



BETHLEHEM UNIVERSITY

Quality Assurance & Institutional Effectiveness Manual

July 2024



This Quality Assurance and Institutional Effectiveness Manual should be read in conjunction with the Academic Quality Assurance Manual of Bethlehem University, as both documents provide guidance and transparency to University employees, students and other stakeholders on the University's quality assurance system.



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Abbreviations

AQAC	Academic Quality Assurance Committee
BU	Bethlehem University
DAP	D ivision A ssessment P lan
DAR	D ivision A ssessment R esults
DoS	Deanship of Student Affairs
HEI	Higher Education Institutions
IE	Institutional Effectiveness
IQC	Internal Quality Cell
IRD	Institutional Research Department
ISO 9001	International standard that specifies requirements for a Total Quality Management (TQM) system
KPI	Key Performance Indicator
QA	Quality Assurance
QAED	Quality Assurance and Enhancement Department
QAF	Quality Assurance Framework
QMS	Quality Management System
TQM	Total Quality Management



1. Bethlehem University : Vision, Mission, Goals and Core Values

Background

The foundations of Bethlehem University (BU) have been built on a sound curriculum for its time. However, since 1973 things have changed and it is time to adapt to new conditions. In 2018 the University set out a detailed Strategic Plan for the period till 2023. In 2020, the year of the Covid-19 pandemic Bethlehem University opened itself to a comprehensive review of its activities, and as a consequence has made some significant adjustments to its ways of working, while maintaining its mission as a Christian/Lasallian university serving the people of Palestine.

The reality of Bethlehem University almost fifty years after its foundation is that it is in a more competitive world, locally and globally. Its graduates now serve Palestinian society and are also part of a diaspora in which they enrich the world by their gifts, their knowledge and skills and by their spiritual openness. Their attachment to Palestine is often enhanced by their university experiences.

There is a need to shift towards the practical value of knowledge and skills that better fit students for life and better meet the aspirations of the young people in Palestine. In doing this it is important to acknowledge the value of a liberal arts heritage and what an educated person can contribute to a modern society.

BU Vision

"Bethlehem University, being a Christian witness in the Holy Land, aspires to be a leader in higher education in the service of the integral development of its students and Palestinian society."

BU Mission

" Strategically situated in the birth place of Jesus, Bethlehem University is a Catholic institution of tertiary education in the Lasallian tradition.

Bethlehem University provides quality education which forms the whole person: intellectually, emotionally, socially, physically, and spiritually. This is undertaken in the context of a learning community: in which each person learns with, for and from each other; and that provides mind- and heart-touching transformative learning experiences.

Its inherited pursuit of truth through the study of the humanities and the sciences, drives Bethlehem University, as a research-informed teaching institution, to serve as a center for the ethical production, advancement, sharing and application of theoretical and practical knowledge.

The University emphasizes excellence in academic programs through their regular review and adopting best practices. The experiences of students at Bethlehem



University open doors for them to enter careers in various professions with competence, confidence and character; and fosters the development of students as committed citizens prepared to assume leading positions in their careers, in Palestine, and internationally."

BU Strategic Goals

1. To be a research-informed teaching university.
2. To be a financially sustainable university.
3. To achieve an expanding local and international reach for securing funds.
4. To be an effective and efficient university.
5. To enhance the quality of student life through creating and maintaining a dynamic, social, innovative and cultural life that compliments academic activity.
6. To enhance the Human Resources element.
7. To expand and enhance the quality of service to the community and partnerships.

BU Core Values

- Respect for the dignity of each person and all peoples and faiths.
- Self-giving which leads to fraternity out of which solidarity grows.
- Service grounded in sharing the gifts and talents we received for the common good.
- Faith, hope and love which encourage the enactment of justice.
- Academic freedom which allows the pursuit of truth.
- Integrity born of open-mindedness and transparency.
- Hospitality which is inviting and inclusive.

2. BU Organizational Structure

The organizational structure of BU embraces the following offices:

1. Office of the Vice Chancellor,
 2. Office of the Executive Vice President,
 3. Office of the Vice President for Finance and Estates,
 4. Office of the Vice President for Human Resources;
 5. Office of the Vice President for Advancement; and
 6. Office of the Vice President for Academic Affairs.
1. The Office of the Vice Chancellor is the overarching body that oversees all offices and divisions in the university including the Office of Institutional values.



2. The academic support divisions that fall under the office of the Executive Vice President are:
 1. Information Technology Services Department;
 2. Marketing and Communications Department;
 3. Quality Assurance and Enhancement Department;
 4. Dean of Students Department;
 5. Institutional Research Department; and
 6. Library.
3. The financial resources divisions that fall under the office of the Vice President for Finance and Estates are:
 1. Estates Management Department (Engineering, Maintenance, Cleaning, Gardening, Security);
 2. Finance Department:
 - i. Business and Contracts Unit;
 - ii. Payroll Unit;
 - iii. Student Finance Unit;
 - iv. Core Finance Unit; and
 - v. Social Survey Unit.
4. The human resources division that falls under the office of the Vice President for Human Resources is:
 1. Human Resources Office.
5. The advancement division that falls under the office of the Vice President for Advancement is:
 1. Advancement Office.
6. The academic divisions that fall under the office of the Vice President for Academic Affairs are:
 1. Academic Senate (including AQAC and other committees);
 2. Faculties (including Academic Departments, Research Centers/ Institutes, and Incubators);
 3. Dean of Research Department;
 4. Registrar Department;
 5. Internationalization Department; and
 6. Institute for Community Engagement and Partnership.

To ensure the Institutional Effectiveness (IE) of the University, all divisions are subject to internal self-assessment processes. Additionally, certain divisions require further external reviews regularly to ensure compatibility with international standards.



3. BU Quality Assurance and Enhancement Department (QAED)

i) Vision Statement:

“The Quality Assurance and Enhancement Office looks to instill and develop optimal quality standards and best practices in all academic and non-academic divisions of Bethlehem University.”

ii) Mission

“The Quality Assurance & Enhancement Office creates consciousness of the highest quality standards and best practices, and promotes compliance thereto for the efficient and effective delivery of teaching, learning, research, community engagement, administration and the overall operations of Bethlehem University. This is achieved through the development, implementation, monitoring, evaluation and continuous quality improvement and enhancement in all activities and outputs in the University.”

iii) Goals

1. Layout, build and continuously improve the structure of a Quality Management System (QMS) to ensure that quality operations are coordinated, monitored and managed with maximum effectiveness.
2. Promote and facilitate development of a culture of quality and continuous quality improvement and enhancement across the University.
3. Develop instruments to detect, evaluate and tackle processes’ deficiencies and/or deviations in cooperation with the Internal Quality Cells (IQCs) in the divisions.
4. Provide support, guidance and training in development, implementation and assessment of quality procedures and practices to employees at all levels which deemed necessary to realize the Vision and Mission of the University as well as uphold its core Values.
5. Ensure quality communication between the University’s different divisions, and properly document all interrelated processes and procedures.
6. Pursue obtaining external institutional and academic accreditation from official national and international quality bodies.

iv) Intended Outcomes:

Therefore, the successful implementation of the QMS will result in enhancing:

- a. Quality Academic provision leading to improved student educational experience;



- b. Continuous professional development of faculty and staff leading to improved performance in key functions of the University;
- c. The spirit of continuous quality improvement and enhancement in the University's processes and operations by faculty and staff;
- d. Satisfaction and confidence of society and stakeholders in the University's outputs;
- e. The capacity to compete in the marketplace of higher education.

v) Quality Assurance Policy Statement

Through its Strategic Plan, Bethlehem University (BU or the University) has defined the direction that it should follow to serve and meet the changing needs of its target market and the society by providing quality higher education in Palestine. Key to achieving this strategy is the development of an effective and efficient Quality Assurance (QA) system underpinned by quality teaching, learning experiences, research, community engagement, curriculum development, student progression monitoring, and activities that promote student wellbeing; in addition to quality governance and administrative systems that support the teaching, learning and research process. In the effort to realize its vision, mission, and goals, which are emanating from the Catholic and Lasallian tradition, BU constantly monitors and systematically evaluates the implementation of all its mandated activities, to ensure continuous quality improvement. Therefore, the University is committed to striving for excellence in teaching, learning, research, community engagement, and governance and administration activities ensuring that all its implemented processes and operations are in line with standard quality-assured best practices.

4. Quality Assurance Framework

Striving for quality is set in the context of the BU's Mission, which generally defines quality as including both efficient operations and high-quality outcomes.

Although the University's official policies, procedures, guidelines, manuals and strategic planning process guide the achievement of efficient operations and high-quality outcomes, the assurance of quality still requires the commitment and participation of all individuals in the University: administrators, faculty, staff, students and other stakeholders.

The Quality Assurance & Enhancement Department (QAED) is responsible for the management of the institution's quality assurance activities, and is not responsible for guaranteeing the quality of any division's processes or operations, and accrediting or approving them. The responsibility for quality always remains with the delivering

division, not with the QAED. Instead, the role of the QAED is to provide a framework, tools, support and a timetable through which these divisions conduct their internal quality assurance activities.



Figure 1: Quality Assurance Elements

This comprises several elements as shown above in (Figure 1), specifically encouraging internal divisions to think about:

- The external standards they are required to meet, the internal standards that they set themselves (**what**);
- The operations and procedures through which they seek to meet them (**how**);
- The data they collect to monitor performance (**evidence**);
- How they use data to amend and improve both their outcomes and their operations (**future action**).

To facilitate this reflection, the QAED often manages a process of internal quality assurance reviews. Through this process, each operational division, academic and administrative, is invited to demonstrate how it responds to these questions. Often, a review will involve an assessment team, sometimes including external members. The role of the assessment team is to consider how effectively the division conducts its affairs, to identify areas of good practice where it finds it, and to suggest areas of improvement where necessary.

A strong quality culture is essential across all University divisions. The University's core values guide every activity and provide a solid foundation for fostering such a



culture. To achieve this, we have a well-defined and systematic approach, which includes the following elements:

- a. Student Focus: students are the heart of our mission, and our efforts continually strive to enhance their success;
- b. Provision of High Quality Education: providing a world-class education that prepares students for successful careers and strengthens our community;
- c. Integrity, Transparency and Accountability: demonstrating the highest ethical standards through transparent and accountable actions to build trust and credibility;
- d. Data-driven decision-making: prioritizing evidence-based practices by establishing efficient systems and analyzing data to optimize core activities and achieve measurable results;
- e. Effective Communication: committing to effective, clear and timely communication with all University stakeholders (employees, students, alumni, donors, partners, suppliers, service providers and the local and international communities) using a variety of communication means;
- f. Positive Working Environment: supporting one another at work in a cooperative, safe and healthy environment;
- g. Respect for Diversity: respecting and seeking to sustain the deep-rooted values and the rich cultural heritage of Palestine.

The Quality Assurance Framework (QAF) covers all the University's programs and services. It involves a continuous cycle of planning, implementing, evaluating, and assessing various activities. This includes teaching, learning, research, community engagement, resources, and support services offered by different University divisions working together.

5. Quality Management System

Quality Assurance Cycle in the Divisions

According to the American Society for Quality (ASQ), a Quality Management System (QMS) is defined as:

"The organizational structure, processes, procedures, and resources needed to implement, maintain, and continually improve the management of quality."

Bethlehem University takes quality seriously. It has a well-defined Quality Management System (QMS) in place. This system is not just a set of rules on paper; it has actively used, monitored, and improved over time. This ensures that all the University's operations are efficient and effective, and that Bethlehem University keeps getting better at what it does.

The University's functioning divisions operate within a QMS that follows a cyclical approach. This cycle revolves around asking three key questions (Figure 2):

- i. How we deliver our services?
- ii. How well we deliver these services?, and
- iii. How we improve our services?



Figure 2: Quality Management System (QMS)

Since the University seeks to have a QMS that meets the expectations of the ISO 9001 standards related to Total Quality Management (TQM) approach, its QMS is established on a model of a continuous improvement cycle, which consists of four phases: Plan → Do → Check → Act (PDCA), and referred to as 'Deming Cycle' (Figure 3):



Figure 3: "Deming Cycle"



- **(Plan)**: the essential starting point in the model is to have a clear identification of the goals. To ensure alignment with the University's strategic plan, informed by its vision, mission, and values, each functional division must establish its own goals. The divisions will then develop annual operational plans outlining specific actions, responsible parties, and measurable objectives to achieve their goals over the coming year.
- **(Do)**: operationalize all previously defined actions in accordance with the delineated plan.
- **(Check)**: consistently monitor progress to identify any deviations from the plan, and investigating the root cause of delays, missed steps, or inaction.
- **(Act)**: address any obstacles hindering progress, adjust for any deviations from the plan, and potentially revise expectations. This will inform the development of a revised plan for the following year.

Risk-based thinking, in addition, is essential for achieving an effective quality management system. In accordance with International Standard ISO 9001, institutions that take a systematic approach to identifying and managing both risks and opportunities can create a robust foundation for a more effective quality management system. This comprehensive perspective on potential challenges and advancements helps to ensure improved performance and prevent negative consequences.

Process-Driven Approach to Quality Management System

A “Process-Driven” approach to quality management (Figure 4) gives a holistic view of the stages involved in the quality assurance cycle employed at Bethlehem University. The iterative cycle commences with establishing a need for a process, and ends with implementing actions for continuous improvement, before beginning again. In demonstrating its commitment to the process-driven approach to quality management, the University:

- a. Identifies the processes needed for the QMS and their application throughout the University;
- b. Maps the sequence and interaction of the processes within and across divisions;
- c. Documents details for each process by developing the sequence of the respective steps;
- d. Determines criteria and methods needed to ensure that both the operation and control of the policies, processes, and associated documents and records are effective;
- e. Monitors, measures and analyses processes for compliance; and
- f. Implements actions necessary to achieve planned results and continual improvement of these processes.

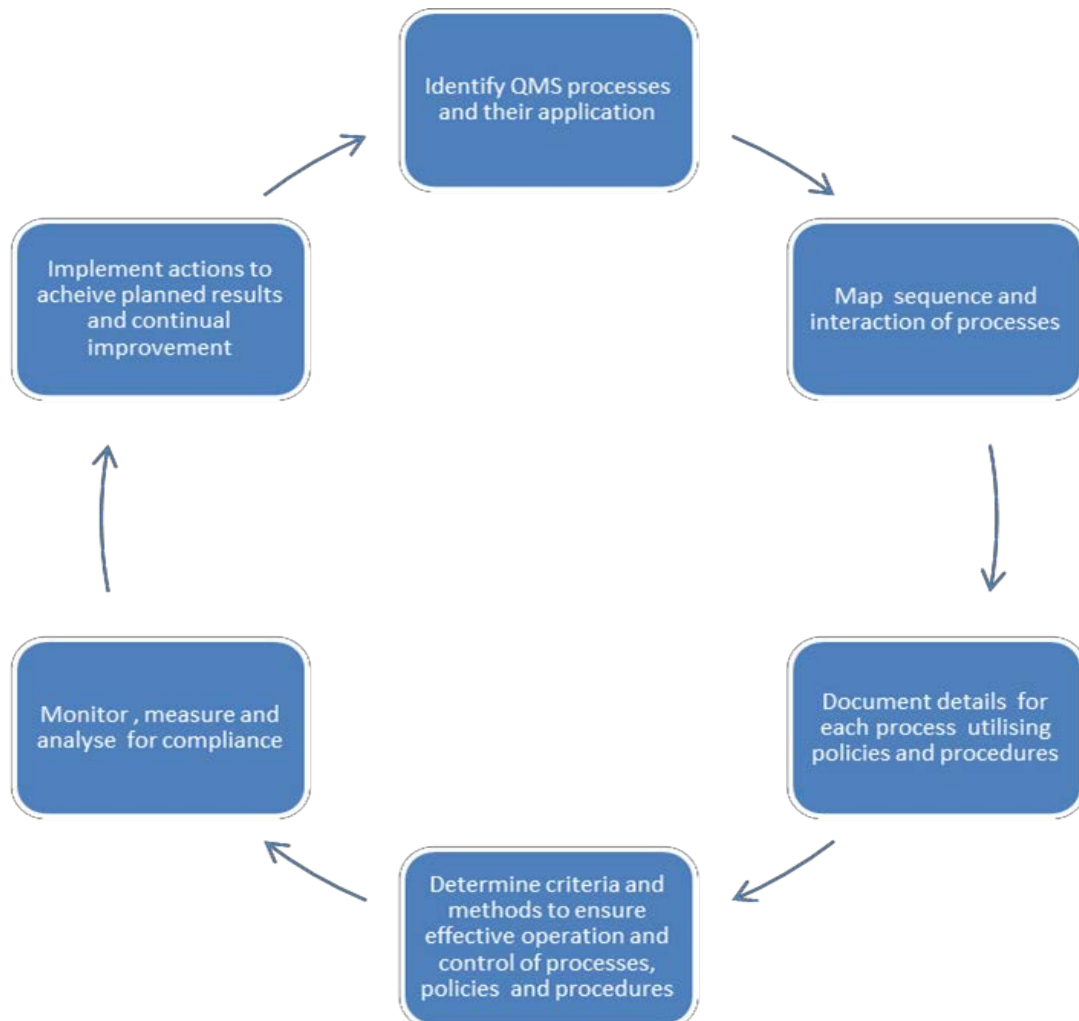


Figure 4: Process-driven Approach to Quality Management

Accordingly, the following are the elements that support the successful and effective QMS:

- a. Management Responsibility – senior management’s commitment to supporting and sustaining the QMS;
- b. Resources - provision of resources for maintaining and improving the QMS;
- c. Educational and Administrative Services - development and delivery of quality programs and services that are relevant to the needs of the beneficiaries;
- d. Measurement, Analysis and Improvement - establishment of reliable methods to monitor, assess and continually improve beneficiaries’ satisfaction level.



6. Administrative Division Self-Assessment Cycle

Conducting internal administrative self-assessment in many Higher Education Institutions (HEIs) is becoming increasingly desired to know how well these institutions are doing, and to improve their strategic planning efforts, decision support, resource allocation, and operational excellence. The Administrative Self-Assessment process is considered as a key part of ensuring and enhancing the Institutional Effectiveness (IE) of any institution. It is part of developing a culture of excellence, which is one of the core elements in the mission of Bethlehem University. Administrative assessment provides insight into the strengths and weaknesses of administrative resources and support services, and guides the implementation of changes to improve the output quality and beneficiary satisfaction level. This section is meant to provide background information about the administrative assessment cycle in the University, and guidance as administrative divisions create assessment plans for their areas.

Empowering divisions through participation leads to a more effective administrative assessment process. When employees collaborate on creating their division's mission, vision, and goals, they become invested in their success. This investment is further strengthened by their role in developing metrics to track progress towards those goals. Internal Quality Cells (IQCs) within BU divisions serve this crucial function. The ultimate aim of administrative assessment is not to impede progress, but to enhance it. By continuously evaluating performance and identifying areas for improvement year after year, IQCs can provide concrete evidence of a division's ongoing development.

6.1 What is Assessment?

Assessment is not a self-study with a start date and end date; rather, it is a systematic and ongoing process of gathering, analyzing, evaluating, documenting and communicating information to measure a certain division's performance, then using the results to improve further that division's performance, student learning and institutional effectiveness as a whole.

Administrative Assessment is not an Employees Performance Appraisal

As with academic divisions, administrative assessment of non-academic divisions needs to be ongoing, continuous and systematic as well. The mission of each division should relate directly to the University's mission, and the division's goals should be explicitly stated and directly related to the mission of that division. Achievement of these goals has to be assessed against targets or benchmarks. The assessment results are used to make changes to improve performance and effectiveness, allocate resources, and inform other decisions related to the division's area of responsibility.



In most of the HEIs, the administrative assessment process addresses the following three questions:

1. **What does the division try to do?** Clearly defining the division's mission, explicitly stated goals and desired outcomes;
2. **How well does the division do it?** Systematically gathering, analyzing and interpreting evidence to determine whether the division's performance matches the expectations/goals; and
3. **How can the division improve what it is doing?** Using the resulting interpretation to improve the ongoing operations, processes, programs and services.

6.2 Why Administrative Assessment is Important?

The importance of conducting an administrative assessment is summarized in the following four points:

1. **Improve** – The assessment process provides feedback to determine how the administrative division can be improved;
2. **Inform** – The assessment process informs division heads and other decision-makers of the contributions and impact of the administrative division to the development and growth of students, faculty, staff, and other stakeholders;
3. **Prove** – The assessment process encapsulates and demonstrates what the administrative division is accomplishing to students, faculty, staff, and other stakeholders;
4. **Support** – The assessment process provides support for campus decision-making activities such as division self-assessment, strategic and operational planning, as well as external review activities.

Administrative assessments aim to locate areas where University divisions excel and fall short, in terms of both their internal processes and the services they offer. This information is then used to make improvements that enhance efficiency and create a better overall experience for everyone involved with the University.

6.3 Assessment Benefits to Administrators and Staff:

1. *Clarifying the purpose and key functions of an administrative unit and its role in supporting the mission and goals of the institution.*
2. *Providing coherence and direction to the unit's work.*
3. *Providing personnel with clear expectations for their work.*
4. *Providing administrators and staff with information about how their functions and services are used and perceived by their customers or stakeholders.*
5. *Providing data to support administrators' decisions regarding improvements or changes to services.*
6. *Providing data to guide budgeting and resource allocation.*

(Adapted from the American University of Cairo Assessment Guide)



6.4 How does Administrative Assessment Process Work?

At Bethlehem University, the annual cyclic administrative assessment process consists of two interconnected phases that yield two documents:

1. A Division Assessment Plan (DAP) (mission, goals, objectives, measures and targets or benchmarks),
2. A Division Assessment Results (DAR) (gathering, analyzing, documenting the findings, and setting improvement/corrective action plans).

Throughout the academic year, a continuous assessment cycle takes place. Plans are established at the beginning to define what will be evaluated and how. Various methods are used to gather information and data on an ongoing basis. This continuous assessment culminates in comprehensive DAR report at academic year-end. If data reveals critical areas for improvement or deficiencies, the division should immediately implement corrective actions. Any such actions should be implemented quickly and documented in the DAR.

The administrative assessment cycle at BU consists of six sequential steps, and resides with the Internal Quality Cell (IQC) of each division. Nevertheless, it is crucial for all the division's staff to assume the responsibility for designing, implementing, and carrying out the assessment process, as staff participation and ownership is essential in the success of the assessment process.

Step 1: Define the Mission and Vision Statements

Mission Statement enables a particular division to define its purpose by succinctly describing what that division does, and what philosophy and principles guide it, all reflecting the greater mission of Bethlehem University. The mission statement serves as the foundation for assessment planning.

To develop a mission statement, the following questions must be answered:

1. **Who** are you? How do you support the Bethlehem University's Mission?
2. **What** are the most important functions or services that you provide? (i.e., determine your primary purpose).
3. **How** do you perform your functions or services? (i.e., determine your guiding principles)
4. **Whom** do you primarily serve? (i.e., the beneficiaries: students, faculty, staff...etc.).

Once the division has drafted a statement addressing the preceding questions, it has to ensure that the resulting statement is specific and unique enough that it is easily differentiated from those of the other divisions. The mission statement should only be rewritten when the division experiences a significant change in its purpose.



Vision Statement, similar to a mission statement, provides a concrete way for stakeholders -especially the employees- to understand the meaning and purpose of the division's work. However, unlike a mission statement – which describes the work purpose in terms of who, what, how and whom– a vision statement describes the desired long-term result of the division's efforts, and what impact these efforts make on the stakeholders. Simply, a division's vision statement reveals, at the highest levels, what the division most hopes to be achieved in the long term and how it should be viewed.

A Vision Statement should be concise, memorable, and no longer than two or three sentences.

Step 2: Define Division Goals

It is worth at the beginning to differentiate between the terms: **Goals** and **Objectives**.

- **Goals** define **what** the division aims to accomplish. These are the intended outcomes, not the steps to take. They align with the division's mission and vision, emphasizing the positive impact on those who receive the services (i.e. the beneficiaries). These goals can be set for a single assessment cycle or span multiple cycles.
- **Objectives** explain **how** each division puts its mission into action. They are specific, actionable steps (tasks) that directly connect to the division's goals and core activities. These objectives should focus on improvements that benefit the division.

Division goals are directly related to the key functional responsibilities of the division, and the division should identify at least one goal for each of its core functional responsibilities.

It is important to differentiate between three types of goals typically used for administrative divisions:

1. **Strategic Goals:** These goals outline the desired outcomes of planned activities. During the planning process, we assess them to ensure they align with our strategic initiatives and will lead to positive results.
Example:
 - Improve transcript delivery efficiency with IT solutions in the upcoming academic year.
2. **Operational Goals:** These goals are achieved for the beneficiary, and align with the division's stable mission, typically remaining consistent unless significant changes occur in the mission or the division's functions. By implementing and monitoring established processes, the focus remains on



delivering key functions and services at the desired quality level (i.e., timeliness, accuracy, efficiency, volume, responsiveness, compliance...etc.)

Example:

- Access to timely comprehensive financial data to enable University administrators optimize resource allocation and achieve institutional goals.

3. **Learning Goals (Learning Outcomes):** These goals are statements that describe the key knowledge, skills, attitude, values or abilities that learners or trainees have attained because of a learning experience. Administrative, academic support and community engagement divisions might want to include goals that relate to learning, if that is part of their mission.

Example:

- The "Policy Writing" workshop will enhance employees' ability to establish clear and effective policies and procedures.

When articulating the goals, one defines further the scope of the mission statement and begins to give it a measurable meaning; that is where key objectives come in. In many ways, objectives are the most important piece of good assessment. Typically, when we write missions and goals, we think in broad terms about what we are and where we want to be. However, when it comes to writing an objective, we need to think in terms of tangible evidence that demonstrates that our efforts have resulted in something. So, when writing objectives, think in terms of the outcomes, or effects, sought from the activity the objective describes. Not just, what do I want to see at the end, but how different will it look from where we are now?

A common method for writing good objectives is to make them SMART. Consider each letter: (for more information see Appendix 1)

- **Specific**—it should identify a target population and say what will be accomplished.
- **Measurable**—it should clearly indicate some comparable results.
- **Achievable**—it should be something your division can actually do.
- **Relevant**—it should address the goal that it supports.
- **Time-bound**—explicitly or implied, it should indicate the period of time in which the result will occur.

Accomplishment of those objectives will serve as KPIs to gauge progress toward the University's overall mission and ensure alignment with available resources. Keep in mind that not all division goals need to be assessed annually. A Division establishes

annual assessment plan, focusing on **3 to 4 goals** only for in-depth assessment, and each goal should have at least one objective. Multi-year planning ensures all goals receive attention.

Step 3: Identify Measures and Targets or Benchmarks for Each Objective

❖ Assessment Measures

Assessment measures identify evidence and methods used to determine whether the expected objective has been achieved or is being accomplished by the relevant division. The measures should be quantitative and show performance compared to criteria for success in relation to expected objective. They should be specific enough to answer whether or not the objective is being met, and should help lead the division to identify problem areas and decide on actions to improve the results.

Several assessment measures are employed in the assessment of administrative divisions. These measures are categorized as direct or indirect measures.

- Direct measures correlate exactly with the objective, and are more powerful because they explain what specific activity will be undertaken to show the extent to which an objective has been accomplished. They examine factual results about the division's accomplishments and provide quantitative information that may be used to make decisions for improvements in the following years. These measures may include averages, percentages or counts, such as:*
 1. *Number of complaints;*
 2. *Number of errors; error rate;*
 3. *Number/percentage change of applications;*
 4. *Number/percentage change of users;*
 5. *Number of training sessions;*
 6. *Growth in attendance;*
 7. *Number/amount/percentage increase of donations;*
 8. *Number of new alumni donors;*
 9. *Timeliness of response;*
 10. *Level of compliance;*
 11. *Average service time;*
 12. *Average wait time;*
 13. *Auditor's findings;*
 14. *Pre- and post-workshop tests.*
- Indirect Measures are weak in terms of evidence and usually are valid if paired with at least one direct measure. They ask for opinion or perception about an outcome, and usually examine the beneficiary's perceptions and attitudes in relation to that outcome. These measures are normally based on surveying the beneficiaries. Indirect assessment measures include, but are not limited to:*



1. Satisfaction surveys;
2. Participant feedback;
3. Staff training plans;
4. Focus groups;
5. Opinion surveys;
6. Awareness surveys.

* (Adapted from University of Central Florida (UCF) Administrative Assessment Handbook; and Marymount University Administrative Assessment Guide)

In close coordination with QAE department, the Institutional Research department (IRD) conducts a series of student, faculty, staff, alumni, and employer surveys in cooperation with the concerned administrative or academic divisions for purpose of assessments and reviews. Comprehensive schedule for envisioned regular data collection is shown in (Appendix 3).

Applying different and multiple types of measures provide a complete and a more dependable picture of the overall efficacy of the objectives. This increases confidence that the results through assessment are accurate, consistent, and replicable. Ideally, one direct and one indirect measure must be used, and at least one direct measure should always be associated with each objective, but multiple direct measures are often used to validate evidence.

❖ **Targets/Benchmarks**

Targets directly flow from the measures that are set and they have a single purpose: to define clearly **the level** of successful accomplishment for a particular objective. Targets must always indicate what is expected to be achieved in this single current academic year, and they are the quantifiable result that will represent success. They must be realistic and have specific numbers indicating the level of accomplishment for the measure; they can indicate a number or percentage of items, people, or activities, or they can indicate a designated level of proficiency, or both.

It is important to note that targets must be clear not just in numbers, but in words as well. They must be defined so that the meaning is easily understood. The intuition of both words “satisfactory” and “successful” are positive, but they are not commonly understood. Sharing the rating scale is of great importance to define and understand these concepts better. For example: Does “satisfactory” mean 3 out of 5 points? Does successful mean fewer than 5 mistakes?

A simple guiding formula is used in many universities for developing targets, although following this formula is not obligatory:

Target = Level + Subject + Action Verb + (Modifiers)



Examples:

- At least 80% (level) of students (subject) report they are satisfied (action verb) with the library services.
- At the end of the training session, 90% (level) of staff members (subject) who attend the MS Excel Training Session will answer (action verb) seven questions correctly on a 10-question quiz (modifiers).

There is no one easy rule for determining what the targets should be for any objective. Generally, the division both has an idea of the current level of achievement and defines a new target from that, or it has a desired level of achievement and works toward that.

Baseline Data: If the division has previously measured an objective, this data should be used as the baseline for setting targets for the next year.

Benchmarks are standards of excellence, achievement, etc., or reference points against which similar things can be measured or judged.

Planning is the key to collecting data. Once having developed the objectives, selecting assessment measures and identifying the targets or benchmarks, simply mapping roles and responsibilities provides an easy tracking system, and helps ensure that high quality data are available. A timetable schedule for data collection should include:

1. All assessment tools,
2. From where the data will be collected?
3. When the data will be collected?
4. Who is responsible for collecting the data?

Step 4: Data Gathering

Every division must collect data and record quantifiable findings that are associated with each measure listed in its assessment plan. The data recorded as findings should indicate the results as they are phrased in the measure description, so make sure that the data collected relates to the objectives under assessment. One may want to collect data continuously or take a snapshot at regular intervals, but it should always represent the work the concerned division does throughout the year.

The actual percentage or numbers that resulted from the measures are the focus of findings, and some specific numbers are essential for analysis. If there is, a small sample taken for example, that sample number (the “n”) should be reported since it provides context for the results.

Remember:

- Data can be collected as soon as it becomes available even if the analysis of the data will take place at the end of the academic year;



- To ensure the integrity and validity of the data used in the assessment, the same data should be collected at the same time each semester/year;
- Data should be collected, retained, and summarized in ways that facilitate its use;
- ONLY collect data that is useful and will provide information that can help to assess the objective.

Step 5: Data Analysis and Interpretation of the Findings

Data Analysis involves reviewing the data to determine whether the intended results have been accomplished. In the analysis phase, the goal is to identify patterns in the data and gain an understanding of what has occurred. In the interpretation phase, the goal is to make meaning of the results and determine the significance of the result for the services provided.

At this point, the IQC who defined the objectives and measures for the assessment plan should meet to look at the findings and determine by the raw data if the target level was met, partially met, or not met. It will also need to determine what further actions are needed. This is the most important part of the assessment process. The IQC analyzes the results to identify what it means for the division in terms of:

1. Why was or was not the target achieved?
2. Is the objective and/or measure appropriate?
3. Could the results be improved? How?
4. What are the next efforts that will best contribute to improving the division's performance?

The assessment identifies areas for improvement and opportunities to excel. For each gap or deviation found, plan and develop an action to address it. Even when targets are met at 100%, seek further improvement strategies. The assessment may also reveal trends or areas requiring deeper investigation.

It is crucial to remember that the goal is not individual evaluation or assigning rewards or punishments. Instead, it is about gaining valuable insights into your division's effectiveness. When staff understand this, they will feel empowered to honestly examine, analyze, and report on results.

Step 6: Identify and Implement Improvement or Corrective Action Plans

An improvement or corrective action plan follows directly from your recent assessment. To create this plan, the IQC involved in the assessment must first analyze and discuss the findings.

Here are some key questions from the analysis that can guide your plan development:



- What specific strengths or progress were identified in achieving the objectives?
- Are there objectives that need continued attention based on the assessment results?
- How well do the stated objectives and targets align with achieving the division's goals?

The most important question to answer is: “How can this information be used to improve the division's performance?”

Once you have a clear answer to this last question, you are ready to create your improvement or corrective action plan.

As mentioned earlier, each objective not meeting expectations requires an identified improvement or corrective action. Strive for specific actions that demonstrate thorough analysis of the results. This might even involve replacing the objective with a more suitable one.

For efficient recovery, prioritize high-impact, low-cost actions. Focus on improvements that deliver significant quality gains without requiring extensive resources.

Once actions are chosen, clearly define what needs to be done, who is responsible, the timeframe for completion, and how data will be collected to measure the impact.

Ensure all actions directly target performance improvement.

The IQC should also consider the broader implications of these remedial actions. This includes potential effects on divisional policies, procedures, resource allocation, and staff workload.

6.5 Writing the Assessment Plan and Results Reports

An effective QMS relies on thorough documentation and reporting. IQCs play a key role by submitting two annual reports to the QAED summarizing their assessment activities; the Division Assessment Plan (DAP) and the Division Assessment Results (DAR). These reports are aligned with the annual assessment cycle outlined in (Table 1): Annual Division Self-Assessment Activities. Efficient documentation throughout the year streamlines report creation, as much of the content can be drawn from previous well-documented steps. However, the final submission of the two documents requires endorsement from the relevant Vice President of the administrative division.

Table 1: Annual Division Self-Assessment Activities

Planning		Reporting	Data Collection	Reporting
September - October	November	December	January - July	August
<p>IQC: -Based on the University's Strategic Plan, and previous year assessment results report, develops / revises the assessment plan for current year onwards. -Consults with QAED regarding the assessment plan.</p> <p>QAED: - Monitors the implementation of the proposed / executed corrective actions by the divisions, and sends feedback to IQCs.</p>	<p>IQC: -Writes the division assessment plan report (DAP); summarizing all the planned assessment activities during Fall Semester by its division. -Submits the assessment plan report to QAED by: (November 30th).</p>	<p>QAED: -Reviews assessment plans for current year and sends feedback to IQCs.</p> <p>IQC: -Responds and communicates feedback to division staff as required. -Develops data collection tools. (Surveys in cooperation with IRD)</p>	<p>IQC: -Implements current year assessment plan; collects data, analyzes and interprets the findings, and identifies improvement / corrective actions. It may also collect data at other points during the academic year, as appropriate.</p> <p>IRD: -Forwards results of the performed surveys (if any) to IQCs and QAED.</p>	<p>IQC: -Compiles the division's assessment findings and analysis of the results, and formulates improvement /corrective action plan. -Prepares and submits division assessment results (DAR) report to QAED by: (August 15th).</p>

Reporting Division Assessment Plan (DAP):

By the end of November, IQCs should prepare and submit their DAP to the QAED, summarizing all the planned assessment activities worked on during that semester by their division staff. Being an essential document for communicating updates, and cooperating in the workplace, the reports should clarify and describe, in clear and concise terms, the assessment plan to be followed during the second semester. A



template of the DAP report is included in (Appendix 4). Any comments or notes on the DAP by the QAED are communicated to the IQCs.

Reporting Division Assessment Results (DAR):

By August 15th, IQCs should prepare and submit their DAR report to the QAED. The DAR should display the division's effectiveness in meeting its objectives. This includes incorporating the assessment results to demonstrate either successful achievement of intended objectives at the target performance level, or areas where objectives have not been met. If objectives have not been met, the report should propose an action plan. This plan outlines improvements to the operations, facilitating the achievement of the objective in the future. A template of the DAR report is included in (Appendix 5). When using multiple measures, the results section draws on all of the analysis to develop its implications. IQCs should include other relevant information in the insights section, particularly if there are any extraordinary circumstances that affected effectiveness at meeting the objective's target, and including a very brief discussion that may provide useful insights into the assessment process.

The final stage, known as "Closing-the-Loop," involves implementing the identified corrective actions (Figure 5). The effectiveness of the implemented changes is then measured and the results are documented in the subsequent assessment cycle. This completes the cyclical process of feedback, ensuring continuous improvement. If the implemented actions prove to be unsuccessful, further improvement initiatives may be identified for the subsequent cycle.

To ensure a comprehensive and accurate assessment, the report should undergo a thorough review by IQC members for both factual accuracy and the appropriateness of the analysis. Additionally, an appendix will be compiled to include supporting documents, such as survey results analysis or any other relevant information that sheds light on the assessment process and activities.



Figure 5: Assessment Loop

6.6 Reviewing and Communicating the Division Assessment Reports:

The QAED reviews all administrative assessment reports to ensure they demonstrate the University’s standards for assessment, and evaluates the reports using a standardized evaluation rubric practice. The QAED will report the divisions’ assessment results to the Executive Vice President, as well as monitor the progress in implementing the improvement or corrective action plans.

6.7 Finally, What Does Success Look Like?

One potential pitfall of the assessment process is being overly concerned with the ability to check off all of the division’s goals one can think of at the year-end. To be clear, the assessment process is designed to lead to improvement not to determine the winners and losers. The assessment process is designed to instill an attitude of continuous improvement in an institution. Therefore, success is setting good objectives and making progress toward them. It is acceptable to modify objectives between academic years and to extend the timeline if real progress is being made. Falling short of a challenging objective is not failure to succeed, it is falling short of excellence. If the objective is worthwhile, making reasonable progress toward excellence is the chief goal.



Appendix 1

Using SMART Criteria to Develop Objectives

A useful way of making objectives more powerful and measurable is to use SMART criteria:

Specific

This criterion stresses the need for a specific objective rather than a more general one. This means the objective is clear and unambiguous. To make objectives specific, they must tell a team exactly what is expected, why it is important, who is involved, where it is going to happen, and which attributes are important.

A specific objective will usually answer the five 'W' questions:

1. What: What do I want to accomplish?
2. Why: Specific reasons, purpose or benefits of accomplishing the objective.
3. Who: Who is involved?
4. Where: Identify a location.
5. Which: Identify requirements and constraints.

Measurable

The second criterion stresses the need for concrete criteria for measuring progress toward the objective. The thought behind this is that if a objective is not measurable, it is not possible to know whether a team is making progress toward successful completion. Measuring progress is supposed to help a team stay on track, reach its target dates and experience the happiness of achievement that spurs it on to continued effort required to reach the ultimate objective. Indicators should always be quantifiable.

A measurable objective will usually answer questions such as:

1. How much?
2. How many?
3. How will I know when it is accomplished?

Achievable

The third criterion stresses the importance of developing objectives that are attainable. While an objective may be ambitious, it cannot be unachievable. That is, it should be neither out of reach nor below standard performance, since these may be considered meaningless. Setting objectives at the right level is key.

An achievable objective will usually answer the question "How?"

1. How realistic is the objective based on other constraints?
2. How can the objective be accomplished?

When you identify objectives that are most important to you, you begin to figure out ways you can make them come true. You develop the attitudes, abilities, skills and resources to reach them. The theory states that attainable objectives may cause objective- setters to



identify previously overlooked opportunities to bring themselves closer to the achievement of their objectives.

Relevant

The fourth criterion stresses the importance of choosing objectives that matter. A bank manager's objective to "Make 50 peanut butter and jelly sandwiches by 2pm" may be specific, measurable, attainable and time-bound but lacks relevance. Many times, you will need support to accomplish an objective: resources, a champion voice, someone to knock down obstacles. Objectives that are relevant to your boss, your team, your organization will receive that needed support.

Relevant objectives (when met) drive the team, department and organization forward. An objective that supports or is in alignment with the mission and objectives would be considered a relevant objective.

A relevant objective can answer yes to these questions:

1. Does this seem worthwhile?
2. Is this the right time?
3. Does this match our other efforts/needs?
4. Are you the right person?
5. Is it applicable in the current socio-economic environment?

Time-bound

The fifth criterion stresses the importance of grounding objectives within a time- frame, giving them a target date. A commitment to a deadline helps a team focus their efforts on completion of the objective on or before the due date. This part of the SMART objective criteria is intended to prevent objectives from being overtaken by the day-to-day crises that invariably arise in an organization. A time-bound objective is intended to establish a sense of importance and urgency.

A time-bound objective will usually answer the questions:

1. When?
2. What can I do today? Six months or one year from now?

* Doran, G. T. (1981)



Appendix 2

Administrative Division Self-Assessment Cycle Calendar

Year 1 Fall Semester:

- Create Mission and Vision Statements.
- Create SMART Objectives (in line with the Division Goals).
- Create Measure(s) for each Objective.
- Create annual Target for each Measure.
- Write and Submit the Division Assessment Plan to the Quality Assurance & Enhancement Department by November 30th.

Year 1 Spring Semester:

- Collect data for all measures related to the appropriate objectives.
- Assess/Evaluate current objectives, measures, targets, and findings. Determine need for modification.
- Create Action Plan for each objective based on the conducted assessment.
- Write and Submit the Division Assessment Results to the Quality Assurance & Enhancement Department by August 15th.

Year 2 Fall Semester:

- Follow-Up the implementation of last year Action Plans.
- Review/edit Mission and Vision Statements.
- Review/edit/create SMART Objectives (in line with the Division Goals).
- Review/edit/create Measure(s) for each Objective.
- Create annual Target for each Measure.
- Write and Submit the Division Assessment Plan to the Quality Assurance & Enhancement Office by November 30th.

Year 2 Spring Semester:

- Collect data for all measures related to the appropriate objectives.
- Assess/Evaluate current objectives, measures, targets, and findings. Determine need for modification.
- Review/modify/create Action Plan for each objective based on the conducted assessment.
- Write and Submit the Assessment Results report to the Quality Assurance & Enhancement Office by August 15th.

Questions regarding Administrative Assessment Process, please contact Mr. Hassan Costantini (gae@bethlehem.edu) and cc. (hassanc@bethlehem.edu).

Appendix 3

Surveys Details

No.	Survey Title	Objective	Target Group	User (+ QAED)	Frequency
1.	Freshmen Students Satisfaction Survey	To get a general insight on freshmen student's satisfaction about the academics, provided services and the university life	Freshmen students completed one semester in the university	Academic Office/ DoS	Beginning of Spring semester
2.	Senior Students Satisfaction Survey	To get a general insight on senior student's satisfaction about the academics, provided services and the university life	Senior students completed \geq 80% of their degree requirements	Academic Office/ DoS	Beginning of Spring semester
4.	Exit Survey	To get feedback from graduating students about their complete university experience	All graduating students	Academic Office/ DoS	End of Spring semester
5.	Employability Survey	To collect accurate information about the employability status of graduates and the graduates experience in finding jobs	Alumni graduated more than 12 months	Academic Office/ Faculties/ DoS	Yearly
6.	Alumni Survey	To collect information from the alumni about the relevance of the education to their work and life after graduation	Alumni	Academic Office/ Alumni Unit	Biennial
7.	Employers Survey	To survey the employers satisfaction about the knowledge, skills and attitudes of the graduates as well as their recommendations for educational modifications	Employers	Academic Office/ Faculties/ DoS/ Alumni Unit	Biennial
8.	Faculty & Staff Satisfaction Survey	To survey faculty & staff satisfaction about the provided services, opportunities and working environment	Faculty & Staff Members	HR Office/ Academic Office	Biennial



Appendix 4 Division Assessment Plan (DAP)

Division:
Internal Quality Cell Coordinator:

Date:

Division Mission Statement:

1. Division Main Goals:

Please list all goals and the year each goal was last assessed.

No.	Goals	Year Last Assessed

2. Current Academic Year Assessment Plan

Please list the key objectives your division will be assessing in the current academic year, along with the methods you will be using to assess these objectives and the expected performance targets for each measure. For each objective, identify at least two ways of measuring performance, at least one of which should be a direct measure.

Goal No.	Objective No.	Objectives	Assessment Measures	Expected Targets/ Benchmarks	Data Collection



Appendix 5 Division Assessment Results (DAR)

Division:
Internal Quality Cell Coordinator:

Date:

Division Mission Statement:

1. Assessment Process Results

Goal No.	Objective No.	Objectives	Assessment Measures	Expected Targets/ Benchmarks	Actual Results/Findings <i>(values, percentages, figures gathered)</i>



2. Major Insights on the Assessment Results and Process:

Please reflect on this year's assessment results and process. What worked well? What was especially challenging but you managed to overcome? What factors were hindering you from completion of certain tasks? What extraordinary circumstances affected the assessment process?

3. Use of the Assessment Results:

Please discuss how the results were used for planning, improvements, corrective actions, and decision-making? What lessons were learned and what will be changed?

4. Provide a Response to the Review of Last Year's Division Assessment Report:

Please respond to the point(s) raised in the division's last year assessment report. If there is any recommendation that was not acted upon, please provide an explanation.



Glossary

Administrative Division: represents a non-academic office, department, unit or center which offers services and/or support University operations.

Assessment: a systematic process of gathering and interpreting information relevant to objectives and operations in order to evaluate performance and make improvements.

Benchmarks: is a standard point of reference against which things are measured or compared.

Division Goals: concepts that are more concrete, narrowed and focused to the division's unique function. They translate the institution's broad goals into actionable steps based on the division's specific purpose. This keeps division focused, organized, and aligned with the institution's strategic direction, marking a clear path towards achieving the institution's overall mission.

Goals: broad and general statements that operationalize the mission of an institution. They usually are written as action verb statements that accompany the Mission statement so that they can be assessed to determine the extent to which the mission of the institution is being achieved.

Key Performance Indicators (KPIs): specific metrics used to track the regular performance (including efficiency and effectiveness) of processes, activities, or individuals to help in achieving the institution's overall goals. Their primary function as tools for continuous monitoring and assessment.

Objectives: concise statements, which provide a specific, detailed description of a desired quality or expectation of key functions, operations, and services within an administrative division. Objectives often begin with a verb and are then associated with an observable, measurable results-oriented action.

Institutional Effectiveness: a term used to describe how well the institution is achieving its mission and purposes, and how it engages in continuous improvement. It is a systematic and ongoing process, which identifies expected objectives for its academic and/or non-academic operations; assesses whether it achieves these objectives; and provides evidence of improvement based on analysis of those results. *The overarching institutional effectiveness question is: how well are we achieving our mission and goals?*

Qualitative Data: non-numeric descriptive information such as dialogue, text, interview, or survey.

Quantitative Data: numeric information including quantities, percentages, and statistics.



Results: report the qualitative or quantitative findings of the data collection in text or table format. Results convey whether the objectives were achieved at desired levels of performance.

Self- Assessment: the process of evaluating or reflecting on one's own learning and development.

Targets: division-specific performance criteria one aims for or strive to achieve.



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