

Quality Assurance Procedure

Purpose

1. This Procedure gives effect to the Quality Assurance Policy and outlines the processes required to plan for, undertake, report on and follow up quality assurance and continual improvement processes and compliance reviews.

Scope

2. This Policy applies to all quality assurance activities at GHE. The Policy and Procedures for course and unit reviews are managed under the provisions of the **Course and Unit Review Policy**.

Definitions

3. Definitions for key terms are presented in the Glossary of Terms which may be accessed on the GHE website at <https://www.globalhe.edu.au/policy>

Suite documents

4. This Procedure is linked to the following suite documents:
 - a) Quality Assurance Policy;
 - b) Quality Assurance Procedure - Benchmarking;
 - c) Quality Assurance Procedure- Student Feedback.

Procedure

Accountability

5. Accountability for quality assurance and compliance is distributed at GHE. The Board of Directors is ultimately accountable for the quality and compliance of GHE including GHE's policy suite.
6. The Academic Board, as GHE's peak academic governance body, has been delegated by the Board of Directors to provide expert academic advice to the Board of Directors, to oversee academic risks and to provide academic governance oversight for GHE's academic programs.
7. The Audit and Risk Committee has been delegated by the Board of Directors to oversee and implement GHE's approach to risk management.
8. The CEO, in conjunction with the Academic Director, have delegated management responsibilities for the operationalisation and reporting of organisational and academic quality and compliance issues.
9. The Manager, Quality and Compliance is responsible for monitoring the overarching standards with which GHE is required to comply and for overseeing the implementation of internal quality improvement.
10. It is the responsibility of all members of the GHE community to monitor ongoing compliance with internal policies, procedures and practices within their remit.

Governance monitoring and review

Annual report on the effectiveness of governance

11. The Board of Directors will delegate to the Manager, Quality and Compliance, responsibility for conducting an annual desktop review of the minutes of GHE's governance bodies against each body's terms of reference.
12. The Manager, Quality and Compliance will submit a report to the Board of Directors that provides a summary of coverage against terms of reference and any recommendations arising.

Self-reviews against the Higher Education Standards Framework (Threshold Standards)

13. The Board of Directors and the Academic Board will schedule and coordinate with the assistance of the Manager, Quality and Compliance, a self-review framework for each member to provide an assessment of the Board's oversight, coverage and activities against the requirements of the Standards in Domain 6 of the *Higher Education Standards Framework (Threshold Standards) 2021*.
14. The self-review may take the form of an online survey for each member to complete.
15. The Manager, Quality and Compliance will compile all responses and provide a consolidated summary of findings to the Board of Directors, and the Academic Board for consideration.
16. The Board of Directors and the Academic Board will consider the findings and make any recommendations for improvement to the Board of Directors.

Independent external review of governance

17. An independent review of corporate and academic governance is undertaken at least once every seven years.
18. The review will systematically consider all aspects of corporate and academic governance against Domain 6 of the *Higher Education Standards Framework (Threshold Standards) 2021* in its entirety.
19. The Board of Directors will approve and commission the independent external expert or experts to undertake the review.
20. The external expert/s must be independent of GHE in line with requirements for independence as set by TEQSA's guidance note on corporate governance¹. The expert or experts must have proven experience in the governance of an Australian higher education provider and knowledge of the *Higher Education Standards Framework (Threshold Standards) 2021*.
21. The expert/s will facilitate the review based on the agreed terms of reference and timeframe and prepare a draft report incorporating recommendations.

Internal compliance reviews

22. The Manager Quality and Compliance, with advice from the Audit and Risk Committee, is responsible for managing the rolling cycle of thematic reviews of GHE's operations against the *Higher Education Standards Framework (Threshold Standards) 2021* the *ESOS National Code*, relevant statutory requirements, GHE's policies and procedures and professional/statutory accreditation standards.
23. The review cycle will be designed so that all Domains in the *Higher Education Standards Framework (Threshold Standards) 2021* and all standards in the *ESOS National Code* are audited twice in a seven-year period.

¹ <https://www.teqsa.gov.au/latest-news/publications/guidance-note-corporate-governance>

24. The Manager Quality and Compliance will prepare an annual program of reviews including a detailed coordination plans that sets out the purpose, the scope, the methodology and the desired outcomes of each review for endorsement by the Audit and Risk Committee.
25. Each review will be coordinated by the Manager Quality and Compliance who will communicate the review plan to all relevant stakeholders at GHE including dissemination of review response templates across organisation units with timelines and instructions.
26. The Manager Quality and Compliance will compile the review responses and evidence against the requirements of relevant standards as part of a consolidated review report.
27. In conjunction with the CEO and the Academic Board, the Manager Quality and Compliance will prepare action plans based on evidence gaps or risks as noted in the review reports.
28. The Review Report and the actions plans for each area of GHE will be approved by the CEO.
29. Progress against all action plans will be monitored by the Manager Quality and Compliance and reported to the Board of Directors.
30. GHE will seek external expertise to review, assess and validate the findings and outcomes of the review and action plans and report to the Board of Directors.

Data analysis and monitoring

31. The Manager Quality and Compliance will develop systems for the collection of data and information from student systems across various organisational units across GHE including digital and documentary information including student files;
32. Student data and information will be collected and systematised to provide analysis including of:
 - a) applications to enrolments to inform load and resource planning;
 - b) admissions pathways and criteria including English language tests, Recognition of Prior Learning and basis for admission;
 - c) education agents;
 - d) student outcomes including attrition and progress rates, Grade Point Averages, and completions;
 - e) performance against national benchmarks including Student Experience Survey, and Graduate Outcomes Survey, up to date benchmarks are defined in the **Internal Quality Benchmarks**.
33. The Manager Quality and Compliance will consult with the Academic Director and CEO to finalise analysis and reports before reporting to governance bodies.
34. The data reports will be tabled at meetings of the TLQC, the CDAC (upon request), the Academic Board and the Board of Directors.
35. Data analysis and monitoring will be used by the TLQC and the Academic Board to identify potential academic risks to courses, admission or student to student cohorts.
36. The data analysis will provide GHE with evidence-based analysis which will contribute to decisions relating to student support, agent performance, or other risks to quality.

Communication

37. The outcomes of each review exercise detailed in this Procedure will be made available to students, staff and other stakeholders as appropriate, via one or more of the following communication channels:
 - a) the GHE website;
 - b) electronic communication (email, electronic newsletter etc);
 - c) forums or meetings;
 - d) organisational planning documents.

38. Stakeholders are given the opportunity to provide feedback or to make suggestions for improvement on an ongoing basis.
39. An annual GHE Quality Cycle report will be prepared to bring together the findings from all academic and corporate review activities across GHE to identify any systemic issues and or good performance including but not limited to:
 - a) complaints, grievances and appeals as per cl37 of the **Student Complaints and Grievances Procedure** and cl76 of the **Student Appeals Procedure**;
 - b) the effectiveness of GHE's approach to student wellbeing and support as per cl12 of the **Student Wellbeing, Orientation and Support Policy**;
 - c) analysis of trends and recommendations to address any system student diversity and equity issues as per cl20 of the **Student Diversity and Equity Procedure**;
 - d) an assessment of effectiveness of GHEs quality assurance system

Roles and responsibilities

40. The Board of Directors is responsible for:
 - a) commissioning and approving the recommendations of governance reviews and monitoring activities;
 - b) ongoing monitoring of actions against audit recommendations;
 - c) oversight of risk management on the advice of the Audit and Risk Committee;
 - d) oversight of academic risk on the advice of the Academic Board;
 - e) general oversight of this Procedure.
41. The Academic Board is responsible for:
 - a) overseeing academic benchmarking activities;
 - b) approval of external benchmarking partners (and seeking endorsement of the Board of Directors where necessary).
42. The Chief Executive Officer is responsible for overseeing the internal reviews and approval of action plans.
43. The Manager, Quality and Compliance is responsible for:
 - a) monitoring the overarching standards with which GHE is required to be compliant and internal quality improvement processes for the implementation of this Procedure;
 - b) initiating and managing the self-review processes;
 - c) overseeing internal quality reviews against individual standards;
 - d) monitoring action plans;
 - e) preparation of the annual GHE Quality Cycle Report for presentation to the Academic Board and Board of Directors;
 - f) ensuring compliance with this Procedure;
 - g) ensuring that staff are adequately notified of the existence of this Policy and the related procedures;
 - h) collection of student performance data and contribute to analysis and reporting;
 - i) benchmarking GHE policy and standards with those adopted elsewhere in the tertiary sector;
 - j) the maintenance of records arising from this Procedure.
44. All managers are responsible for monitoring compliance with internal policy, procedure and practice within their remit.
45. All members of staff are responsible for becoming familiar and complying with this Procedure.

Associated information

Related Internal Documents	<p>Quality Assurance Policy Quality Assurance Procedure – Benchmarking Quality Assurance Procedure - Student Feedback Internal Quality Benchmarks Academic Progress Policy Admissions Policy Assessment Policy Course and Unit Review Policy Course Design Policy Enrolment Policy Governance Framework Human Resources Framework Risk Management Policy Student Complaints, Grievances and Appeals Policy Student Disability Policy Student Diversity and Equity Policy Student Wellbeing, Orientation and Support Policy Glossary of Terms</p>
Related Legislation, Standards and Codes	<p><i>Tertiary Education and Quality Standards Agency Act 2011</i> <i>Higher Education Standards Framework (Threshold Standards) 2021</i> TEQSA Guidance Notes: <i>Academic Quality Assurance, Version 2.2,</i> <i>Academic Governance, Version 2.3</i> <i>Education Services for Overseas Students Act 2000</i> <i>National Code of Practice for Providers of Education and Training to Overseas Students 2018</i> <i>Disability Discrimination Act 1992</i> <i>Disability Standards for Education 2005</i></p>
Date Approved	10 July 2020
Date of Effect	10 July 2020
Date of Review	June 2026
Approval Authority	Board of Directors
Policy Custodian	Chief Executive Officer
PinPoint DocID	2808

Change history

Version Control	Version 1.2	
Change Summary	7-Jul-20	V1.0 Draft approved by Board of Directors 10-Jul-20
	9-Nov-20	V1.1 addition of cl 39 and 43(e) to harmonise with referenced policy
	10-Oct-23	V1.2 administrative updates following TEQSA registration

Warning - Document uncontrolled when printed! The current version of this document is maintained on the GHE website at <https://www.globalhe.edu.au/policy>