MQA of its intention to submit application (only for Full Accreditation)</li> </ul>
<ul style="list-style-type: none"> <li>HEP submits a complete Full Accreditation/ Compliance Evaluation application to MQA</li> </ul>
<ul style="list-style-type: none"> <li>MQA: <ul style="list-style-type: none"> <li>records the application</li> <li>checks whether the information submitted is complete</li> <li>assigns the application to the relevant officer</li> <li>notifies the HEP that the evaluation process will commence</li> </ul> </li> </ul> <p><b>Note:</b> MQA will notify HEP to submit the application for Compliance Evaluation.</p>
<ul style="list-style-type: none"> <li>MQA: <ul style="list-style-type: none"> <li>appoints the members of the POA</li> <li>MQA, HEP and the POA agree on a date for evaluation visit to the HEP</li> <li>forwards the application to the POA</li> </ul> </li> </ul>

<b>Activities and Responsibilities</b>
<ul style="list-style-type: none"> <li>• POA prepares the preliminary evaluation report</li> </ul>
<ul style="list-style-type: none"> <li>• POA preparatory meeting (only for Compliance Evaluation)</li> </ul>
<ul style="list-style-type: none"> <li>• POA sends the preliminary evaluation report to MQA</li> </ul>

### **The Panel of Assessors Preparatory Meeting (for Compliance Evaluation only)**

After receiving the preliminary report from each panel member, a Preparatory Meeting of the POA will be conducted ideally two weeks before the visit. In this meeting, the POA will:

- i. share each other's views of the HEP's submission;
- ii. determine the main issues for evaluation;
- iii. review the evaluation procedures;
- iv. identify any further information, clarification or documentation required from the HEP; and
- v. review schedule for the programme evaluation visit.

Following the Preparatory Meeting, the MQA will advise the HEP if there is any further information, clarification or documentation required from it.

#### **4.4.2.2 During the Evaluation Visit**

The principal purpose of the site evaluation visit by the POA is to verify the statements, descriptions, conclusions and proposed improvement activities as presented in the PSRR and to acquire further insight into the programme's operations through first-hand investigation and personal interaction. A visit allows for a qualitative assessment of factors that cannot be easily documented in written form and may include facilities inspection.

Visits can be between two to three days' duration depending on the scope of the visit. Table 11 describes the typical activities of an evaluation visit and the personnel involved.

**Table 11.** Typical activities of an evaluation visit and personnel involved

Activities	Personnel Involved
• POA Coordination Meeting	- POA - HEP Liaison Officer
• Meeting with Senior Management and briefing by HEP	- POA - HEP Senior Management - Programme Staff
• Inspection of the Facilities	- POA - Student Guide
• Document Review	- POA
• Meeting with Key Programme Staff	- POA - Programme Staff
• Meeting with Programme Team, Counsellors and Other Support Staff	- POA - Counsellors - Support Staff - Programme Team
• Learning and Teaching Observations	- POA
• Meeting with Students	- POA - Students
• POA Finalises Findings and Report	- POA
• Exit Meeting	- POA - HEP Representatives
The visit activities will be arranged in accordance to specific audit priorities, issues and availability of evidences as agreed by MQA, POA and HEP.	

There will be an opening meeting whereby the chairperson of the POA explains the purpose and requirements of the visit. The HEP may provide background information regarding the institution and programme at this stage.

The POA conducts interviews with staff, students and other relevant stakeholders to clarify issues on the effectiveness of the programme in achieving its objectives.

The POA normally takes advantage of every appropriate opportunity to triangulate its finding through various sources. To this end, most meetings are not single-purpose meetings. Interviewees may, within reason, expect to be

asked about anything within the scope of the programme evaluation. The POA, already equipped with the background information of the programme, reaches its final conclusions through interviews and observations, and through its consideration of the additional documentary evidence supplied.

To conclude the visit, the POA meets to formalise its findings which are then reported to the HEP.

### **The Evaluation Report**

The chairperson is responsible for drafting the report, in full consultation with, and cooperation of, the panel members, to ensure that it represents the consensus view of the POA.

The POA comes to its conclusions and recommendations through observed facts and through its interpretation of the specific evidences received from the various sources or that it has gathered itself. The evaluation report will generally focus on areas of concern (**recommendations**) and suggestions to improve the programme. However, the report may also include the **commendations** (aspects of the provision of the programme that are considered worthy of praise), and **affirmations** (proposed improvements by the department on aspects of the programme, which the POA believes to be significant and which it welcomes).

### **The Exit Report**

At the end of the visit, an executive summary (written/oral) will be given to the HEP on behalf of the POA. The chairperson highlights the programme's areas of strengths and emphasises the areas of concern and opportunities for improvement as per the finding during the evaluation visit. All key elements highlighted in the oral presentation, written executive summary and final written report must be clear and consistent throughout the process. It is critical to note that at this point, the POA reports on the findings of the visit and not provide an accreditation decision to the HEP. The chairperson should advise the members of the HEP that the report is subjected to further verification process by MQA.



#### 4.4.2.3 After the Evaluation Visit

Table 12 describes the activities undertaken after the evaluation visit.

**Table 12.** Typical process for post-visit evaluation

Activities and Responsibilities	
•	Each panel member will produce an individual report. The report will be collated by the chairperson of the POA and submitted to MQA (only for Compliance Evaluation)
•	MQA sends the final report to the HEP for verification of facts (only for Compliance Evaluation)
•	HEP sends feedback on the evaluation report to MQA (only for Compliance Evaluation)
•	MQA sends the feedback to chairperson/panel member (only for Compliance Evaluation)
•	Chairperson/panel member evaluates the feedback (only for Compliance Evaluation)
•	MQA Vetting Committee reviews the report for submission to the Accreditation Committee
•	MQA tables the report and the recommendation to the Accreditation Committee for its decision
•	MQA notifies the HEP the decision of the Accreditation Committee

#### 4.5 Recommendations on the Programme Accreditation

Based on the findings contained in the final evaluation report, the POA may propose to MQA one of the following recommendations:

No.	Provisional Accreditation	Full Accreditation	Compliance Evaluation
i	Grant the Provisional Accreditation with / without conditions	Grant the Accreditation with/without conditions	Continue Accreditation with/without conditions
ii.	Grant the Provisional Accreditation after conditions are fulfilled	Grant the Accreditation after conditions are fulfilled	
iii.	Denial of Provisional Accreditation (with reasons)	Denial of Accreditation (with reasons)	Withdrawal of Accreditation (with reasons)

The report on the evaluation findings, together with the recommendations, is vetted by the MQA Vetting Committee before it is presented to the MQA Accreditation Committee for its decision. For professional programmes, the application will be decided by the relevant professional bodies based on the recommendation of the Joint Technical Committee set up by the respective professional bodies of which MQA is a member.

All provisionally accredited programmes will be registered in the List of Provisionally Accredited Programmes, while all fully accredited programmes will be issued a certificate of accreditation and registered in the Malaysian Qualifications Register (MQR). Programmes which have successfully undergone the Compliance Evaluation will continue its registration in the MQR, while others will have a cessation date recorded in the MQR.

#### **4.6 Appeal**

The HEP can appeal against the decision of the MQA Accreditation Committee or professional bodies. Generally, the appeal can be made in relation to the factual contents of the report, any substantive errors within the report or substantive inconsistencies between the oral exit report, the final evaluation report and the decision of the Accreditation Committee.

An appeal against a decision of the MQA Accreditation Committee can be submitted to the Department of Higher Education, Ministry of Education for consideration by the Minister of Education. An appeal against the decision of the professional body can be submitted to the professional body through MQA for consideration by the Appellate Body set up by the respective professional bodies. All appeals must be made within the provision of MQA Act 679.

## Section 5

# The Panel of Assessors

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### INTRODUCTION

Higher Education Providers (HEPs) make submissions to MQA for the purpose of either a Provisional Accreditation, Full Accreditation or Compliance Evaluation of programmes. Assessment for Provisional Accreditation, Full Accreditation and Compliance Evaluation will be based on the information provided in MQA-01 (2017), MQA-02 (2017) and MQA-04, respectively. These assessments will also be based on other documents submitted, and further supported by observation, written and oral evidence, and personal interaction during the evaluation visit by assessors appointed by MQA.

Programmes are assessed or evaluated for the purposes of accreditation or maintenance of accreditation. In this section, the terms assessment and evaluation are used interchangeably.

The HEP and relevant departments are expected to have mechanisms in place for verification and also at the same time, to be able to demonstrate to the Panel of Assessors (POA) that the procedures are effectively utilised and that there are plans to address any shortfalls.

The primary task of the POA is to verify the compliance to policies and standards, and that the processes, mechanisms and resources are appropriate for the effective delivery of the programme. Verification includes evaluation on the effectiveness of the quality assurance procedures. For this purpose, the assessors must investigate the application of these procedures, and the extent to which the programme achieves the expected learning outcomes.

### 5.1 Appointing Members of the Panel of Assessors

The selection of members of the POA is guided by the type, level and discipline of the programme to be assessed, and by the availability, suitability, expertise, experience and neutrality of the prospective panel members.

### 5.1.1 Personal and General Attributes of Assessors

Assessors should be competent, ethical, open-minded and mature. They should be good speakers and good listeners. They should possess sound judgment, analytical skills and tenacity. They should have the ability to perceive situations in a realistic way, understand complex operations from a broad perspective, and understand the role of individual units within the overall organisation.

Equipped with the above attributes, the assessors should be able to:

- i. obtain and assess evidence objectively and fairly;
- ii. remain true to the purpose of the assessment exercise;
- iii. evaluate constantly the effects of observations and personal interactions during the visit;
- iv. treat personnel concerned in a way that will best achieve the purpose of the assessment;
- v. commit full attention and support to the evaluation process without being unduly distracted;
- vi. react effectively in stressful situations;
- vii. arrive at generally objective conclusions based on rational considerations; and
- viii. remain true to a conclusion despite pressure to change what is not based on evidence.

It is not expected that each panel member possesses all the competencies and experience required of an assessor, but as a group, the panel should possess qualities which may include some or all of the following:

**i. Higher education qualification or further education and training aspects:**

- a. Appropriate subject knowledge and teaching experience
- b. Knowledge of curriculum design and delivery
- c. Programme leadership or management experience
- d. Experience in research and scholarly activities
- e. Up-to-date with current developments in the field of study

**ii. Quality evaluation aspects:**

- a. An understanding of the context and environment within which the department operates
- b. Commitment to the principles of quality and quality assurance in higher education

- c. Knowledge of quality assurance, methods and terminologies
- d. Experience and skills in quality reviews and accreditation processes
- e. Ability to relate processes to outputs and outcomes
- f. Ability to communicate effectively
- g. Ability to focus knowledge and experience to evaluate quality assurance procedures and techniques, and to suggest good practices and ways for improvements
- h. Ability to produce quality reports in a timely manner
- i. Familiar with MQA quality assurance documents, current policies and advisory notes
- j. Ability to work in a team

**iii. Personal aspects:**

- a. Integrity
- b. Discretion
- c. Timeliness
- d. Breadth and depth of perspective
- e. Commitment and diligence

### **5.1.2 Responsibilities of the Assessors**

Assessors are responsible for:

- i. complying with the evaluation requirements;
- ii. communicating and clarifying evaluation requirements;
- iii. planning and carrying out assigned responsibilities effectively and efficiently;
- iv. documenting observations;
- v. reporting the evaluation findings;
- vi. safeguarding documents pertaining to the accreditation exercise;
- vii. ensuring documents remain confidential;
- viii. treating privileged information with discretion;
- ix. cooperating with, and supporting, the chairperson;
- x. attending POA training from time to time to keep abreast with new development and to improve evaluation skills;
- xi. producing evaluation report within the time frame given; and
- xii. updating personal information in POA portal.

Assessors should:

- i. remain within the scope of the programme accreditation;

- ii. exercise objectivity;
- iii. collect and analyse evidence that is relevant and sufficient to draw conclusions regarding the quality system;
- iv. remain alert to any indications of evidence that can influence the results and possibly require further assessment; and
- v. act in an ethical manner at all times.

## 5.2 Conflict of Interest

Prospective assessors must declare their interest in the institution. If the prospective assessor has a direct interest, MQA may exclude him/her from consideration. In addition, the HEP can register its objections to their appointment. If an HEP disagrees with a prospective assessor, it is obliged to furnish reasons for its objection. However, the final decision whether to select a particular person as an assessor rests with the MQA.

Conflict of interest may be categorised as personal, professional or ideological.

- i. **Personal conflict** could include animosity or close relationship between an assessor and the Chief Executive Officer or other senior manager of the HEP, or being related to one, or being a graduate of the programme, or having close relative in the programme, or if an assessor is excessively biased for, or against, the HEP due to some previous events.
- ii. **Professional conflict** could occur if an assessor had been a failed applicant for a position in the HEP, is a current applicant or a candidate for a position in the HEP, is a senior advisor, examiner or consultant to the HEP, or is currently attached to an HEP that is competing with the one being evaluated.
- iii. **Ideological conflict** could be based on differing world views and value systems. An example of this type of conflict would be an assessor's lack of sympathy to the style, ethos, type or political inclination of the HEP.

## 5.3 Members of the Panel of Assessors

Potential members for the POA are selected from the MQA's Register of Assessors. The selection of assessors depends on the type of the programme, the characteristics of the HEP, and the need to have a panel that is coherent and balanced in background and experience.

It is crucial that the members of the POA work together as an evaluation team, and not attempt to apply pre-conceived templates to their consideration of the programme being evaluated, nor appear to address inquiries from entirely within the perspective of their own specialty or the practices of their own HEP. All communications between the HEP and members of the panel must be via the MQA.

### **5.3.1 The Chairperson**

The chairperson is the key person in an accreditation exercise and should have prior experience as an assessor. It is the Chair's responsibility to create an atmosphere in which critical professional discussions can take place, where opinions can be liberally and considerately exchanged, and in which integrity and transparency prevail. Much of the mode and accomplishment of the accreditation exercise depends on the chairperson's ability to facilitate the panel to do its work as a team rather than as individuals, and also to bring out the best in those whom the panel meets.

The chairperson is responsible to ensure that the exit report accurately summarises the outcomes of the visit and is consistent with the reporting framework. The chairperson presents the oral exit report that summarises the tentative findings of the team to the representatives of the HEP. The chairperson also has a major role in the preparation of the written report and in ensuring that the oral exit report is not materially different from the final report.

The chairperson is expected to collate the reports of the members of the panel and to work closely with them to complete the draft report within the specified time frame. He is responsible for organising the contributions from the other team members and to ensure that the overall report is evidence-based, standard-referenced, coherent, logical and internally consistent.

### **5.3.2 The Panel Members**

Panel members are selected so that the panel as a whole possesses the expertise and experience to enable the accreditation to be carried out effectively.

In evaluating the HEP's application for Provisional, Full Accreditation or Compliance Evaluation of a programme, the panel members will:

- i. assess the programme for compliance with the Malaysian Qualifications

Framework (MQF), current policy, programme standards and the seven areas of evaluation, as well as against the educational goals of the HEP and the programme objectives and outcomes;

- ii. verify and assess all information about the programme submitted by the HEP, and the proposed improvement plans;
- iii. highlight aspects of the Programme Self-Review Report (if applicable) which require attention that would assist it in its effort towards continual quality improvement; and
- iv. reach a judgment.

#### **5.4 The Roles and Responsibilities of the Panel of Assessors**

The relevant documents submitted by the HEP to MQA when applying for Provisional or Full Accreditation, or Compliance Evaluation of a programme will be distributed to the members of the POA. The roles and responsibilities of POA in evaluating a programme and producing a final report can be distinguished by application, i.e., Provisional or Full Accreditation, or Compliance Evaluation.

##### **5.4.1 Provisional Accreditation**

POA is responsible to evaluate the proposed programme in terms of the MQF, Code of Practice for Programme Accreditation, programme standards, programme learning outcomes, programme educational objectives and compliance with existing policies.

The focus of the evaluation is on the soundness of the curriculum and the readiness of the HEP to offer it. A visit by POA to the HEP to inspect facilities may be necessary for professional programmes and where required by programme standards. The evaluation report must outline the strengths and weaknesses of the proposed programme and provide recommendations for its approval or rejection.

##### **5.4.2 Full Accreditation or Compliance Accreditation**

The roles and responsibilities of POA in evaluating a programme and producing a final report can be divided into different stages – before evaluation visit, during evaluation visit and after evaluation visit.



#### **5.4.2.1 Before the Evaluation Visit**

Before the evaluation visit, panel members must read thoroughly the HEP's Programme Information and Programme Self-Review Report (PSRR) to familiarise themselves with the HEP and the department's policies, procedures and criteria for assuring the quality of the programme. Adequate exploration of the issues and thorough understanding of the PSRR by the POA will ensure the credibility of, and confidence in, the accreditation process.

The Programme Information and PSRR should be considered from two perspectives. At one level, the assessors read its contents for information on the HEP's quality management systems and the plan of the programme to achieve its objectives, and form preliminary views on them. At another level, the assessors construct an opinion on the quality and depth of the department's self-review of the programme.

The following are some of the questions which the assessors would want to consider in critically examining the PSRR:

- i. How thorough is the PSRR?
- ii. Does it show that the HEP and the department have a strong process of ongoing self-review?
- iii. How perceptive is the PSRR?
- iv. Does it clearly identify the strengths and weaknesses of the programme?
- v. Does it propose appropriate actions to enhance the strengths and remedy the weaknesses?
- vi. Does it clearly indicate the capability and capacity of the department to achieve the objectives of the programme?

An assessor's analysis of the Programme Information and the PSRR should result in:

- i. an understanding of the major characteristics of the HEP and department relevant to the programme evaluation;
- ii. the identification of broad topics for investigation that arise from these characteristics; and
- iii. the generation of other ideas about the strengths, concerns, quality system and proposed improvement to the programme.

The assessors may also find it helpful to record thoughts about the following:

- i. to request the department for further information before the site visit, to clarify the PSRR, to assist in planning the visit, and to save time during the visit;
- ii. to request the department to furnish further information to be made available during the evaluation visit, particularly when the information sought would be voluminous;
- iii. to alert the department before the evaluation visit of issues that may be raised during the visit; and
- iv. to identify relevant persons or groups to be interviewed during the evaluation visit.

Each assessor is expected to produce a preliminary evaluation report to be submitted to the MQA and circulated to other panel members. These reports highlight the major topics or concerns identified by the assessors.

#### **5.4.2.2 During the Evaluation Visit**

Preliminary evaluation reports may have raised differences in views or issues which can be resolved by the end of the evaluation visit. While this may require some debate among assessors, it is important that the assessors maintain their professionalism. This is to avoid a public presentation of the lack of unanimity and to avoid wasting the short time available for interaction with members of the department and the HEP.

In group discussions, panel members should work with and through the Chair without being excessively formal. Members should respect the agenda agreed by the panel for the various meetings, and support the chairperson as he matches the pace of the meeting to the size of its agenda.

During interviews with members of the department, the panel should clarify issues and seek explanations, justifications and further information. It is extremely important to create an atmosphere for genuine dialogue. Questioning should be rigorous but fair and consistent. In particular, panel members need to:

- i. explore discrepancies between what is written and what is said;
- ii. seek clarification and confirmation when required;
- iii. listen as well as ask;
- iv. concentrate on major rather than minor issues;

- v. participate in a collaborative manner;
- vi. be aware that the dynamics of the panel and its relation to the staff of the department will change and develop during the visit; and
- vii. put interviewees at ease to ensure their full and active contributions.

Panel members may also offer occasional suggestions where appropriate, but without slipping into the role of a consultant. The panel must do its utmost to unearth and consider all information that is relevant to the audit. The panel uses a variety of questioning styles to gather the information it requires, ranging from discursive to directive.

To pursue a particular issue, the panel might begin by seeking information through an open-ended question, and then investigate the issue further by probing through other questions based on the answer to the first question. This often leads to the use of closed questions, and finally checking to confirm the impression obtained.

The panel considers both quantitative and qualitative data, looks for specific strengths or areas for improvement and highlights examples of good practices. Within the scope of the evaluation, the work of the panel depends on well-chosen samples. The selection of samples occurs at two levels. The first arises from the assessors' analysis of the programme information and PSRR. At this stage, particular areas may be identified as significant or problematic and therefore selected for further investigation. This process is sometimes called scoping. At the second level, the panel decides what documentary or oral evidence is needed to sample within these areas. Some sampling may be done to check information already presented in the PSRR. If this verifies the information, the panel may use the rest of the report with confidence in its correctness and completeness, and avoid the repetition of collecting for itself information that is already available in the HEP's written documents.

Although a panel cannot cover all issues in-depth, it delves into some issues through a process known as tracking or trailing. This form of sampling focuses on a particular issue and pursues it in-depth through several layers of the organisation. For example, to check that procedures are being implemented, a selection of reports relating to a particular programme might be sought, and the way in which an issue arising in them had been dealt with would be tracked. Another instance would be the investigation of a system-wide issue, such as the

way in which student evaluations of teaching are handled. A department may need to be informed in advance of the areas in which this approach is to be used so that the necessary documentation and personnel are available to the panel. Some of the materials may need to be supplied in advance of the visit.

Triangulation is a technique of investigating an issue by considering information on it from sources of different types such as testing the perceptions held about it by different individuals in the organisation. For example, selected policies and their implementation may be discussed with the senior management, with other staff and with students to see if the various opinions on, and experiences of, the policy and its workings are consistent.

Aspects of a programme may be checked through committee minutes, courses and teaching evaluations, programme reviews, reports of external accreditation, external examiners and external advisors. The panel must determine where inconsistencies are significant and are detracting from the achievement of the programme's objectives. The panel may also attempt to detect the reasons for such inconsistencies. If an interviewee makes a specific serious criticism, the panel should verify whether this is a general experience.

Panel members must plan and focus their questions. They should avoid:

- i. asking multiple questions;
- ii. using much preamble to questions;
- iii. telling anecdotes or making speeches;
- iv. detailing the situation in their own organisation; and
- v. offering advice (suggestions for improvement and examples of good practice elsewhere can be included in the Evaluation Report).

The questioning and discussion must always be fair and polite. It must, however, be rigorous and incisive, as the Evaluation Report must reflect the panel's view of the programme in respect of both achievements and weaknesses, and not merely describe a well-constructed facade.

The panel must collect convincing evidence during the evaluation visit. The evidence-gathering process must be thorough.

The panel must reach clear and well-founded conclusions within the terms of reference of the programme accreditation.

**Note:** To assist POA during the evaluation visit, MQA officer usually accompanies POA throughout the visit.

#### **5.4.2.3 After the Evaluation Visit**

After the evaluation visit, panel members must contribute, read and comment on the draft or drafts of the Evaluation Report prepared by the chairperson. Panel members should be satisfied that the Evaluation Report is accurate and balanced. POA is encouraged to complete the Evaluation Report at the end of evaluation visit. On the submission of the Evaluation Report, MQA will conduct an evaluation of the effectiveness of the POA. The Report will be submitted to the MQA Accreditation Committee.

### **5.5 The Accreditation Report**

The Accreditation Report outlines the findings, commendations and areas of concern of the POA. The panel comes to its conclusions through its interpretation of the specific evidence it has gathered and the seriousness of the areas of concern is determined by the evidence.

The Accreditation Report should not contain vague or unsubstantiated statements. Firm views are categorically stated, avoiding excessive subtlety. The Report does not comment on individuals nor appeal to irrelevant standards.

The findings of the panel include the identification of commendable practices observed in the HEP and the department, and the Report draws attention to these. The Report deals with all relevant areas but without excessive detail or trying to list all possible strengths. In writing the conclusions and areas of concern, the following factors are kept in mind:

- i. They should be short, brief and direct to the point.
- ii. They should address issues and not provide details of processes.
- iii. They should be prioritised to provide direction to the department.
- iv. They should take into account the department's own plans of improvement, make suggestions for improvement in aspects not covered by the PSRR, and make constructive comment on plans of improvement for the programme that will push the department and the HEP towards achieving its goals and objectives.

## Section 6

# Guidelines for Preparing the Open and Distance Learning (ODL) Programme Accreditation Report

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## INTRODUCTION

This section provides the guidelines for the Panel of Assessors (POA) to prepare the Provisional Accreditation, Full Accreditation and Compliance Evaluation Report. The focus of Provisional Accreditation is to evaluate the soundness of the proposed programme in terms of Code of Practice Programme Accreditation: Open and Distance Learning, applicable programme standards, industry and professional standards, and other related policies, while Full Accreditation focuses on the quality delivery of an approved programme. In the case of Compliance Evaluation, the focus and emphasis is on the maintenance of quality delivery as well as sustainability of the programme.

Therefore, the focus of the evaluation report will be based on the type of accreditation carried out and the specific format of the report has been outlined for the various accreditation exercise.

The generic content of the report will encompass the following:

### 1. Previous Quality Assessment of the Programme (if applicable)

If the programme had gone through a quality assessment exercise, for example a provisional accreditation exercise or has been delivered through the conventional mode, summarise the key areas of concern including any progress in addressing problems identified or conditions that need to be fulfilled. If there has been more than one exercise, consider only the most recent one. Give the dates of the previous assessments.

## **2. Self-Review Report (if applicable)**

Evaluate on the organisation, the completeness and the internal consistency of the Self-Review Report (SRR). Critically review the use of data and other evidence in analysing the curriculum, admission, delivery, assessment, programme management, monitoring and continual improvement.

Comment on the self-review in terms of the degree of participation by stakeholders of the HEP (academic staff, administrators, students, etc.); the comprehensiveness and depth of analysis; and the organisation and quality of the conclusions and recommendations. When the POA draws the major conclusions of the accreditation evaluation, the POA may indicate how these conclusions reflect the self-review undertaken by the HEP.

## **3. Report on the Criteria and Standards for Programme Accreditation**

This section of the POA's Programme Accreditation Report should contain a summary of what has been found during the programme evaluation exercise. It should be structured around the seven areas of evaluation as in Section 2. All comments must be based on sound evidence submitted by the HEP or discovered by the POA during its evaluation visit.

The report should indicate the extent to which the Standards embedded in each area fulfil the quality and requirements of the ODL programme. For accreditation to be granted, it would normally be expected that all the Standards in all the seven areas of evaluation are met or the POA will specify requirements or recommendations to ensure that they are met.

The following provides guidance on reporting the findings of the panel in relation to each of the seven areas of evaluation for quality assurance.

### **3.1 Evaluation on Area 1: Programme Development and Delivery**

#### **3.1.1 Statement of Educational Objectives of Academic Programme and Learning Outcomes**

##### Evaluations of Standards

3.1.1.1 (a) Appraise how the programme is related to, and consistent with the

larger institutional goals of the HEP in promoting the democratization of education through globalised online learning.

(b) Comment on the overarching Open and Distance Learning (ODL) policy of the HEP.

- 3.1.1.2 Verify and comment on the methodology and outcomes of the needs assessment, demand and feasibility for this programme to be offered via ODL mode.
- 3.1.1.3 Comment on the relevancy, clarity and specificity of the programme educational objectives, programme learning outcomes, teaching and learning strategies, and assessment, and the constructive alignment between them.
- 3.1.1.4 Comment on the alignment of the programme learning outcomes to an Malaysian Qualifications Framework (MQF) level descriptors and the five clusters of MQF learning outcomes.
- 3.1.1.5 Evaluate the link between the student's competencies expected at the end of the programme and those required by the market as well as for purposes of higher studies.

### **3.1.2 Programme Development: Process, Content, Structure and Learning-Teaching Methods**

#### Evaluations of Standards

- 3.1.2.1 Evaluate the level of autonomy given to the department in the design of the curriculum and in the utilisation of the allocated resources available to the department. How does the above vary with collaborative programmes and joint programmes (where applicable)?
- 3.1.2.2 Comment on the appropriateness of the processes, procedures, and mechanisms in designing and developing the curriculum of the programme. Comment on the appropriateness of the academic authority involved in the approval process.
- 3.1.2.3 Evaluate the effectiveness of involvement of stakeholders including education and ODL experts in the curriculum development.  
Note: effectiveness means consultation, involvement and incorporation of feedback from stakeholders)
- 3.1.2.4 (a) Verify and comment if the curriculum fulfils the disciplinary requirements in line with the programme standards (if applicable)



and good practices in the field.

- (b) Comment on the alignment of the course learning outcomes to the programme learning outcomes, as well as to the teaching and assessment methods, as presented in Table 4: Item 8. Comment if the above leads to the achievement of the programme learning outcomes.
- (c) Evaluate the diverse teaching-learning methods that help to achieve the learning outcomes and ensure that students take responsibility for their own learning.

3.1.2.5 Evaluate the appropriateness of teaching and learning methods applied to achieve the objectives and learning outcomes of the programme which covers the following:

- (a) Readiness of the teaching and learning mechanism/system where all forms of interaction and delivery are integrated;
- (b) The provision of appropriate self-instructional material (SIM) for ODL learners
- (c) The establishment of this unit or section (devoted to the design and development of SIM) within the institutional organisation structure and outline the roles and responsibilities in this unit.
- (d) The design (adapt/adopt/create) of the SIM including licensing and copyright matters
- (e) Online learning platform used
- (f) Mode of interactions between learners

### **3.1.3 Programme Delivery**

#### Evaluations of Standards

- 3.1.3.1 Evaluate the methods and approaches used by the department to ensure the effectiveness of delivery in supporting the achievement of course and programme learning outcomes.
- 3.1.3.2 Evaluate and comment on how students are informed about the current key elements of the programme (including the information made available to students in the learning portal and/or learning management system).
- 3.1.3.3 (a) Comment on how the programme is managed, line of responsibility and oversight for programme planning, implementation and

continuous improvements.

- (b) Evaluate the adequacy of the resources provided to the programme team to implement teaching-learning activities, and to conduct programme evaluation for quality improvement.

- 3.1.3.4 Comment on the provision of the learning environment (virtual and physical) for teaching and learning.
- 3.1.3.5 Comment on the innovative efforts made by the department to improve teaching, learning, assessment and student monitoring.
- 3.1.3.6 Comment on how the department obtain feedback and uses it to improve the delivery of the programme outcomes.

## **3.2 Evaluation on Area 2: Assessment of Student Learning**

### **3.2.1 Relationship between Assessment and Learning**

#### Evaluations of Standards

- 3.2.1.1 Comment on the alignment between assessment, learning outcomes and MQF level.
- 3.2.1.2 Comment on the effectiveness of regular reviews in aligning assessment and learning outcomes as well as the related policy (if any).

### **3.2.2 Assessment Methods**

#### Evaluations of Standards

- 3.2.2.1 Evaluate the appropriateness of the various methods and tools (including innovative techniques) in assessing learning outcomes and competencies.
- 3.2.2.2
  - (a) Evaluate how the department ensures the validity, reliability, integrity, currency and fairness of the assessment methods.
  - (b) Comment on the authority and processes for verification and moderation of summative assessments.
  - (c) Comment on the guidelines and mechanisms that have been put in place to address academic plagiarism among students.
  - (d) Comment on the frequency of the review of the assessment method.
  - (e) Comment on the review of the assessment methods in the

programme conducted (e.g., the existence of a permanent review committee on assessment and consultation with external assessors and examiners, students, alumni and industry).

- 3.2.2.3 (a) Comment on how the frequency, methods, and criteria of student assessment – including the grading criteria and appeal policies – are documented and communicated to students at the commencement of the programme.
- (b) Comment on the comprehensiveness of the rules, regulation and policies on assessment which outlines the duration, diversity, weightage, criteria and coverage of the assessment.

### **3.2.3 Management of Student Assessment**

#### Evaluation on Standards

- 3.2.3.1 Comment on the roles, and autonomy of the department and the academic staff in the management of student assessment.
- 3.2.3.2 Comment on the policies and mechanisms to ensure the security of assessment documents and records.
- 3.2.3.3 Comment on the timeliness of the assessment results being available to the students.
- 3.2.3.4 Evaluate the guidelines and mechanisms on students' appeal against course results.
- 3.2.3.5 Evaluate the periodic review on the management of student assessment undertaken by the department and actions taken to address the issues highlighted by the review.

#### **Note:**

1. Results of the coursework component must be announced to the student before the final examination.
2. Results are released and communicated to the students before the commencement of a new semester.

### **3.3 Evaluation on Area 3: Student Selection and Support Services**

#### **3.3.1 Student Selection**

##### Evaluation on Standards

- 3.3.1.1 (a) Comment on the clarity and appropriateness of the criteria and the mechanisms for student selection including candidates with prior experiential learning (accreditation of prior experiential learning, APEL), transfer students and any other additional requirements.
- (b) Comment on how the HEP ensure that the selected students have capabilities and fulfil the admission policies that are consistent with applicable requirements.
- 3.3.1.2 (a) Comment on the dissemination of the selection criteria to the public. If there are other additional selection criteria utilised, examine the structure, objectivity and fairness.
- (b) Comment on how the department ensure that the student selection process is free from unfair discrimination and bias.
- 3.3.1.3 (a) Comment on the information of the past, present and forecasted (refer to Item 17 & 18 in Part B of the MQA-01-ODL and MQA-02-ODL) student intake in relation to the department's capacity to effectively deliver the programme. Comment also on the proportion of applicants to intake.
- (b) Comment on how the HEP ensure the availability of adequate resources to admit transfer students (if any).
- 3.3.1.4 Comment on the policies and mechanism for appeal on student selection.
- 3.3.1.5 Comment on the appropriateness of the support provided to the ODL students and the monitoring mechanism to evaluate its relevancy and effectiveness.

#### **3.3.2 Articulation and Transfer**

##### Evaluation on Standards

- 3.3.2.1 (a) Comment on how the department facilitates credit transfer/exemptions as well as national and transnational student

mobility.

- (b) Comment on the approach undertaken by the department to keep abreast of the latest development on credit transfer/ exemption.

3.3.2.2 Comment on the procedures to ensure the success of the incoming transfer students.

### **3.3.3 Student Support Services**

#### Evaluation on Standards

- 3.3.3.1
  - (a) Evaluate the adequacy and quality of student support services listed by the department and how they contribute to the learning experience of the student's life.
  - (b) Comment on the support services provided to students in the various regional centres that are geographically separated from the main campus and how the quality of the provisions are monitored and reviewed.
- 3.3.3.2
  - (a) Comment on the unit responsible for planning and implementing the student support services and how it fits into the overall organisational structure of the institution in terms of hierarchy and authority
  - (b) Comment on the suitability of the staff appointed to head the unit and the personnel involved in terms of qualification and relevant experience.
- 3.3.3.3 Appraise the student orientation programmes where it helps to expose, familiarise and adopt the different approaches of learning via ODL.
- 3.3.3.4
  - (a) Comment on adequacy and qualifications of the academic and career counsellors.
  - (b) Evaluate the effectiveness of academic and counselling services, including plans for improvements.
- 3.3.3.5 Evaluate the mechanisms that exist to identify and assist students who are in need of academic and career counselling.
- 3.3.3.6 Comment on the processes and procedures in handling student disciplinary cases.
- 3.3.3.7 Appraise the mechanisms available for students to raise their complaints and appeals on academic and non-academic matters.
- 3.3.3.8 Comment on the student support services that are evaluated regularly for

their adequacy and, effectiveness to ensure student well-being and safety.

### **3.3.4 Student Representation and Participation**

#### Evaluation on Standards

- 3.3.4.1 Evaluate the policy and processes that are in place for active student engagement in areas that affect their interest and welfare.
- 3.3.4.2 (a) Comment on the linkages with the external stakeholders established for the students.
- 3.3.4.3 (b) Evaluate the department's role in facilitating students to gain managerial, entrepreneurial and leadership skills in preparation for the workplace or enhancing their current skills in the workplace.

### **3.3.5 Alumni**

#### Evaluation on Standards

- 3.3.5.1 (a) Evaluate the linkages established by the department with the alumni.
- (b) Evaluate the involvement of the alumni in programme development, review and continuous improvement.

## **3.4 Evaluation on Area 4: Academic Staff**

### **3.4.1 Recruitment and Management**

#### Evaluation on Standards

- 3.4.1.1 Evaluate the consistency of the department's academic staff plan with HEP's policies and programme requirements.
- 3.4.1.2 (a) Appraise the academic staff selection policy, criteria, procedures, terms and conditions of service in terms of getting adequately qualified and/or experienced staff in the relevant field with ODL background.
- (b) Comment on the due diligence exercised by the department in ensuring that the qualifications of academic staff are from *bona fide* institutions.

- (c) Comment on how does the department ensure diversity among the academic staff in terms of experience, approaches, and backgrounds?
- 3.4.1.3 Assess the appropriateness of staff–student ratio to the programme and the teaching-learning methods used consistent with the requirements in the programme standards (where applicable).
- 3.4.1.4
  - (a) Assess whether the department has adequate and qualified academic staff, including part-time academic staff necessary to implement the programme.
  - (b) Comment on the policy related to the appointment of part time academics from other institutions for teaching and learning purposes.
  - (c) Comment on the turnover of the full-time academic staff for the programme (for Full Accreditation only).
- 3.4.1.5 Assess the policies and procedures to ensure equitable work distribution which covers content preparation, teaching (including facilitating student learning in the online platform), research and scholarly activities, consultancy, community services and administrative functions. (Refer to Table 5 for information on workload distribution.)
- 3.4.1.6
  - (a) Comment on how recognition of academic staff takes into account their involvement in professional, academic and other relevant activities, at national and international levels?
  - (b) Comment on how the institution ensures the policies, procedures and criteria for recognition through promotion, salary increment, or other remuneration of the academic staff are clear, transparent and merit-based?
- 3.4.1.7 Evaluate the nature and extent of the national and international linkages and how these enhance teaching and learning in the programme.
- 3.4.1.8
  - (a) Assess how ODL related trainings are conducted for the full time/part time academic staff or academic support staff
  - (b) Evaluate the extent and effectiveness of the academic staff development scheme. Also comment on the organised support available to assist academic staff to enhance teaching expertise in line with current trends in pedagogy, curriculum design, instructional materials and assessment.
  - (c) Assess the formative guidance and mentoring provided for new

academic staff.

### **3.4.2 Service and Development**

#### Evaluation on Standards

- 3.4.2.1 Comment on the department's policy on service, development and appraisal of the academic staff.
- 3.4.2.2 Comment on the opportunities given to the academic staff in order to focus on their areas of expertise such as curriculum development, curriculum delivery, supervision of students, research and writing, scholarly and consultancy activities, community engagement and academically-related administrative duties.
- 3.4.2.3 (a) Comment on the HEP's policies on conflict of interest and professional conduct.  
(b) Comment on the HEP's procedures for handling disciplinary cases.
- 3.4.2.4 Evaluate the mechanisms and processes for periodic student evaluation of the academic staff and assess how this feedback is used for quality improvement.
- 3.4.2.5 (a) Evaluate the support provided by the HEP and/or department for academic staff to participate in national and international activities to obtain professional qualifications.  
(b) Assess the benefit of this participation for the enrichment of the teaching-learning experience.
- 3.4.2.6 Comment on how the department encourages, facilitates and reward academic staff involved in community and industry engagement activities.

### **3.5 Evaluation on Area 5: Educational Resources**

#### **3.5.1 Physical Facilities**

#### Evaluation on Standards

- 3.5.1.1 Comment on the policy regarding the selection and effective use of electronic devices, internal and external networks, eContent and other effective means of using information and communication technology in the programme.



- 3.5.1.2
  - (a) Evaluate the sufficiency and appropriateness of infrastructure and infostructure facilities for the effective delivery of the curriculum.
  - (b) Evaluate the adequacy and appropriateness of equipment and facilities provided for practical-based programmes and for students with special needs.
- 3.5.1.3 Evaluate the effectiveness and utilisation of the LMS in supporting and facilitating the learning of students through ODL.
- 3.5.1.3 Examine evidence of compliance of infrastructure and infostructure facilities, system and eContent to relevant laws and regulations including issues of licensing.
- 3.5.1.4
  - (a) Evaluate the adequacy of the library services.
  - (b) Evaluate the adequacy and suitability of learning spaces in and around the library.
  - (c) Comment on the quality of the library's databases and bibliographic search, computer and audio-visual capabilities in relation to the programme.
- 3.5.1.5
  - (a) Evaluate how the HEP maintains, reviews and improves the adequacy, currency and quality of educational resources (including ICT resources and facilities such as learning management system, digital/virtual library, video conferencing, virtual labs, online helpdesk) and eContent, and assess the role of the department in these processes.
  - (b) Assess the condition and the provision for the maintenance of the learning facilities.

### **3.5.2 Research and Development**

*(Please note that the standards on Research and Development are largely directed to universities and university colleges.)*

#### Evaluation on Standards

- 3.5.2.1
  - (a) Appraise the research policy. How does the department policy foster the relationship between research and scholarly activity and education?
  - (b) Comment on the research priorities, allocation of budget and facilities provided.
  - (c) Comment on the extent of research activities in the department by

looking into the number of academic staff members who are principal investigators, the value of research grants, and the priority areas for research.

- 3.5.2.2 Evaluate the interaction between research and learning reflected in the curriculum. How does it influence current teaching, and prepare students for engagement in research, scholarship and development?
- 3.5.2.3 Comment on the effectiveness of the department's review of its research resources and facilities. Comment on the steps taken to enhance its research capabilities and environment, where a link between research, development and the industry could be created.

### **3.5.3 Financial Resources**

#### Evaluation on Standards

- 3.5.3.1 Comment on the financial viability and sustainability of the HEP to support the programme.
- 3.5.3.2
  - (a) Evaluate the department's budgetary and procurement procedures to ensure that its financial resources are sufficient and managed efficiently.
  - (b) Comment on whether there are indications that the quality of the programme is being compromised by budgetary constraints. Identify if the HEP has a credible plan to address any current or potential financial imbalance.
- 3.5.3.3 Comment on the responsibilities and lines of authority of the HEP with respect to budgeting and resource allocation for the department.

## **3.6 Evaluation on Evaluation on Area 6: Programme Management**

### **3.6.1 Programme Management**

#### Evaluation on Standards

- 3.6.1.1
  - (a) Comment on the management structures and functions of the department, how their relationship within the department is defined and how these are being communicated to all stakeholders involved based on principles of transparency, accountability and authority.
  - (b) Comment on the structure and composition of the committees in the

department and how these committees impact the programme.

- 3.6.1.2 Comment on the steps taken by the department to ensure accuracy, relevancy and timeliness of disseminating the information about the programme. This information must be easily and publicly accessible, especially to prospective students.
- 3.6.1.3 Comment on the policies, procedures and mechanisms for regular review and updating of the department's structures, functions, strategies and core activities.
- 3.6.1.4 Comment on the academic board of the department as an effective decision-making body and its degree of autonomy.
- 3.6.1.5 Comment on the arrangement between the main campus and the regional centres or partner institutions. Evaluate the mechanisms that exist to assure functional integration and comparability of educational quality.
- 3.6.1.6 Comment on the periodic internal and external consultations as well as graduate employability analyses to ensure currency and relevancy of the programme in meeting market demand.

### **3.6.2 Programme Leadership**

#### Evaluation on Standards

- 3.6.2.1 Comment on the criteria for the appointment and the responsibilities of the programme leader.
- 3.6.2.2
  - (a) Comment on the appropriateness and suitability of the programme leader.
  - (b) Evaluate the authority of the programme leader in relation to curriculum design, delivery and review.
- 3.6.2.3 Comment on the mechanisms and processes of 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 put in place.

### **3.6.3 Administrative Staff**

#### Evaluation on Standards

- 3.6.3.1 Comment on the appropriateness and sufficiency of the administrative

and academic support staff who support the implementation of the programme.

3.6.3.2 Evaluate how the department reviews the performance of the administrative and academic support staff of the programme.

3.6.3.3 Evaluate the effectiveness of the training scheme including ODL related training for the advancement of the administrative and academic support staff and how it fulfils the current and future needs of the programme.

### **3.6.4 Academic Records**

#### Evaluation on Standards

3.6.4.1 (a) Comment on the policies and practices of the nature, content and security of student, academic staff and other academic records.

(b) Comment on the policies and practices on retention, preservation and disposal of those records.

3.6.4.2 Verify the process and practice of maintaining student records by the department relating to their admission, performance, completion and graduation.

3.6.4.3 Evaluate the implementation of the policy on privacy and the confidentiality of records.

3.6.4.4 Comment on the availability of review policies on the security systems and effectiveness of improvement plans.

### **3.7 Evaluation on Area 7: Programme Monitoring, Review and Continual Quality Improvement**

#### **3.7.1 Mechanisms for Programme Monitoring, Review and Continual Quality Improvement**

##### Evaluation on Standards

3.7.1.1 Comment on the policies and mechanisms for regular monitoring and review including its structures, functions, strategies, policies, Standard Operating Procedures (SOPs) and core activities to ensure continual quality improvement complements the department's effort in continual quality improvement.

3.7.1.2 Assess the roles and the responsibilities of the Quality Assurance unit/

personnel responsible for the internal quality assurance of the department.

- 3.7.1.3
- (a) Comment on the structure and workings of the programme monitoring and review committee in ensuring the continual review of the programme content and ODL learning support services.
  - (b) Evaluate the frequency and effectiveness of the mechanisms for monitoring and reviewing the programme in identifying strengths and weaknesses to ensure the achievement of programme learning outcomes.
  - (c) Comment on how the department uses the findings of the review to further improve the programme.
  - (d) Evaluate the currency of the content and how are these updated to keep abreast with the advances in the discipline and to meet the current needs of the society.
  - (e) Comment on how the department periodically review the learning support services (including the online system, learning materials, assessment, administration/management of the programmes, ICT system including bandwidth management, physical facilities).
- 3.7.1.4
- (a) Comment on how the department ensure the involvement of all relevant stakeholders (including ODL or technology experts) in a programme review.
  - (b) Comment on the nature of their involvement and how their views are taken into consideration.
- 3.7.1.5
- Evaluate how the programme review report is made accessible to stakeholders and how their views are used in the continuous improvement and development of the programme.
- 3.7.1.6
- (a) Evaluate how the various aspects of student performance, progression, attrition, graduation and employment are analysed for the purpose of continual quality improvement.
  - (b) Comment on the benchmarked data that were utilized by the department for continual quality improvement.
- 3.7.1.7
- In collaborative arrangements, evaluate the relationship between the parties involved in programme monitoring and review.
- 3.7.1.8
- Ascertain that the findings of the review are deliberated at the highest academic board of the HEP. Comment on the action taken thereon.
- 3.7.1.9
- Evaluate how the departmental quality assurance processes are

integrated with the achievement of the institutional purpose.

#### 4. Conclusion of the Report

The panel of assessors comes to its conclusions and recommendations through observed facts and through its interpretation of the specific evidences received from the various sources or that it has gathered itself. The panel of assessors' report will generally include **commendations** (aspects of the provision of the programme that are considered worthy of praise), **affirmations** (proposed improvements by the department on aspects of the programme, which the panel believes significant and which it welcomes) and **areas of concern** to improve the programme.

##### 4.1 Full Accreditation

With respect to status of the application for Full Accreditation of the programme, the panel will provide report on the evaluation findings, together with the following recommendations to the MQA Accreditation Committee for its decision:

i. **Grant the Accreditation without conditions**

ii. **Grant the Accreditation with conditions**

Conditions specified by the evaluation panel which do not prevent or delay accreditation but completion of which must be confirmed to the MQA by a date to be agreed between the HEP and the MQA.

iii. **Denial of Accreditation**

Denial is where the evaluation panel recommends accreditation is not granted. The panel will provide reasons for the denial.

The report on the evaluation findings, together with the recommendations, is presented.

In general, the findings in the report will be presented in the exit meeting with the HEP and best follow the sequence in which the items were listed in the oral exit report. For the areas of concerns (or problems), the panel should indicate their relative urgency and seriousness, express suggestions for improvements in generic or alternative terms, and avoid giving prescriptive solutions.

## 4.2 Provisional Accreditation

The types of recommendations in the conclusion of the report of the evaluation for Provisional Accreditation will be largely similar to that of the Full Accreditation as outlined above. However, suitable to its provisional status and as an interim phase before Full Accreditation, there will be differences in emphasis and the degree of compliance in the seven areas of evaluation.

## 4.3 Compliance Evaluation

Based on the compliance evaluation conducted on the programme, the panel of assessors may propose one of the following:

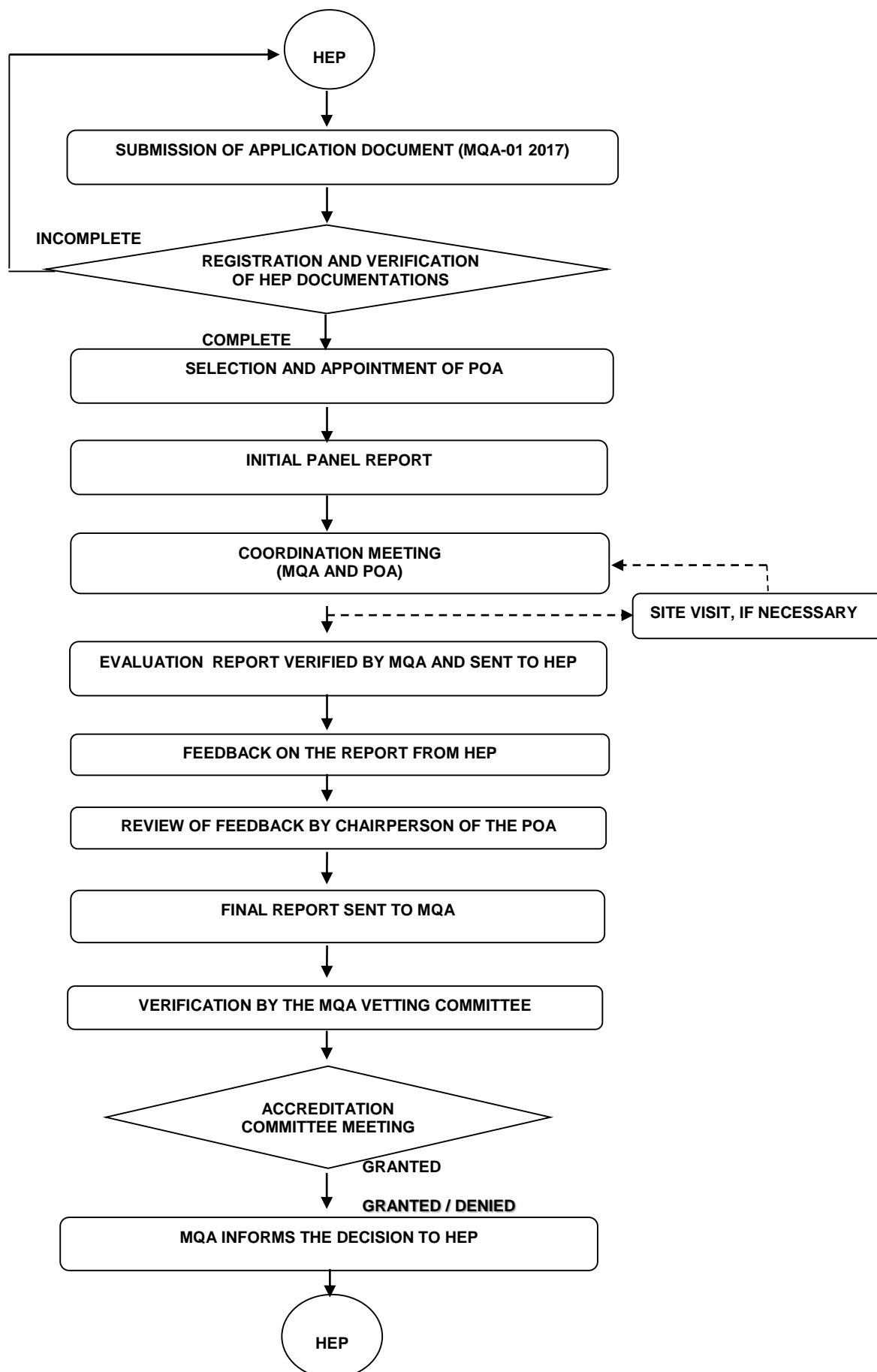
- i. **the programme accreditation be continued with or without condition; or**
- ii. **the programme accreditation be withdrawn, in which case a list of reasons must be provided.**

# Appendices



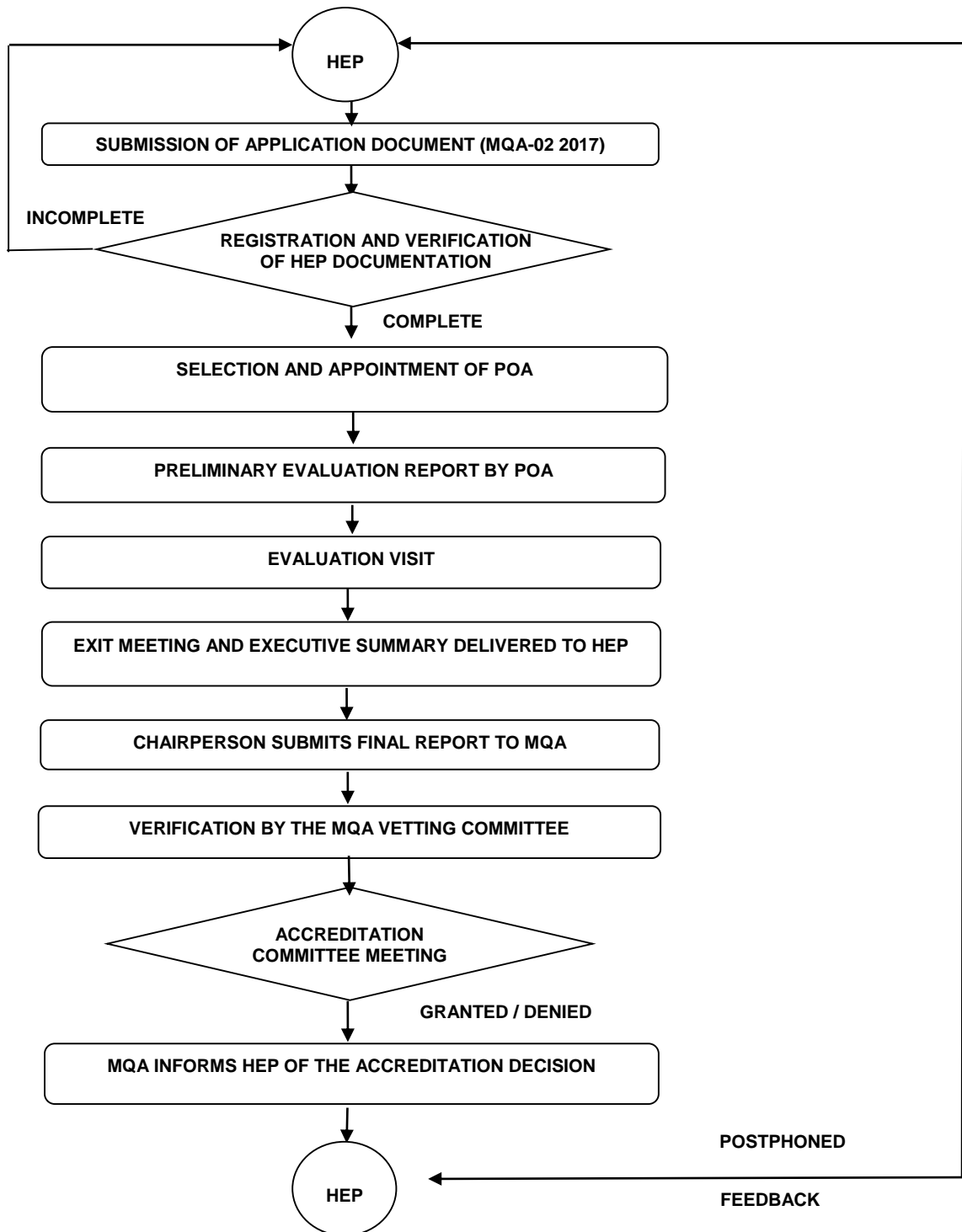
# Appendix 1

## FLOW CHART FOR PROVISIONAL ACCREDITATION PROCESS



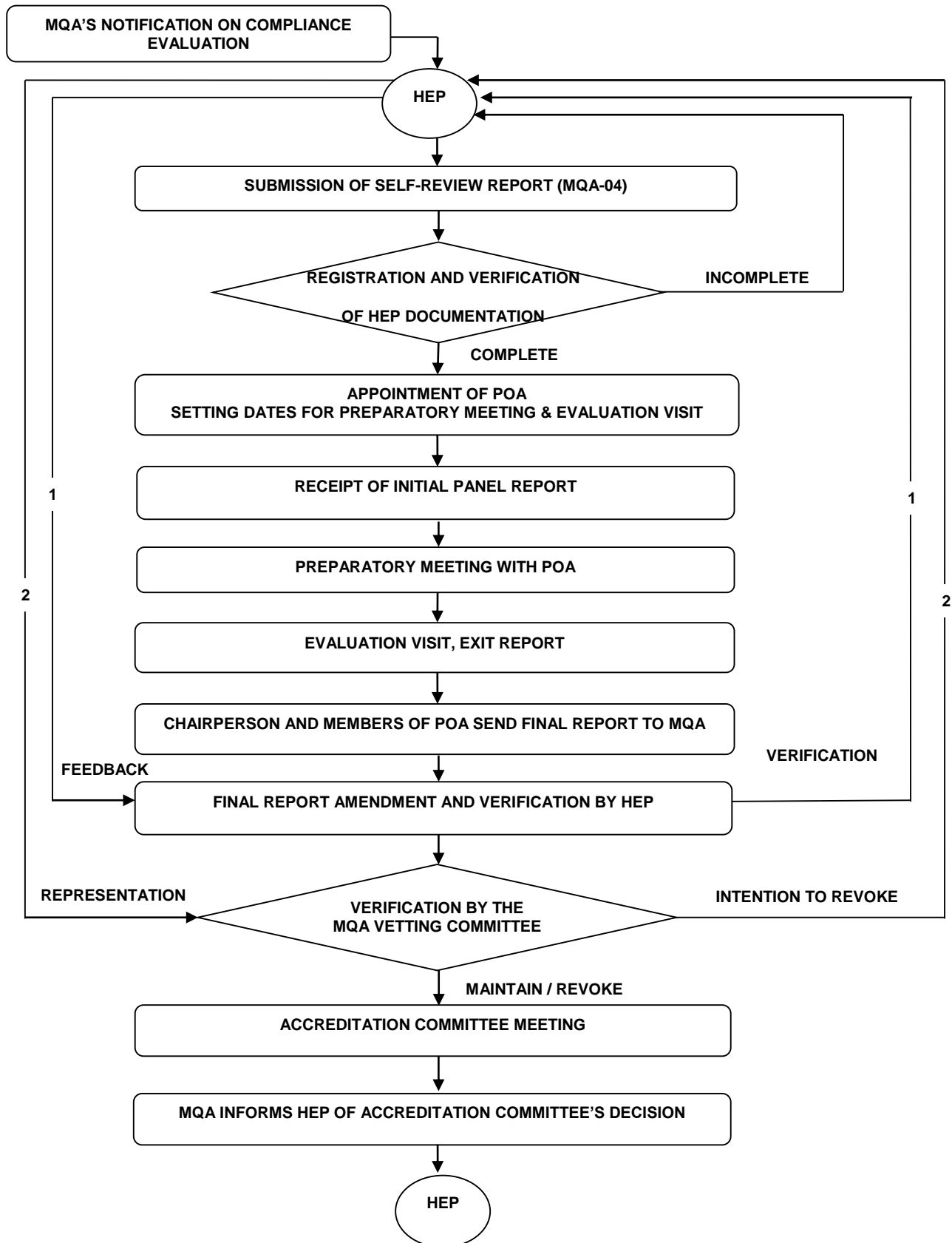
# Appendix 2

## FLOW CHART FOR FULL ACCREDITATION PROCESS



# Appendix 3

## FLOW CHART FOR COMPLIANCE EVALUATION PROCESS



# Appendix 4

## PANEL MEMBERS

Malaysian Qualifications Agency would like to thank the following panel members for their support and contribution towards the production of this document.

NO	PANEL MEMBERS	ORGANISATION
1.	<b>Liew Teik Kooi (Dr.) - <i>Chairman</i></b>	Wawasan Open University (WOU)
2.	<b>Alyani Ismail (Prof. Dr.)</b>	University Putra Malaysia (UPM)
3.	<b>Ahmad Hj. Mohamad (Assoc. Prof. Dr.)</b>	Universiti Sains Malaysia (USM)
4.	<b>Malini Eliatamby (Dr.)</b>	International Centre for Education in Islamic Finance (INCEIF)
5.	<b>Kelvin Loh Lih Fu (Mr.)</b>	eLearning Minds Group Sdn Bhd