



**The National Center for Quality Assurance and
Accreditation of Educational and Training Institutions**

**Guide of Procedures for Licensing and Accrediting
Educational and Training Institutions**

2016

Foreword

The National Center for Quality Assurance and Accreditation of Educational and Training Institutions has a grate rule in the development of education in Libya, by building and developing a comprehensive national system for evaluation, quality assurance, and accreditation for all educational institutions (governmental, private, and foreign) operating in Libya. The aim is to enhancing the competitiveness that leads to achieve the highest standards of quality and excellence in all level of education.

The center is not a regulator body, but rather an institution that is keen to provide all forms of technical support, guidance, and capacity building these institutions, thus helping them to continuously improve the quality of the educational process through effective procedures and mechanisms.

In order to achieve the aforementioned, the Center is keen to provide and disseminate sufficient and accurate information that helps educational and training institutions to work towards accreditation and quality assurance, and to be able to carry out evaluation and self-assessment processes, which would enhance and develop the quality of the educational and training process in institutions.

As part of the of the quality-assurance campaign led by the Center, great efforts made by a team of experts to prepare the manual for technical procedures and operations: “Licensing – Accreditation – Quality Assurance – Equivalency”. This manual provides educational and training institutions in Libya with clear details of the accreditation process conducted by the Center.

Success is only from Allah Almighty
Dr. Osama Nouredin Al-Fazani
The General Director of the Center

Team Work

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2016**

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1- Technical Terms and Definitions

Center: The National Center for Quality Assurance and Accreditation of Educational and Training Institutions.

Guide: Technical Procedures Guide for Licencing-Accreditation.

Educational and Training Institution: Any governmental or private educational institution that offers regular study or training programmes

The College: A unit providing higher education and research in a university, which has an independent legal personality, and includes a group of scientific departments, commensurate with the nature of scientific disciplines in the college.

The Department: A basic scientific unit of the college within a university that provides higher education, and specialized in a field of knowledge, and undertakes the task of preparing, organizing and implementing educational and research programs.

Educational Program: It is a scientific unit of specialized within a department that undertakes the task of preparing and organizing educational and research programs.

The Accreditation: It is the process of ensuring that the institution has met the minimum standards for accreditation (institutional and programmatic) and is granted the accreditation status accordingly.

The Criterion: A set of indicators within a process or a shared resource.

The Indicator: A quantitative or qualitative measure of the level of performance over time to infer the extent to which the criterion has been achieved.

Witnesses and Evidence: the available sources that can be taken as a proof of fulfilling the indicators performance. This could be in the form of: databases, minutes of meetings, annual reports, results of evolutions and various records such as attendance records, absences, interviews... etc.

Mechanisms: A procedure or set of procedures that are implemented to achieve an indicator.

Procedures: A set of follow-up steps required to accomplish a specific task.

Documentation: A set of operations for collecting, copying, organizing, analyzing, storing, and retrieving information or documents according to the needs of those concerned.

Annual Report: A report prepared by the institution at the end of the academic year, based on reports of the educational and training programs, and the various activities of the institution that achieve its mission and goals, according to the form prepared by the center.

Technical Report: The technical approved issued by the center, to carry out the task for establishment or create educational or training institutions or for which it is submitted to obtain a license, based on the audit team report.

Inspection Team: A team named by the center, that assess the license application file and conducts a field visit to ensure of the institution requesting a technical report, and conducts a field visit to ensure its eligibility foundation to obtain a technical license.

Auditing: An organized process to obtain objective evidences related to verifying activities and practices, and their compliance with standards, appropriate accreditation decision is then taken accordingly.

Supplementary Audit: A re-audit of standards that have not met the minimum requirements for accreditation.

Self-Evaluation: The institution evaluates itself according to the accreditation standards issued by the Center.

Self-Study Report: The report submitted by institutions to apply for the accreditation. The report is prepared according to the standards issued by the center.

Minimum limits (requirements): It is the level required to be achieved by the institution in the evaluation process which is 65% for each standard and 70% for the total standards.

Academic Recognition: A Mutual Recognition by educational and training institutions and accreditation bodies that belonging to the same network of regional and international quality assurance and accreditation.

The Facilitator: is a member of the institution who facilitates the external audit process during site visits.

Institutional accreditation: It is the Center formal confirmation about the institution's ability to achieve its standard mission and ambitious goals in accordance with NCQAAETI's institutional standards.

Program Accreditation: It is the Center formal confirmation that the candidate educational program is capable to achieve its stated mission and objectives according to the NCQAAETI's program accreditation standards.

Governance: The framework in which institutions exercise their functions and clarify the relationship between the relevant parties from the institution's board of directors, its various organizational levels, and external parties benefiting from its services, and ensuring the rights of all these parties.

Self-learning: A learning activity carried out by the learner, motivated by his own desire, with the aim of acquiring knowledge and developing skills determined by the educational program.

Feedback: Process of providing information, opinions, and observations about a particular performance, product, or behavior with the intention of helping the recipient improve, grow, or make necessary adjustments.

Objectives: A set of strategic goals formulated in a manner that represents the vision of the organization, achieved through a gradual scale of tactical and executive objectives.

2- Licensing and Accreditation

With the aim of simplifying the procedure for Licensing and Accreditation of educational and training institutions in Libya, the three main processes have been identified, which are:

- The technical license.
- Institutional Accreditation.
- Program Accreditation.

The institutional and programmatic accreditation standards have been defined based on specialization, the level, and the quality of services provided by the institution. The evaluation process has been simplified, through which the eligibility of educational and training institutions for accreditation is determined. The previous stages of institutional preliminary accreditation and programmatic preliminary accreditation have been abolished.

This guide presents the procedures, accreditation requirements and working mechanisms for educational and training institutions to apply quality assurance practices at their institutions according to the standards issued by the center in details.

3- Classification of Educational and Training Institutions

The Educational and Training Institutions in Libya are classified as follows:

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|----------------------------------|--------------------------|
| 1. Universities | (Higher Education) |
| 2. Technical institutes | (Higher Education) |
| 3. Specialized Institutes | (Higher Education) |
| 4. Vocational Education | (Intermediate Education) |
| 5. Basic and Secondary Education | (Basic Education) |

4- Technical License

A written permission issued by the Center, allowing the completion of the procedures for establishing or creating educational institutions and training, or authorized to carry out educational business. The License is formally issued by a decision of the Director General of the center, based on the recommendation of the Accreditation Department.

- The License to provide educational and training services is a proof that the institution has met the requirements of technical licensing, and it has a clear vision, educational mission and appropriate equipment facilities in order to achieve the goals, objectives and the community requirements.

5- Licensing of Newly Established Institutions

- Technical licenses for educational and training institutions are granted for a period not exceeding 12 months from the date of issuance. It is also required that foreign institutions be accredited by their home country and the host country of that institution.
- Granting a technical license is based on the specific requirements and regulations issued by the center.

6- Requirements for Applying to Obtain a Technical License

- 1- License application form
- 2- Pay slip of the licensing application fee.
- 3- Stated Values, vision, message, and aims of the institution
- 4- Market survey showing the extent to which the labor market needs the outputs of the institution.
- 5- The CVs of the constituent body members.
- 6- The organizational structure of the institution.
- 7- Teaching staff recruitment plan.
- 8- Institution's administrative system for faculty members and assistant cadres in terms of appointment, contracting, and promotions, vacations, and forms of contracts to be concluded with the institution.
- 9- The administrative and financial regulations that regulate the institution's work.
- 10- A list of academic and professional specializations and degrees that the institution intends to grant.
- 11- the educational system of the institution, including the system of study, examinations and evaluation, and the conditions of admission and registration and graduation.
- 12- The estimated budget of the institution.

- 13- Comprehensive plans for the educational and administrative buildings of the institution.
- 14- General and health facilities plan, according to the quantity requirements and regulations that must be provided in higher education institutions, issued by the center.

7- Stages of the Technical Licensing

The First Stage: Application Submission

1. The institution submits the licensing application file to the center.
2. The Accreditation Department assigns a team to inspect the licensee application files, and to make any recommendations accordingly.
3. In the event of any deficiencies in the file, the Accreditation Department contacts the applicant to complete the deficiencies within a period not exceeding two weeks from the date of receiving the communication.
4. A date is set for presenting and discussing the applications in the presence of the applicant institution's representative, if the need arises.
5. The Accreditation Department prepares its report, and forwards it to the center Director, and notifies the applicant of that.

The Second Stage: Granting the Technical License:

1. Payment of the licensing process expenses.
2. A team is appointed to examine the components of the educational and training programs by:
 - Examining the extent to which the requirements of the educational and training process are fulfilled in terms of human, material needs and education requirements, and reviewing the governing systems.
 - The Examining proposed study/training plan, and taking in feedback notes.
 - Assessing the compliance of the institution's facilities with the approved requirements and regulations.
3. The examination team submits its report to the center's accreditation department.

4. The Accreditation Department prepares its report and submits it to the Director of the Center, in order to grant the technical license form.

8- Institutional Accreditation

The Institutional Accreditation is granted based on reviewing all aspects related to the institution, by providing evidence that the institution's management is working to fulfil the NCQAAETI's institutional accreditation standards, and is compliance with the laws in force, and condition of licensing, during the period of institutional accreditation.

The institution requesting institutional accreditation must be licensed, and their application must be subject to the assessment by the Accreditation Department at the center, after which the institution undergoes, an audit process to assess the degree of its achievement of the minimum standards of accreditation. Based on evidence and the decision is made in this regard by the director of the center.

9- General Requirements for Institutional Accreditation

- Institutional accreditation is mandatory for any educational institution that wishes to operate in Libya. Educational and training institutions that have obtained a license must seek institutional accreditation. These institutions must have their license confirmed by the relevant authority before applying for institutional accreditation.
- A 12 months validity License is granted to satisfactory applications submitted by institutions for the first time, during this period of time the institution should submit the application for institutional accreditation.
- The institution obtainment or renewal of the institutional accreditation depends on the extent to which it meets the NCQAAETI's applicable accreditation standards, which are subject to periodic review and updating by the center.
- The educational and training institution that received institutional accreditation is subject to quality assurance procedures (continuous development and immunization) by the center.
- The educational and training institution must pay all financial dues incurred from institutional accreditation and follow-up operations, and any additional fees.

- The educational and training institution must maintain a clear and transparent relationship with the center, and to notify it with any changes that occur to the institution, and work to provide the information requested by the center.
- The educational and training institution must comply with all applicable laws, regulations and systems related to all its activities and operations, including licensing requirements.
- The educational or training institutions should refer to the center website, or contact the center directly to follow up and review everything related to the requirements of accreditation processed and guarantee the quality.

10- Institutional Accreditation Course

- The maximum period of institutional accreditation is five years, and the accredited institution must apply for renewal of institutional accreditation at least six months before the end of the accreditation period.
- The institution applying for renewal institutional accreditation must undergo a comprehensive audit conducted by auditing teams assigned to visit the institution.
- Based on the audit team's report, the Accreditation Department recommends: either granting institutional accreditation renewal, postponing the accreditation decision until specific requested improvements are addressed, or withdrawing institutional accreditation from the institution that has not maintained the required standards.
- The institution has the right to submit an appeal to the center only in case institutional accreditation is not granted, or if institutional accreditation is withdrawn.

11- Steps of Institutional Accreditation

The institutional accreditation process includes the following steps:

- The institution readiness for the institutional accreditation process.
- The licensed institutions must submit the documents and evidence proving their compliance with all accreditation requirements.
- The institution submits their application for institutional accreditation on the standard forms provided the Center, attached with institution's self study report prepared according to institutional accreditation standards.

- The accreditation department at the center reviews the application and all required documents.
- Coordination is made between the center’s accreditation department and the institution on scheduling the audit process.
- A specialized team named by the center carries out the audit process, and submits a relevant report to the accreditation department.
- The audit report is reviewed by the center’s accreditation department, the audit team leader, and a representative from the candidate institution (Head of the Institution, or the Head of the quality assurance office).
- The head of the audit team submits the final audit report to the Center’s Accreditation Department, including the recommendation to take the appropriate decision.
- The decision of granting the institutional accreditation or not is issued by the director of the center.
- The Center Department informs the Institution with the Decision.

The institutional Accreditation procedures issued by the Center are fixed, which include many stages before their completion, so they take up few months from the date of submitting the application to the receiving the institutional accreditation. The time taken to reach the stage of refining depends largely on fulfilling the requirements submitted from the institution, and the extent of its response to respond to inquire and to provide the center with the additional information requested from it. Should the institution’s application is completed, and all the required documents are timely provided, the application review can take 30 days, and the audit process can be scheduled within two months. Later, the institution can receive accreditation status within six months if it provides everything necessary and showed the adequate level of satisfying the quality standards. However, schedules time may be affected by a set of factors dependent on circumstances, some of which are beyond the control of the center, and the center provides the concerned institution with the specific dates within institutional accreditation audit process.

12- Financial Fees for the Accreditation Process

The NCQAAETI relies on an approved list by the competent authorities regarding the financial fees for the process of institutional. program accreditation and quality assurance, the list includes all

the preceding and subsequent stages related to accreditation. It is disseminated to educational and training institutions and also is published on the Center's website.

13- Request for Institutional Accreditation

- The institution must obtain the license before applying for institutional accreditation.
- The licensed institution is required to provide evidence demonstrating its compliance with licensing requirements and regulatory guidelines governing the institution's operations before applying for institutional accreditation.
- The licensed institution must submit an institutional accreditation application that meets the requirements of the center within twelve months from the date of obtaining the license.
- The Accreditation Department reviews the file of the documents required by the institution for the purpose of accreditation, and begins the procedures of the audit process based on a specific timetable from the date of submitting the application.
- The accreditation applications are valid for a period of only six months from the date of submission. If the necessary requirements are not completed within the specified period, the institution must submit a new application.
- The institutions should begin preparing the application for institutional accreditation after reading and understanding the Institutional Accreditation Guide, accepting all the conditions stated in it, and gathering the necessary information and accompanying documents required to prepare the application.
- The institution shall deliver two hard copies and two electronic copies of the application and the supporting documents to the Accreditation Department, in Arabic language, or in English language when necessary.
- The Accreditation Department begins the audit process upon receiving all the required documents, paying the prescribed financial fees and responding to all inquiries.

14- Reviewing the Application of Institutional Accreditation.

- The application for institutional accreditation shall be valid for a period of six months to fill in the deficiencies.

- The Accreditation Department appoints an administrative coordinator for each institutional accreditation request, to undertake communication and coordination with the institution; in order to inquire or request additional information.
- The institution receives confirmation from the Accreditation Department that its application has been received and that it has fulfilled all requirements, after reviewing it within twenty working days.
- The audit team that will undertake the audit for the purpose of accreditation is named. The audit team reviews the accreditation application file before moving on to the audit stage and the site visit.

15- Application for Renewal of Institutional Accreditation

- The center expects accredited institutions to improve their quality assurance processes throughout the accreditation period. The center maintains all information about the institution, including annual reports and others.
- An accredited institution wishing to continue its institutional accreditation must submit an application for renewal of accreditation and undergo an audit process six months prior to the expiration date of the accreditation period.
- The deadline for submitting a renewal application is three months before the end of the current accreditation, and the accreditation is withdrawn and announced if the institution does not commit to submitting on the specified date, unless it obtains an extension from the Center.
- Accreditation renewal requirements:
 - ✓ Request for renewal of institutional accreditation.
 - ✓ Data collection forms.
 - ✓ Supporting required documents.
 - ✓ Payment of the financial fees for the institutional accreditation process.
- The institution must fill out the application accurately, and submit it with the documents in two hard copies and two electronic copies.
- The procedures for the audit process to renew the institutional accreditation begin after the center receives the complete renewal application.

- After conducting the audit process, if the institution is unable to receive or renew its institutional accreditation, its institutional accreditation will be withdrawn and announced, and as a result, the program accreditation will be suspended for all educational programs it offers.

16- Program Accreditation

Program accreditation is based on reviewing all aspects related to the educational programs, and providing evidence that the program management is working to sustain program accreditation standards, and its commitment to the applicable laws and accreditation conditions, during the period of institutional accreditation.

The institution requests program accreditation for its programs, it is must be institutionally accredited, and their application must be subject to examination by the Accreditation Department at the Center, after which their programs are subject to an audit process to assess the degree of its achievement of the minimum standards of program accreditation. The audit team submits a report to the Accreditation Department, which recommends granting program accreditation, postponing it, or rejecting it based on evidence, and a decision is made in this regard by the director of the center.

17- General Requirements for Program Accreditation

- Program accreditation is mandatory for any educational programs that are implemented in the educational institution, and it is only possible to apply for program accreditation for educational and training programs for institutions that have institutional accreditation.
- Program accreditation is mandatory for any educational programs implemented by the educational institution. But it is required that the institution must holds institutional accreditation in order to apply for program accreditation.
- Educational programs that are implemented in an accredited institution, grantee program accreditation, or renewing program accreditation depends on the extent to which it meets the applicable program accreditation standards, which are subject to periodic review and updating by the Center.
- The educational and training institution shall pay all financial dues incurred for program accreditation process or any follow-up operations, and any additional fees.

- The educational and training institution must maintain a clear and transparent relationship with the center, inform it of any changes in the program, and work to provide the information requested by the center.
- The management of the educational or training program must comply with all applicable laws, regulations and systems related to all its activities and operations, including accreditation requirements.
- The management of the educational or training program should refer to the website of the center, or contact the center directly to follow up and review everything related to the requirements of accreditation and quality assurance processes.

18- Program Accreditation Course

- The maximum duration of the program accreditation is five years, and the management of the accredited program must submit a request for renewal of the program accreditation at least six months before the end of the accreditation period.
- Any application for program reaccreditation must undergo full scrutiny by the audit teams assigned to visit the program.
- Based on the report of the audit team, the Accreditation Department recommends granting program accreditation or renewal, deferring the accreditation decision until specific improvement points are addressed, or withdrawing programmatic accreditation from a program that has not maintained the continued achievement of the required standards.
- The program management has the right to submit a grievance request to the center in the event that program accreditation is not granted, or only withdrawn

19- Steps for Program Accreditation

The program accreditation process includes the following steps:

- The institution's readiness for the program accreditation process.
- Accredited institutions must submit documents and evidence proving their compliance with all accreditation requirements.

- The institution submits a request for program accreditation for its programs on the form prepared for that, attached to the institution's self-study report, which is prepared according to program accreditation standards.
- The Accreditation Department at the center reviews the application and all required documents.
- Coordination is made between the Accreditation Department at the center and the institution on the audit process.
- A specialized team named by the center carries out the audit process for the purpose of accreditation, and submits a relevant report to the Accreditation Department.
- The audit report is reviewed by the Accreditation Department of the center, the head of the audit team, and the program representative (department head, or quality office coordinator).
- The head of the audit team submits the final audit report to the Center's Accreditation Department, including a recommendation to take the appropriate decision.
- The decision of granting the institution the program accreditation or not is issued by the director of the center.
- The management of the center informs the institution of the decision.

The program accreditation procedures issued by the Center are fixed. The procedure includes many stages which is expected to take few months from the date of submitting the application. The needed to perform the audit stage depends largely on fulfilling the requirements submitted from the program management, and the extent of its response to respond to inquiries, and provide the center with the additional information requested. If the program management application is completed the necessary submissions, and all the required documents are attached on time, the application review can be completed within thirty working days and the program accreditation audit process can be scheduled within two months. The overall program accreditation is expected to be granted within six months if the program management shows its commitment to the standards. These schedules may be affected by a group of factors dependent on circumstances, some of which are beyond the control of the center, and the center provides the concerned institution with the specific dates during the program accreditation audit process.

20- Financial Fees for the Accreditation Process

The NCQAAETI relies on a list approved by the competent authorities for the financial fees for the process of institutional and program accreditation and quality assurance, and everything related to them from previous and subsequent stages. It is also circulated to educational and training institutions and published on the website of the Center.

21- Application for Program Accreditation

- The institution must obtain institutional accreditation before applying for program accreditation.
- The accredited institute must provide evidence that proves its compliance with the accreditation requirements, and the regulations governing the institution's work, before applying for program accreditation.
- The institution must submit an application for program accreditation that meets the requirements of the center within twelve months from the date of granting the institutional accreditation.
- The Accreditation Department reviews with the program administration the application documents, and begins the procedures of the audit process based on a specific timetable from the date of submission of the application.
- Accreditation applications are valid for a maximum period of six months from the submission, in case that the necessary requirements in the application are not completed within the specified period, the program administration must submit a new application.
- The educational and training institution can start preparing the application for program accreditation after reading the program accreditation manual and accepting all the conditions contained therein and the attached documents. The institution must collect the important information for preparing the application for program accreditation.
- The institution shall submit to the Accreditation Department two hard copies and two soft copies of the application and the supporting documents in Arabic language, and in English language when necessary.
- The Accreditation Department begins the audit process upon receiving all the required documents, paying the prescribed financial fees, and responding to all inquiries.

22- Reviewing the Application for Program Accreditation

- The application for program accreditation shall be valid for a period of six months. Any application deficiencies can be submitted within this period.
- An administrative coordinator is appointed by the Accreditation Department for each program accreditation request. He/she undertakes communication and coordination with the program/programs administration in order to inquire or request additional information.
- The program management receives confirmation from the Accreditation Department that its application has been received and that it fulfills all requirements, after reviewing it within twenty working days.
- The audit team that will undertake the auditing for the purpose of accreditation is named.
- The audit team reviews the accreditation application file before moving on to the audit stage and the field visit.

23- Request for Renewal Program Accreditation

- The Center expects accredited programs to improve their quality assurance processes throughout the accreditation period, and the Center maintains all information about these programs such as annual reports and others.
- Institutions willing to update their program accreditation status must submit an application for renewal of accreditation and undergo an audit six months prior to the expiration date of the accreditation period.
- Programs that are accredited and wish to maintain their accreditation state must submit a request for renewal of accreditation and undergo an audit process within six months prior to the expiration date of the accreditation.
- The deadline for submitting a renewal application is three months before the expiry of the current accreditation, and the accreditation is withdrawn and announced if the program lease is not committed to submitting on the specified date, unless an extension is obtained from the center.
- Accreditation renewal requirements:
 - ✓ Program accreditation renewal application.

- ✓ data collection forms.
 - ✓ Supporting required documents.
 - ✓ Payment of the financial fees for the program accreditation process.
- The program administration must fill out the application accurately and submit it with the documents in two hard copies and two electronic copies.
 - The procedures for the audit process to renew the program accreditation begin after the Center receives the complete renewal application.
 - If the program management is unable to obtain program accreditation renewal after conducting the audit process, its accreditation will be withdrawn, and as a result, the program accreditation will be suspended.

24- Self-Study Report

- The self-study report is an important tool in the procedures for accreditation and ensuring the quality of the educational and training process and continuous improvement.
- The institution must prepare a self-study report objectively showing the assessment of ensuring the quality of the educational or training process and continuous improvement, on the basis and reference of the accreditation standards issued by the center, before implementing the audit procedures.
- If the institution adopted a different or additional criteria, it is required to provide supporting evidence through an implementation plan, provided that it is completed in accordance with the self-study report based on the center's standards.
- The institution may update the self-study report during the period of reviewing the application file for accreditation, so that it is delivered to the center at least one month before the start of the auditing process.

25- Renewal of Accreditation for an Institution with Denied or Withdrawn Institutional Accreditation

The Center sets up a timetable for conducting the new auditing process for institutions whose accreditation was rejected or withdrawn applies for institutional accreditation.

26- Auditing Process

- Auditing is the process of verifying the institution's application of the required accreditation standards, which is carried out by a specialized audit team assigned by the Center's management.
- Accreditation is granted or renewed after conducting an audit process.
- The audit process begins after a decision is issued by the center to that effect, and coordination with the institution to schedule audit dates during regular study in the institution.
- The audit teams are composed of experts who have extensive knowledge in the field of quality assurance and accreditation. They provide the candidate institutions with rigorous evaluation and guidance to develop and continuously improve quality assurance.
- The Center shall notify the audit team at least two months before the start of the audit process.
- The center approves the audit schedule, and notifies the institution of this.

27- Selection of the Audit Team

- The center maintains a database of local and international experts to carry out audits.
- Audit teams are named on the basis of scientific specialization and sufficient knowledge in the field of education quality.
- The members of the audit team undertake that there will be no conflict of interests with the institution, and that the audit process and its results will be conducted in strict confidentiality.
- Before starting the audit process, the institution is informed of the names of the team members, and the institution should inform the center if there is a conflict of interest with any of the members.
- The audit team consists of:
 - ✓ Head of the audit team who is responsible for setting an audit schedule, managing the team members and compiling the report, and ensuring that the audit process has been completed in accordance with the requirements of the manual, and that it covers all areas of the audit.

- ✓ An administrative coordinator who handles the process of communication between the institution and the audit team, and coordinates the administrative operations of the audit team.
- ✓ Team members are local or non-local investigators chosen by the center, with the possibility of a graduate student participating as a representative of the students.
- The auditing site visit takes a period of time ranging from three to five days.
- The institution obliges its relevant members those involved in the audit process to be present during the auditing according to the scheduled audit timetable.

28- Preparing for the Audit Process

- The institution shall be notified in writing of the schedule, names of the audit team, and details of the audit including a list of buildings and facilities to be visited.
- The institution must inform its staff of the audit process that will take place in the institution, and prepare for it.
- The audit team should avoid disrupting the institution's activities during the audit process.
- The audit team collects the required documents before starting the audit.

29- The Facilities to be Provided During the Audit Process

- The administrative coordinator of the audit team represents the link between the team and the institution in all administrative matters related to the audit process.
- During the audit process, the institution must provide a special room for use by the audit team, provided that it is inside the institution and isolated from its administrative offices as much as possible. The room must be equipped with internet service, photocopying and printing service.
- All documents to be reviewed by the audit team are kept in this room, this includes all documents sent, the application, documents and evidence proving the eligibility of the institution to achieve the standards, and examples of student work.

30- Changing the Audit Date

The center has the right to change the audit date before starting the audit process, as well as in cases where it is not possible to proceed with the planned schedule.

31- Compliance with Legal Requirements

The institution applying for new accreditation or renewal, must sign a pledge that it complies with all legal requirements related to health, safety, environment, security protection, labor law, copyright, disability law, equal opportunities, means of protection and civil responsibilities. It is the responsibility of the institution and its head to ensure that these requirements are met. The audit team does not review and audit these agreements, but monitors any special violations and informs the center about them, which will lead to a verdict of distrust in the institution's ability to evaluate itself in these matters, and to question the integrity of the senior management that undertook this, and these violations reflect poor compliance with the relevant laws and decisions in the educational process, will negatively affect accreditation decisions, and the status of the institution.

32- Preparation of Audit Reports

The audit team meets with the management of the enterprise at the end of the last day of the audit process, to discuss the findings

The head of the audit team is responsible for preparing reports, sending the draft to the team members for review, and making the necessary amendments before submitting it to the accreditation department at the center

33- Format of the Audit Report:

The audit report includes an executive summary and three sections as:

- The Executive Summary: A description summarizing the audit process, including key findings and required actions.
- Part one- introduction, which includes:
 - ✓ General information about the institution.
 - ✓ Description of what the institution offers: in terms of learning and education, research, and community service.
 - ✓ Description of the audit process and its procedures (audit methodology).
- Part two- achieving the requirements of accreditation standards, that includes:

- ✓ Commentary on how the institution performs in relation to each accreditation standard.
- ✓ Mentioning the details of provisions based on evidence and documents for each standard.
- ✓ Issuing a final judgment regarding the institution's compliance with the requirements of each standard.
- Part three- Conclusion and recommendations:
 - ✓ This section presents the strengths of the institution and identifies areas that need improvement due to not meeting the minimum standards (weaknesses). It is suggested that this list of areas for improvement be used to develop a clear action plan for the institution.

34- Areas of Improvement in the Audit Report

The third part of the audit report usually contains a number of points that need to be improved, and they are classified as high, medium or low priority

- High priority: those points that the auditors consider critical, and should be urgently addressed, which prevent the immediate granting of accreditation.
- Medium priority: those points that the auditors have concerns about, but they can be achieved within a longer time frame and these areas may lead to a decision to postpone granting accreditation.
- Low priority: These points that auditors consider beneficial to the institution and enhance the quality of what it provides. However, typically, these areas do not significantly impact the decision to grant accreditation.

And these points that need improvement will be taken into consideration by the center's management when making the decision

35- Evaluation Process:

- The performance evaluation is made for each indicator of the accreditation standard separately, and the grades are allocated according to the audit team's findings, which are based on concrete evidence, including physical and non-physical ones, on a scale from zero to four as follows:

- ✓ Score: zero for indicator with no action.
- ✓ Scores: (1, 2, 3, and 4) for indicators have been achieved, based on Deming Cycle “PDCA” cycle.
- Non-applicable indicators are excluded from scoring.
- To achieve accreditation, the institute/program must obtain at least 65% in each standard, and 70% of overall standards.
- The good practices performed by the institute/program which do not include within the standard indicators are points of praise and do not affect the score of the standard.
- A 3-year accreditation is granted if the institute/program obtains 70% to less than 80% of the total score of overall standards.
- A 4-year accreditation is granted if the institute/program obtains 80% to less than 90% of the total score of overall standards.
- A 5-year accreditation is granted if the institute/program obtains 90% or more of the total score of overall standards.
- The standards performance rate is calculated as follows:
 - ✓ Standard performance rate = $\frac{\text{The sum of the all indicators scores}}{\text{number of indicators} \times 4}$
 - ✓ Standards' total performance rate = $\frac{\text{The sum of the standards performance rate}}{\text{The number of standards}}$
 - ✓ The results are displayed as a percentage.
- The results are displayed as a percentage

36- Reviewing of the Audit Report.

The audit report submitted by the head of the audit team is reviewed by the NCQAAETI Accreditation Department, and the following matters are taken into account:

- The report was implemented according to the guidelines specified in the report formatting section.
- Making judgments on all indicators of the standard
- Listing the points to be improved for all indicators recommended by the audit team.
- The appropriateness of the language used.
- Presentation of the report's provisions based on clear evidence.

After the review, which includes contacting the accreditation department or the quality assurance department with the head of the audit team to obtain more information, the report is sent to the institution to check its accuracy, so the matter may need more amendments and requires more consultations with the head of the audit team as a result of the feedback provided by the institution, the institution can only comment on the accuracy of the report and not on the judgments and decisions issued in it.

Once the procedures for verifying the accuracy and realism of the report are completed with the institution and the audit team, the report is ready to be submitted to the center's management for decision-making.

37- Decisions on Granting Accreditation

- The accreditation department reviews the report and submits its recommendations to the center's management to make the appropriate decision.
- The accreditation department recommendation can be granting, or rejecting, or postponing or renewing the accreditation decision, and the quality assurance department has the right to recommend suspending or withdrawing accreditation based on the quality assurance audit report.
- The institution shall be informed of the center's decision within a month

38- Granting Institutional Accreditation

- The accreditation is granted or renewed to the institution based on the results of the audit process.
- The accreditation department can recommend that the institution be granted accreditation for a period less than three years.
- The institution has the right to refuse the accreditation mentioned in the previous point - and then undergo a supplementary audit

39- Postponement of Granting Institutional Accreditation

- The Accreditation department may recommend postponement accreditation decision, if the audit team finds that the institution has not met the minimum limits of some standard, provided that the deficiencies are resolved within two months.

- It can be recommended to postpone the accreditation for up to six months, which is the period during the organization must address the aspects that need to be improved as requested by the audit team.
- The accreditation department requests the institution to undergo a supplementary audit at its expense in case it does not meet the requirements of postponement
- The Accreditation department recommends granting or renewing accreditation based on the supplementary audit report
- If the institution is unable to address the aspects to be improved before the end of the deferral period or has not been subjected to supplementary audit, the accreditation department can recommend refusing accreditation and the institution should apply for a new application if it wishes to obtain accreditation

40- Post-Accreditation

- All accreditation decisions: grant, suspend or withdraw are published on the center's website.
- Information on accreditation and quality assurance of educational and training institutions is updated and published on the center's website.
- The institution must apply for accreditation of the educational programs it offers within one year of receiving institutional accreditation.
- The programs offered by the institution are subject to the accreditation standards issued by the center.

41- Protecting the Credibility of Accreditation

In order to protect the credibility of the accreditation, the following should be taken into account:

- The granted accreditation guarantees what the institution provides and has been announced to the center only
- The institutional accreditation granted to any institution does not necessarily mean that the programs it offers are accredited.
- The application for accreditation submitted on behalf of the institution by its partners, branches or any related entity will not be considered.

- The institution should avoid giving any inaccurate or misleading information about its accreditation status, and the center has the right to contact the institution to request clarifications about it, because violation of this condition leads to rejection, withdrawal or suspension of accreditation
- The institution that has applied for accreditation should use this informatively only after gaining accreditation.
- The institution that has applied for accreditation should not use this process publicly until it has obtained accreditation.

42- Maintain Accreditation

Gaining accreditation is a major achievement for any institution, but this should not be the end, the institution has ongoing responsibilities to maintain the achievement of the minimum required standards and full cooperation with the center in monitoring these standards through quality assurance processes. The most prominent of these responsibilities are:

- compliance with the relevant laws and regulations.
- continue to maintain the minimum standards of accreditation issued by the center
- work to meet the requirements of the center contained in the previous audit reports
- undergo the procedures for follow-up conducted by the center, including:
 - ✓ Inform the center about any changes that occur in a timely manner.
 - ✓ Quality assurance auditing.
 - ✓ Supplementary auditing.
 - ✓ Issuance of Annual reports.
 - ✓ Immediate response to any information requested by the center.
 - ✓ Submit an application for renewal of accreditation and undergo a full auditing before the expiration date of the current accreditation of the institution.
 - ✓ Payment of the financial fees associated with the accreditation process, including any fees due for auditing.

Failure of the institution to meet any of the above conditions may lead to suspension or withdrawal of accreditation.

43- Sustainability of Accreditation

The institution must inform the center of any changes that affect the educational process, and this should be done at the beginning of the planning phase. Examples of such changes include:

- Changing the institution name.
- Changing the institution ownership, or registration.
- Change any of the managers of the organization.
- Moving to a new place.
- Includes additional buildings.
- Changes in the academic programs shown in the previous audit.

The center has the right to review the accreditation based on such changes or others, and may request the institution to provide evidence, documents, or conduct supplementary auditing at its own expense. In the event of non-cooperation by the institution with such a request issued by the center, it may result in the suspension or withdrawal of accreditation.

44- Accreditation of Educational and Training Institutions Branches:

The institution that intends to open a branch must apply for accreditation to the center soon after obtaining a license from the authorized bodies, examples include:

- Opening branch/es for a Libyan institution
- Opening branches of foreign institution in Libya
- Joining an institution with an existing institution.
- Separation and creation of a new institution.

In such cases, the institution is requested to provide the required documents and records according to the branch of the institution that is being established, in order to undergo the auditing process and pay the designated fees. If the institution fails to cooperate or delays in providing the required requirements or meeting the specified deadlines after submitting its application, the center has the authority to suspend or withdraw accreditation from the original institution.

45- Quality Assurance Auditing

- As part of the process of maintaining accreditation and the quality of the educational process, all accredited institutions undergo a quality assurance auditing during accreditation time.

- The audit is conducted by a team of three auditors over two days.
- Based on the results of the quality assurance audit, the quality assurance department recommends the following:
 - ✓ The continuation of accreditation or conditional continuation, with some points that need further procedures to address.
 - ✓ In case of proving a lack of continuity in maintaining the minimum accreditation standards that issued by the center, the institution should take further measures in the framework of the following:
 - Provide evidence proving the processing of the points to be improved within a period of time determined by the quality assurance department.
 - Conducting a full or supplementary audit at the expense of the institution.
- The report is sent to the institution with the details of the recommendation and the required procedures

46- Annual Follow-up

- The institution must submit an annual report by the end of each academic year to inform the center of any changes that may affect the level of what the institution provides
- The annual report submitted by the institution includes the following documents:
 - ✓ A document certifying the financial capacity of the institution by the president or director.
 - ✓ A copy of the latest financial settlements of the institution.
 - ✓ Details of any changes that have occurred in the owners, management, address or academic programs.
 - ✓ Details about the previous academic year, including the number of students enrolled in each semester or academic year, the development of graduation rates and success rates.
 - ✓ A list of study programs offered in the current year.
 - ✓ Information about the latest batch of graduates.
 - ✓ Details about the research activity, and about the expenditure ongoing on it.
 - ✓ Details of the professional development activities provided by the organization to **employees, including the amounts of money spent.**
 - ✓ Activities related to community outreach.

- ✓ details about any complaints received by the institution.
- ✓ Outline of any plans to grow.
- In case of significant changes or the information contained in the report shows a set of remarks that need to be improved, a representative of the center may check these remarks on the ground in the institution to prepare a report and submit it to the Quality Assurance Department.
- Details of any of lawsuits that the institute is a formal or still part in.
- A document proving that the institution meets all the relevant legal requirements, and if the quality assurance department finds out at a later stage that there is evidence that the document was not correct, then it has a recommendation to the center management to withdraw the accreditation immediately.
- A document certifying that the institution meets all licensing requirements.

47- Accreditation Renewal Procedures

- Six months before the expiration of the accreditation, the center informs the institutions on the need to submit the renewal file.
- The institution must apply for a renewal of accreditation and undergo a full audit before the end of the granted accreditation period.
- If the institution does not submit a request to renew the accreditation, the granted accreditation will be withdrawn upon its expiration
- The accreditation department has the right to recommend an extension of accreditation for a period not exceeding one year if it finds exceptional circumstances that postpone the renewal audit process.
- Accreditation for educational institutions is renewed for a period of five years and the accreditation department may recommend granting accreditation for a shorter period if there is a reason for this.

48- Suspension or Withdrawal of Accreditation

Based on the quality assurance audit report, the Quality Assurance Department may recommend suspending or withdrawing the accreditation if the institution violates the accreditation standards. According to the recommendation the center will suspends the accreditation or withdraws it from

the institution if it does not maintain the minimum standards. Reasons for withdrawing the accreditation or suspending are as follows:

- Failure to maintain minimum standards.
- The institution commits any violations that affect the quality of the educational process and its outputs, but for flagrant violations that negatively affect the entire educational system, they are referred to the competent authorities.
- Failure to comply with the laws, regulations and instructions in force in educational institutions
- The registration of students in unlicensed programs or programs granted by an entity outside the country that is not accredited by an accreditation body recognized by center.
- Non-payment of financial fees for accreditation or quality assurance operations or any other financial fees due from the organization
- Failure to apply for renewal of accreditation before the end of the deadline (three months)
- The failure to carry out the audit process to renew the accreditation before the expiration date of the accreditation period.
- Failure to submit the annual report in an integrated manner (for annual follow-up) within the specified period.
- In case that the institution provides misleading or falsified documents.
- The failure to inform the center of the changes taking place in the institution within three months.
- preach of academic integrity.

The center has the right to withdraw accreditation for other reasons that may affect the quality of the educational process and are not mentioned

* The name of the institution will continue to be included in the center's directory of accredited institutions during the suspension period, and will be determined if the accreditation is withdrawn later

49- The Use of the Accreditation Decision

The accredited institution is allowed to use the center's logo and accreditation decision as it is listed in the center's directory of accredited institutions on its website, and the use of the center's logo in advertising materials is subject to certain conditions issued by the center.

The advertising format that the accredited institution can use in its advertising materials shall be as follows:

Accredited by the National Center for Quality Assurance and Accreditation of Educational and Training Institutions

The Center encourages its accredited institutions to use the center's logo in all documents, as well as in advertising, while adhering to the following:

- The institution uses the official logo provided by the center, which is available in several forms.
- The size, color and shape of the accreditation logo must match the original logo of the center.
- The institution should use (HTML) for the accreditation logo on the website.
- The institution is notified of any changes to the accreditation logo at least thirty days before the expiration of its validity and the institution must replace all the old accreditation logos after the expiration date.
- The institution does not have the right to use the center's logo and the mark of accreditation on awards' certificates or certificates of attendance of a course or any other uses unless it obtains written permission from the center.

50- Publication on the Center's Website

The names of the accredited institutions and their accredited programs are published on the center's website, and the concerned institutions should review the website periodically and inform the center of any information that has not been updated.

To enhance transparency and generate confidence in the quality assurance and accreditation system; and to provide valuable information to stakeholders, all audit reports are published in full on the center's website.

51- Grievance:

The institution has the right to appeal against the decision of accreditation rejection, in accordance with the procedures stipulated in this guide.

If a decision to withdraw accreditation is issued based on a recommendation from the Quality Assurance Department, the institution has the right to submit a complaint against the decision, in accordance with the procedures stipulated in this guide.

The institution does not have the right to object to the accreditation standards and requirements or the general instructions that accredited institutions must follow (as indicated in the manuals issued by the center) and the institution has the right to object only to the estimation of the process of measuring indicators

52- The submission of a complaint

If the institution wishes to complaint against a rejection or withdrawal decision, it must notify the center in writing within five working days from the date of the official notification of the decision. The institution must also provide the reasons for filing the complaint within a period not exceeding ten working days from the date of submitting the notification, along with supporting documents

53- Grounds for Grievance

The application for a grievance submitted by the institution must include objective grounds within the framework of the following justification:

That the decision was not issued in accordance with the standards and procedures stipulated in the accreditation procedures manual.

54- Grievance Procedures:

The application for a grievance is submitted to a committee to be nominated by the director of the center; it consists of an independent chairman, a specialist in the quality of the educational process, two members and a representative of the relevant ministry as an observer.

55- Additional Procedures for Grievance:

Settlement of all previous financial dues, and payment of grievance fees to the center within ten working days from the date of filing the grievance application.

Settlement of all previous financial dues and payment of grievance fees to the center within ten working days from the date of filing the grievance application.

The decision of rejection or withdrawal of accreditation issued by the center remains in effect until a decision is issued by the Appeals Committee.

The institution has the right to object to the Appeals Committee or one of its members in writing to the director of the center; after officially notifying the institution of this.

After being officially notified by Appeals Committee members, the institution has the right to lodge a written objection against the Appeals Committee or one of its members to the director of the center.

All evidences, proofs, and documentations relied upon during the auditing process shall be taken into consideration in the grievance procedures.

56- Grievance Session:

- The institution must provide the grievance hearing with the following documents:
 - ✓ Accreditation file submitted to the center with supporting documents
 - ✓ Audit report.
 - ✓ Any other threatening materials; agreed-upon provisions between the center and the institution.
- All members at the grievance hearing are provided with evidence and documents by the center's management
- The grievance hearing is held within 30 working days from the date of filing the grievance.
- A representative of the center and a representative of the institution have the right to attend the grievance hearing.
- The Grievance Committee is authorized to seek the assistance of whomever it deems suitable to fulfill its tasks.

57- Decisions of the Grievance Committee:

The Grievance Committee makes its decisions by a majority vote of its members, according to the following:

- Accepting the grievance, entails: Accreditation (with a minimum accreditation period); or cancellation of the decision to withdraw accreditation.

- Rejecting the complaint, entails the affirmation of the center's decision regarding the matter.
- Initiating a re-audit of the institution at the expense of the center.

The decisions of the Grievance Committee are final and may not be appealed.

58- Notification of the Grievance Committee Decision:

- The center and the institution shall be notified of the Grievance Committee's decision within five working days from the date of the committee's final session.
- The center shall implement the decision of the Grievance Committee.

59- The Timeline of the Grievance:

First day: notifying the institution of withdrawal or refusal of accreditation.

Day five: deadline for filing a complaint.

Day ten: the deadline for the institution to submit the reasons for the complaint and the supporting documents.

The thirtieth day: the deadline for holding the grievance hearing.

The thirty-fifth day: the deadline for informing the center and the institution of the decision of the Grievance Committee