

# King Khalid University College of Dentistry

Quality Management System Manual

2024

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## Message from the Dean

*I thank Allah for the blessing of Islam and his security and protection over us all.*

I am happy to introduce the King Khalid University College of Dentistry Quality Management System Manual. The College of Dentistry is committed to achieving the College and Institutional mission by upholding high-quality standards in all aspects of its functioning. The Bachelor of Dental Surgery program goals guide the College towards excellence in teaching, learning, and producing competent dental graduates. I appreciate the faculty and staff at the forefront of striving to achieve the College Goals.



The College's Quality Management System is essential to the organization and allies with the Institutional Quality Management System. The Department of Dental Education and the Quality and Accreditation Committee are responsible for creating and implementing quality standards that align with the National Qualifications Framework, NCAAA requirements, and Vision 2030. This alignment has guided the continuous improvement efforts of the College in teaching, research, community service, and patient care. I am grateful for the support and initiatives extended by the KCU Deanship of Academic Development and Quality that has guided our quality assurance process.

The modern amenities at the new Alqaraa campus will further support the continuous quality improvement endeavors of the departments and committees of the College. The improved clinical facilities will ensure the students receive rich clinical experiences while serving the community with quality patient care. As a College, we are proud of the Islamic values and morals we endorse and instill in our students and pride ourselves in creating a healthy teaching, learning, and working environment. I am hopeful this Quality Management System will go a long way in improving the quality of education, research, community service, and patient care.

**Professor Mohammed Ali Alqarny**





## Vision

To be a distinguished centre for undergraduate and graduate studies and research, nationally and internationally.

## Mission

Excel in **training** students, performing and supporting **advanced research**, organizing and conducting broad-based **community outreach** programs, and providing quality **oral health care**.

## Goals

- To produce general dentists and specialists who fulfil national requirements
- To establish the College as a major centre for advanced oral health research
- To promote an effective and broad-based community oral health program
- To provide comprehensive dental care in the region



Figure 1.1 Strategic Plan Theme





## Chapter I

### I. Introduction

#### I.1 History of King Khalid University College of Dentistry (KKUCOD)

The Council of Higher Education approved King Khalid University (KKU) on July 9th, 1998. Based on the recommendation of the King Khalid University Board, the Supreme Council of Higher Education issued its approval on February 4th, 2001, for the establishment of a Dental College at King Khalid University.

**The key reasons for the establishment of the program were:**

- High demand for Saudi dentists in the Kingdom of Saudi Arabia
- Provide general and specialist dental services to the general population in the region.
- Need for oral health promotion throughout the country.
- Generate employment opportunities for Saudi dental graduates.
- Expansion of KKU programs in line with national Higher Education policy

A Royal Consent ratified the approval in 2001, and accordingly, the new College admitted its first batch of male dental students during the academic year 2003/2004 in the Alsamer campus. This class of students graduated in July 2009. In line with the rapid expansion strategy of KKU, the male campus of the College of Dentistry was relocated to the Graiger University campus in February 2009. In September of the same year, the first batch of female dental students was admitted to the dental program at the Alsamer campus.

The total number of enrolled male and female students in the College has reached 1130 and 610 by the end of semester 2 of 2019-20. Approximately 100 students undergo the Internship Training Program over the two semesters of each academic year.





## 1.2 Quality Assurance Policy

The Dean of the College of Dentistry at King Khalid University (KKUCOD), along with the Vice Deans, Chair of AQDAC, Head of the Departments and sections, academic faculty, technical, and administrative staff, is dedicated to implementing a Quality Assurance System across Teaching, Training, Research, Community service, and Patient care. Recognizing the value of continuous improvement, the college has established a structured approach to ongoing development and training for all its levels, sections, and departments. Furthermore, the College of Dentistry remains committed to offering solid infrastructure, consistent maintenance, and a supportive work environment in every department and section to meet the accreditation standards.

## 1.3 The Internal Quality Assurance System

King Khalid University College of Dentistry (KKUCOD) has designed the internal quality assurance (IQA) to match the IQA at KKU. It focuses on spreading the quality culture and monitoring the quality in the administrative and academic areas of the College. The KKUCOD IQA's primary purpose is quality assurance of the various operations within the college in teaching, training, research, community services and patient care. Moreover it serves to facilitate the implementation of the KKUCOD strategic plan to achieve its strategic goals, mission, and vision. The KKUCOD IQA is practiced by implementing quality policies and initiatives, periodic reports and measurement and analysis of indicators. The KKUCOD quality management system (QMS) implements and monitors the policies and procedures of the KKUCOD IQA.

## 1.4 The External Quality Assurance System

The External Quality Assurance (EQA) at KKUCOD ensures regulatory compliance. It conducts College benchmarking at a national level. The KKUCOD IQA complements the KKUCOD EQA by providing the data and statistics compiled at different courses and committee levels at different times.

The components of KKUCOD EQA are the following.

- Self-Study for NCAAA Accreditation
- Compliance with the National Qualification Framework (NQF)





- Program Accreditation
- Benchmarking with National Dental Colleges in KPIs

Applying for NCAAA accreditation and preparing a comprehensive self-study report, measuring its performance on the NCAAA five standards and criteria defined by the Education and Training Evaluation Commission (ETEC).

## 1.5 KKUCOD Advisory Committee

### Purpose

- Linking college outputs to the needs of the labor market in the public and private sectors.
- Achieving community partnerships with civil society sectors and institutions.
- Benefiting from national and international experiences in making decisions that have a societal impact.
- Participation of several beneficiaries in civil society in managing and directing the College in a way that enhances cooperation, partnership, and integration with civil society.
- Strengthening the relationship between college students and public and private civil society institutions

### Membership

- The College Dean chairs the College Advisory Board
- The Vice Dean of the College of Dentistry is the Secretary of the Board.
- The Board meets at the invitation of its chairman at least once a year.
- Board sessions may be held inside or outside the College, and he may invite whoever he sees from outside the Board to attend its sessions.
- Board membership is for two years, subject to change.
- Board members will include eminent personalities such as Deans or Professors of Dental Colleges, Professors and Doctors working in Ministry of Health, KKUCOD Alumni, and international personalities with experience in oral health care and academics.







## Duties

- Submitting proposals regarding everything that serves to explore the College's future.
- Providing ways to deepen the partnership between the College and the local and global community.
- Contribute to the development of programs and curricula following the requirements of the labor market.
- Contribute to the implementation of the College's strategic plan.
- Submit proposals that would provide material and moral support for the College.
- Contribute to developing a mechanism for coordination and establishing joint projects between the College and the sectors of society to find solutions to society's problems in an integrated manner.
- Proposing methods to provide funding sources for the College's developmental projects.

## 1.6 Objectives of Quality Management System

The KKUCOD QMS objective is to standardize the quality activities and spread the quality culture across the College. The following are the objectives of KKUCOD QMS.

- Develop and share the quality policies, practices and procedures
- Improve the quality of KKUCOD administrative and academic activities
- Spread quality culture across the College
- Develop necessary quality structures
- Define the roles and responsibilities of participants in the quality assurance framework
- Continuous Assessment of performance
- Identify good practices
- Promote continuous improvement





## Chapter 2

### 2. The Quality Management System at KKUCOD

The AQDAC is the center for preparing, implementing, monitoring, and reporting the quality management system at KKUCOD. Reporting in QMS is done through the NCAAA annual program reports (APR) and course reports (CR) for the academic processes. The QMS ensures that the Bachelor of Dental Surgery (BDS) program aligns with the National Qualifications Framework (NQF) for identifying the program learning outcomes at LEVEL 7. For non-academic operations, the QMS also reports the goals, objectives, measurements, outcomes, and results for improvement.

#### 2.1 Process of Development of QMS

The development and implementation of QMS is an NCAAA eligibility requirement. The AQDAC is tasked with the development of KKUCOD QMS.

At different stages, the academic departments, the College Board, and the Dean approve the QMS. The summary of academic/non-academic activities, the IQA, EQA, indicators, and benchmarking form the central part of the QMS. Figure 2.3 presents the details of the Quality Assurance and Accreditation processes at KKUCOD.

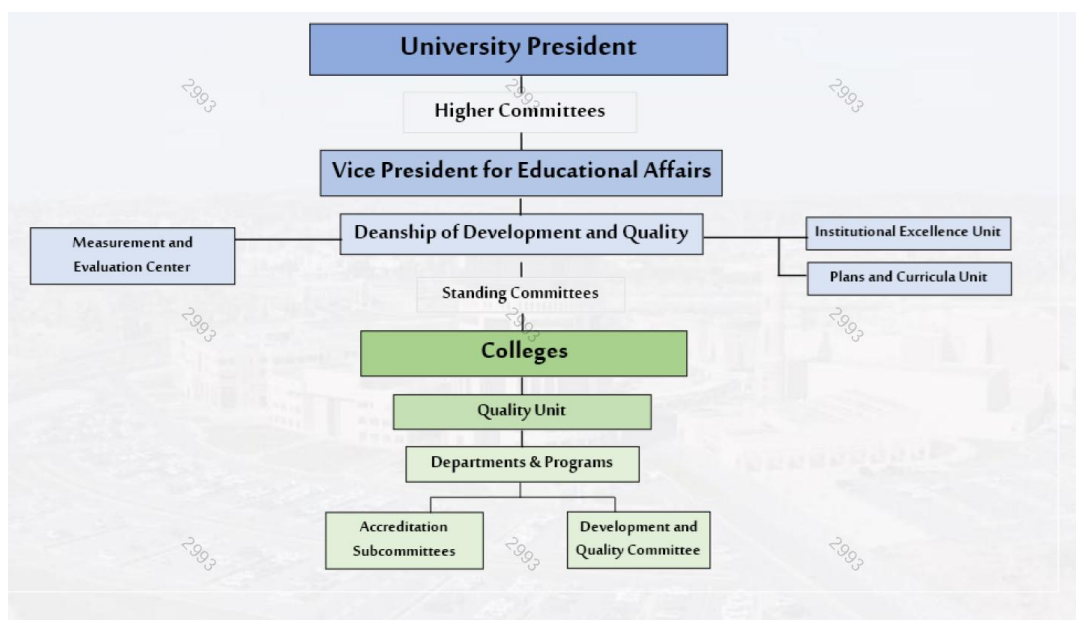


Figure 2.1 Quality Assurance and Structure at KKU





The organizational chart for the College of Dentistry at King Khalid University illustrates a comprehensive and structured hierarchy under the Dean's leadership. It is organized into various key divisions, including the College Board, Vice Deans, and Advisory Board, alongside strategic planning functions. Major areas of focus include Academic Affairs and Development, Female Students Affairs, Postgraduate Studies and Research, Academic Departments, Student Council, Community Service, and Administrative Services. The chart highlights specialized committees and units such as the Academic Coordination Committee, Institutional Review Board, and Graduate and Scientific Research Committee, which contribute to academic and research excellence. It also showcases department-specific roles, including chairs for various dental sciences disciplines, such as Prosthodontic, Periodontics, and Orthodontic Sciences. Additional support structures like the Assessment and Evaluation Committee, Faculty Development and Media, and Teaching Strategies Committee ensure continuous quality improvement in education and professional training. This well-organized chart reflects a clear delegation of responsibilities and a commitment to academic and operational excellence.

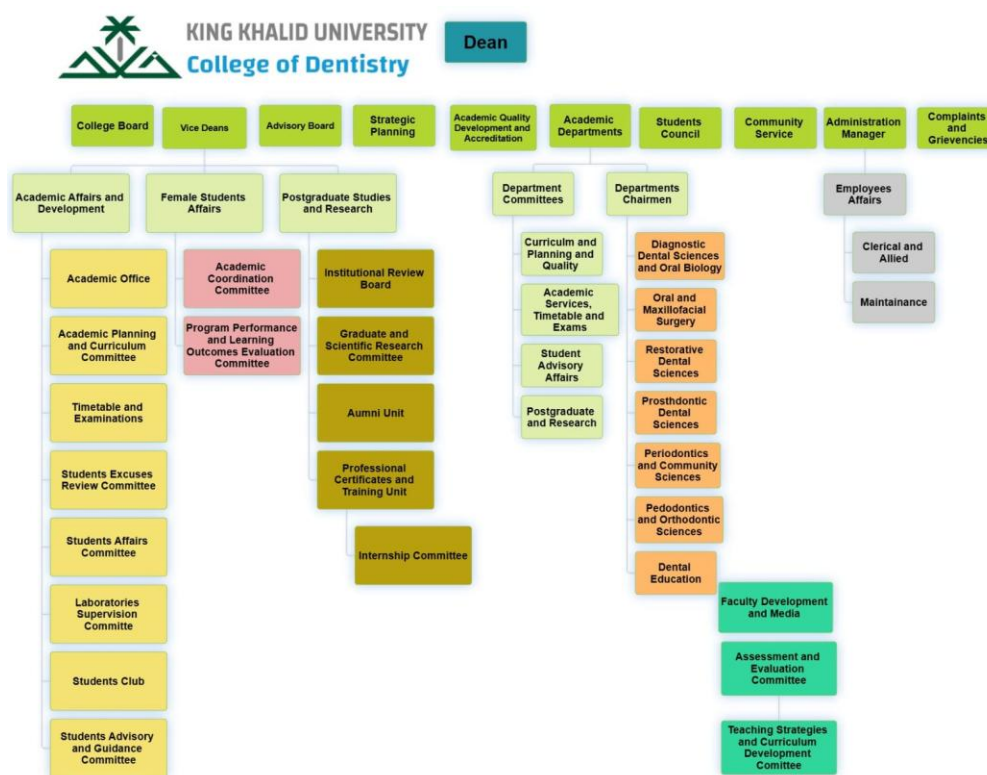


Figure 2.2 KKUCOD Organizational Chart





## 2.2 Documentation and Record Control

The Academic Quality Development and Accreditation committee (AQDAC) coordinates the quality management and assurance system at KKUCOD. AQDAC aims to instill a culture of quality that leads to excellence, continuous improvement, and sustainable quality processes to provide an optimal teaching and learning environment. The AQDAC and DDE aspire to meet the NCAAA standards and provide a model for other accreditations for the College. Figure 2.3 presents the major documents and records controlled by the AQDAC to implement the QMS and measure the effectiveness of the quality procedures. The periodicity of the documents and data measurement is annual. The recording and implementation of the QMS at the level of courses are done through the NCAAA course specifications and course reports. The approved action plans at the college level are recorded in the NCAAA program specifications and annual program report. All Policies and Manuals are coded for organizing and managing for archival, quick retrieval and tracking of progress.

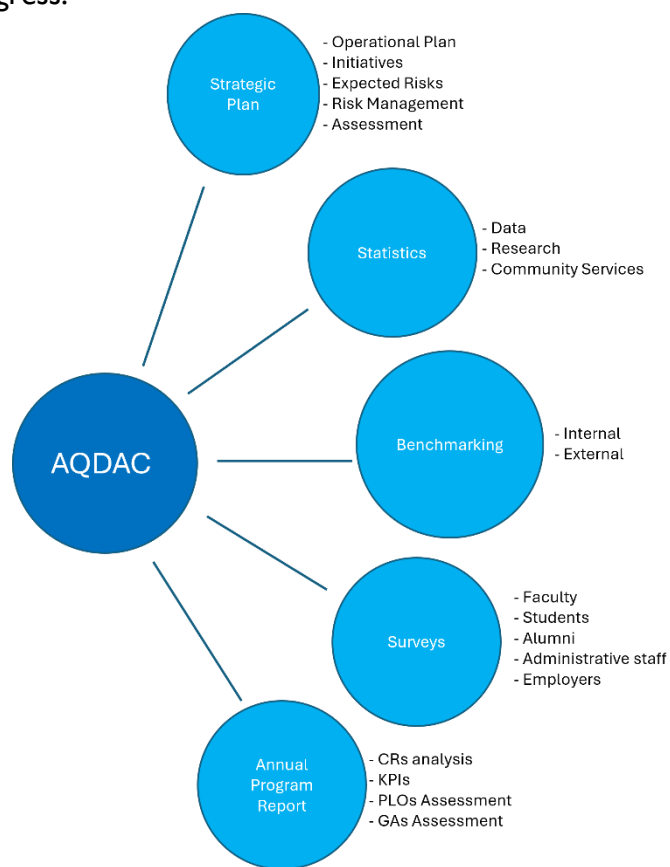


Figure 2.3 Documents and records controlled by the AQDAC





## Chapter 3

### 3. Responsibilities for Quality Management at KKUCOD

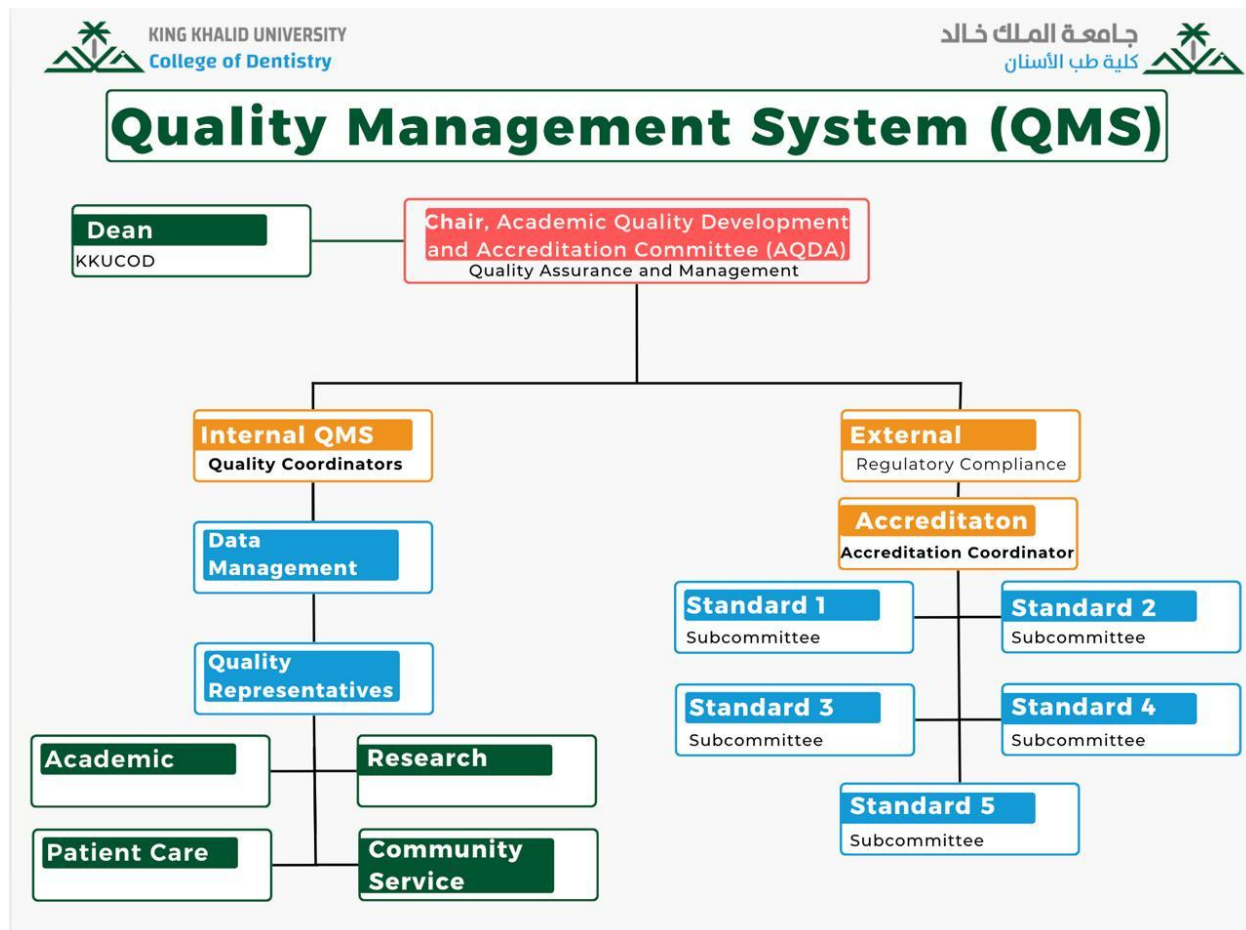


Figure 3.1 Flowchart for Quality Management System at KKUCOD

#### 3.1 Academic Quality Development and Accreditation Committee Structure (AQDAC)

##### Purpose

The KKUCOD Academic Quality Development and Accreditation Committee (AQDAC) is responsible for quality assurance at KKUCOD. It also governs, reviews, and approves the quality assurance processes aligning with the College's teaching and learning mission, research, community engagement, and patient care.





## Membership

The Dean selects the Quality and Accreditation Committee members, and the College Board approves the membership. The Committee is headed by a chairperson and assisted by its members. The members are chosen according to the following criteria.

- Full-time faculty
- Qualification or experience related to the committee tasks
- Has no conflict of interest

## Terms of Reference

- The workload distribution of the Committee must be according to the expertise of the committee member.
- The Committee Chair workload should be fairly distributed among the committee members.
- The Committee should be reconstituted partially or fully every year. The reconstitution of the Committee is based on the Committee's achievements and contributions to ensure continuous improvement.

## Duties

- Communication with the Dean, Vice Dean, Department Chairmen, and Committee heads about quality activities.
- Provide feedback on the results of annual program reports, action plans, and performance assessments.
- Make recommendations for improvement and other program activities to the departments and the appropriate committees.
- Disseminate department and committee performance information to promote quality assurance and a culture of excellence.
- Ensure the quality is upheld in all College activities & the NCAAA standards are met.
- Ensures the College maintains continuous, appropriate, and effective quality improvement through all activities and regular performance assessments.





- Annually review college performance for use in submissions for NCAAA accreditation requirements.
- Ensure that the appropriate resources are available to support the QA process.
- Ensure that the requirements for program accreditation are met promptly.
- Assure a systematic implementation of the curriculum, the best utilization of learning resources, and optimal educational management, and monitor the outcomes of the academic program.

### **Chair, Academic Development and Accreditation Committee**

**Reports To:** Dean KKUCOD

#### **Responsibilities**

- Leadership and governance for the Academic Development and Accreditation Committee (AQDAC).
- Oversee the AQDAC activities to maintain and enhance academic excellence and compliance with NCAAA accreditation standards
- Oversee the implementation of quality assurance policies and procedures across all academic units.
- Control of Quality documents
- Facilitate Quality culture among committee members, faculty, and stakeholders regarding Quality assurance in Teaching, Training, Research, Community services and Patient care
- Oversee the continuous improvement at KKUCOD academic program.
- Serve as the primary liaison for NCAAA accreditation-related activities and correspondence.
- Lead the preparation and submission of NCAAA accreditation reports and self-study documentation.
- Coordinate site visits and ensure compliance with NCAAA standards
- Monitoring of key performance indicators (KPIs)





### **Responsibilities of Quality Coordinators at KKUCOD**

- Support and coordinate the implementation and monitoring of Quality assurance policies and procedures in areas of Teaching, Training, research, community services and patient care at KKUCOD
- Maintain accurate and up to date related documentation of policies, procedures and reports
- Support the implementation of quality assurance policies and procedures
- Monitor and evaluate the effectiveness of quality systems in all the academic activities and reports it to the Chair AQDAC.
- Conduct and report periodic internal reviews to maintain and exceed quality benchmarks

### **Responsibilities of Quality Representatives at KKUCOD**

- Assist in implementing Quality assurance measures in accordance with the Quality assurance process of KKUCOD in areas of Teaching, Training, research, community services and patient care
- Report any non-conformities observed for Quality assurance activities at KKUCOD to the Quality coordinators and AQDAC for preventive and corrective actions.

### **Responsibilities of Accreditation Coordinator at KKUCOD**

- Coordinating and overseeing NCAAA accreditation processes
- Assisting in the preparation and submission of accreditation documents, such as self-study reports, compliance reports, and evidence files
- Gathering, organizing, and analyzing data required for accreditation purposes
- Developing and maintaining databases and documentation systems to support accreditation activities
- Assisting the Chair of AQDAC in organizing committee meetings, preparing agendas, and documenting minutes







### 3.2 NCAAA Accreditation Subcommittees

The NCAAA Accreditation Subcommittees work under the Quality and Accreditation Committee. The subcommittees are divided according to the NCAAA standards, and they work to measure, analyze, and report the action plans for the indicators related to their respective NCAAA standards (Figure 3.2). The subcommittees are assisted by ad hoc committees that work temporarily alongside the members of the subcommittees.



Figure 3.2 Subcommittees supporting Quality and Accreditation Committee

### 3.3 Department of Dental Education

The Department of Dental Education (DDE) was established in 2011. DDE was initially made responsible for monitoring curriculum implementation, conducting curriculum review, peer review of courses, and recommending curriculum development as may be required.

#### **DDE Committees**

1. Teaching Strategies and Curriculum Committee
2. Faculty Development and Media Committee
3. Assessment and Evaluation Committee





### DDE Goals

1. Evaluate, revise, and recommend policies to implement the BDS curriculum in the College.
2. Share and update the faculty about the latest teaching and assessment strategies.
3. Promote the latest dental education practices in the teaching and learning activities of the faculty.
4. Develop educational and non-educational processes for the College through media relations activities.
5. Provide a centralized system of printing, conducting, scanning, and analyzing the reliability of exams.

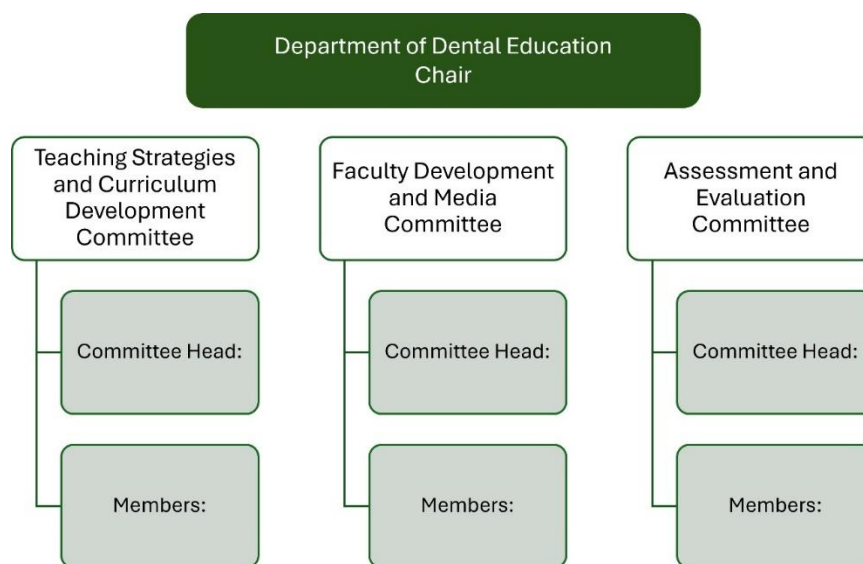


Figure 3.3 DDE structure

### DDE Roles and Responsibilities

- Analyzing course delivery through course specifications and course reports of all the courses.
- Monitoring the faculty's commitment to the teaching and learning strategies mentioned in the course specification documents.
- Evaluating the effectiveness of the steps taken by faculty to close the assessment loop.
- Recommend new teaching strategies and conducting meaningful lectures and workshops for the faculty with the help of the Faculty Development and Media committee.
- Organizing continuing dental education events.
- Conducting media relation activities
- Arranging the new faculty orientation program
- Scanning, printing, and analysis of examinations





- Updating and archiving of course files.
- Inspire a culture of quality throughout the College.

### 3.4 KKUCOD Committees

KKUCOD Committees are responsible for various academic and non-academic activities. The Dean of the college constitutes these committees and appoints a head. The College Board approves the members and terms of reference of these committees.

List of KKUCOD committees

1. Academic Quality Development and Accreditation Committee (AQDAC)
2. Academic Office
3. Academic Planning and Curriculum Committee
4. Timetable and Examinations
5. Students Excuses Review Committee
6. Students Affairs Committee
7. Laboratories Supervision Committee
8. Students Advisory and Guidance Unit
9. Academic Coordination Committee
10. Program Performance and Learning Outcomes Evaluation Committee
11. Institutional Review Board
12. Graduate and Scientific Research Committee
13. Alumni Unit
14. Professional Certificates and Training Unit
15. Internship Program Committee

### 3.5 Quality Assurance at KKUCOD Dental Hospital

Dental Hospital quality assurance is controlled and managed by the KKUCOD Dental Hospital Quality manager. It plays a crucial role in ensuring that patient care meets the highest standards while providing students with a robust learning environment. This system involves the continuous monitoring, evaluation, and improvement of clinical procedures, safety protocols, and patient outcomes. Quality assurance teams which include Quality Assurance specialist, assess adherence to regulatory requirements, ethical practices, and institutional policies, fostering a culture of accountability and excellence. In the context of patient care, it also integrates feedback mechanisms to enhance patient satisfaction. By prioritizing patient satisfaction and clinical effectiveness, quality assurance management helps bridge the gap between student training and practical comprehensive healthcare delivery.





## Chapter 4

### 4. Responsibilities of KKUCOD Leadership

The department committees headed by the Department Chairman implement the quality assurance system across all academic departments. The Department Chairmen reports to the Dean, and the College Board monitors the functioning and performance of the Departments. The responsibilities of the leadership are given below.

#### 4.1 Responsibilities of Dean

The Dean administers the Quality Procedures and Practices of the College through the Department of Dental Education and the Quality and Accreditation Committee.

Typical duties of the Dean include the following.

- Ensure the quality procedures and practices are implemented in all the Departments of the College.
- Correspond with the Department of Dental Education and the Quality and Accreditation Committee.
- Communicate with the accreditation and benchmarking organizations.
- Provide the necessary resources and infrastructure to the Dental Education and the Quality and Accreditation Committee.
- Lead the accreditation review process.
- Monitor the implementation of the strategic and operational plan of the College.
- Monitor the implementation and progress of the Vision-Mission and goals of the College.

#### 4.2 Responsibilities of the Vice Deans

There are three Vice Deans for the College who report to the Dean.

1. Vice Dean Academic Affairs and Quality.
2. Vice Dean for Research and Postgraduate Studies
3. Vice Dean for Female Section

The typical duties of the Vice Dean for Academic Affairs and Quality include the following.

- Administer educational activities and works on their development
- Approves the College teaching schedule and supervise the teaching load for faculty
- Supervise the exam committee's work on student exams and their Assessment



- Submit postgraduate programs proposals and monitor the implementation of the postgraduate curriculum
- Provide support to scientific research activities in the College
- Administer the smooth functioning of female student activities
- Review progress and evaluate the performance of DDE and Quality and Accreditation Committee

The typical duties of the Vice Dean for Research and Postgraduate Studies include the following.

- Establishing postgraduate programs in coordination with the college departments.
- preparing postgraduate and research plans and policies.
- Supervise the development of the college's scientific research strategy and generating the tools for its implementation and follow-up.
- enhance the college facilities for post graduate studies and researches in cooperation with the deanship of research and post graduate studies.
- prepare annual plan for scientific research development.
- Organize the process for communication and cooperation with external local, regional and international in coordination with the Deanship of Scientific Research at the university to gain mutual research benefit.
- Provide guidance, support and incentives for the college members to published in international scientific publishing venues.
- Supervise and follow up with the college scholarship students.
- provide guidance for the college demonstrators to continue their postgraduate studies.
- Supervise the postgraduate professional training and internship program in cooperation.

The typical duties of the Vice Dean for the Female Section include the following.

- To oversee the implementation of the recommendations of the College Council regarding the female section.
- Coordination with the vice deans of the College to ensure the implementation of plans and the continuous development of the program
- Propose future plans and development projects for the program.
- Supervising the implementation of the College's strategic plan for the female section.
- Facilitation of Educational, Research, Administrative, Financial and Cultural Affairs in respect of the female section





- Coordinating and developing the College's relations regarding the female section inside and outside the university.
- Develop initiatives to promote female student engagement, leadership, and extracurricular involvement.
- Work to improve the image of the College.
- Work on the development of work in the female section administratively and academically.
- Coordinating and organizing the administrative and organizational relationship with the Dean, Vice Deans and Heads of Departments in their respective fields regarding the female section.
- Submission of periodic reports to the Dean of the College on the functioning of units in the female section
- Follow-up to the units in the female section
- Supervision on finances and custodies in the female section following the regulations

#### 4.3 Responsibility of the Department Chairmen

The head of the department (HOD), also referred to as the Department Chairman, is the department's overall administrator. The HOD takes general decisions on the functioning of the department. The coordinators of all the department committees report to the HOD, and the HOD reports to the College Dean.

Typical duties of the HODs related to quality assurance in the department include:

- Communication with Dean, Vice-Deans, other departments and various committees and units within the college.
- Performs the supervision, monitoring, and review of the performance of the department committees
- Monitoring of the program delivery following the course specifications.
- Monitoring the results of the student evaluation of course surveys and feedback received from the students.
- Monitoring the implementation of the action plan for improvement derived from the Course Reports and feedback from the students.
- Ensure measurement of the course learning outcomes, the submission of the course reports for each course, and the course delivery per the course specifications.





#### 4.4 Responsibility of the Departments' Representative

The Department Reps, represent the six College departments to DDE, AQDAC and other departments as needed. The HOD of each department appoints one Department Rep. They liaise between their department and other departments and committees for communication and reporting of academic affairs.

Typical duties include:

- The Department Reps facilitate communications between departments.
- They collect and deliver the course files to DDE at the end of each semester
- They help their departments with issues related to AQDAC

#### 4.5 Responsibility of the Course Coordinators

Reporting to the HOD, the course coordinator works with course contributors within the department to ensure consistency of the adopted curriculum and to implement the course delivery as per the course specifications and Assessment of course learning outcomes.

The course coordinator submits a separate course report for every course and each campus where the course is taught, even if the same course coordinator teaches the course. A combined course report is then prepared and provided to the HOD and the Department of Dental Education.

Typical duties include:

- Coordinates with the course contributors to run the course
- Schedule meetings with course contributors with the course committee to discuss course learning, teaching strategies, assessment methods and the entire course report.
- Prepare course reports and submit them to the HOD and the Department of Dental Education through the Department representative to DDE.
- Schedule course committee meetings each semester.
- Maintains an archive of course file
- Provide required reports and information to the department, curriculum and quality committees.





## Chapter 5

### 5. Key Performance Indicators (KPI)

#### Introduction

King Khalid University College of Dentistry (KKUCOD) considers Key Performance Indicators (KPIs) as essential tools for assessing the quality of its academic programs and ensuring performance monitoring. KKUCOD places significant emphasis on benchmarking to overcome challenges and establish itself as one of the premier dental colleges in the Kingdom. Benchmarking ensures quality teaching and training, efficient dental services, impactful research, and effective community outreach programs.

Benchmarking also serves as an assessment tool to establish a parity in teaching, training, services, and resources across college campuses. The process involves comparing KKUCOD with an accredited dental college in the Kingdom and aligning with national standards based on the following criteria:

- Identifying KKUCOD processes to be evaluated.
- Selecting a national dental college as a benchmark.
- Matching KKUCOD standards with the selected benchmark.

KKUCOD selected Qassim University College of Dentistry as its external benchmark based on these criteria.

#### Purpose

To define and standardize the monitoring and evaluation of all 26 Key Performance Indicators (KPIs) at KKUCOD, ensuring continuous improvement in teaching, training, research, community services, and patient care within the program.

#### Scope

The scope of this document applies to all departments, faculty, staff, and administrators involved in the implementation, tracking, analysis, and reporting of KPIs.

#### Responsible Personnel

1. Dean
2. Vice Deans
3. Department Chairmen
4. Strategic Planning Committee
5. Department of Dental Education (DDE)
6. Academic Departments
7. Faculty







Responsible Committee for Analysis and Dissemination

- Academic Quality and Development Affairs Committee (AQDAC)

## Procedure

### 1. Strategic Planning and KPI Selection:

The Strategic Planning Committee, in collaboration with the AQDAC, is responsible for outlining and selecting KPIs in accordance with the requirements of NCAAA accreditation standards.

### 2. Benchmarking Process:

KPIs are benchmarked based on the following:

- Actual Benchmark
- Target Benchmark
- Internal Benchmark (Average of last three years)
- External Benchmark (Qassim University)
- New Target Benchmark

### 3. Mapping KPIs to Operational Goals:

All KPIs are mapped to the goals outlined in the Operational Plan.

A master chart of all KPIs is prepared, including the name, measurement method/frequency, and the responsible personnel for measurement and review.

### 4. KPI Implementation and Tracking:

The AQDAC prepares a master chart to ensure implementation, follow-up, and tracking of KPIs.

The chart includes:

- KKUCOD KPI number
- NCAAA KPI number (where applicable)
- Benchmarking details
- Responsible personnel for data collection and analysis

### 5. Data Collection and Analysis:

Data is checked, collected, and analyzed to identify strengths, weaknesses, and priorities for improvement.

### 6. Preparation of KPI Reports:

The AQDAC prepares a KPI analysis report highlighting achievements and areas for improvement.





7. Trend Analysis:

The AQDAC conducts trend analysis for all KPIs to identify patterns and opportunities for growth.

8. Review and Approval:

The KPI analysis report is forwarded to the Dean and College Board for review, final approval, and implementation.

9. Stakeholder Transparency:

KPI achievement reports are shared with relevant stakeholders to ensure transparency and foster continuous improvement.

## 5.1 List of All 26 KPIs

### Standard 1: Program Management and Quality Assurance

1. KPI S1.1: Percentage of achieved indicators of the program operational plan objectives.
2. KPI S1.2: Proportion of courses in which student evaluations were conducted during the year.

### Standard 2: Teaching and Learning

3. KPI S2.1: Students' evaluation of the quality of the courses.
4. KPI S2.2: Student completion rate.
5. KPI S2.3: First-year students' retention rate.
6. KPI S2.4: Employers' evaluation of the program graduates' proficiency.

### Standard 3: Students

7. KPI S3.1: Students' evaluation of the quality of the learning experience in the program.
8. KPI S3.2: Students' performance in professional and/or national examinations.
9. KPI S3.3: Graduates' employability and enrolment in postgraduate programs.
10. KPI S3.4: Average number of students in the class.
11. KPI S3.5: Students' satisfaction with the offered services.
12. KPI S3.6: Satisfaction of recipients with KKUCOD outreach program.
13. KPI S3.7: Student performance in clinical competency assessment.

### Standard 4: Faculty

14. KPI S4.1: Ratio of students to teaching staff.



- 15. KPI S4.2: Percentage of teaching staff distribution.
- 16. KPI S4.3: Proportion of teaching staff leaving the program.
- 17. KPI S4.4: Percentage of publications of faculty members.
- 18. KPI S4.5: Rate of published research per faculty member.
- 19. KPI S4.6: Citation rate in referred journals per faculty member.
- 20. KPI S4.7: Percentage of faculty actively engaged in community service activities.

**Standard 5: Learning Resources, Facilities, and Equipment**

- 21. KPI S5.1: Satisfaction of beneficiaries (Faculty, Interns, and Students) with learning resources.
- 22. KPI S5.2: Number of patients treated annually.
- 23. KPI S5.3: Patient dental treatment completion data.
- 24. KPI S5.4-5: End of treatment patient satisfaction survey.
- 25. KPI S5.6: Satisfaction of department chairmen with the provision of clinical and lab facilities.

**5.2 Source of KPI Data**

KPI	Source of Data	Responsibility
KPI S1.1	Program operational plans	Dean Strategic committee
KPI S1.2	Records of student evaluations from departmental reports.	HODs +DDE
KPI S2.1	Student feedback surveys on course quality.	HODs +DDE
KPI S2.2	Academic records and graduation data from the registrar. (Academic Office)	Vice Dean Academic Affairs Academic Office
KPI S2.3	Enrollment and progression records for first-year students from the registrar. (Academic Office)	Vice Dean Academic Affairs Academic Office
KPI S2.4	Employer surveys conducted through alumni Unit	Alumni Unit
KPI S3.1	Student satisfaction surveys on learning experience.	Ad Hoc Committee
KPI S3.2	Results of SDLE website	Alumni Unit
KPI S3.3	Alumni surveys and postgraduate enrollment data.	Alumni Unit
KPI S3.4	Classroom and enrollment data from the academic office.	Vice Dean Academic Affairs Academic Office
KPI S3.5	Student satisfaction surveys on services provided.	Ad Hoc Committee





KPI S3.6	Feedback from outreach program participants.	Community Service Committee
KPI S3.7	Clinical assessment records and exam results.	HODs +DDE
KPI S4.1	Faculty and student schedule and teaching assignments.	Vice Dean Academic Affairs Academic Office
KPI S4.2	Faculty distribution reports from all the departments.	Vice Dean Academic Affairs Academic Office
KPI S4.3	Faculty records from college administration.	Dean Vice Dean Academic Affairs Vice Dean Research and post graduate studies HODs
KPI S4.4	Faculty publication records and indexed journal data.	Vice Dean Research and post graduate studies
KPI S4.5	College research databases and publication tracking.	Vice Dean Research and post graduate studies
KPI S4.6	Citation metrics from indexing databases.	Vice Dean Research and post graduate studies
KPI S4.7	Records of faculty involvement in community programs.	Community Service Committee HODs
KPI S5.1	Surveys from faculty, interns, and students about learning resources.	Dean HODs Vice Dean Academic Affairs
KPI S5.2	Clinical patient management systems and clinic logs.	Hospital Administration
KPI S5.3	Dental treatment records for completed cases.	Hospital Administration
KPI S5.4-5	Patient satisfaction surveys post-treatment.	Hospital Administration
KPI S5.6	Department chair surveys on clinical and lab facilities.	Dean+ HODs+DDE





## 5.3 Surveys and Methodology

### List of Survey-Based KPIs and Methodologies

1. KPI S1.2: Proportion of courses in which student evaluations were conducted
  - Methodology: Surveys distributed at the end of each course to get student feedback.
  - Questions: Course clarity, instructor effectiveness, and learning outcomes.
2. KPI S2.1: Students' evaluation of the quality of the courses
  - Methodology: Online surveys with Likert-scale questions.
  - Respondents: Students enrolled in the courses.
3. KPI S2.4: Employers' evaluation of program graduates
  - Methodology: Questionnaires sent to employers of graduates to evaluate skills and job readiness.
  - Questions: Communication skills, problem-solving abilities, and job-specific competencies.
4. KPI S3.1: Students' evaluation of the quality of the learning experience
  - Methodology: Comprehensive surveys addressing academic support, teaching quality, and resources.
  - Respondents: Current students.
5. KPI S3.3: Graduates' employability and enrolment in postgraduate programs
  - Methodology: Surveys sent to alumni within one year of graduation.
  - Questions: Employment status, postgraduate enrollment, and barriers faced.
6. KPI S3.5: Students' satisfaction with the offered services
  - Methodology: Surveys evaluating clinics, labs, and campus facilities.
  - Respondents: Students from various levels.
7. KPI S3.6: Satisfaction of recipients with KKUCOD outreach program
  - Methodology: Feedback forms distributed to participants in outreach events.





- Questions: Awareness impact, professionalism of staff, and suggestions for improvement.
- 8. KPI S5.1: Satisfaction of beneficiaries (Faculty, Interns, and Students) with learning resources
  - Methodology: Surveys distributed among faculty, interns, and students.
  - Questions: Quality and availability of learning resources.
- 9. KPI S5.4-5: End of treatment patient satisfaction survey
  - Methodology: Patient questionnaires post-treatment.
  - Questions: Ease of access, staff behavior, and quality of care.

**List of Data Based KPIs:**

1. KPI S1.1: Percentage of achieved indicators of the program operational plan objectives.
  - Source: Program operational plans
2. KPI S2.2: Student completion rate.
  - Source: Academic records and graduation data from the registrar.
3. KPI S2.3: First-year students' retention rate.
  - Source: Enrollment and progression records.
4. KPI S3.4: Average number of students in the class.
  - Source: Classroom and enrollment data from academic departments.
5. KPI S3.7: Student performance in clinical competency assessment.
  - Source: Clinical assessment records and exam results.
6. KPI S4.1: Ratio of students to teaching staff.
  - Source: Faculty and student rosters, teaching assignments.
7. KPI S4.2: Percentage of teaching staff distribution.
  - Source: Faculty distribution reports across departments.
8. KPI S4.3: Proportion of teaching staff leaving the program.
  - Source: Faculty turnover records.
9. KPI S4.4: Percentage of publications of faculty members.





- Source: Faculty publication records and indexed journal data.
10. KPI S4.5: Rate of published research per faculty member.
- Source: Institutional research databases and publication tracking.
11. KPI S4.6: Citation rate in referred journals per faculty member.
- Source: Citation metrics from Scopus and other indexing services.
12. KPI S4.7: Percentage of faculty actively engaged in community service activities.
- Source: Records of faculty involvement in community programs.
13. KPI S5.2: Number of patients treated annually.
- Source: Clinical patient management systems and clinic logs.
14. KPI S5.3: Patient dental treatment completion data.
- Source: Dental treatment records for completed cases.





## Chapter 6

### 6 Program Learning Outcomes (PLO) and Graduate

#### Attributes (GA)

##### 6.1 KKUCOD PLO Planning and Assessment Policies

###### Purpose

The PLO development and assessment policies establish a framework for developing, assessing, and improving KKUCOD PLOs. The PLOs align with the college's mission, graduate attributes, academic standards, and the National Qualification Framework (NQF), while addressing labor market needs and stakeholder expectations. The aim is to uphold high academic standards and prepare graduates with the essential knowledge, skills, and values for professional success.

###### Scope

Effective communication of PLOs and the assessment results is essential, as it must be shared via various platforms like the college website to keep students and faculty informed. The annual assessment, led by the Department of Dental Education, involves data collection and analysis by the PLO Assessment Team, with findings reported to aid decision-making. Continuous improvement is supported by feedback from the PLO Assessment Committee and the College Board to ensure the learners' academic success.

###### Developing KKUCOD PLOs

The KKUCOD Program Learning Outcomes (PLO) are statements that outline the knowledge, skills, and values that graduates are expected to demonstrate upon completing the program. PLOs play a crucial role in guiding the design, delivery, and evaluation of the program. They also help communicate the program's purpose and expected outcomes to students, faculty, and all other stakeholders.

While formulating or revising the PLOs, the program ensures its alignment with the college's mission, graduate attributes, academic standards, Course Learning Outcomes (CLOs), and the National Qualification Framework (NQF). The PLOs are directly reflective of the college's mission, as they identify and incorporate key areas outlined in the mission statement.







Furthermore, these outcomes are designed to meet the KKUCOD Graduate Attributes (GAs), ensuring that students are well-prepared for their future careers. In addition, the PLOs are framed in accordance with the academic standards established by the Education and Training Evaluation Commission (ETEC), taking into account the current needs of the labor market. Course coordinators play a vital role in this process by ensuring that the CLOs are structured in a way that supports the achievement of the PLOs. Lastly, the development of the PLOs carefully considers the alignment with NQF standards, as detailed in the Program consistency document.

The program learning outcomes (PLOs) for KKUCOD (Figure 6.1) are developed by the Department of Dental Education and submitted to the departments and the Academic Plan Committee for review and feedback. After incorporating the suggestions, the PLOs are approved during Department of Dental Education meetings and then sent to the College Board for final approval. Once the PLOs are approved, they are communicated to students and faculty and publicly available on the College's website.

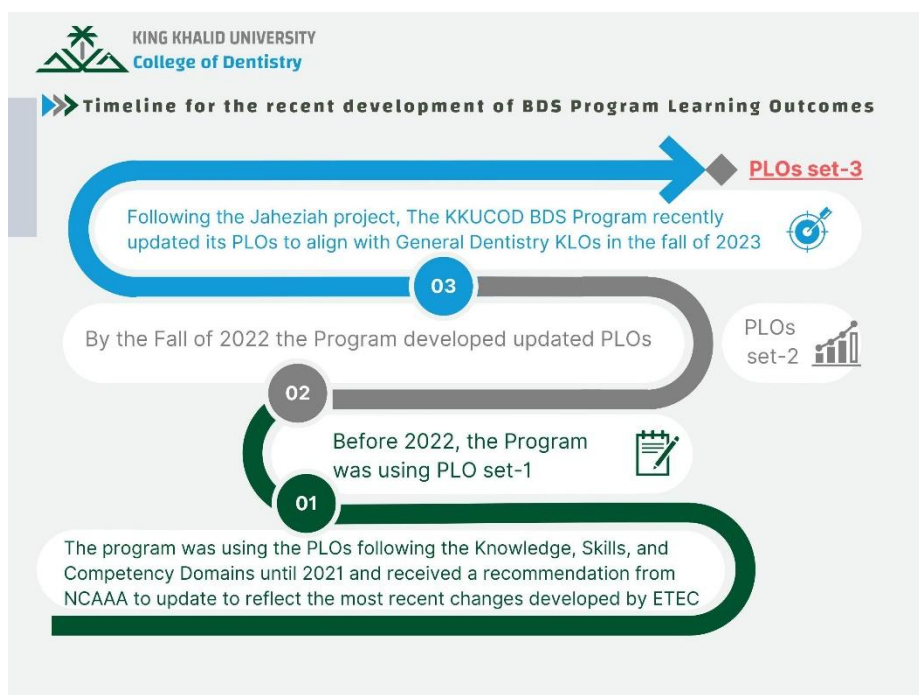


Figure 6.1: Timeline for KKUCOD PLO Development





## 6.2 KKUCOD PLO Assessment Policies

The PLOs are assessed annually according to the University norms using student assessment data and stakeholders' opinions. The KKUCOD Department of Dental Education (DDE) governs the PLO Assessment Team to conduct the PLOs assessment. DDE and the PLO Assessment Committee ensure the PLO assessment method is scientific and follows the KKU Deanship of Academic Development and Quality guidelines. The team is tasked with the collection of data and documentation related to the selected courses. Following this, they analyze the assessment data gathered. Ultimately, their work culminates in the writing of the KKUCOD PLO Assessment Report, which is presented to the DDE Chairman.

The DDE Chairman reviews the report with the PLO Assessment Committee and suggests any necessary improvements. Once the changes are made, the DDE Chairman approves the report and sends it to the other Departments Chairmen while also submitting a copy to the College Board. The College Board members then discuss the report and the accompanying action plan. Departments or committees that need to take action are notified, and finally, the report is approved.

## 6.3 Program Learning Outcomes and their Assessment

KKUCOD program learning outcomes (PLO) (Table 6.1) depict the knowledge, skills, and values a student will display after completing the BDS program. KKUCOD has a well-established PLO assessment plan that is utilized annually. The program learning outcomes are assessed to improve the program and form the basis for curriculum changes and program development as evidence of student learning.

The KKUCOD PLO assessment system depends on data collection from multiple sources to increase the validity and reliability of the Assessment (Figure 6.2).

The departments also ensure that the course learning outcomes are consistent with the PLOs and NQF, covering all learning domains. Students' performance during the final theory, practical/clinical and clinical competencies provide a valuable tool for assessing achievement of course learning outcomes and the PLOs. Knowledge, Skill and Values domain results are tabulated and compared with KKUCOD internal benchmarks.



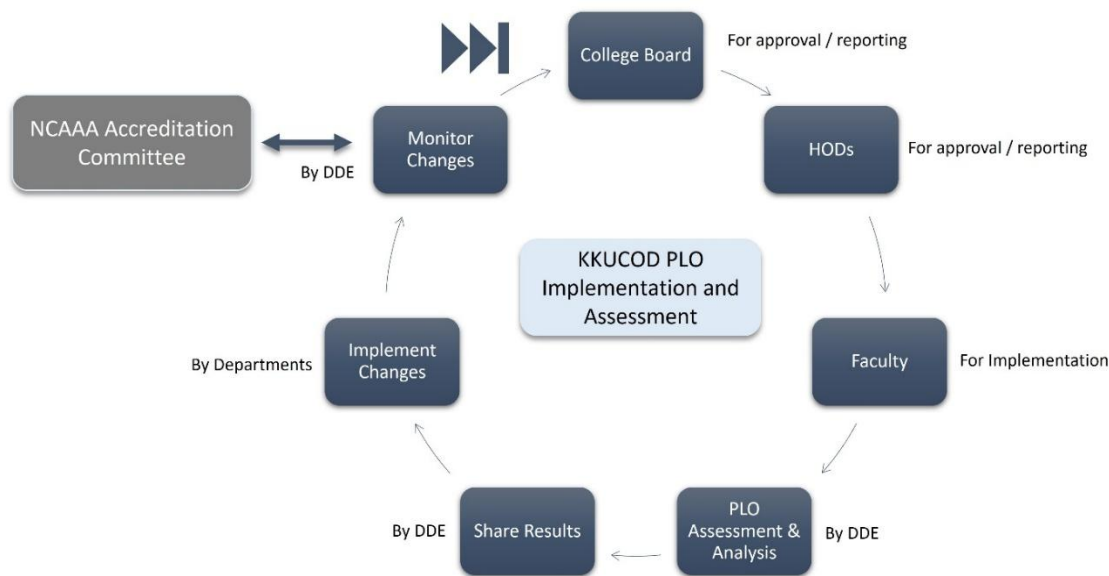


Figure 6.2 KKUCOD PLO Implementation and Assessment

The direct methods for assessing PLOs is carried out by considering the exam result of courses in the highest academic level for each speciality. If the benchmarks are not met, in-depth analysis and careful interpretation of student grades in each course will give an insight into the degree of achievement of PLOs and reveal any action needed for course modification and improvement.

The indirect methods for PLO assessment include surveys and tabulation of statistical data. The surveys utilized for the indirect method of PLO assessment are.

- Students' Evaluation of courses
- Performance of KKUCOD graduates in the Saudi Dental Licensing Examination

Table 6.1 KKUCOD Program Learning Outcomes (PLO)

<b>Knowledge</b>
<b>K1.</b> Demonstrate critical knowledge of the biomedical, technical, and dental sciences and the normal and abnormal variations of the craniofacial complex relevant to clinical practice.
<b>K2.</b> Integrate the fundamental principles of infection control, occupational hazards, prevention, and patient safety into contemporary dental practice and scientific research.
<b>Skills</b>
<b>S1.</b> Implement problem-solving and critical thinking to diagnose, manage, and treat oral and systemic conditions, complications, and emergencies.
<b>S2.</b> Demonstrate skills to access, critically analyze, and communicate scientific literature in providing evidence-based oral health care and conducting scientific research.





<b>S3.</b> Use advanced techniques to document and correlate medical, oral, and radiographic findings to develop differential and definitive diagnosis and formulate comprehensive, patient-centred treatment plans for patients of all age groups and types.
<b>S4.</b> Apply essential practical and clinical skills to demonstrate effective manual dexterity in using materials and instruments safely to deliver interprofessional comprehensive patient care and manage clinical emergencies by adhering to regulatory guidelines and infection control procedures.
<b>S5.</b> Communicate effectively with patients, their attendants, and other healthcare professionals using appropriate oral health promotion and delivery methods.
<b>S6.</b> Utilize contemporary digital technological tools for research, informatics, and documentation in dental practice management.
<b>Values</b>
<b>V1.</b> Employ the principles of ethics, responsible citizenship, and respect for diversity in providing oral health care services by adhering to the latest legal and national regulatory policies.
<b>V2.</b> Integrate professionalism, autonomy, accountability, lifelong learning, effective teamwork and workplace self-assessment for disease prevention, treatment, and oral health promotion.
<b>V3.</b> Apply the principles of leadership, entrepreneurship, time, and resource management in general dental practice.

#### 6.4 KKUCOD Graduate Attributes

Graduate Attributes (GAs) are high-level qualities, skills, and understanding students should gain due to the learning and experiences they engage in college. Every KKUCOD graduate is unique, and the experiences and opportunities at KKUCOD will lead them to achieve the attributes listed in Table 6.2. The Dean of the College approves the GAs prepared by DDE following the KKUCOD Graduate Attributes Road map (Figure 6.3).

#	Attributes	Interpretation
1	Ethical responsibility	Responsible citizenship
		Integrity
		Coexistence and respect for diversity
2	Scientific knowledge and clinical skills	A broad range of oral health knowledge and skills
		Autonomous, self-directed learning
		Work and think productively without supervision.
		Lifelong learning
3	Creativity and Innovation	Research under supervision
		Critical thinking and creativity
		Use of the latest equipment and material
4	Patient care	Competent in providing patient care
		Practice evidence-based dentistry
5	Health promotion	Promote oral health in the community
6	Professionalism	Leadership qualities
		Project management
		Oral and written communication skills
		Digital literacy

Table 6.2 Graduate Attributes - 2023



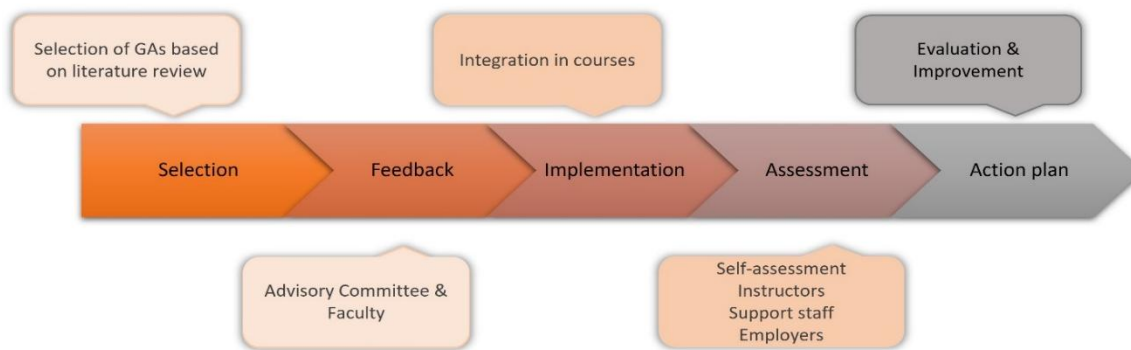


Figure 6.3 KKUCOD Graduate Attributes Road Map

## 6.5 KKUCOD Graduate Attributes Planning and Assessment Policies

### Purpose

The purpose of the KKUCOD GA policy is to establish a structured framework for developing, evaluating, and continuously improving the KKUCOD Graduate Attributes (GAs). These attributes are in line with the college's mission, competencies, and educational standards, serving as a foundation for the BDS program to ensure graduates meet institutional and national expectations for professional excellence.

### Scope

The policy governing the development, revision, and assessment of KKUCOD Graduate Attributes is a structured process led by the Department of Dental Education (DDE) in collaboration with the Internship Program Committee. This initiative involves consultation with the NCAAA Consultant, all Department Chairmen and faculty to ensure comprehensive input. The development and revision of these attributes are closely aligned with KKUCOD's Mission, Competencies, Program Learning Outcomes (PLOs), and the ETEC General Knowledge Units. Overall, this policy is designed to keep the Graduate Attributes relevant and actionable while ensuring they align with both institutional objectives and national standards for quality education and graduate outcomes.





### **Developing KKUCOD Graduate Attributes**

KKUCOD Graduate Attributes (GAs) are developed by the Department of Dental Education (DDE), Internship Program Committee and evaluated by the NCAAA Consultant to KKUCOD, as well as the Department Chairman and faculty. The process of selecting or revising the GAs begins at DDE with a review of existing literature and an analysis of institutional GAs. The GAs are written in a way that aligns with KKUCOD's Mission, Competencies, ETEC General Knowledge Units, and KKUCOD's PLOs. Subsequently, the list of selected GAs along with their interpretations, is sent to all the Department Chairmen and faculty for their input. Following the feedback and any necessary modifications, the final version is approved by the College Board, which then serves as a guiding document for the BDS program at the college.

### **KKUCOD Graduate Attributes Assessment Policies**

The GAs are assessed annually by the DDE. The DDE members begin the assessment process by collecting and analyzing both direct and indirect assessment data from student performance in select courses and surveys. They then identify areas for improvement, create an action plan and compile it in a report. Once the report is prepared, it is approved during the DDE meeting and forwarded to the Academic Planning Committee. After reviewing the report, the Academic Planning Committee sends it to the department chairmen for their consideration and to work on implementing the proposed action plan. Finally, the report is submitted to the College Board, where members discuss, deliberate, and approve it.





## Chapter 7

### 7. Community Services Committee [CSC] Policy

#### Introduction

This policy outlines the procedures for planning, conducting, and evaluating community service activities under the supervision of the Community Services Committee (CSC) at King Khalid University College of Dentistry (KKUCOD). The goal of this policy is to ensure the smooth execution of community service activities that benefit both participants and the community.

#### Purpose

The following are the purpose of this policy:

- To achieve community service-related goals at both college and institutional level.
- To provide clear steps for organizing and implementing community service activities at KKUCOD, ensuring all activities are properly coordinated, documented, and evaluated.
- To recognize and reward the involvement of students and faculty members.

#### Roles and Responsibilities

The CSC is responsible for overseeing all community service activities at KKUCOD, ensuring the activities align with the mission and vision of the college.

These members bring a wealth of expertise and experience to the committee, ensuring the effective planning, implementation, and evaluation of community service initiatives.

#### Functions of CSC:

- To promote oral health in the community, especially the underserved population by participating and involving in all community outreach programs.
- To execute any community services and related responsibilities devolved by the Dean, KKUCOD.
- To ensure the highest quality of educational and treatment programs to the public. The community services committee welcomes any kind of participation and appreciates sharing ideas that enhance the quality of the community services provided by KKUCOD.





- To provide learning opportunities for the students to work in various field settings outside KKUCOD clinics.
- To encourage faculty members to take part in community outreach programs and contribute to social welfare.
- To meet regularly to discuss updates with all ongoing activities and future plans.
- To coordinate with the Internship Program Committee (IPC, KKUCOD) for assigning interns for various outreach programs.
- To make recommendations and/or communicate the needs and problems related to community services to the Dean, KKUCOD.
- To maintain records related to all community programs organized by KKUCOD.







## Chapter 8

### 8 Research Policy KKUCOD

#### Introduction

Research is a cornerstone of academic excellence and innovation, particularly in a KKUCOD where advancements in science directly impact oral health and patient care. Research policies serve as a structured framework that guides faculty, students, and staff in conducting ethical, high-quality, and impactful research. These policies ensure compliance with ethical standards, regulatory requirements, and institutional objectives while fostering a culture of inquiry, collaboration, and continuous improvement.

In the dynamic field of dentistry, research not only enhances knowledge but also drives the development of new technologies, materials, and clinical practices. To achieve these goals, it is essential to establish clear guidelines for every aspect of the research process, from idea conception to dissemination of findings.

This document outlines the research policies designed to support the KKUCOD, vision, mission and goals of advancing oral health through evidence-based research. It encompasses governance, ethical considerations, data management, publication standards, and quality assurance mechanisms, providing a comprehensive roadmap for researchers at all levels. These policies aim to empower researchers at KKUCOD while upholding the highest standards of scientific rigor and ethical responsibility.

The research process is governed and monitored by the Vice Dean for Postgraduate studies and Scientific Research at KKUCOD. It has its associated committees - Scientific Research Committee (SRC) and Institutional Review Board (IRB) which ascertain the smooth research process at KKUCOD. Objectives of scientific research:

#### **Objectives of scientific research:**

Scientific research at KKUCOD aims to provide quality oral health care advanced research and providing quality oral health care to improve patient care, and enhance oral health outcomes.





**Purpose:**

To ensure the presence of an appropriate system that regulates and monitors the quality of research in compliance with the highest principles of ethics.

**Duties and Responsibilities:**

1. Register new research ideas aiming to keep the legal rights of the researcher.
2. To carry out ethical review and approve research proposal submitted to the committee.
3. To limit certain sections of a research proposal and solicit changes for the protection of participants involved.
4. To regulate and monitor good research practices by Implementing an ethical evaluation of endorsed research at suitable time intervals.
5. Suspend or terminate any pre-approved study that isn't following the approved guidelines laid out by the IRB.
6. Discontinue or suspend the execution of initially sanctioned research that corresponds with unforeseen grave harm towards participants.
7. Reject a research proposal that could potentially lead to severe harm or damage to its participants.
8. To report research related ethical malpractices to the college administration.
9. To issue ethical waiver letter to appropriate research proposals.
10. To maintain data pertaining to the research proposal approved by the committee.
11. To execute any other research related responsibilities devolved to it by the Dean.





## Chapter 9

### 9 List of Policies and Manuals

#### 9.1 KKUCOD List of Policies

S.NO	Policy Title	Attachment Link	Policy code	Department/Committee
1.	STUDENT ADMISSION POLICY	<a href="#">STUDENT ADMISSION POLICY</a>	AQP_01(1)	ACADEMIC
2.	CONSISTENCY AND COORDINATION BETWEEN MALE AND FEMALE STUDENT POLICY	<a href="#">CONSISTENCY AND COORDINATION BETWEEN MALE AND FEMALE STUDENT POLICY</a>	AQP_02(1)	ACADEMIC
3.	EXAMINATION POLICY	<a href="#">EXAMINATION POLICY</a>	AQP_03(1)	ACADEMIC
4.	EXCUSES AND EXAM REMEDIATION POLICIES	<a href="#">EXCUSES AND EXAM REMEDIATION POLICIES</a>	AQP_04(1)	ACADEMIC
5.	INTER ASSESSMENT DISCREPANCY POLICY	<a href="#">INTER ASSESSMENT DISCREPANCY POLICY</a>	AQP_05(1)	ACADEMIC
6.	PLAGIARISM AND CHEATING POLICY	<a href="#">PLAGIARISM AND CHEATING POLICY</a>	AQP_06(1)	ACADEMIC
7.	FACULTY ACADEMIC SUPPORT POLICY	<a href="#">FACULTY ACADEMIC SUPPORT POLICY</a>	AQP_07(1)	ACADEMIC
8.	FINANCIAL SUPPORT STUDENT POLICY	<a href="#">FINANCIAL SUPPORT STUDENT POLICY</a>	AQP_08(1)	ACADEMIC
9.	GRADUATE ATTRIBUTES POLICY	<a href="#">GRADUATE ATTRIBUTES POLICY</a>	AQP_09(1)	ACADEMIC
10.	MONITORING STUDENT ENROLLMENT AND GRADUATION POLICY	<a href="#">MONITORING STUDENT ENROLLMENT AND GRADUATION POLICY</a>	AQP_10(1)	ACADEMIC
11.	PLANNING DATA COLLECTION ANALYSIS AND DECISION-MAKING POLICY	<a href="#">PLANNING DATA COLLECTION ANALYSIS AND DECISION-MAKING POLICY</a>	AQP_11(1)	ACADEMIC
12.	PLO PLANNING AND ASSESSMENT POLICY	<a href="#">PLO PLANNING AND ASSESSMENT POLICY</a>	AQP_12(2)	ACADEMIC
13.	TEACHING STRATEGIES AND ASSESSMENT METHODS POLICY	<a href="#">TEACHING STRATEGIES AND ASSESSMENT METHODS POLICY</a>	AQP_13(1)	ACADEMIC
14.	UNDERACHIEVING STUDENT POLICY	<a href="#">UNDERACHIEVING STUDENT POLICY</a>	AQP_14(1)	ACADEMIC
15.	PROCEDURAL PLAN OF THE ACADEMIC ADVISORY	<a href="#">PROCEDURAL PLAN OF THE ACADEMIC ADVISORY</a>	AQP_15(1)	ACADEMIC
16.	STUDENT SECTION NUMBER POLICY	<a href="#">STUDENT SECTION NUMBER POLICY</a>	AQP_16(1)	ACADEMIC
17.	COMMUNITY SERVICE COMMITTEE POLICY	<a href="#">COMMUNITY SERVICE COMMITTEE POLICY</a>	CQP_01(1)	COMMUNITY
18.	INFECTION CONTROL POLICY	<a href="#">INFECTION CONTROL POLICY</a>	HQP_01(1)	DENTAL HOSPITAL





19.	RADIATION POLICY	<a href="#">RADIATION POLICY</a>	HQP_02(1)	DENTAL HOSPITAL
20.	EVALUATION OF FACULTY BY STUDENTS POLICY	<a href="#">EVALUATION OF FACULTY BY STUDENTS POLICY</a>	FQP_01(1)	FACULTY EVALUATION
21.	FACULTY PERFORMANCE EVALUATION POLICY	<a href="#">FACULTY PERFORMANCE EVALUATION POLICY</a>	FQP_02(2)	FACULTY EVALUATION
22.	FACULTY RECEIVING FEEDBACK ON THEIR PERFORMANCE POLICY	<a href="#">FACULTY RECEIVING FEEDBACK ON THEIR PERFORMANCE POLICY</a>	FQP_03(1)	FACULTY EVALUATION
23.	FACULTY PROMOTION POLICY	<a href="#">FACULTY PROMOTION POLICY</a>	FQP_04(1)	FACULTY EVALUATION
24.	COLLEGE FACILITIES AND LABS INTERDISCIPLINARY FACILITY ROUND	<a href="#">COLLEGE FACILITIES AND LABS INTERDISCIPLINARY FACILITY ROUND</a>	LQP_01(1)	LABS
25.	POLICY FRAMEWORK FOR RESEARCH EVALUATION	<a href="#">POLICY FRAMEWORK FOR RESEARCH EVALUATION</a>	RQP_01(1)	RESEARCH
26.	RESEARCH POLICIES MANUAL AT KKUCOD	<a href="#">RESEARCH POLICIES MANUAL AT KKUCOD</a>	RQP_02(1)	RESEARCH
27.	CITATIONS POLICY	<a href="#">CITATIONS POLICY</a>	RQP_03(1)	RESEARCH
28.	RESEARCH QUALITY ASSURANCE PROCESS AT KKUCOD	<a href="#">RESEARCH QUALITY ASSURANCE PROCESS AT KKUCOD</a>	RQP_04(1)	RESEARCH
29.	STUDENT ADMISSION POLICY	<a href="#">STUDENT ADMISSION POLICY</a>	AQP_01(1)	ACADEMIC

## 9.2 KKU List of Policies

S.NO	Policy Title	Attachment Link
1	HOSPITAL INTERDISCIPLINARY FACILITY ROUND	<a href="#">HOSPITAL INTERDISCIPLINARY FACILITY ROUND</a>
2	HOSPITAL POLICIES	<a href="#">HOSPITAL POLICIES</a>
3	KKU HOSPITAL FACILITY MANAGEMENT AND SAFETY	<a href="#">KKU HOSPITAL FACILITY MANAGEMENT AND SAFETY</a>
4	KKU CODE OF CONDUCT AND ETHICS POLICY	<a href="#">KKU CODE OF CONDUCT AND ETHICS POLICY</a>
5	KKU PATENT RULES AND POLICIES	<a href="#">KKU PATENT RULES AND POLICIES</a>
6	KKU RESEARCH FUNDING POLICY ARABIC	<a href="#">KKU RESEARCH FUNDING POLICY ARABIC</a>
7	KKU POLICIES FOR FUNDING RESEARCH PROGRAMS ENGLISH	<a href="#">KKU POLICIES FOR FUNDING RESEARCH PROGRAMS ENGLISH</a>





### 9.3 KKUCOD List of Manuals

S.NO	Manual Title	Attachment Link	Policy code	Department/ Committee
1	ACADEMIC POLICIES MANUAL	<a href="#">ACADEMIC POLICIES MANUAL</a>	AQM_01(1)	ACADEMIC
2	ACADEMIC ADVISOR GUIDE	<a href="#">ACADEMIC ADVISOR GUIDE</a>	AQM_02(1)	ACADEMIC
3	CIRRICULUM DEVELOPMENT AND MONITORING PLAN	<a href="#">CIRRICULUM DEVELOPMENT AND MONITORING PLAN</a>	AQM_03(1)	ACADEMIC
5	DENTAL INTERNSHIP PROGRAM MANUAL	<a href="#">DENTAL INTERNSHIP PROGRAM MANUAL</a>	AQM_04(1)	ACADEMIC
6	FACULTY MANUAL	<a href="#">FACULTY MANUAL</a>	AQM_05(1)	ACADEMIC
7	ROLES AND RESPONSIBILITIES OF COURSE COORDINATORS	<a href="#">ROLES AND RESPONSIBILITIES OF COURSE COORDINATORS</a>	AQM_06(1)	ACADEMIC
8	STUDENT GUIDE	<a href="#">STUDENT GUIDE</a>	AQM_07(1)	ACADEMIC
9	STUDENT HANDBOOK	<a href="#">STUDENT HANDBOOK</a>	AQM_08(1)	ACADEMIC
10	DENTAL HOSPITAL MANUAL	<a href="#">DENTAL HOSPITAL MANUAL</a>	HQM_01(1)	DENTAL HOSPITAL
11	HAZARDOUS WASTE MANAGEMENT PROTOCOL	<a href="#">HAZARDOUS WASTE MANAGEMENT PROTOCOL</a>	HQM_02(1)	DENTAL HOSPITAL
12	MEDICAL EMERGENCY PROTOCOL	<a href="#">MEDICAL EMERGENCY PROTOCOL</a>	HQM_03(1)	DENTAL HOSPITAL
13	FACULTY EVALUATION AND FEEDBACK SYSTEM MANUAL	<a href="#">FACULTY EVALUATION AND FEEDBACK SYSTEM MANUAL</a>	FQM_01(1)	FACULTY EVALUATION
14	KKUCOD EXCELLENCE AWARDS MANUAL	<a href="#">KKUCOD EXCELLENCE AWARDS MANUAL</a>	FQM_02(1)	FACULTY EVALUATION
15	ORTHODONTICS LAB MANUAL	<a href="#">ORTHODONTICS LAB MANUAL</a>	LQM_01(1)	LABS
16	HISTOPATHOLOGY LAB MANUAL	<a href="#">HISTOPATHOLOGY LAB MANUAL</a>	LQM_02(1)	LABS
17	LAB SAFETY GUIDELINES FOR STUDENTS AND FACULTY	<a href="#">LAB SAFETY GUIDELINES FOR STUDENTS AND FACULTY</a>	LQM_03(1)	LABS
18	RADIOLOGY LAB MANUAL	<a href="#">RADIOLOGY LAB MANUAL</a>	LQM_04(1)	LABS
19	CODE OF CONDUCT AND ETHICS	<a href="#">CODE OF CONDUCT AND ETHICS</a>	RQM_01(1)	RESEARCH
20	IRB OPERATION MANUAL	<a href="#">IRB OPERATION MANUAL</a>	RQM_02(1)	RESEARCH





#### 9.4 KKU List of Manuals

S.NO	Manual Title	Attachment Link
1	KKU QUALITY SYSTEM MANUAL 3RD EDITION	<a href="#">KKU QUALITY SYSTEM MANUAL 3RD EDITION</a>
2	KKU GUIDEBOOK OF ACADEMIC PLANS AND PROCEDURES	<a href="#">KKU GUIDEBOOK OF ACADEMIC PLANS AND PROCEDURES</a>
3	KKU HANDBOOK OF RIGHTS AND DUTIES OF KKU STUDENTS	<a href="#">KKU HANDBOOK OF RIGHTS AND DUTIES OF KKU STUDENTS</a>
4	KKU ACADEMIA MANUAL	<a href="#">KKU ACADEMIA MANUAL</a>

