

TERTIARY EDUCATION COMMISSION

Quality Audit Handbook

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ABBREVIATIONS

APL	-	Accreditation of Prior Learning
APEL	-	Accreditation of Prior Experiential Learning
CQAC	-	Central Quality Assurance Committee
CAT	-	Credit Accumulation and Transfer
HEQC	-	Higher Education Quality Council
QAA	-	Quality Assurance Agency
TEC	-	Tertiary Education Commission
WBL	-	Work Based Learning

PREFACE

The Tertiary Education Commission was set up in 1988 by an Act of Parliament (Act No. 9 of 1988) with one of its principal objects being to optimise the use of resources through proper planning and co-ordination. This effectively means that, it has to satisfy itself that, institutions in its purview do not unnecessarily duplicate course offerings together with any attendant infrastructure. Such a possibility is avoided by virtue of each institution having been created to serve a specific purpose. As per its Act, the Commission is also charged with the responsibility to foster the development of tertiary education in Mauritius. Implicit in this Act is the notion of examining the quality of education provided; ensuring that it represents not only value for money, but that it is of international standard also. Traditionally, academic standards have been ensured by the external examiner system that is widely resorted to. However, total reliance on such a system is no longer considered adequate. As a result of globalisation, the provision of tertiary education has become very complex with the move towards modularisation of programmes, credit rating, credit transfer, accreditation of prior learning and improved access, among other things. With these developments, maintenance of academic standards is proving very challenging. Besides, it is becoming evident that whilst standards may be high, in themselves they do not equate to high quality. Thus, it is possible for an institution to have set high standards for its programmes, yet deliver poor quality education through inappropriate planning, perhaps. Formal systems of quality assurance have come to play a significant part in establishing quality of educational provision.

At the Commission, the Division of Quality Assurance and Accreditation has been entrusted the responsibility to establish appropriate quality assurance processes sector-wide. Accordingly, the Division has adopted a mission to instil confidence in the public and the stakeholders to the effect that quality of educational provision and academic standards are being maintained and enhanced. Towards this end, it has developed a *Framework for Quality Assurance in Tertiary Education in Mauritius*, which puts into perspective the quality assurance agenda for the sector. In order to implement the agenda, the Commission has set out to:

1. assist the institutions in putting in place their specific quality assurance systems;
2. prepare the institutions to undertake their self-assessment;
3. undertake external quality audit of the institutions; and
4. carry out quality assessment exercises (or accreditation).

The Quality Audit handbook which has been prepared by the Head of the Quality Assurance and Accreditation Division sets the scene for quality assurance in tertiary education in Mauritius and provides guidelines for undertaking self-assessments by institutions to assemble their portfolio in preparation for an external quality audit. It also deals with quality audit procedures that will form the basis for quality audits. In this regard, it is intended for use by institutions and auditors.

This handbook incorporates experience gained over the years from various parts of the world. We would like to thank the quality assurance bodies in England and Scotland, New Zealand, South Africa, India, the Netherlands, France, United States of America, Japan and Hong Kong for providing us with information on quality assurance in their particular settings.

In line with quality concepts and with the evolution of quality procedures, we seek to improve on this first document on a continuing basis. Hence, this handbook is subject to change and new versions will appear as and when deemed necessary.

Chapter 1

QUALITY ASSURANCE: A GENERAL PERSPECTIVE

1.1 Introduction

Educational institutions, as torch bearers of the nation, shoulder the responsibility of educating and training future teachers, scientists, doctors, leaders and other professionals. In this respect they are accountable to their stakeholders in one form or another. Thus, it is imperative for them to ensure that the educational experience they are providing to their students is sound, relevant and of a quality that is internationally comparable. In order to achieve this target, they need to have effective and efficient structures and systems in place to monitor their activities towards ensuring that they are compatible with their mission and achieving their stated objectives. The range of activities for effecting, monitoring and enhancing educational provision has been branded Quality Assurance. For all intents and purposes, quality assurance can be internal to an institution just as it can be external to it. It is internal when it is carried out for the institution by the institution, but external when it is carried out by an external body for an institution. In this instance, since the TEC is external to the tertiary education institutions, quality assurance by the TEC will be external to the sector.

Over the course of the last decade, quality assurance has continued to assume increasing importance in higher education. Although different countries have established quality assurance mechanisms to pursue their specific agenda, in general, all have focused on improvement and accountability. Some argue that they are two divergent paths that are difficult to reconcile, yet others believe that they are inseparable for proper functioning of institutions. Critics of quality assurance argue that the system is subject to abuse and that it taxes on academics' time and resources that could be better invested in improving teaching and research. On the other hand, institutions acknowledge that both academic and non-academic staffs are more conscious of the need to satisfy their 'customers'. They are also aware that it is not an easy job to satisfy an increasingly sophisticated and demanding clientele. Thus, continuous improvement is crucial to enable one to provide a better quality of education or service. Therefore quality consciousness through quality assurance, including accountability gives them the necessary impetus to improve their services. More and more educationists are waking up to the realisation that teaching should be student rather than staff oriented. Previously, curricula were written predominantly by academic staff. Students were not involved, nor were personnel from the employment sector. With time, as programmes became more work oriented, in order to ensure that they met job requirements, employers, including industrial experts, also were involved in curriculum design. Only a decade ago it was inconceivable to have students in the curriculum development programmes. It was argued that students went to universities with the expectation to be taught by knowledgeable academics, that their knowledge was inadequate to make any significant contribution to the curriculum. However, with the influx of mature students who came with wide ranging experience and knowledge as well as different expectations from those who are fresh from secondary schools, there was a need to consider and value their input. In

so far as teaching style and teaching methods are concerned, it was realised that students did have an important role in suggesting ways in which curricula could be made user friendly and accessible leaving contents and rigour unaffected. Nowadays it is common practice to involve students in major decisions. Educational institutions agree that maintenance of quality of educational provision and its active enhancement should be given high priority if they are to continue functioning as centres of excellence. Countries across the world have responded to the need for rigorous monitoring, maintenance and enhancement of quality of education by setting up quality assurance agencies, bodies charged with the responsibility for undertaking quality assurance related activities. Presently, there are over 100 different quality assurance agencies worldwide and the number is continuing to increase.

1.2 Quality

What is quality? As a concept it is elusive to the extent that it means different things to different people. Varying definitions have been put forward and they include notions such as excellence, value for money, faultless or zero defect, etc. Although they all point to an 'ideal condition', the target is different for different groups of people. It is difficult to get everyone to agree on one specific definition. It is probably for this reason Vroijenstinjn (1995) suggests that it is a waste of time trying to define quality. According to The Concise Oxford Dictionary (1999), quality refers to "the standard of something as measured against other things of a similar kind and as general excellence". This definition appears to equate quality with standard and tends to adopt a comparative approach. Quality in 'quality product' or 'quality service' conjures up the image of a product or service as being reputable, reliable and consistent. However, it is common knowledge that sometimes products or services fall short of specifications and are rejected on account of being of 'poor quality'. The immediate question that arises is: how does 'quality' become 'poor'? Obviously, in such instances, quality is meaningful when it is appropriately qualified. For the purposes of applying the concept of quality in everyday life, a working definition is desirable.

In this context, it is necessary to make some basic assumptions; that quality should satisfy the following attributes:

1. achieve well defined purposes;
2. meet customer satisfaction;
3. comply with applicable standards;
4. products/services must be consistent and reliable;
5. excellence;
6. comply with health and safety regulations; and
7. comply with environment requirements.

Put together, they represent the totality of features and characteristics of a product or service that bear on the ability to satisfy stated or implied needs. Needs, in this case must be customer, rather than supplier oriented.

As far as education is concerned, it is neither a product nor a service. It is more of a process than a product, although some argue that it is both a process and a product. Students come to an educational institution to learn and in the process undergo change from a relatively novice stage to being a more informed, mature and developed person, intellectually, socially and psychologically. Such a transition in an individual's life points to a transformation. At the end of graduation, the learner does not change to become a product satisfying certain specifications, but is a more knowledgeable individual equipped with desirable attitude and a wider range of skills that would enable him/her to better meet life's challenges than those he/she had at the start of the educational experience.

In some quarters education is considered as a tradable service. Such an approach may satisfy the criteria of a service set by such groups. Here, it is argued that education is more than just a service. It leads to learning, which induces permanent behavioural change. Such change has a life-long effect on students. In addition, education is a life-long process which assists every learner reach his/her destination in life. A service, on the other hand, is a transient provider-customer relationship that is meaningful for the duration of the transaction which can be brief, short term or long term.

In any case, whether education is taken to be a service or to go beyond the concept of a service, it involves communication, but more importantly it embraces key concepts such as recall of information, analysis, including diagnosis and problem-solving skills and synthesis which are fundamental processes in any integrated education. To some extent these processes are common to service also. Both education and service can range from being very simple to being extremely complex with varying degrees of sophistication. Service provides learning opportunities and as such, in keeping with the concept of education, it could be considered as an element of the education process. So, what does quality in education mean?

For the purposes of education, quality can be taken to refer to "fitness for purpose"; an approach adopted by the Quality Assurance Agency (QAA) in the United Kingdom and quality assurance agencies elsewhere in many countries, and can be extended to include "fitness of purpose". Fitness for purpose is taken to mean that the institution has its own mission and objectives and that it is successfully fulfilling its mission and achieving its stated objectives, i.e. it is fit for the purpose of the responsibility it has assumed. Unlike the previous definitions which include an element of comparison with a reference point, in this case there is no requirement that an institution's quality is subject to comparison with another's statement of quality. To illustrate this point one can borrow an example from the motor industry: it does not do justice to compare a "Mini" with a "Rolls Royce" as each automobile is built for a different clientele in mind. Both vehicles are passenger cars, but they differ substantially in size, shape, performance, reliability, comfort and price, among other things. Nonetheless, each one can be judged to be a high quality vehicle so long as they meet their stated specifications and guarantee. In the same manner, each educational institution offers programmes for specific groups of students who can benefit from them in furthering their career. By way of the same argument, it is not justifiable to compare one institution with another as each one came into being for a specific purpose and was created with very different objectives from one another.

This argument is particularly true in the Mauritian setting as each of the tertiary education institutions was created with their specific characteristics, missions and purpose. Thus, an institution's quality is judged against its own stated objectives rather than an external reference point. However, an institution must demonstrate sensitivity to the national requirements and interests. Since it is funded by public money, it has a duty to respond to the socio-economic needs of the community. In this regard, built into its mission and objectives must be an undertaking to respond to the national imperatives in an appropriate manner, thus embracing the concept of fitness of purpose. Hence, institutions have a responsibility to publicly demonstrate that they are sensitive to the national needs as well as demonstrating that the education and training that they are providing are of respectable quality such that the qualifications are recognised nationally, regionally and internationally.

The ultimate question that arises is how do institutions know whether they are adhering to their mission and achieving their objectives? As previously mentioned, institutions need to have adequate control mechanisms and an effective monitoring system to ensure that quality of educational provision is maintained and continuously improved. These are ongoing exercises that are implemented by all responsible institutions. Over and above these continuing processes, institutions need to conduct periodic self-assessment which can be regarded as an internal audit to ascertain that their quality assurance system is effective. Such an audit provides the institution tangible evidence of its achievements and strengths as well as weaknesses. Guided by the findings, it takes necessary measures to redress any imbalances.

Quality of educational provision can be ascertained by none other than the provider of the education and training. Since they are deemed to have the necessary expertise to design and offer programmes, they necessarily have the responsibility to determine whether a student has acquired the requisite knowledge, skills and attitudes to be able to practise/function at the level of a 'graduate' or 'professional'. Thus, the lecturer who nurtures the growth and development of his/her students also checks their progress and extent of development before judging them as having achieved the necessary standard for a pass or otherwise. The lecturer therefore acts both as facilitator and regulator, although some form of moderation is required.

1.3 External Verification

While institutions are putting in place appropriate mechanisms to ensure that their students benefit from world class education and training (assuming that their mission embraces this concept), it is necessary for independent bodies to confirm that the institutions in question have a 'clean bit of health'. Taking another analogy from the motor industry, whereas the manufacturer of the vehicle can certify that the vehicle is in good condition, all eligible vehicles are required to undergo an independent test for road worthiness. Thus, they are examined to ensure that they meet the safety regulations for the safety and comfort of passengers and other road users alike. Similarly, educational institutions are subject to external verification to confirm or otherwise the soundness of their undertakings. In so doing they take a step in informing stakeholders about the quality of educational experience and academic standards at the institutions.

The TEC which has the mission to foster the development of tertiary education in Mauritius also has the responsibility to ensure that students benefit from a rich educational experience in the tertiary education institutions. In this context, as per internationally established practices, educational institutions are required to undergo external verification of institutional quality assurance systems. The most common and widely used process of such verification takes the form of academic audit, also called quality audit.

1.4 Purpose of a Quality Audit

Quality assurance agencies and educational authorities in different countries have adopted a more or less common approach to carrying out academic audits. However, they may differ to varying extents on their rationale. In some countries emphasis is on accountability and the audit's outcome has a bearing on funding of the institution concerned. In others, improvement is given prominence. In Mauritius, the emphasis is on improvement with accountability taking a second place. Thus, in our context, an academic audit is undertaken for the following purposes:

1. assessing the strength of the quality culture;
2. determining the commitment to continuous improvement;
3. appraising the systems in place to determine academic standards;
4. evaluating the systems in place to ensure that measures taken to maintain and enhance quality are appropriate and effective; and
5. establishing whether the institution is embracing the concept of *fitness for purpose* as well as *fitness of purpose* through fulfilling its mission and achieving its objectives in an efficient and effective manner and demonstrating relevance of its undertakings.

Chapter 2

DEFINITIONS AND EXPLANATIONS OF TERMS USED IN THIS TEXT

2.1 Introduction

Quality assurance and accreditation mean different things to different organisations, yet for some they mean one and the same thing. Similarly, some of the terminologies used in quality assurance imply more or less the same thing to different groups, although slight differences may exist. In the interest of clarity and common understanding, it is deemed necessary to explain the terminologies that are employed frequently in quality assurance and as used in this text.

2.2 Quality Assurance

For our purposes, quality assurance may be described as a process of systematically and continuously evaluating the provision of education or delivery of a service (teaching and learning, research and support services) with the objective of maintaining its specified standard and improving on it. It should be the responsibility of each and every educational institution to see to it that an effective quality assurance system is in place and that planned and regular quality assurance exercises are carried out by competent and responsible people and that all staffs are fully informed and are involved in it. The main processes employed for assuring quality are quality audit, otherwise called academic audit, and quality assessment.

Quality assurance should not be confused with a standard setting exercise as the latter differs substantially from quality assurance in many respects. It is not a comparability exercise either, wherein institutions are judged against one another's standards and achievements.

A comparative definition of quality assurance is given in Annex 1.

2.3 Quality Audit

It is the process by which an independent body assures itself and the stakeholders that an educational institution has adequate and appropriate mechanisms set up to ensure quality of educational provisions. It is not an exercise to determine quality per se. It is therefore concerned with an evaluation of the way in which quality is assured by an institution. *Institutional Accreditation* is another term used to denote more or less the same thing as an academic audit or quality audit.

The 1991 White Paper in higher Education, UK, defines quality audit as 'external scrutiny aimed at providing guarantees that institutions have suitable quality control mechanisms in place'.

A comparative definition of quality audit is given in Annex 1.

2.4 Quality Assessment

Quality assessment is a process by which an external body independently assesses the quality of teaching/learning and research in an institution. Such an evaluation is judgmental and at the end of the exercise, an institution is deemed to have attained a certain criteria referenced score, which is indicative of its performance. ‘Review’ and ‘evaluation’ are sometimes used instead of assessment. Quality assessments are usually undertaken on a programme basis and for this reason the alternative term *programmatic accreditation* is sometimes used.

The 1991 White Paper in higher Education, UK, defines quality assessment as ‘external review of, and judgements about, the quality of teaching and learning in institutions’.

2.5 Quality Control

This is a concept which has its origin in industry, but is also used in education although its application is rather limited. In the industrial sector, as a result of mass production, formal procedures had to be set up to ensure that goods met specifications and passed the quality control checks. Those that failed the checks were rejected. Such a system of control is not readily applicable to education. The nearest application of quality control in education and training would be the failing/rejection of students who do not succeed in examinations/assessments. Even here, failure means that the student did not attain the minimum pass marks or did not satisfy the learning outcomes. This brings in the concept of minimum/threshold standard which implies that students who meet the minimum standards are eligible for promotion. Such a notion is contrary to the concept of quality as it usually refers to excellence. However, in reality, the adoption of the “fitness for purpose” means that the minimum standard approach is acceptable. Of course this does not mean that students should be content with satisfying minimum standards only. Again, in practice, the majority of students score average grades, with a minority finding themselves on the lower scale.

Quality control is more applicable to design, validation and approval of programmes of study, including assessment schemes. The external examiner system which seeks to establish fairness in the assessments and comparability with other institutions could be considered as a quality control system. Nowadays, even in industry, total quality management has replaced quality control.

The 1991 White Paper in Higher Education, UK, defines quality control as ‘mechanisms within institutions for maintaining and enhancing the quality of their provisions’.

A comparative definition of quality control is given in Annex 1.

2.6 Programme, Curriculum, Course

A course is concerned with a particular subject. A series of integrated lectures, seminars and tutorials in a given subject constitutes a course. Such a course consists of a complete chunk of knowledge and skills that are assessable. It can take the form of a module or unit and these can be designed to be at specific levels. Thus, a module can be pitched at level I, II or III for a first degree programme, or level M for a masters level programme (or their equivalent in the qualifications frameworks, where they exist). The combinations of interrelated courses at different levels make up programmes. Typically, a programme consists of a core curriculum together with electives/optional courses. The integrated combination of the core curriculum with the optional courses makes up a programme leading to a particular award/degree. A curriculum is a detailed description of the subjects covered in a degree. It also provides information on essential reading and teaching resources and deals with assessments.

2.7 Assessments

An assessment is a means of verifying that students have learned and internalised the concepts they have been exposed to and are able to apply them in solving problems. Assessments are either formative or summative. In the summative type, the performance is graded. Thus, students are assessed as having scored high marks or otherwise. On the other hand, formative assessments indicate whether a student has achieved a pass standard or has failed. Most courses are assessed summatively, i.e. marks awarded count towards the final result. Continuous assessment, as opposed to end of year examination, is widely used. However, the weighting between course assignment and end of year examination or module examination may vary from course to course.

As for the first degree, depending on their performance, students are awarded a first, second or third class degree, with or without honours.

2.8 Accreditation

Accreditation is a term that is used differently in different countries. In America, it is a voluntary exercise that is carried out by regional accreditation bodies where the focus is on assuring the stakeholders that an educational institution has the wherewithal to offer educational programmes as professed and that a particular course/programme has educationally appropriate objectives that are being achieved. It does not comment on standards or whether it is an approved course/programme. The panel carrying out the accreditation makes a judgement based on the institution's stated aims, goals and objectives. Accredited institutions are eligible for Federal student-aid funds. In spite of assurances that accreditation serves to evaluate higher education institutions' offerings, controversies exist over whether it serves as a guarantee of academic quality (Leef G.,2003).

In other countries, it carries a slightly different meaning. For example, in Hong Kong, as well as ensuring that the objectives are achieved, accreditation also ensures that the course/programme is recognised nationally and internationally.

In the UK, according to the Higher Education Quality Council, “accreditation is mainly used to describe a process by which an institution without its degree awarding body is given authority by a university or other awarding institution to exercise powers and responsibilities for academic provision”.

In Mauritius, accreditation should state that a particular course/programme is:

1. at a specified level of qualification and is in conformity with the level described in the National Qualifications Framework:
2. validated and approved by an authoritative body; and, by inference,
3. recognised as an appropriate level qualification nationally and internationally.

Implicit in this statement is the requirement for continuous monitoring of programme offerings to ensure that standards are consistent with those professed at the time of accreditation. How this is carried out is left to the discretion of the institutions concerned.

As such, accreditation includes ‘professional’ or ‘specialised’ accreditation and as a matter of principle, it is subject to periodic reviews.

COMPARATIVE DEFINITIONS

A paper of the former HEQC**Definitions: British Standard Institute (from BS 4778)**

Quality: The totality of features or characteristics of a product or service that bear on its ability to satisfy a given need.

Quality Control: The operational techniques and activities that are used to fulfil requirements for quality.

Quality Assurance: All those planned and systematic actions to provide adequate confidence that a product or service will satisfy given requirements for quality.

Quality Audit: A systematic and independent examination to determine whether quality activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives.

Definition: HMG

Definitions are contained in the Higher and Further Education Act 1992 and the White Paper: *Higher Education: A New Framework 1991*.

Quality Control: Quality control relates to the arrangements (procedures, standards, organisation) within HE institutions which verify that teaching and assessment are carried out in a satisfactory manner. Quality control would include the external examiner system but would usually be *post hoc* and the responsibility of the institution itself.

Quality Assurance: Quality assurance encompasses all the policies, systems and processes directed to ensuring maintenance and enhancement of the quality of educational provision in higher education.

Quality Audit: Quality audit is the process of ensuring that the quality control arrangements in an institution are satisfactory. In practice, prime responsibility for quality audit lies individually or collectively with institutions, and it extends to the totality of quality assurance in an institution including staff development

Definitions: DQA

Definitions of quality control and quality assurance used by the DQA:

Quality control, as it affects institutions' teaching and learning systems, is an operational function applied at all levels by an institution to its teaching activities, and is concerned in detail with the way these are organised, undertaken, and evaluated, in order to ensure fitness for purpose, an optimised use of resources, and the achievement of their identified goals.

Quality assurance, by comparison is concerned with the way in which an institution, is discharging its corporate responsibility for the programmes, courses and qualifications it offers, satisfies itself that it has effective structures and mechanisms in place to monitor the quality control procedures employed and that these promote the enhancement of existing standards.

It is the monitoring in turn of the quality assurance structures and mechanisms of the universities,

	<p>and curriculum design. External quality audit will be conducted by the Division of Quality Audit of the Higher Education Quality Council which is collectively owned and funded by the institutions.</p> <p>Quality Assessment: Quality Assessment is the process of external evaluation of the actual provision of education. Quality assessment is statutory responsibility of the Funding Councils. The process of external assessment by peers of actual provision in particular subjects is by scrutiny of institutional documentation and student work; direct observation; interview; and by reference to performance indicators such as completion rates.</p>	<p>which is the concern of the Division of Quality Audit.</p>
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Chapter 3

SELF-ASSESSMENT

3.1 Introduction

Quality in tertiary education is about improvement and accountability. The immediate questions that arise out of that statement are: (i) improvement on what, and (ii) accountable to whom? Education is a dynamic process which is evolving all the time. In pursuit of excellence, educationists have a duty to continuously discover better ways of teaching and learning, thereby shape education. Perfection or excellence can only be the result of determined effort and continuous improvement. Thus, by taking active steps to ameliorate performance, remedy faults and strengthen weaknesses, an institution moves in the direction of improvement. In a climate of constant change, continuous improvement is a means of timely adaptation, which is vital for an institution's growth and survival. A prerequisite for improvement is an awareness of one's weaknesses as well as the scope and opportunities for alternative and better ways of addressing certain issues. Both awareness and improvement require critical self-examination. Similarly, by critically examining the effectiveness and efficiency of the processes employed in discharging the assumed responsibilities and thereby identifying the strengths and weaknesses, an institution/faculty/school/department takes account of its progress, thus taking a step in the process of becoming accountable to itself and to a range of internal and external auditors/authorities. Therefore it is clear that accountability and improvement are inseparable. They can be likened to the two sides of the same coin.

Self-assessment also called self-evaluation serves as a tool for improvement and accountability. It is an exercise that institutions should engage in periodically. As it is fairly resource-intensive, it is recommended that it is undertaken biennially. At the opportune time the findings

of an immediate exercise of this nature can be used to prepare an institutional portfolio for the purposes of an external quality audit.

Nowadays, it is common practice worldwide to monitor the quality of higher education by two well-known processes, namely quality audit (also known as academic audit) and quality assessment, although different countries have adapted them to suit their specific needs.

3.2 Quality Audit and Quality Assessment

A quality audit is concerned with the evaluation of the effectiveness of quality assurance system within an institution with a view to establishing:

- (i) that the institution uses its resources appropriately to uphold its mission and meet its stated objectives and that it will continue to do so in the foreseeable future; and
- (ii) the institution's ability and effectiveness of providing quality educational experience to its students.

On the other hand, a quality assessment is concerned with assessment of how quality and standards are maintained and enhanced at a programme level. The focus is on curriculum development and teaching and learning. Part of the exercise involves assessment of teaching to determine how well a particular subject is being taught. Hence, it is also known as subject assessment.

Both processes are undertaken by an external body. In the UK, for instance, the Quality Assurance Agency has been entrusted the responsibility to carry out quality audits and quality assessments. In Mauritius, the Tertiary Education Commission will assume responsibility for external quality assurance for the tertiary education sector. Worldwide, an established system of undertaking quality audit and quality assessment is widely in use whereby institutions carry out a self-assessment also called an internal audit. In the case of an external quality audit, the findings of such an assessment which are compiled as a submission document by an institution are used as a basis for evaluating the effectiveness of the institutions' quality assurance systems by an external body. For the purposes of quality assessment, the self-assessment is rather different from that of the quality audit, and for this reason it will be considered in a separate document nearer the time of its implementation.

This set of guidelines is proposed to facilitate institutions in Mauritius to undertake their self-assessments in preparation for a quality audit.

3.3 Guidelines for Action

Self-assessment is a valuable means of identifying whether an institution is adhering to its mission and achieving its objectives. In undertaking this task the institution must consider the following:

- Planning – this must be carried out within the framework of the institution’s principles of self-assessment.
- Scope of the assessment – who and what are to be assessed.
- Persons involved in the assessment must be knowledgeable, dedicated and have a thorough understanding of the plan
- The assessment should be deductive and not inductive

Undoubtedly, the self-assessment will generate lots of *information* and perhaps provide *evidence* to support certain assertions that the institution would make.

3.4 Planning

3.4.1 The need for an agreed plan

Like any important transaction, self-assessment requires careful planning to justify the required time and resources. The person who has overall responsibility for quality assurance in the institution calls up a Central Quality Assurance Committee (CQAC) meeting to discuss the self-assessment. The following must be discussed and agreed upon: the purpose of the self-assessment, drawing up of a timetable, identification of members with a view to assigning responsibilities and generally agreeing as to who will do what, when and how.

3.4.2 Prioritisation of Areas (specific areas of the institution, including services and their functions) that need to be covered

The plan must prioritise the areas that have been identified for the assessment. The CQAC may decide on the priorities and it may wish to refer to Annex 1 dealing with areas that are considered in a quality audit.

3.4.3 Identification of criteria

Self-assessment, by definition, must result in an outcome; that is, a judgement has to be made as to whether a particular practice is good or poor or otherwise. How does one decide on a practice? In the interest of objectivity, there must be clear guidelines and valid criteria for undertaking the assessment. The planning phase can be used to identify the criteria and standards that would constitute achievement of objectives. By default, the institution needs to refer to its strategic plan. Thus, as a first step, the strategic plan will guide the institution on the direction it should take and the objectives should indicate as to how the plan will be implemented. During and following implementation, it is necessary to evaluate the effectiveness of the implementation process. The evaluation should reveal strengths, including good practice as well as weaknesses, if any. In the light of the evaluation, the plan must be reviewed and amended appropriately to better meet the needs of the institution. The whole system can be viewed as a continuous, cyclical process, with emphasis on continuous improvement. This cyclic process can be represented diagrammatically, as shown below in Figure 1.

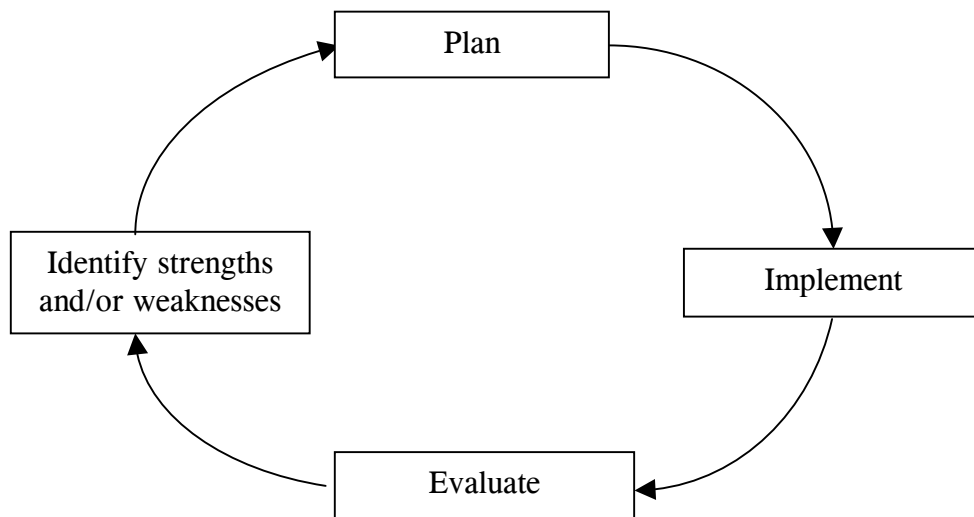


Figure 1. Cyclical nature of the continuous improvement, incorporating assessment, planning, implementation and review.

3.4.4 Identification of information and possible generation of data

The criteria identified will facilitate the identification of information and data to justify whether a goal/objective has been achieved. The plan will identify persons responsible for collecting information and data. It must also state what use will be made of the data.

3.4.5 Who should be involved and what roles they will play

As mentioned above, planning involves identification of personnel who would be responsible for carrying out specific tasks. For an effective and meaningful self-assessment, taking a faculty as an example, it is necessary to involve all persons having direct responsibility in the delivery of a programme. Similarly, in all other areas of the institution, participation of persons having direct responsibility must be secured in the self-assessment.

3.4.6 Timetable and adherence thereto

A well-planned self-assessment must have a timetable for achieving the stated objectives on time, and it also means that allowance must be made for untoward occurrences. Progress on the plan must be monitored on a regular basis by the self-assessment group and the timetable adjusted as necessary. A stepwise timetable is provided in Annex 2.

3.4.7 Scope of the assessment

The self-assessment group needs to identify the scope of the exercise. Certainly, the major functions of institution have to be addressed and, by implication, all the departments lending support to the main functions also need to be addressed. The group may refer to Annex 1 dealing with areas that a quality audit panel would consider necessary to look at.

3.4.8 Persons involved in the assessment must be knowledgeable, dedicated and have a thorough understanding of the plan

For the successful outcome of a self-assessment, without labouring the point, it is crucial for all personnel involved in this exercise to have a thorough understanding of the plan. Without the basic understanding and the necessary drive, a self-assessment may suffer from serious weaknesses that can thwart the whole initiative. Hence, careful selection of the team cannot be overemphasized.

3.4.9 The assessment should be deductive and not inductive

A deductive approach implies that the assessment is carried out in an objective manner, moving from the known, assembling evidence to arrive at conclusions. On the other hand, an inductive approach implies that the assessment is carried out with the objective of providing evidence to support an opinion. In this case it is subjective.

A self-assessment is not merely a paper exercise designed to prove that a certain practice exists or that an institution is working in perfect harmony. Such an approach is self-defeating as the objective of this exercise is to improve, and improvement cannot be entertained if weaknesses are not identified. Flagging up is healthy if it confirms good practice that is worthy of emulation by other institutions, but unhealthy if done at the expense of improvement. Thus, it is important to be objective in the approach. (Institutions may wish to refer to Annex 3, which highlights the dangers of a conforming approach to self-assessment.)

3.5 Assembling the Information and Evidence

3.5.1 Information

Information for the sake of it serves no purpose in a self-assessment. It must be useful and add weight to certain assertions or arguments in relation to the functions of the institution. It can be quantitative and qualitative and is generally obtained from surveys, performance indicators, etc. Information can be obtained through questionnaires and interviews from many sources. A good way to approach this task is to adopt the strategy formulated by the former HEQC (1996) of UK, which is encapsulated in the questions that follow:

- (a) What are you trying to do?
- (b) Why are you trying to do it?
- (c) How are you doing it?
- (d) Why are you doing it that way?
- (e) Why do you think that is the best way of doing it?
- (f) How do you know it works?
- (g) How do you improve it?

This strategy may be employed to check whether the objectives of the exercise are being achieved.

The following is a list of possible areas that can be explored for gathering necessary information.

3.6 Sources of information

3.6.1 *The Institution in Context*

- Vision and Mission
- Aims and Objectives
- Strategic Plan

3.6.2 *Curriculum Development and Course Assessment (including input from employers)*

- Course design
- Course validation and approval
- Assessment, including moderation
- Course reviews

3.6.3 *Students*

- Enrolment, registration, admissions, entry qualifications, etc.
- Equal opportunities, access, mature students, etc
- Numbers on full-time and part-time/flexible mode or distance education
- Attendance, dropout rates and their reasons, completion
- Pass rate, awards, value added

3.6.4 *Feedback from Students and Alumni*

- Evidence, views and recommendations from staff/student meetings, course/programme committees, etc. must be sought.
- Students' views on effectiveness of teaching must be obtained.
- Tracer studies, employment within six months of qualifying, etc

3.6.5 *Staff perceptions*

- Staff perceptions of courses, course materials, assessments, staff-student ratio and factors affecting their performance must also be sought. Part-time lecturers must be included.

3.6.6 *Staff development*

- Who has responsibility for policy and implementation of staff development and how this is organised and effected?
- What mechanisms exist for identification of staff development needs?
- Record of who has benefited and how, over a given period

3.6.7 *External perceptions*

- External examiners' reports and action taken

- Feedback from examination and assessment board meetings
- Feedback from employers/trainers
- Feedback from faculty/school advisory groups

3.6.8 Resources

- Physical and financial: quantitative data and policy
- Human: numbers, qualifications, experiences, age, equal opportunities. Noteworthy achievements, including research and scholarship. Links with employers and professions. Support staff numbers, qualifications, etc.
- Library/learning resource centre: quantitative and qualitative data, policy, responsibilities and links between library subject specialists and teaching staff.
- Welfare: facilities and policy

3.6.9 Research

- Institutional approach to research; relative importance given to it etc
- Collaboration with industry or other institutions
- Achievements and contribution to country's development

3.6.10 Quality assurance

- An outline of the quality assurance system, policy and responsibility
- Quality assurance in the provision and design of programmes of study
- Review of established courses and programmes
- Quality assurance in teaching, learning, research and communications
- Quality assurance in relation to academic staff – staff appointment procedures, staff development and training, staff appraisal, promotion, evaluation of teaching quality, etc.
- Quality assurance in relation to assessments
- Mechanisms for quality assurance in the validation of courses, internal and external to the institution
- Verification, feedback and enhancement – external examiners, appointment of external examiners, student evaluation of courses and programmes, staff/student liaison committees and views of professional and external bodies
- Problems identified, actions taken and outcomes
- Future developments

3.6.11 Transformation and responses to change

- This section should describe changes that have been effected since the last review/self-assessment (where applicable).

3.7 Evidence

Mere information cannot be considered as evidence without supporting criteria. Criteria are necessary for a judgement to be made and information becomes evidence when it is linked to the criteria on which judgements are made. Thus,

$$\text{Information} + \text{Criteria} = \text{Evidence}$$

In carrying out the self-assessment it is necessary to structure questions that will provide necessary information. Following receipt of the information, it will be possible to identify whether it is valid and reliable and whether it can be used to support an argument/judgement.

3.8 Judgements

A necessary part of self-assessment involves making a judgement to determine whether something/a practice is good or might benefit from change/improvement. Information *per se* does not provide evidence and it cannot be used to make a judgement, whereas, self-assessment requires judgement, judgement that the standard or a certain course is appropriate and acceptable or simply in need of improvement or radical change. Therefore, criteria must be developed to be able to assess information as to whether it can be used for making a judgement.

A self-assessment, therefore, should not be merely descriptive. It requires critical self-analysis and this has to be reflected in the report. The reader must not be left guessing as to what is implied in a statement. It has to be explicit. If a particular practice is found to be excellent, then it is necessary to give the reasons for such a statement and how other institutions could benefit from it. On the other hand, if a practice is deemed to be lacking in quality, then it must be spelt out in what way it is poor, what is lacking and how it can be remedied. Only then a self-assessment will serve its purpose. Therefore, a self-assessment, by its nature, must contain judgements and reasons for them.

Much of the information obtained from students, tracer studies, employers, professional bodies and external examiners are judgemental in nature and can be usefully incorporated in the report.

Judgements, therefore, should demonstrate the following:

- That the evidence on which the judgement is made is clear, valid and reliable
- That weaknesses as well as strengths are identified
- That the reader should not be left to guess on them; they should be explicit
- Assertions about quality without supporting evidence are avoided.

3.9 Reporting

The team assuming the responsibility for carrying out the self-assessment should decide at the planning stage on the preparation of the report, assembling information and making the judgements.

The purpose of the self-assessment will, to a large extent, determine the presentation of the report. Most reports have audiences other than “self”. Where the report needs to be submitted for a quality audit, a thorough report is essential. In other circumstances, such as a periodic self-assessment, the full report may be kept for internal purposes (internal to the quality assurance group and the areas assessed), with the main findings and recommendations submitted to the higher level for information and possible intervention.

Whichever be the case, the committee entrusted the responsibility to carry out the self-assessment owns the report. Members of the committee take responsibility to compile data and prepare drafts. However, for consistency of style and coherence of arguments, final responsibility for writing the report has to be assumed by a single person. Invariably, it is assumed by the person having overall responsibility for quality assurance in the institution, although he/she will be assisted by the team of assessors. Judgements, however, must be made collectively by the group.

3.9.1 Content and Structure of the Report

A self-assessment report is expected to cover the following:

- The institution in context
- The group undertaking the self-assessment
- The period covered by the self-assessment and the date of the last report
- The purpose of the report and who commissioned it
- The report’s audience
- Who prepared the report and who takes collective responsibility for it
- Reference to the last assessment, including its recommendations. Any actions taken and outcomes thereof must also be included.
- A brief description of how the assessment was carried out, including people involved, especially when they are external to the institution, how evidence was collected – whether from students, employers, external examiners, etc.
- The data and evidence gathered
- Analysis of the evidence and judgements made, including criteria used to convert information into evidence. Identification of not only strengths, but weaknesses also
- Recommendations, including those who should assume responsibility and date of completion for all recommended activities. Included must be a statement on how the same will be monitored.
- Comments on the usefulness and efficacy of the self-assessment exercise, and in the light of the experience, suggestions on how it might be undertaken in future
- Date and period of next self-assessment.

3.9.2 Confirmation of the accuracy of evidence and the report

Before finalising the report, it is always a good idea to check on the accuracy of the data, evidence and the overall report. This can be done by consulting those who have provided the

information with the explicit request to verify the information and not comment on the judgements. The self-assessment group can then endorse the final draft before it is put together as the final report.

3.9.3 Impact of the report

Readers of the report should get a clear picture of the views expressed by the self- assessment group about itself and the institution as a whole, including its strengths and weaknesses. It should also state how the strengths will be maintained and there must be a frank appraisal of the weaknesses with identification of the reasons for their presence and a realistic way of dealing with them.

3.9.4 Guidelines for writing the report

At the very outset of the process, the self-assessment team should decide the following:

- Who will do what, how and when
- Who will prepare the draft
- The timetable, including dates for submission
- The structure

Confirm evidence with sources

Conclusions should:

- Reflect judgements based on evidence
- Avoid assertions which cannot be supported with evidence
- Be approved and owned by all the members of the self-assessment group

Recommendations should be:

- Explicit and attainable within the time frame
- Addressed to a specific person or body having the necessary power and responsibility for action

3.10 Actions and Monitoring

The self-assessment, whether carried out in anticipation of a quality audit or otherwise, must not be seen as a one off exercise. After the exercise it is very tempting for individuals to return to their usual mode of operation, in spite of the observations and recommendations of the group. This is understandable especially when one is faced with a huge workload, following a daunting audit period. However, it is more rewarding and comforting to be able to redress imbalances instead of ignoring them. Hence, this exercise must be seen as a good opportunity to implement the actions and recommendations made by parties who have responsibility for them.

The group should also identify how monitoring of the actions taken with respect to the recommendations will be carried out and who will carry them out. Clearly, the recommendations must be attainable within the time frame.

Following the assessment, there is a need to close the loop. Those who have provided the information and have been interviewed need to know the outcome of the assessment. If this is not done they would be reluctant to co-operate in the future. Those who have complained about the quality of service need to know what action is being taken, if any. They may be enlisted to provide feedback.

Upon fulfilment of the recommendations, a brief report describing the outcomes must be submitted to the self-assessment group and thereafter, disseminated to all parties concerned.

What does the Panel look for in a Quality audit?

Over the course of the three days the audit panel will attempt to find out whether what the institution's document says is a true reflection of the state of affairs in the institution. It is also an opportunity to develop a better understanding of the institution, its mission, its strengths as well as good practice and its weaknesses, if any. In general, an audit will explore the following:

- the Quality Management System of the Institution
- the formal quality assurance structures and mechanisms in:
 - Communication
 - Administrative and management issues
 - Governance
 - Admissions
 - Students council
 - Students welfare
 - Staff council
 - Staff welfare
 - Staff appointments, appraisal, promotion
 - Curricula and programmes
 - Teaching and Learning environment
 - Research
 - Community Service and Good Citizenship
 - Collaborative provisions
 - Student development and support
 - Student assessments
 - External examiners
 - Staffing
 - Industrial links
- the informal quality assurance structures and mechanisms with particular attention to:
 - Ethos
 - Staff morale
 - Staff attitude
- the institution's approach to quality
 - Notion of quality in the institution
 - Commitment to continuous improvement
 - A systematic approach
 - The identification of functions, areas and issues (evidence, if any, that improvement is high on the agenda)
 - Elements of good practice in the institution

A detailed version of the audit process is given in chapter 5.

Preparation for the Quality Audit (suggested approach to self-assessment)

An institution expecting to undergo an external quality audit/assessment must allow adequate time for proper organisation and management of the procedures. Experience of academic audits carried out in institutions in the UK shows that it takes between 3 – 6 months to prepare for a self-assessment in anticipation of a quality audit or quality assessment. An institution that has a quality assurance system that is managed and implemented by a dedicated team should derive maximum benefit from an external quality audit and turn it to its advantage as it can use this opportunity to “sell” its institution by publicising its strengths. It is therefore essential for the institution to invest time and appropriate resources to make it a success. Whether the self-assessment is scheduled as a periodic exercise or specifically in the context of an external quality audit, a systematic approach must be adopted to ensure efficiency and effectiveness. The steps involved in such an exercise are given hereunder.

1. **Commitment (day 1)**
Institution makes a commitment to undergo a quality audit/assessment. A formal agreement is reached and a firm date is scheduled (planned a year in advance)
2. **Planning (2 weeks from commitment)**
Institution starts to organise itself – the quality assurance co-ordinator plans to:
 - Discuss purpose of the self-assessment
 - Identify members of the self-assessment team
 - Draw up a timetable and assigns responsibilities to members and agree with them as to who will do what, when and how.
3. ***Collection of Information (8 weeks from planning)***
Members of the self-assessment group collect the necessary information from the various departments contributing to the overall function of the institution. They may range from maintenance of the institution’s infrastructure, admissions and registration of students to assessments and their outcomes, course design, course appraisal, course review, students’ satisfaction, staff satisfaction, staff recruitment, staff development, staff promotion, research activities, etc.
4. ***First meeting to analyse information (9 weeks from start)***
Meeting held to:
 - evaluate the information gathered
 - identify issues arising from the information
 - identify any additional information that is required
 - agree on the first draft of the report to be discussed on a given date
5. **Collection of additional information [(3 weeks) = 12 weeks from start]**
Members collect additional information and meet as necessary to prepare draft report

6. Second meeting to analyse information and organise the writing of the report (13 weeks)
Meeting to:
 - Further analyse information and discuss draft report
 - Agree on the draft report, including the evidence and judgements made and conclusions reached
 - Confirm accuracy of information with parties concerned
 - Based on the above, redraft the report and distribute for comments
7. *Third meeting (15 weeks)*
Meeting to:
 - Receive comments on the second draft
 - Agree on modification of the draft in the light of the comments
 - Final draft distributed for verification
8. *Final meeting (17 weeks)*
Final meeting to agree on the final draft
9. *Report (18 weeks)*
Published report ready to be sent to the TEC.

The time frame is given as a mere indication of possible time involved. Different institutions will set their time frame differently, depending on their circumstances and specificities.

Cautionary Remarks

When undertaking a self-assessment, at least from an educational institution's point of view, it would be sensible to have a model to work with. A natural reaction would be to examine the panel's approach to the audit to reassure oneself that the report of the self-assessment matches the expectations of the audit panel. This aspect has been amply described and institutions should have a clear idea what to expect from the external auditors. However, at this juncture it is considered appropriate to give a word of caution: that an institution does not carry out its self-assessment based entirely on the audit processes as there is a danger that a focus on conforming to external assessments may lead to a 'culture of compliance' which can help generate high quality documents that will be viewed favourably by the auditors. Such an approach will inevitably lead to the build up of an industry for self-assessments geared towards scoring highly in the external assessment, especially if a rating scale were to be employed. Such a practice can only be counterproductive as quality documents will be produced with perhaps undue regard for objectivity and, indirectly, this may undermine innovation, originality and creativity. Each institution should develop its own style of carrying out its self-assessment. It should be undertaken with a serious intent of critical self-examination with a view to improving on its current practice. Otherwise, self-subjected compliance to external processes can defeat the whole purpose of the audit and, by inference, will amount to self-deception. It is therefore recommended that institutions undertake this exercise with honesty and an open mind, and placing improvement foremost on their agenda.

Chapter 4

THE PORTFOLIO

4.1 Introduction

As emphasised all along, the ultimate responsibility for assuring quality of educational provision rests with the educational institutions. This is particularly applicable to degree awarding institutions as they need to assure their students and other stakeholders that their awards meet international standards and are worthy of recognition. In the same way, where programmes are offered jointly with other institutions, the awarding institution has the responsibility to ensure the quality of the programme. However, as a recognition/pledge of their guarantee of quality, it is standard practice world-wide to expect the institutions to undergo external verification of the effectiveness of their quality assurance system and procedures. Such an exercise is conducted periodically, usually quinquennially, by quality assurance agencies with the help of members from the academic community and from industry. As per established norms, tertiary education institutions carry out their periodic internal quality audit, also called self-assessment. Once a commitment is made to undergo an external quality audit, the institution systematically prepares itself for the event. As a first exercise it has to prepare a portfolio on the basis of a self-assessment.

Why a portfolio and not a report, one might ask? The definition of a portfolio which closely matches that which is applicable in the context of a quality audit refers to “a range of investments held by a person or organisation” (Concise Oxford Dictionary). A portfolio is more than just a report. It provides evidence of assertions made for immediate use and in this sense it is unlike a report which makes reference to any evidence or document. Put simply, it is the document that the institution submits to the quality assurance agency for the purposes of a quality audit and it is in fact the synthesis of findings resulting from a self-assessment carried out by the institution prior to the audit with supporting documents, as applicable. There are no hard and fast rules for putting together a portfolio. However, in the interest of clarity, consistency and pragmatism, some guidelines are considered appropriate and they will be dealt with towards the end of this chapter. As a general rule it should contain sufficient information to enable auditors to obtain a clear picture of the institution and its activities.

4.2 Self-Assessment in the context of the Portfolio

This self-assessment is like any other self-assessment in that the same procedures are involved. Where it differs from those meant for an external use is one which forms the basis for an external assessment. However, since the portfolio is destined for external auditors, the self-assessment must be particularly thorough to ensure that it leaves no room for doubts or misgivings. A necessary starting point is the institution’s strategic plan, including its mission, aims and objectives.

The frequency of self-assessments and the procedures for carrying them out should be fully described in the institution's quality assurance handbook. The latter should also include quality assurance activities in the institution, including external assessments, to inform and prepare all staff of their respective responsibilities.

As with all self-assessments, this one too is expected to appraise the achievements of the institution in the period under consideration, highlight good practice and identify weaknesses. In order to address the weaknesses identified, it is necessary to come up with recommendations with a built-in review date. With this approach the institution acknowledges that it has undertaken an internal audit and found weaknesses, as applicable, and that it is seeking to deal with them in a consistent manner.

4.3 Structure of the Portfolio

The portfolio must be structured such that it provides information in a sequence, one leading to the other. For this reason a format is given in paragraph 4 under *Assembling the Information and Evidence*. Given that it is the basis on which an institution is assessed, the auditors scrutinise the document and make an appraisal of the quality of educational provision against the institution's stated mission and objectives. Hence, the portfolio must contain adequate information to enable auditors to obtain an overall picture of the institution, including the range and complexity of its undertakings. It does not have to be exhaustive to the extent that it becomes voluminous, nor should it be overly conservative to the extent that important facts go undetected. Should the auditors need additional information on specific items, they would make a request for same to be forwarded.

As a general rule, it is recommended that they comply with the following:

- ❖ Style: formal, loosely bound in soft cover
- ❖ Size: 20 – 25 pages in length on A 4, excluding annexes
- ❖ Margin: left -1.5 inch/3.75 cm and right -1 inch/2.5 cm
- ❖ Line spacing: 1
- ❖ Supporting documents should be made available in their original format.

4.4 Acronyms and Abbreviations

Acronyms and abbreviations are useful in documents such as the portfolio as they help avoid repetitions of certain names or designations which can be quite lengthy at times. However, when employing such abbreviations, authors who are already familiar with them inadvertently make use of them without giving their full version.

To assist readers obtain a quick grasp of the acronyms and abbreviations used in the text, it is recommended that a list of abbreviations together with their full version be provided at the very beginning of the portfolio.

4.5 Submission of the Portfolio

In the context of an external quality audit, when the institution concerned has come up with a final version of the portfolio, it makes a formal submission together with supporting documents to the TEC in seven copies. As per standard practice, a copy of the complete set of documents is sent to each member of the audit panel. By this time the institution would have been informed about the constitution of the audit panel.

The TEC acknowledges receipt of the submissions with the assurance of a formal reply within six weeks on the future course of action. All preliminary activities leading to the audit are completed four weeks prior to the event.

Chapter 5

THE AUDIT PROCESS

5.1 Introduction

As a natural process of evolution and consistent with strategic planning, educational institutions need to periodically review their aims and objectives to ensure that they are responsive to the prevailing socio-economic environment. In the same way, they also need to carry out regular checks to ascertain that they are indeed fulfilling their aims and achieving their objectives. The latter exercise can be done through the periodic internal audit or self-assessment. The findings of these exercises are essentially for the benefit of the institutions concerned as they get an opportunity to appraise themselves and take action, as necessary. Whilst it is desirable for institutions to carry out internal audits periodically, maximum benefits can be derived from this exercise if it is carried out objectively, putting improvement on their educational offerings as the ultimate outcome.

5.2 Events leading to the Audit

The external quality audit is programmed at the invitation of the institution to be audited. In practice, following discussions, the institution and the TEC should agree on a date for the audit. The institution then formally invites the TEC to carry out the quality audit. Thereafter, after organising the audit panel, the TEC formalises the audit. Three months before the appointed date the institution submits its portfolio describing the institution's approach to assuring quality, including results of particular quality assurance initiatives, to the TEC. A copy of this document is sent to each of the panel members for scrutiny. It must be emphasised that after studying the document the panel members draw up a list of issues that they would like to pursue during the audit visit. A month from the submission of the portfolio, a pre-audit workshop* is convened to gather the audit panel. This is an opportunity for the members to get to know each other, discuss the audit process and decide on the future course of action. They may, if found necessary, request additional information from the institution. Nearer the date of the event the person with the responsibility to co-ordinate the activities finalises the agenda for the audit, the venue and other associated matters with the institution to be audited.

The audit programme is normally drawn up by the audit panel, following its preliminary meeting**. However, this tentative programme is discussed with the institution to be audited for adjustments, as necessary. Thereafter it is finalised.

* For our purposes, given resource constraints (human and financial), an alternative timing of the pre-audit workshop is deemed appropriate. It will be held on the eve of the audit.

** Despite the preceding statement, in order to ensure proper co-ordination, the audit panel will draw up the audit programme four weeks prior to the event.

5.3 Prerequisite of the Audit

Since the institution invites an audit, in a way it is playing host to the auditors. However, in so doing it takes commitments to co-operate fully with them. For the smooth execution of all the activities of the audit, it is worth drawing attention to essential requirements of the audit team.

They are as follows:

1. Physical arrangements of designated rooms for specific purposes;
2. Participation of academic and non-academic staff, as per requirements, with advance notice being given to members concerned; and
3. Participation of a mix of students, gender, discipline and level-wise (academic achievement) with prior notice.

Physical arrangements

The quality audit co-ordinator will advise the institution on the likely arrangements that would be required for the purposes of the audit. Essentially, they are:

- An interview room large enough to accommodate between ten to twelve persons around a table
- An adjoining room or a suitable area in the interview room where hard copies of all information requested by the audit team are displayed for easy reference
- An adjoining room to be used as a waiting area for groups of individuals who have been invited to be interviewed
- A fairly large room that can accommodate up to 60 individuals where students and staff can mingle with auditors (this area will be used once for approximately 2 hours)

The first three rooms will be used for the duration of the audit.

On the first morning of the audit, the panel meets the quality assurance co-ordinator of the institution to discuss the agenda for the entire audit. This is an opportunity to inform personnel on both sides of each other's expectations, particular issues or constraints, if any. The audit proper starts with the panel meeting the Vice-Chancellor/Director-General/Director and his/her team. The rest of the audit proceeds as per agreed programme, an example of which is given in chapter 6. The auditors may wish to carry out a site visit of an area of the institution that is given prominence.

5.4 Academic and Non-Academic Staff

An educational institution has as its primary object to educate its students. For this to happen, it requires educationists/lecturers/academic staff whose job primarily is to develop curricula and teach them. Included in the institution's activities is the element of research. It is customary for higher education institutions to be engaged in research to promote a culture of research which underpins education. The hallmark of a higher education institution is its ability to carry out research for the advancement of knowledge, science and technology that contribute to new developments and better ways of responding to needs.

For the successful operation of an institution, academic and non-academic members need to work in close collaboration. Academic members need to have the support of non-academic staff to manage activities associated with the main function of the institution. For research purposes the institution requires appropriate infrastructure, namely well equipped laboratories attended by appropriate technicians. Similarly, for teaching, the institution must provide adequate infrastructure. Administrative procedures, including registration and enrolment of students, accommodation, student welfare, library, and management of whole host of other resources are just as important to the institution. In order to have an appreciation of the effectiveness of communication between various departments it is necessary to talk to people assuming responsibilities in different environments.

The audit panel is conscious of this need and accordingly it makes provision to interview personnel from all possible hierarchies and even students.

5.5 Students

Students are the *raison d'être* of educational institutions. An audit would be incomplete without the participation of students. Hence, an informal session where the panel would wish to speak to a mix of students to get a feel of the institution's ethos, culture and general atmosphere is also included in the programme. Students from various disciplines at different levels of study will be invited. Others may, if they wish, join in. Therefore it makes sense to inform them of this meeting well in advance.

The panel may wish to have a structured approach to eliciting information from them in which case each panel member would talk to a mixed group or it may resort to an unstructured method with panel members mingling with students at random.

5.6 Objective of the Quality Audit

As addressed earlier, the objective of the audit is to make an assessment of the effectiveness of the institution's quality assurance system towards confirming or otherwise that it is fulfilling its mission and achieving its objectives. The audit panel would want to be reassured that the institution's mission is understood and owned by its stakeholders. The panel would also want to know whether and how the institution is achieving its objectives.

It is not possible to look into all aspects of an institution during a three day visit. Nevertheless, the audit panel would seek to cover as wide an area as possible. In this regard, it may decide to split up into two or more groups, each pursuing a different line of enquiry. In line with its terms of reference, the panel would resort to focussing on specific areas and it would do this by an audit trail.

In these respects, it would want to explore any given area, as detailed hereunder, that it considers appropriate for the purposes of the audit.

5.7 Areas for consideration by the Audit Panel

5.7.1 Institutional Mission, Aims and Objectives

- Institution's mission is explicit. It is understood and owned by its staff
- Aims and objectives are in keeping with the mission. They are realistic and achievable.

5.7.2 Institutional Approach to Quality Assurance

- The institution has adopted a working definition of quality assurance which is compatible with its mission.
- A systematic and comprehensive approach to quality assurance affecting all the essential services of the institution is being implemented.
- A quality assurance handbook addressing all the affected activities is in evidence.
- The quality assurance handbook is available to all departments for consultation by all staff members.

5.7.3 Administrative and Management Issues

Governance

- Principles of good governance are evident and they are translated into:
 - working in an open manner so as to facilitate access to its policies and decisions by the public
 - encouraging institution-wide participation in the formulation of policies
 - ensuring that specific responsibilities are clear and are assumed appropriately by members according to their hierarchy
 - timely implementation of policies and monitoring thereof
 - Governing body being cohesive in its approach
- Top management Leadership is demonstrable through:
 - developing and communicating the institution's strategic plan with identifiable short term and long term goals and objectives

- developing and communicating the institution's mission and plan
- establishing effective links with external stakeholders
- developing an organisational structure which reduces bureaucracy and improves communication, efficiency and effectiveness
- Management of funds through:
 - transparency and accountability
 - proper budgeting and rationalisation of funds with justification, taking into account short term and long term goals
 - ensuring cost effectiveness of programmes
 - effective internal auditing
- Management of academic activities through:
 - ensuring that programmes are relevant
 - ensuring that academic standards are continuously monitored and improved
 - ensuring that the institution's awards are recognised nationally, regionally and internationally

Admissions

- Policies regarding admissions are clear, transparent and accessible by the public
- Policy on equal opportunities is implemented
- Consideration is given to physically disabled and mature students

Students Council

- A body such as a Students Council is operational to represent students in various committees, including the Academic Board.
- The Council's voice is heeded by management and appropriate action taken

Students Welfare

- An office for students welfare is operational and it is actively supported by management
- There is evidence that students are encouraged to use the services provided.

Staff Council

- A body fitting the description of staff council is active with full participation of staff.
- It caters for the needs of all the institution's staff, ensuring that their rights are respected.
- It positively contributes to the effective management of the institution.

Staff Welfare

- Provision is made to have an office or an association to provide support to staff
- It takes an active role in ensuring that staff are listened to and their needs are acted upon in the most appropriate manner

Staff Appointments, Appraisal and Promotion

- The institution has well established policies for appointment, appraisal and promotion of staff and that these policies are effectively implemented
- These policies are reviewed to reflect changing circumstances

Staff Development

- Performance appraisal is undertaken periodically in a transparent manner with the employment of clearly developed policies.
- Staff are informed of management's recorded perception of their strengths and weaknesses
- Appropriate support and training is given to staff concerned to enable them to overcome weaknesses so as to perform more effectively. Opportunities are given to deserving members to further their career.
- Continuing professional development is actively promoted

5.7.4 Curricula and Programmes

Aims and Objectives

- Curricula aims and objectives are explicit and known to staff and students.
- Specialist aims and objectives are consistent with institutional mission and aims.
- Aims and objectives correspond to the needs of students, society and the economy, as revealed by systematic investigation.
- Curricula accurately reflect declared aims and objectives and the needs identified.
- Curricula provide an appropriate balance of specialist content, general conceptual skills and personal, transferable skills.
- Curricula are up-to-date in terms of specialist developments and current thinking on curriculum development and delivery.

Programme Design, Validation, Approval and Review

- Programmes are designed to meet the needs of students, taking into account programme length/duration, modes of attendance, location, structure and sequence, optional elements etc.
- Provision is made to enable students who do not have traditional academic qualifications, but who have the motivation and potential, including accreditation of prior learning (APL), accreditation of experiential learning (APEL), credit accumulation and transfer (CAT) work-based learning (WBL) and those who are mature to enrol on these programmes.
- Programmes go through a validation process and are subsequently approved by the academic council/senate prior to their offer
- The validation process is an established procedure which is thorough, consistent, reliable and is in conformity with international norms
- Programmes are periodically reviewed to assess their suitability

- There is an established system of regular liaison between the institution and industry, public agencies, professional bodies and other potential end-users.

The Teaching and Learning Environment

- The academic environment, physical and social, is generally conducive to learning, and the level of research and other scholarly activities is appropriate to the level of teaching.
- Teaching accommodation is sufficient in quantity and is appropriate for the curricula on offer and for the full range of students.
- There are adequate specialist facilities - including practical and experimental learning facilities - for the curricula on offer.
- Ancillary facilities - staff accommodation, storage space, preparation rooms, amenity accommodation etc. - are adequate.
- The physical environment is adequately maintained in terms of safety, cleanliness, repairs and decor.
- Accommodation, especially specialist accommodation, is optimally used as evidenced by suitable plans, schedules, timetables and control systems.

Staff Resources Ancillary

- The teaching staff establishment is sufficient to deliver the curricula.
- The teaching staff complement is suitable for the curricula, in terms of the mix of qualifications and skills, experience, aptitudes, age, status etc.
- There is adequate support in terms of library, technician, administrative, student services, staffing, etc.
- Staff resources are effectively deployed: roles and relationships are well defined and understood; duties allocated are appropriate to qualifications, experience and aptitude; there is provision for review, consultation and redeployment.
- Staff development needs are systematically identified, in relation to individual aspirations, the curricula and institutional requirements.
- All staff, academic and non-academic, are given the opportunity with necessary support to undertake appropriate staff development related to identified needs: induction, in-service training, secondments, consultancy, research and other scholarly activities.

Learning Resources

- There are sufficient physical resources to deliver the curricula, including equipment, materials and Information and Communications Technology.
- Equipment is up-to-date, readily available and effectively deployed.
- Library, audio-visual, internet access, appropriate software and hardware and other academic services are adequate for the curricula.

Programme Organisation and Delivery

- Learning programmes are effectively organised and managed.

- Teaching programmes are clearly articulated, made known to students and regularly monitored.
- Coursework and assessment are systematically scheduled.
- Feedback is regularly obtained from students, employers, moderators and auditors, and analysed and acted upon as appropriate.

Teaching and Learning

- Teaching and learning are based on explicit learning outcomes which are consistent with programme/course aims.
- Teaching methods are innovative, varied, and appropriate to the stated learning outcomes and make effective use of available facilities, equipment, materials and aids.
- Teaching is well planned and prepared and effectively performed, taking account of the needs of all categories of students.
- The style and pace of teaching and learning takes due account of the nature of the curricula, students' varied abilities and prior learning, and the specific needs of the very able or weak students equally.
- Teaching approaches encourage independent learning with critical thinking and students take responsibility for their own learning.
- Learning is enriched by appropriate reference to cross-curricular links, current research, industrial applications and development of generic skills such as communication and teamwork.

Student Support

- Students' needs for guidance and support are recognised and provision made for advice and assistance in the curricular, vocational and personal domains.
- Responsibility for particular aspects of student support is clearly located and effective liaison maintained between arrangements at all levels.
- Adequate provision is made for information and advice to potential students during the application and enrolment phases.
- Students are effectively supported during their studies by systems of induction, course tutors, personal tutors and provision for remediation and curricular choice.
- Students are adequately prepared for the next stage of study or employment by appropriate contacts, information, advice and training.

Monitoring and Assessment

- A range of assessment methods including coursework, projects, research and examinations etc is used in a planned manner to serve diagnostic, formative and summative purposes.
- Assessment schemes are compatible with the aims and aspects of the curricula as taught.
- The scope and weighting of assessment schemes are clear and known to all concerned and the standards applied are explicit and consistent across the curricula.
- Procedures are regularly applied to ensure that, as far as possible, assessment schemes are valid, reliable and fairly administered.
- Coursework is regularly set and assessed and is at the appropriate level of attainment.

- Coursework faithfully reflects the full range of curricular aims, including the development of generic skills.
- Student achievement, as represented by their coursework, is comparable with that of students on similar courses elsewhere.
- Students' performance and attitudes indicate a positive and successful learning experience.
- A systematic procedure for keeping record of student progress, for providing feedback to students and taking corrective action where necessary is effectively employed.
- Students have ready access to reasonable appeal procedures.

Output, Outcomes and Quality Control

- Performance indicators are regularly used to inform institutional assessment of achievement in relation to educational aims and learning outcomes.
- Results are monitored and analysed and appropriate action taken.
- Results against these or other appropriate indicators compare favourably with institutional or national norms.
- Quality Control arrangements at institutional, department, subject and/or course level are consistent and coherent.
- Quality standards, policies and strategies, are consistently applied and periodically reviewed within the cognate area.
- There is a general commitment to excellence in teaching and learning, apparent in staff and student attitudes in all aspects of provision.

5.7.5 External Examiners

- External examiners, as implied, are independent of the institution and are appointed for a specified period not exceeding three years.
- They are from reputable institutions and have the necessary expertise and experience.
- Terms of reference are explicit and should include moderation of question papers and model answers, moderation of scripts and providing feedback on performance of students. A feedback on the curriculum should be included.
- Ethical practice is given due importance.

5.7.6 Research Degree Students

- Students are clearly informed of their commitment to research through appropriate guidelines.
- Role of supervisors is explicit and expectations by students from them and vice versa are clearly understood.
- Students receive adequate support through regular tutorials and continuous monitoring of progress, together with feedback.
- Physical resources including appropriate equipment are readily available

5.7.7 Collaborative Provisions

- The collaboration is legally binding through a memorandum of understanding.

- Collaborating institutions undertake the responsibility to ensure that programmes are of the required standard and are offered with the same rigour as those in the parent institution.
- Students benefit from the same standard of resources as the regular students of the awarding institution.
- The awarding institution undertakes the responsibility to assure the quality of the educational provision under the collaboration.
- The partner institution is subject to quality audit or quality assessment together with the parent institution.
- Students are fully informed of the nature of the collaboration between the institutions concerned.

5.7.8 Industrial Links/Work-based Experience

- A committee comprising the institution and industry and other principal stakeholders meets regularly for the purposes of manpower planning.
- An active interface exists with industries for the purposes of identifying programmes of study and suitable work experience compatible with the students' programme.
- The industrial sector is encouraged to participate in curriculum design and validation.

5.7.9 Community Service and Good Citizenship

- The institution plays an active role in inculcating the spirit of a healthy community and in providing its services and expertise to it to promote psycho-socio-economic integration and development.

5.8 Deliberations and Decision of the Audit Panel

The audit panel takes note of all the findings. Members discuss their observations and decide on their conclusion, ensuring that it is a true reflection of the state of affairs at the institution. At the end of the audit the panel gives an oral feedback to the top management. Thereafter the institution is given a copy of the draft report within two months of the visit. This is followed by the final report which is sent within a period of three months.

Chapter 6

INSTITUTIONAL VISIT

6.1 Introduction

An audit is incomplete without verification of assets together with assessment of statements made by an institution. In the context of quality assurance in education, such verification takes the form of an institutional visit which is an integral part of a quality audit. This exercise will be aligned with established practices in countries already implementing quality assurance activities. Depending on the size of the institution being audited, such a visit is scheduled over a period of three days, but for our purposes, given that our tertiary education institutions are comparatively small, it may be rationalised to suit the respective institutions.

6.2 Panel Visit

The audit panel will visit the institution for a period of three days during which it will try to establish the thoroughness and accuracy of the self-assessment reported in the institution's portfolio. It will be guided by a programme of activities previously agreed upon. As part of the exercise, subject to recommendations of the institution, the panel will also visit any aspect of the institution which is considered as a significant quality assurance initiative.

An example of the institutional visit programme is given hereunder.

6.3 Example of Pre-Audit Workshop Programme

Pre-audit Workshop Programme

09.00 - 10.00	Audit Panel Meeting – introductions and planning of the workshop – deciding on lines of enquiry
10.00 - 10.30	Coffee break
10.30 - 12.30	Workshop
12.30 - 13.30	Lunch
13.30 - 14.30	Workshop (continued)
14.30 - 15.00	Tea break
15.00 - 16.00	Meeting with Institution's Quality Assurance Co-ordinator

Winding up of Workshop

6.4 Example of Audit Programme

Day 1

09.00 - 09.30	Meeting with Institution's Quality Assurance Co-ordinator followed by orientation
09.30 - 10.15	Interview with Vice-Chancellor/Director-General/Director and Executive Management
10.15 - 10.30	<i>Review</i>
10.30 - 10.45	Coffee
10.45 - 11.45	Interview with Deans of Faculties/Heads of Schools
11.45 - 12.00	<i>Review</i>
12.00 - 12.45	Interview with Heads of Departments (one from each Faculty)
12.45 - 13.00	<i>Review</i>
13.00 - 14.00	Lunch
14.00 - 14.45	Interview with Lecturers (one from each department)
14.45 - 15.00	<i>Review</i>
15.00 - 15.15	Tea
15.15 - 16.00	Interview with Student Representatives
16.00 - 16.30	<i>Review</i> <i>Plan for day 2</i> <i>Wind up</i>

Day 2

09.00 - 09.45	Interview with Members of Senate/Academic Council
09.45 - 10.00	<i>Review</i>
10.00 - 10.15	Coffee
10.15 - 11.00	Interview with Council/Board Members
11.00 - 11.15	<i>Review</i>
11.15 - 12.00	Meeting with Administrative and Support Staff
12.00 - 12.15	<i>Review</i>

12.15 - 1.15	Lunch
13.15 - 14.00	Interview with members of Staff Association
<i>14.00 - 14.30</i>	<i>Review</i> <i>Planning for day 3</i>
14.30 - 16.30	Visits
 Day 3	
09.00 - 09.45	Interview with Quality Assurance Committee
<i>09.45 - 10.00</i>	<i>Review</i>
10.00 - 10.15	Coffee
10.15 - 11.00	Interview with Library Staff
<i>11.00 - 11.15</i>	<i>Review</i>
11.15 - 12.00	Interview with Heads of Centres
<i>12.00 - 12.15</i>	<i>Review</i>
12.15 - 13.15	Lunch
13.15 - 13.45	Interview with Masters and PhD Students
13.45 - 15.00	Open Session – Students and Staff
15.00 - 15.15	Tea
<i>15.15 - 16.00</i>	<i>Private panel meeting to draft conclusions</i>
16.00 - 16.30	Closing meeting with Vice-Chancellor/Director-General/Director (and others): brief outline of panel’s main conclusions

Chapter 7

AUDITORS

7.1 Introduction

In undertaking the task assigned to it, a quality audit panel collectively shoulders a very high responsibility as it has to make a judgement on the institution being audited. Such a decision can have an enormous impact, positive or otherwise, on the institution. Thus, it is crucial to ensure that the members making up the panel have the right profile, ability and experience to assume such a responsibility. The panel leader plays a critical role in ensuring that the team works as a cohesive unit. Hence, it is equally vital to ensure that the leader is adequately versed in this exercise. The success of a quality audit is dependent to a large extent on the professionalism of the quality audit panel.

7.2 Constitution of a Quality Audit Panel

As per norms established in most countries engaged in quality audits and assessments, an audit panel is constituted for each audit such that, as far as possible, no two panels consist of the same members. Thus, except for the secretariat, membership of audit panels changes.

It is common practice to have five members serving on an audit panel and they are as follows:

1. Chairperson (usually a Vice-Chancellor or someone in a similar position);
2. Two peers, one of whom may be the Chairperson and the second one being an academic – usually at the level of Dean or higher who has experience in teaching, research and consultancy;
3. One auditor from overseas;
4. One auditor who is preferably from industry and who has many years of experience in management; and
5. Secretary to the Panel and also acting as an auditor (Head of Quality assurance and Accreditation Division, TEC).

For the first round of quality audits, given that it is a new experience for the tertiary education sector in Mauritius, the panel will consist of overseas auditors mainly. Thereafter, with the benefit of experience, local auditors will be involved.

7.3 Selection of Auditors

Selection will be made from a pool of trained auditors, taking into consideration the above criteria and also bearing in mind that there should be no conflict of interest with the institution to be audited. For the purposes of forward planning, for each panel to be constituted, two individuals will be approached with two possible dates for two separate audits. Those who find one or both dates convenient may so indicate. Their bio data will be submitted to the TEC

Board for deciding on their suitability as panel member. The panel will therefore be constituted as per above mentioned criteria, giving due regard to skill mix of eligible auditors.

7.4 Approval of the Panel Members

This will take place at two levels. In the first instance the Board will give its approval on the basis of recommendation and curriculum vitae supplied. Upon the Board's approval, the curriculum vitae will be sent to the institution concerned, asking them to approve the panel. However, if they have any reservations they should give reasons as to why a panel member, on the basis of conflict of interest, may not be acceptable to the institution.

Once the panel is finalised, the co-ordinator liaises with the institution's QA representative to sort out preliminary arrangements.

THE AUDIT REPORT

8.1 Introduction

Following the audit process which is very intensive on account of discussions with varied groups of stakeholders, a wealth of information is generated which needs to be sorted out and presented in an appropriate format which is acceptable to the stakeholders within and outside the institution audited. The audit report is the official document describing the outcome of the audit process. It is carefully prepared after thorough checks and cross checks with the auditors to ensure that the statements made in the report accurately reflect the areas that were explored in the audit, the nature of the discussions that ensued and the findings of the audit panel, including possible recommendations.

8.2 Submission of the Audit Report

This document becomes the property of the TEC and is as such intended for the institution audited. However, prior to its submission, it is approved by the TEC Board. Thereafter, five copies are sent to the institution audited and at the same time, a copy is sent to each of the panel members. The institution has the right to respond to the report. The sector-wide Quality Assurance Committee is apprised of the outcome of the audit.

8.3 Appeal

If the institution addressed in the audit report feels that the audit report does not accurately reflect the state of affairs in the institution, it has the right to appeal. Such an appeal should be made directly to the Minister of Education and Scientific Research who will set up an *ad hoc* committee whose membership will include a representative of the State Law Office to deal with the case. The minister will thereafter communicate the decision of the *ad hoc* committee to the institution concerned and the TEC Board.

8.4 Recommendations

Invariably an audit results in recommendations for the purposes of improvements in the services provided by the institution. The quality assurance unit of the institution should see to it that the recommendations have been acted upon appropriately within the time frame. When they have been achieved, a short report describing the outcome of the recommendations is submitted to the senate for its approval following which it is transmitted to the TEC. The latter will liaise with the institution's quality assurance personnel to confirm the attainment of the objectives set in the recommendations.

Chapter 9

LOGISTICS AND ADMINISTRATIVE ARRANGEMENTS

9.1 Introduction

The execution of an academic audit is an extremely delicate and complex responsibility which requires utmost care. Logistics and administrative arrangements play a crucial role in ensuring that all the activities are synchronised. Thus, appropriate steps must be taken to ensure that all personnel engaged in this exercise assume their role and responsibilities according to the planned programme. As mentioned elsewhere, the programme is planned jointly by the Secretariat responsible for the audit and the Quality Assurance Unit of the institution to be audited. Officers on both sides have responsibility for their specific tasks.

9.2 Institution's Quality Assurance Unit

This office has an important role in co-ordinating the various meetings of the identified groups with the audit panel. It requires advanced planning on the part of the co-ordinator to ensure that individuals concerned are appropriately informed of the expected time of their presence at the correct venue. For the purposes of the meetings a suitable place having the necessary facilities must be identified. The Officer in Charge of the Secretariat at the TEC (Quality Assurance and Accreditation Division) will liaise with the co-ordinator to discuss the logistical arrangements at the institution.

9.3 Auditors

From the auditors' side, the Secretariat will take the responsibility for co-ordinating all aspects of audit arrangements, including travelling and hotel accommodation. Since each audit team will comprise home and overseas auditors, appropriate and precise arrangements are crucial for smooth and effective operation of the audits. The TEC will provide overseas auditors with airfare and board and lodging costs.

Travel arrangements: Overseas Auditors

Overseas auditors are entitled to a return air ticket on economy class, from and to their destination. Travel arrangements will be made by the Finance Division of the TEC. Alternatively, auditors may make provisional bookings and advise the TEC of their itinerary. Following agreement, the TEC will confirm the booking and take over the arrangements. Air tickets must be purchased a month in advance to avoid disruptions in the audit programmes.

Overseas auditors will be picked up from the airport and taken to their hotel accommodation by the TEC's transport. They will also be picked up from and returned to their hotel during the course of the audit.

Accommodation for Auditors from Overseas

The Secretariat at the TEC will make necessary accommodation arrangements for auditors from overseas. For practical purposes, auditors will be booked in a hotel which is the nearest to the TEC/Institution to be audited.

Honorarium

Auditors are entitled to a daily honorarium of US \$ 100 for the period of the audit. In the event that overseas auditors spend additional days in Mauritius, through travel constraints (availability of flights), they are entitled to a daily allowance of US \$ 60. However, if their services are required over and above the audit period, they will be given an honorarium of US \$ 100 per day for each day spent in specific projects assigned to them.

Quality Audit Panel: Terms of reference for auditors

In order to undertake external quality of the tertiary education institutions, the Tertiary Education Commission is taking the commitment to invite eligible auditors to form part of the quality audit panel. Such panels will be constituted as per criteria given in chapter 7 of the quality audit handbook.

The function of the quality audit panel will be to study the portfolio submitted by the institution and in the light of the audit process described in chapter 5 decide on a strategy for conducting the quality audit, ensuring that it covers all the major functions of the institution to enable the panel to make a judgement on the institution's commitment on quality.

Terms of reference for auditors

1. To make a commitment to act as a quality auditor for the institution identified as per the schedule worked out, participate in the pre-audit workshop and the audit.
2. To act within the scope identified in the Quality Audit Handbook.
3. To be objective at all times, ensuring that they are non-judgemental in their approach; that they are aware of possible personal bias.
4. To observe confidentiality.
5. To give full support to the Chairperson.
6. To work as a team, ensuring that members are working in harmony with a view to accomplishing a fact finding mission grounded on the self-assessment document.
7. To identify good practice as well as unhealthy practice and make necessary recommendations.
8. To ensure that there is agreement among the members on the conclusions of the panel.
9. To fully co-operate in getting the audit report ready within two months of the audit by writing the specific observations made and checking with the Tertiary Education Commission's Secretariat to see that the report is a true reflection of the panel's findings.

Quality Auditor's Claims Form

Title:

Name:

Designation:.....

Employer:

Country in which employed:.....

Date of arrival in Mauritius:

Date of Departure from Mauritius:.....

Pre-Audit Workshop attended on.....

Dates spent in Academic Audit:.....

Institution audited:.....

Dates in Mauritius not engaged in academic audit:.....

Dates in Mauritius in specific project:

Details of the Project undertaken:.....
.....
.....
.....

I confirm that the above information provided by me is correct.

Date:.....

Signature:.....

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