

# Quality Assurance and Enhancement Procedure

## 1. Purpose and Scope

- 1.1 The Quality Assurance and Enhancement Procedure operationalises the Quality Assurance and Enhancement Policy. It should be read in conjunction with the Quality Assurance and Enhancement Policy.
- 1.2 This procedure applies to:
  - 1.2.1 all non-academic and academic staff of AIAT whether full-time or fractional, continuing, fixed-term, or casual (known as staff in this document); and
  - 1.2.2 members of the Board of Directors, Academic Board and respective committees (known as Board Members in this document).

## 2. Definition

Refer to *Glossary of Terms* for commonly used terms. The definitions below are included for clarity.

**Functional unit** – teams of employees who have similar skills and expertise. For example, marketing, corporate services (finance, IT, HR admin, risk and quality management, board support), student services, academic operations, academic support and services.

**Stakeholders** - students, alumni, staff, industry and professions, employers and government.

## 3. Procedure

- 3.1 The AIAT Quality Assurance Continuous Improvement Cycle and key elements are in the diagram below.

Plan	Implement and Monitor	Review	Improve
<ul style="list-style-type: none"> <li>• Strategic and Operational Planning</li> <li>• Performance measures and operational targets</li> <li>• Development of new courses</li> <li>• Learning and Teaching Plans</li> <li>• Identification and planning to meet student needs</li> <li>• Staff Performance Management and Review objectives</li> <li>• Professional accreditation</li> </ul>	<ul style="list-style-type: none"> <li>• Course delivery</li> <li>• Committees, working parties</li> <li>• Collection of data / information</li> <li>• Staff Performance Management reviews</li> <li>• Quality Audits</li> </ul>	<ul style="list-style-type: none"> <li>• Annual reporting of actual performance against strategic</li> <li>• Review of Performance Management objectives</li> <li>• External Review and Benchmarking</li> <li>• Policies and Procedures review</li> <li>• Moderation / Validation</li> <li>• Stakeholder engagement</li> <li>• Survey results</li> <li>• Complaints and appeals</li> <li>• Support services and administrative processes</li> </ul>	<ul style="list-style-type: none"> <li>• Professional development / staff training</li> <li>• Courses are changed based on review activities</li> <li>• Implementation of Audit/Review recommendations / completion of corrective actions</li> <li>• Operational systems and services improvements based on review outcomes</li> </ul>

Details of key items are in the following steps.

### 3.2 Strategic and Operational Planning

3.2.1 AIAT will undertake annual strategic and operational planning activities.

3.2.2 AIAT strategic and operational plans

- a. are evidence-based;
- b. incorporate a strategic review of performance against key performance indicators;
- c. identify desirable improvements; and
- d. detail implementation of strategic actions.

3.2.3 All plans contain key performance indicators, performance targets and quality improvement strategies.

3.2.4 Board of Directors and sub-committees conduct annual strategic planning that is informed by AIAT's Quality Framework.

3.2.5 Academic Board and functional units conduct an annual operational planning process that is informed by AIAT's Quality Framework.

### 3.3 Reporting

3.3.1 The Board of Directors is regularly informed (at least annually) on progress against Strategic Plan targets and Key Performance Indicators (KPIs).

3.3.2 A schedule for reporting institutional data will be developed by the Risk, Quality and Audit Committee.

### 3.4 Reviews

3.4.1 The Board of Directors will establish and conduct a review process for itself and relevant governance committees.

3.4.2 Academic Board will establish and conduct reviews relevant to its terms of reference.

3.4.3 All functional units will be reviewed every 5 years. These reviews involve self-assessment, benchmarking against comparable units, engagement with stakeholders and external peer review.

3.4.4 Reviews should incorporate relevant comparative or process benchmarking.

### 3.5 Professional accreditation

3.5.1 External assessment of professional courses is conducted through accreditation processes.

### 3.6 Review of Courses and Teaching

3.6.1 Data to be collected for the review of courses and teaching is specified in the Course and Subject Lifecycle: Review, Monitoring and Change Procedure.

3.6.2 Courses are reviewed as per the Course and Subject Lifecycle: Review, Monitoring and Change Policy.

### 3.7 Collection of stakeholder data

3.7.1 Regular internal and external surveys of students, staff and employers are conducted in order to measure satisfaction and to identify areas in need of improvement.

### 3.8 Annual performance reviews

3.8.1 All staff are expected to actively participate in the annual performance review activities as defined in the Staff Performance Policy.

## 4. Roles and responsibilities

4.1 All staff and Board Members are responsible for understanding this policy and procedure.

4.2 All staff are responsible for actively engaging in quality assurance, quality assessment and process improvement activities.

4.3 The Board of Directors is responsible for

4.3.1 ensuring that a quality assurance culture is adopted;

4.3.2 ensuring that compliance with external responsibilities is an inherent part of quality assurance; and

4.3.3 establishing and conducting a review process for itself and relevant governance committees.

4.4 The Academic Board is responsible for annual operational planning for Academic Board activities.

- 4.5 All functional units are responsible for
- 4.5.1 annual operational planning;
  - 4.5.2 undertaking reviews every 5 years.

## 5. Procedure Details

Institution	Australian Institute of Advanced Technologies (AIAT)
Procedure name	Quality Assurance and Enhancement Procedure
Procedure Reference No.	PROC – 39
Procedure Approval	Board of Directors
Procedure Authority	Executive Management Group
Responsible Officer	Director, Quality Assurance and Risk Management
Governance Reference Threshold Standards	HESF 6.2.1b, 6.2.1.c, 6.2.1.f, 6.3.1.a, 6.3.2e, 6.3.2g
Related Documents	<p>Assessment Policy</p> <p>Course and Subject Lifecycle: Proposal and Development Policy</p> <p>Course and Subject Lifecycle: Review, Monitoring and Change Policy</p> <p>Course and Subject Lifecycle: Review, Monitoring and Change Procedure</p> <p>External Referencing and Benchmarking Policy</p> <p>Quality Assurance and Enhancement Policy</p> <p>Staff Performance Policy</p> <p>Student Academic Misconduct Procedure</p> <p>Student Complaints and Appeals Policy</p> <p>Student Survey and Feedback Policy</p>
Related Legislation	<p>Australian Qualifications Framework</p> <p>Higher Education Standards Framework (Threshold Standards) 2021 (HESF)</p> <p>Tertiary Education Quality and Standards Agency Act 2011</p>
References	<p>AIAT has referred and benchmarked with the following institutions and policies during the creation of this policy:</p> <p>Federation University (2020) Quality Framework</p> <p>Griffith University (2021) Framework for Quality Assurance</p> <p>James Cook University (2017) Quality Enhancement Framework</p> <p>Macquarie University (unknown) Quality Assurance Framework Policy, <i>retrieved 5 Oct 2021</i></p>
Date of approval	2 December 2021
Review date	December 2024
Policy Category	Governance

## 6. Document Version Control

Document No	PROC – 39	Last Modify Date	Summary of Changes
Version No	1.0	NA	Initial version approved by Board of Directors
	1.01	28/3/2022	Added definitions and synced with Governance Charter; updated policy number; removed incorrect policies and legislation
Created Date	Dec 2021		