



TERTIARY EDUCATION COMMISSION

Quality Audit Handbook for Tertiary Education Institutions

[Second Edition]

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PREFACE

The Tertiary Education Commission (TEC) has the responsibility of ensuring and monitoring quality of tertiary education in Mauritius. The TEC has adopted a two pronged approach in its endeavour to ensure quality in the publicly funded institutions and the private providers. Private providers are required to apply for registration of their institution and the accreditation of each of the programmes they offer. Publicly funded institutions on the other hand undergo institutional academic quality audits based on the guidelines contained in the *Quality Audit Handbook* which was first published in 2004.

The first cycle of audits (5 years) started in 2005 and has been completed in 2010. All the publicly funded tertiary education institutions have been audited and the reports have been posted on the websites of the Commission and of the respective institutions. Almost six years have elapsed since the publication of the first edition of the *Quality Audit Handbook* and the Commission has, on the basis of experiences gathered in the conduct of the first cycle of audits, brought changes to the contents of the Handbook to include the latest international practices in institutional audits. The Second edition of the *Quality Audit Handbook* will also assist institutions embarking on quality audits for the first time as well as those institutions that have completed the first cycle audit and will be undergoing the second cycle in due course.

The criteria for quality audits have remained almost the same but the Second edition of the *Quality Audit Handbook* has been adapted with more user-friendly guidelines which will help institutions to prepare the self-evaluation report in a more autocritical and comprehensive manner. The *Quality Audit Handbook* provides guidelines for undertaking self assessments by institutions and to assemble necessary information to be submitted in the portfolio of the institution in preparation for an external institutional audit.

Basically, the second cycle audit involves the evaluation of progress made by institutions in implementing the recommendations of the previous audit and the conduct of a new audit based on predetermined themes. The themes have been described thoroughly in this Handbook.

Quality of Tertiary Education cannot be compromised. The Commission is fully aware that the quality of our human resources and of our workforce rests on the quality of tertiary education. The social and economic development of our country depends on the quality of tertiary education we impart to our people. The Commission will therefore always endeavour to continuously improve the quality of tertiary education in Mauritius.

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INTRODUCTION TO THE 2ND EDITION OF THE *QUALITY AUDIT HANDBOOK*

The Tertiary Education Commission (TEC), by virtue of its Act, has been inter alia assigned the responsibility to promote and maintain high quality standards in post secondary education through an appropriate quality assurance mechanism. The TEC has as mission to position Mauritius as a world class knowledge hub and the gateway for post secondary education and also has the responsibility to ensure that students benefit from a rich educational experience in the tertiary education institutions.

The Framework for Quality Assurance of the TEC has been developed with a view to instil confidence of the public and other stakeholders on the quality of educational provisions and academic standards that are being maintained in the sector. In order to implement its framework, TEC sets 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.

As per internationally established practices, in Mauritius, publicly funded tertiary education institutions (TEI) are required to undergo external verification of their institutional quality assurance systems. In this context, Quality Audit is the most common and widely used process of such verification, the emphasis being on continuous improvement as well as accountability.

An audit cycle is spread over a period of five years. The first cycle of quality audits in Mauritius started in 2005. Since then, the publicly funded tertiary education institutions under the purview of the TEC have been audited on the basis of the Criteria for Quality Audits as set out in the *Quality Audit Handbook* published in 2004. The second cycle of quality audits is due to start in 2011.

The purpose of this 2nd edition of the Quality Audit Handbook is to provide institutions being audited for the first time and those embarking on the second cycle as well as auditors with the guidelines and general information on the conduct of Quality Audits. This handbook incorporates experience gained over the years from various parts of the world. We would like to

thank the quality assurance bodies in Australia, 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 document on a continuing basis. Hence, this handbook is subject to change and new versions will appear as and when deemed necessary.

‘Quality Audit’ is defined as *“a systematic and independent examination to determine whether activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives”*.

Quality assurance agencies and educational authorities in different countries have adopted a more or less common approach to carrying out institutional audits. Quality Audits pay due attention to the quality of the programmes and the standards of awards at the point of delivery, as well as the institutions’ ultimate responsibility for what is done in their names and through the exercise of their formal powers. A quality audit is an evidence-based process carried out through peer review, and balances the need for publicly credible, independent and rigorous scrutiny of institutions. Quality Audits reckon that institutions themselves are best placed to provide stakeholders with valid, reliable and up-to-date information on the quality of their programmes and the standards of their awards.

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 effective monitoring and enhancing educational provision has been branded as 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 staff 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:

- i. achieve well-defined purposes;
- ii. meet customer satisfaction;
- iii. comply with applicable standards;
- iv. products/services must be consistent and reliable;
- v. excellence;
- vi. comply with health and safety regulations; and
- vii. comply with environmental 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 a 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 lifelong effect on students. In addition, education is a lifelong 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 its specific characteristics, mission 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 providers 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 habit 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 roadworthiness. 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 the 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:

- i. assessing the strength of the quality culture;
- ii. determining the commitment to continuous improvement;
- iii. appraising the systems in place to determine academic standards;
- iv. evaluating the systems in place to ensure that measures taken to maintain and enhance quality are appropriate and effective; and
- v. 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.

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 staff 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.

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 on Higher Education, UK, defines quality audit as “*external scrutiny aimed at providing guarantees that institutions have suitable quality control mechanisms in place*”.

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*”.

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 attained an acceptable level of competency. Most courses are subject to summative assessment, i.e. marks awarded count towards the final results. 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. This is carried out at 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.

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 address 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 which have been adapted by different countries to suit their specific needs.

3.2 Quality Audit and Quality Assessment

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

- a) that the institution uses its resources appropriately to uphold its mission and meets its stated objectives and that it will continue to do so in the foreseeable future; and
- b) the institution's ability and effectiveness in 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 tertiary education institutions in Mauritius to help them undertake their self-assessments in preparation for a quality audit.

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:

1. Planning – this must be carried out within the framework of the institution's principles of self-assessment.
2. Scope of the assessment – who and what are to be assessed.
3. Persons involved in the assessment must be knowledgeable, dedicated and have a thorough understanding of the plan.
4. 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.

3.3 Planning

3.3.1 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.

3.3.2 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 Appendix B dealing with areas that are considered in a quality audit.

3.3.3 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.

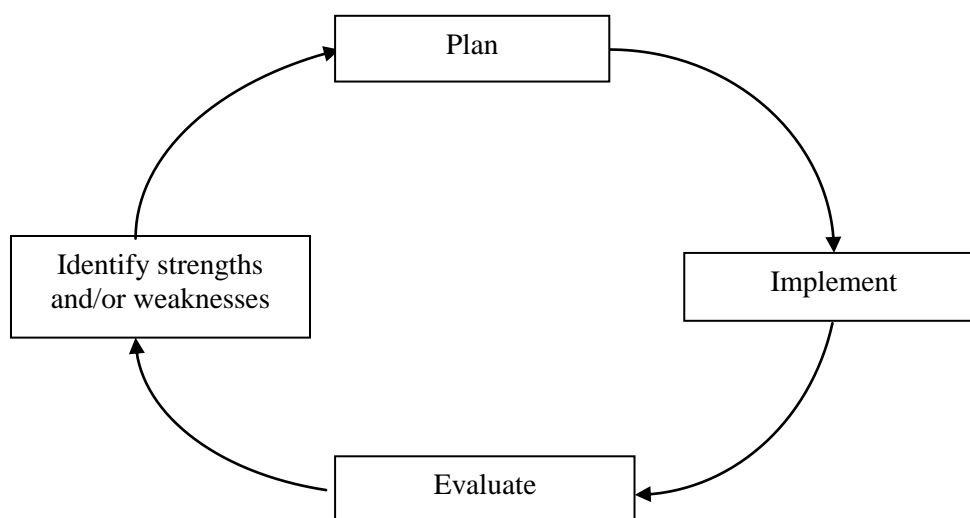


Figure 1. Cyclical nature of the continuous improvement, incorporating assessment, planning, implementation and review.

3.3.4 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.

3.3.5 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.

3.3.6 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.

3.3.7 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.

3.3.8 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.

3.3.9 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.

3.4 Assembling the Information and Evidence

3.4.1 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.

3.5 Sources of information

3.5.1 The Institution in Context

- Vision and Mission
- Aims and Objectives
- Strategic Plan

3.5.2 Curriculum Development and Course Assessment (including input from employers)

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

3.5.3 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

3.5.4 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.

3.5.5 Staff perceptions

- Staff perceptions of courses, course materials, assessments, staff-student ratio and factors affecting their performance must also be sought. Methodologies adopted by staff to objectively acquire perceptions of courses, teaching-learning process, etc. Besides part-time lecturers, visiting professors, adjunct professor/faculty may also be included for obtaining staff perceptions.

3.5.6 Staff development

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

3.5.7 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

3.5.8 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

3.5.9 **Research**

- Institutional promotion of students' research at PG and PhD levels.
- Promotion of research by faculty through institutional incentives like starter grant, support for participation in conferences etc., and conduction of research projects.
- Institutional norms & guidelines for taking up R&D research and consultancies.
- Collaboration with industry or other institutions and availability of institutional guidelines, MoUs etc.
- Research achievements and contribution to country/society development.

3.5.10 **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

3.5.11 **Transformation and responses to change**

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

3.5.12 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.

3.6 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 will a self-assessment 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.

3.7 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 of 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 with 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.

3.7.1 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. A statement must also be included 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.

3.7.2 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.

3.7.3 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.

3.7.4 Guidelines for writing the report

At the very outset of the process, the self-assessment team should decide on 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.

3.8 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.

4 THEMATIC AREAS FOR AUDIT

4.1 Thematic Areas for audit

TEC will work in consultation with the institution to reflect on specific areas of academic risks at the institution and the management of these risks. Confirmation of the areas for thematic enquiries to the institution takes place twelve months preceding the audit. For the purpose of the audit, two themes will be subject to particular emphasis during the audits. The themes must be narrow enough that the increased depth does not increase the overall scale of the audit.

A theme can be either:

1. an area of academic outcomes within the core activities of teaching and learning, research and scholarship, including a broad discipline area, or
2. an ‘enabling’ area closely related to the achievement of academic outcomes.

A theme covers a range of sub-themes. These sub-themes must be closely related enough to allow the institution to provide meaningful self-evaluation of the theme as a whole. A sub-theme may form part of more than one theme. The self-evaluation must include an evaluative component, including evidence of outcomes and effectiveness, and identified improvements.

Audits will reach a view on the outcome standards achieved by the institution in relation to each theme. If an area other than a discipline is chosen, sampling of some programme areas will be undertaken to explore quality assurance arrangements within academic units.

Example of Themes and Sub-Themes: Areas of Academic Outcomes

4.1.1 Curriculum and Assessment

Processes for the mounting of programmes, curriculum development, design and review mechanisms, learning, procedures and mechanism for assessment including moderation, accreditation of professional programmes with relevant authorities, etc.

4.1.2 Admissions and Progress

Students selection and admission processes, provisions for recognition of prior learning, credit transfer, student support, orientation, progression/retention of students for all cohorts.

4.1.3 Quality of Teaching

Pedagogical expertise in teaching, enhancement of skills, professional development of academics, recruitment of teaching staff, evaluation of teaching and impact on learning.

4.1.4 Learning Outcomes

Equivalence and recognition of awards, assessment, graduate attributes, employment and industry needs, curriculum development, design and review.

4.1.5 Flexible or Blended Learning

Modes of delivery, curriculum development, design for flexible learning, learners' support, learning outcomes, and infrastructure and ancillary facilities, etc.

4.1.6 Research

Management of research, research for scholarly development, link between research and teaching, research-based programmes, collaborative partnership, funding, academic integrity, consultancy, equipment and infrastructure, etc.

4.1.7 Research Training

Research-based programmes, admission to research programmes, training, retention and progression, support for research students, supervision, skills development, career planning, etc.

4.1.8 Engagement

Corporate social responsibility, stakeholder involvement, roles and responsibilities, relationship management, etc.

Enabling Areas**4.1.9 Academic Governance**

Academic culture, ambiance, structures and roles for curriculum development; quality management system; academic decision making instances, integrity etc.

4.1.10 Student Experience

Understanding the student population and student life cycle; learning and social support, appeals and grievance procedures, alumni, student bodies, etc.

4.1.11 Workforce Planning and Renewal

Planning and skill requirements; selection and recruitment, managing change, academic workloads, scholarly development, retention, career path, work environment, etc.

4.1.12 Career Development and Performance Management

Planning and skill requirements, career development, work environment, research environment, communication, performance management. Support to staff for teaching and research, etc.

Discipline Areas

As noted above, if a discipline area is chosen as a theme, the audit will be a quality audit not a discipline review or direct assessment of programme content, although audit findings will address the outcome standards achieved by the institution within the discipline area. The following possible areas are largely based on the Broad Fields of Study:

- Agriculture/Environmental Sciences
- Arts/Social Sciences
- Education
- Business, Management and Commerce
- Law
- IT
- Engineering Sciences
- Health Sciences

- Physical Sciences
- Biological Sciences
- Design/Creative Arts

Other Themes

Other themes could include: interdisciplinary approaches; teaching-research nexus; interaction of vocational education and training and higher education. Additional themes may be suggested and would be agreed between TEC and the institution.

5 AREAS FOR CONSIDERATION BY THE AUDIT PANEL

5.1 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.

5.2 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.
- Presence and functioning of the documentation and monitoring structure such as Internal Quality Assurance Cell in the institution.

5.3 Administrative and Management Issues

5.3.1 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.

5.3.2 Admissions

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

5.3.3 Students Council

- A body such as a student's 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.

5.3.4 **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.

5.3.5 **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.

5.3.6 **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.

5.3.7 **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.

5.3.8 **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.

5.4 Curricula and Programmes

5.4.1 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.

5.4.2 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 prior and experiential learning, credit accumulation and transfer, work-based learning 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.

5.4.3 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.

5.4.4 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.

5.4.5 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.

5.4.6 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.

5.4.7 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.

5.4.8 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.

5.4.9 **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.

5.4.10 **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, 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.

5.5 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.

5.6 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.
- Provision of Institutional funding in the form of research fellowships (both short-term and long-term) for student research.

5.7 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.

5.8 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.
- Industry-Institute interaction norms/guidelines at the institutional level.

5.9 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 promote psycho-socio-economic integration and development.
- Institutional structures with trained staff to promote community service and good citizenship qualities and capacity among students.

6 SELF-EVALUATION REPORT

Guidelines for producing institutional self-evaluation reports

6.1 Purpose of the institutional self-evaluation report

The institution's self-evaluation report (SER) is a key reference point for the audit team. Its importance reflects the focus in institutional audit on the institution's own methods for assuring the quality of its programmes and the standards of its awards, and on its published information about quality and standards.

The institutional SER provides the main opportunity for the institution to:

- set the context for the audit by drawing upon the outcomes of internal review and evaluation processes to identify strengths in its provision and to evaluate the effectiveness of its policies and procedures for quality management and enhancement;
- describe and evaluate the way in which it is exercising its responsibilities in the two areas that are central to the aims of institutional audit: the provision of programmes of appropriate quality and awards of an appropriate standard; and the exercising of its legal powers to award degrees in a proper manner;
- describe and evaluate the effectiveness of its quality assurance structures and mechanisms; the way in which it assures the accuracy, completeness and reliability of its published information; and its practices and procedures in relation to the particular focuses of institutional audit;
- provide the audit team with an understanding of how the institution assures quality and standards sufficient to enable the team to make a judgement of the confidence that can reasonably be placed in the institution's present and likely future management of quality and standards.

In the case of an institution without the powers to award undergraduate and/or research degrees, and thus without some of the responsibilities of a degree-awarding body, the institutional SER also provides an opportunity for the institution to demonstrate the ways in which it meets the requirements of its degree-awarding collaborative partners; exercises its responsibilities for

awarding certificates and diplomas; and is committed to its general responsibilities for securing quality.

6.2 Length and style of the institutional SER

The institutional SER should:

- be balanced and relevant;
- be concise and accessible to the audit team;
- adopt an institution-wide perspective;
- have an appropriate balance of evaluation and description.

The SER should provide sufficient description to enable the audit team to understand the key features of the institution's approach to assuring quality and securing standards, but should focus on the effectiveness of that approach. Where the institution expresses confidence in its own effectiveness, the evidence upon which its view is based should be made clear: a successful SER will minimise the need for further clarification by the team. Because it is largely upon the SER that the team's perceptions of, and confidence in, the institution will be based (at least in the first instance), it is important that the SER is both accurate and verifiable.

The SER may typically be 30 to 40 pages in length, although there is no penalty for a longer submission. It may provide cross-references to other documents that are available to the audit team and to external reference points as appropriate.

6.3 Content and structure

The institution is asked to structure its SER under the following main headings:

- Introduction.
- Institutional processes for the assurance of academic quality and standards.
- The accuracy, completeness and reliability of published information.

In producing its SER, the institution should:

- provide the context for the audit by outlining, for example, its size, style, mission, and the nature and extent of its collaborative provision;

- describe and analyse any developments since the last audit;
- describe and analyse its responses to individual subject reviews and professional, statutory or regulatory body accreditations undertaken since the last audit and the ways in which lessons learnt from these have been taken into account in the enhancement of institutional practice;
- describe briefly the key features of its institutional framework and processes for assuring the academic standards of its awards and the quality of its programmes and of its learner support;
- highlight any key changes that have been made to institutional practices since the last audit, and any areas that have caused particular difficulty;
- provide a view on the perceived strengths and limitations of its current institutional arrangements for the assurance of quality and standards;
- describe and discuss its intended strategy for the next three years to further enhance practice and remedy any shortcomings it has identified;
- identify disciplines or cross-institutional themes which exemplify good practice and/or illustrate claims made.

Where the institution is in the process of making changes to aspects of its systems or procedures at the time of the audit, the TEC accepts that evidence may not yet be available to illustrate the effectiveness of the new arrangements. Where this is the case, the institution should address in its institutional SER the way in which it is managing the process of change.

6.4 Collaborative provision

Unless the institution and the TEC have agreed that the institution's collaborative provision should be the subject of a separate audit, the institutional SER should include discussion of the institution's approach to assuring the quality of the programmes and securing the standards of the awards it offers collaboratively.

6.5 Documentation linked to the institutional SER

As far as possible, the institutional SER should be a self-standing document: it should not need to be accompanied by other papers. However, the institution may, if it wishes, supplement the

SER with other documents that it believes will assist the audit team in gaining a fuller understanding of the institution.

6.6 Submission

The institution is required to submit the institutional SER and any supporting documentation to the TEC not later than **4 months** before the audit visit.

6.7 Confidentiality

It is likely that the audit report will refer to and include quotations from the institutional SER but, subject to prevailing legislation, the SER itself remains confidential to the TEC and the audit team, although where appropriate it will be made available to specialist advisers who are asked to provide advice to the team, and to subject specialist reviewers undertaking reviews in the institution. The institution is strongly encouraged to involve students in the preparation of the SER and to make the completed document available to them.

7 FIRST AND SECOND CYCLE OF QUALITY AUDIT

The second cycle of quality audit process is intended to combine scrutiny of internal quality assurance system at an institutional level with investigations on how those systems operate at the level of the discipline and to assure the quality of the programme.

While the first cycle of quality audits was mostly comprehensive institutional audits, the second cycle audits will be a continuation of the approach adopted in the first cycle as well as a sampling approach and will explore selected thematic areas in greater depth. While maintaining the fitness for purpose approach, the criteria for the second cycle of quality audits reinforce the diversity and differentiation of objectives across the sector.

7.1 Similarities and differences between the first and the second cycle of Quality Audits

7.1.1 Main similarities:

- an audit cycle of 5 years;
- a fitness for purpose audit against institutional objectives, recognising the specificities of each publicly funded tertiary educational institution;
- an emphasis on continuous quality enhancement;
- audit reports containing commendations and recommendations;
- acknowledgement of the benefit and importance of self review;
- a peer review mechanism.

7.1.2 Main differences:

- ‘close the loop’ on recommendations from the first cycle of audits by verifying the implementation of a sample of the recommendations from the first cycle;
- emphasis on main changes in the quality assurance procedures since the first cycle;
- evaluate possible risk areas at the institution by considering the first cycle audit report, the strategic and operational plan, other public reports (such as auditors’ general,

ombudsmen, etc.) and issues in the media or otherwise in the public domain. These possible risk areas once identified will be used to guide the focus of the audit activity;

- the report may specify that a complete or focused audit should be carried out sooner than the next cyclic date;
- further to the submission of subsequent progress reports by the institution, the TEC may visit the institution to discuss the implementation of urgent recommendations.
- identification of two thematic areas for detailed attention by the audit panel.

8 THE QUALITY AUDIT PROCESS

8.1 Audit Scope

The audit will consider the areas of enhancement in relation to quality and the progress made by the institutions in meeting the recommendations of the first audit report. Furthermore, the quality audit will:

1. assess the institution's performance against its objectives and external references and also assess its performance and outcomes in relation to national and international academic standards.
2. establish 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.
3. determine in conjunction with other mechanisms, to the promotion and enhancement of high quality in teaching and learning;
4. ensure that the awards and qualifications meet national expectations in respect to academic standards and quality;
5. provide a means of securing accountability for the use of public funds received by institutions;
6. evaluate the systems in place to ensure that measures taken to maintain and enhance quality are appropriate and effective; and assess the strength of quality culture.

8.2 Composition of Panel and the Audit Personnel

Auditors are chosen on the basis of their expertise and recent experience to their relevant roles. Audit Panels comprise five auditors including an audit secretary. The audit panels are constituted bearing in mind the scope of the audit including the agreed theme.

The composition of the audit panel will be as follows:

1. A Chairperson (usually a person with high- level experience in quality assurance).

2. Two peers from overseas or locally, one being an academic – usually at the level of Pro-Vice Chancellor or higher (Auditors for the second cycle should have extensive experience in the relevant theme).
3. One auditor from industry and who has many years of experience at the level of senior management; and
4. A TEC staff member.

Note: A Programme Officer will act as Secretary to the audit panel.

8.3 Approval of the Panel Members

This will take place at two levels. In the first instance, the curriculum vitae of the panel members will be sent to the institution concerned, asking them to approve the audit 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.

Further to the response from the institution, the approval of the TEC Board is sought on the basis of recommendation made by the Quality Assurance and Accreditation Division (QAAD) and curriculum vitae supplied. Upon the TEC Board's approval, the audit panel is finalised and same is communicated to the institution and the panel.

The selected auditor should indicate to the TEC that he/she has no conflict of interest with the institution to be audited.

The audit secretary will liaise with the institution's quality assurance representative to sort out preliminary arrangements for the audit.

8.4 Terms of reference for auditors

In order to undertake external quality audit 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.

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 paragraph 2.5, 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:

- i. To make a commitment to act as a quality auditor for the institution identified as per the schedule worked out and participate in the pre-audit workshop and the audit.
- ii. To act within the scope identified in the *Quality Audit Handbook*.
- iii. To be objective at all times, ensuring that they are non-judgemental in their approach; that they are aware of possible personal bias.
- iv. To observe confidentiality.
- v. To give full support to the Chairperson.
- vi. 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-Evaluation Report.
- vii. To identify good practice as well as unhealthy practice and make necessary recommendations.
- viii. To ensure that there is agreement among the members on the conclusions of the panel.
- ix. 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.

8.5 How the process works

The Quality Assurance Committee (QAC) set up by the TEC facilitates the smooth running of the quality audits in the TEI. Prior to the start of the second cycle, institutions will be called upon to tentatively agree on the dates for their respective audit visits.

Twelve months preceding the audit visit, a preliminary meeting is held between the TEC and the institution to clarify the scope of the audit and the interaction between the institution, the TEC and the audit panel. The meeting also ensures that the Self-Evaluation Report (SER) will be well

matched with the process of the audit. The meeting includes opportunities to discuss possible areas for thematic enquiry. The institution and the TEC agree on a timetable for the audit process.

Following the preliminary meeting, drawing up on information received, for second cycle audits, the TEC identifies a range of discipline areas from which the final selection of the themes will be made and same is communicated to the institution.

Once the dates for the audit visit and the thematic areas are confirmed, the institution is expected to report on the preparation for the audit visit on a quarterly basis at the QAC.

The audit panel as approved by the TEC Board is communicated to the institution 6 months before the audit visit. The institution is requested to confirm if it is agreeable to the composition of the audit panel.

The institution is required to submit its initial documentation for the audit not later than 4 months before the audit visit. The initial documentation comprises the institution's SER and other documents that the institution wishes to provide to the audit panel in advance of the audit visit.

On receipt, the documentation submitted by the institution is despatched to the audit panel. On the basis of this information, the team is asked to consult (normally using electronic means) and to select the discipline areas it intends to pursue. If required, the audit panel may seek additional information from the institution through the QAAD.

A briefing visit is held at the institution to finalise on the structure of the audit visit. The visit offers the institution the opportunity to clarify grey areas if any regarding the set up for the audit visit and other support services to be provided. The Commission may call for such documents or information as it may require.

8.6 The Audit Visit

The audit visit extends over five working days, including one half day for the panel to consider any additional documents requested and to finalise its audit trail. The detailed programme for each visit, based around meetings with staff and students is decided by the audit panel. However,

this tentative programme is discussed with the institution to be audited for adjustments, as necessary. Thereafter it is finalised.

During the audit, the panel visits the campus of the institution and speaks to a wide range of people, as relevant to the theme, including students, staff and external stakeholders. If the theme is a discipline area, the panel would expect to speak to relevant discipline experts and groups from the institution. As compared to the first cycle of quality audit, interview sessions may be fewer but more in-depth.

The panel mostly operates as a single group, but may split into subgroups for visits to different areas or campuses or affiliated colleges or for meetings with large groups. The panel may also split into subgroups when there would otherwise be a diverse group of interviewees. For institutional audits, brief visits by individual panel members to parts of the campus may occur in parallel with the ongoing interview sessions or as a group activity.

On the final day of the audit, the audit panel identifies good practice in the management of quality and standards, or in the delivery of teaching and the facilitation of learning in the form of commendations and also agree on possible recommendations.

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 of the institution. Thereafter, the institution is given a copy of the draft report within one month of the visit. This is followed by the final report which is sent within a period of three months.

8.7 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 which are as follows:

- i. Physical arrangements of designated rooms for specific purposes;
- ii. Participation of academic and non-academic staff, as per requirements, with advance notice being given to members concerned; and

- iii. 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.

8.8 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
10.30 - 12.30	Workshop
12.30 - 13.30	Lunch
13.30 - 14.30	Workshop (continued)
14.30 - 15.00	Tea
15.00 - 16.00	Meeting with Institution's Quality Assurance Co-ordinator
	Winding up of Workshop

8.9 Example of Audit Programme (First Cycle)**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
<i>10.15 - 10.30</i>	<i>Review</i>
10.30 - 10.45	Coffee
10.45 - 11.45	Interview with Deans of Faculties/Heads of Schools
<i>11.45 - 12.00</i>	<i>Review</i>
12.00 - 12.45	Interview with Heads of Departments (one from each Faculty)
<i>12.45 - 13.00</i>	<i>Review</i>
13.00 - 14.00	Lunch
14.00 - 14.45	Interview with Lecturers (one from each department)
<i>14.45 - 15.00</i>	<i>Review</i>
15.00 - 15.15	Tea
15.15 - 16.00	Interview with Student Representatives
<i>16.00 - 16.30</i>	<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
<i>09.45 - 10.00</i>	<i>Review</i>
10.00 - 10.15	Coffee
10.15 - 11.00	Interview with Council/Board Members
<i>11.00 - 11.15</i>	<i>Review</i>
11.15 - 12.00	Meeting with Administrative and Support Staff

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
<i>10.15 - 10.30</i>	<i>Review</i>
10.30 - 10.45	Coffee
10.45 - 11.45	Interview with Deans of Faculties/Heads of Schools
<i>11.45 - 12.00</i>	<i>Review</i>
12.00 - 12.45	Interview with Heads of Departments (one from each Faculty)
<i>12.45 - 13.00</i>	<i>Review</i>
13.00 - 14.00	Lunch
14.00 - 14.45	Interview with Lecturers (one from each department)
<i>14.45 - 15.00</i>	<i>Review</i>
15.00 - 15.15	Tea
15.15 - 16.00	Interview with Student Representatives
<i>16.00 - 16.30</i>	<i>Review</i>
	<i>Plan for day 3</i>
	<i>Wind up</i>
Day 3	(General Themes)
09.00 - 09.45	Interview with Members of Senate/Academic Council
<i>09.45 - 10.00</i>	<i>Review</i>
10.00 - 10.15	Coffee
10.15 - 11.00	Interview with Council/Board Members
<i>11.00 - 11.15</i>	<i>Review</i>
11.15 - 12.00	Meeting with Administrative and Support Staff
<i>12.00 - 12.15</i>	<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 4</i>
14.30 - 16.00	Visits
<i>16.00 - 16.30</i>	<i>Review</i>
	<i>Plan for day 4</i>
	<i>Wind up</i>
Day 4	(Thematic areas: Research, Collaboration, etc.)
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 external members/collaborative partners
<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	Meeting with Research Committee
15.00 - 15.15	Tea
<i>15.15 - 16.30</i>	<i>Review</i>
	<i>Plan for day 5</i>
	<i>Wind up</i>
	<i>Private panel meeting to draft conclusions</i>

Day 5 (Thematic areas: Teaching and Learning)

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 Teaching and Learning Committee
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

9 THE AUDIT REPORT

9.1 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 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.

9.2 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.

9.3 Commendations

The audit panel usually makes commendations to the institution when the panel is satisfied that a strategic goal of the institution has been significantly achieved. The institution is then expected to continue achieving the goals in a timely manner.

9.4 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.

10 LOGISTICS AND ADMINISTRATIVE ARRANGEMENTS

10.1 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.

10.2 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.

10.3 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.

10.3.1 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. The TEC also takes care of all inland transportation charges pertaining to the return air trip (e.g. taxi, train,

domestic flights). The auditor is expected to submit a claim for transport to the secretary of the audit.

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.

10.3.2 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.

10.3.3 Honorarium

Auditors are entitled to a daily honorarium of US \$150 for the period of the audit. In the event that overseas auditors spend additional days in Mauritius, through travel constraints (unavailability of flights), they are entitled to a daily allowance of US \$100. However, if their services are required over and above the audit period, they will be given an honorarium of US \$150 per day for each day spent in specific projects assigned to them.

The Chairperson of the audit will be paid a daily honorarium of US \$200 for the period of the audit or for each day spent on specific projects assigned to him/her. For additional days spent in Mauritius, he/she is entitled to a daily allowance of US \$150.

11 INFORMATION

11.1 Information requirements

The institutional audit process depends to a large extent on the availability of information for the audit team to consider. These comprise two sections, the first (Part A) being information which should be available in each institution for internal management information purposes, and the second (Part B) which is routinely published by the institution. The full list of the information sets is provided at Appendix B.

The audit team will routinely require access to all the items in Part B of the information sets. It will also need access to some of the material in Part A, according to the precise nature of its enquiries.

The audit team will also need access to some information additional to that listed at Appendix B.

This additional information includes:

- the institution's self-evaluation report (SER), including SER specific to the discipline audit trails, and supporting documentation;
- information submitted by representatives of students of the institution;
- information from the institution and other sources (such as professional, statutory and regulatory bodies) about the discipline areas selected for trailing, including evidence of student achievement;
- reports on the institution by relevant external bodies within the six years preceding the audit;
- information (written or oral) acquired during and after the briefing visit, and during the audit visit.

The information is limited in all cases to no more than is necessary to inform the audit team's proposed enquiries.

11.2 Submission of information to the TEC

The Executive Director will discuss with the institution the timing and format of submission of information for the audit. Where possible, information should be submitted in an electronic format.

In relation to institutional audit, formal submissions of information by institutions are received and processed in the first instance by the QAAD. The Division supports the key stages of the audit process and, by using standard approaches and techniques, endeavours to provide a consistent approach to the use and handling of information by the TEC.

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APPENDIX A: 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:.....

APPENDIX B: INFORMATION

Part A: Information which should normally be available in all TEIs

1. Institutional context:

- (a) Mission statement.
- (b) Relevant sections of the TEI's corporate plan.
- (c) Statement of quality assurance policies and processes.
- (d) Learning and teaching strategy and periodic reviews of progress.

2. Student admission, progression and completion:

- (a) Student qualifications on entry.
- (b) Range of entrants classified by age, gender, disability and geographical origin.
- (c) Progression and retention data for each year of each course/programme, differentiating between failure and withdrawal.
- (d) Data on student completion.
- (e) Data on qualifications awarded.
- (f) Data on employment/training outcomes from the First Destination Survey.

3. Internal procedures for assuring academic quality and standards:

(a) Programme approval, monitoring and review:

- programme specifications;
- a statement of the respective roles, responsibilities and authority of different bodies;
- key outcomes of programme approval, and annual monitoring and review processes;
- periodic internal reports of major programme reviews;
- reports of periodic internal reviews by departments or faculties;
- accreditation or monitoring reports by professional, statutory or regulatory bodies.

(b) Assessment procedures and outcomes:

- assessment strategies, processes and procedures;
- the range and nature of student work;
- external examiners' reports, analysis of their findings, and the actions taken in response;
- reports of periodic reviews of the appropriateness of assessment methods used.

(c) Student satisfaction, covering the views of students on:

- arrangements for academic and tutorial guidance, support and supervision;
- library services and IT support;
- suitability of accommodation, equipment and facilities for teaching and learning;
- perceptions of the quality of teaching and the range of teaching and learning methods;
- assessment arrangements;
- quality of pastoral support.

(d) Evidence available to teams undertaking TEI's own internal reviews of quality and standards:

- the effectiveness of teaching and learning, in relation to programme aims and curriculum content as they evolve over time;
- the range of teaching methods used;
- the availability and use of specialist equipment and other resources and materials to support teaching and learning;
- staff access to professional development to improve teaching performance, including peer observation and mentoring programmes;
- the use of external benchmarking and other comparators both at home and overseas;
- the involvement of external peers in the review method, their observations, and the action taken in response.

Part B: Information for publication

4. Quantitative data:

- (a) Data on student entry qualifications (including A-levels, access courses).
- (b) Performance indicators and benchmarks published by the Higher Education funding bodies on progression and successful completion for full-time first degree students (separately for progression after the first year, and for all years of the programme).
- (c) Data on class of first degree, by subject area.

5. Qualitative data:

- (a) Summaries of external examiners' reports on each programme.
- (b) A voluntary commentary by the TEI at whole institution level on the findings of external examiners' reports.
- (c) Feedback from recent graduates, disaggregated by institution, collected through a national survey.
- (d) Feedback from current students collected through TEIs' own surveys, undertaken on a more consistent basis than now.
- (e) A summary statement of the institution's learning and teaching strategy.
- (f) Summary statements of the results of, and the actions taken in response to, periodic programme and departmental reviews, to be undertaken at intervals of not more than six years.
- (g) Summaries of employer links, included in item 5(e) above and in programme specifications.

APPENDIX C: ABBREVIATIONS**Abbreviations**

The following abbreviations and definitions are used in this Report. As necessary, they are explained in context.

AUQA	Australian Universities Quality Agency
CQAC.....	Central Quality Assurance Committee
HEQC.....	Higher Education Quality Council, UK
INQAAHE.....	International Network for Quality Assurance Agencies in Higher Education
IT.....	Information Technology
QA.....	Quality Audit
QAA.....	Quality Assurance Agency, UK
QAAD	Quality Assurance and Accreditation Division
QAC	Quality Assurance Committee
SAUVCA.....	South African Universities Vice-Chancellors Association
SER.....	Self-Evaluation Report
TEC	Tertiary Education Commission
TEI.....	Tertiary Education Institution
VC	Vice-Chancellor