

# Program Review and Continual Improvement Policy

Version number	1
Approved by	Academic Board
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## Purpose

The continual review and improvement of programs is integral to Sydney Institute of Higher Education (SI) delivering high academic standards and a strong learning and teaching experience. It allows programs to integrate up-to-date scholarship and teaching practices and address any problems that may arise during the period of study.

This policy has been created to clearly outline the procedures that SI implements for the periodic review and improvement of all programs. It establishes the frequency of program reviews and the types of data that will be used in each review.

## Scope

The policy applies to all staff involved in the program review and improvement processes.

## Principles

SI is committed to the robust and ongoing monitoring and review of all higher education programs as a key quality assurance mechanism.

Major program reviews informed by program reviewing in accordance with *Compliance Calendar* is designed to maintain high academic standards of all curriculum delivered and supported at SI.

Program reviews ensure that all programs:

- Adhere to the SI's strategic goals and academic values
- Comply with the *Threshold Standards 2015*.
- Meet the relevant AQF level specification requirements
- Provide a pathway to further study
- Be built upon defined learning outcomes
- Demonstrate a process of constructive alignment in the development of learning outcomes and assessment
- Have assessments appropriate for testing student achievement of learning outcomes
- Have specified admissions criteria and pathways that are applied fairly and consistently

- Be intellectually challenging and draw from advanced knowledge appropriate to the learning outcomes
- Provide equivalent quality outcomes to all those who meet entry requirements, regardless of their background or study mode
- Have a strong foundation in theoretical frameworks, current research and scholarship, and trends in relevant industries
- Integrate processes of continual review improvement.

The *Corporate Governance Board* delegates responsibility for academic oversight to the *Academic Board*. The *Academic Board* is thus responsible for ensuring that all program undergo the review process as outlined in this policy.

In the event that a program must be discontinued, student rights and wellbeing will be prioritised. Refer to the *Program Discontinuation Policy*.

The *Academic Board* will only re-approve a program if the program demonstrates that it continues to meet the *Higher Education Standards Framework (HESF) 2015*. For information on the standards that programs must meet for initial approval by the *Academic Board*, see *Program Development and Approval Policy*.

## Procedures

### *Responsibilities*

#### *Academic Board*

The *Academic Board* is responsible for:

- Ensuring that programs meet all standards defined in the *Program Development and Approval Policy* before re-approval
- Overseeing the major and ongoing review of all SI programs
- Approving, amending, or declining any suggested changes to a program
- Communicating decisions as needed
- Overseeing the development and implementation of approved changes to the program
- Ensuring that thorough records are kept through the whole review process

The *Learning and Teaching Committee*, *Program Advisory Committee*, and *Program Monitoring Committee* each provide interim reports, in accordance with the *Compliance Calendar*, containing data and information as outlined below. These reports will be taken into account when conducting program reviews.

#### *Learning and Teaching Committee*

Monitors and reports on the standard and quality of teaching and learning at SI. Advises *Academic Board* on aspects of teaching and learning that can be improved at SI, for example: staffing, library and learning resources, academic and non-academic student support, facilities, policy frameworks for admissions, progression, graduation, and staff professional development. Takes the leading role in redeveloping a new *Learning and Teaching Plan* and assisting with developing SI academic objectives and

benchmarks for achievement.

#### *Program Advisory Committee*

Advises the *Academic Board* on quality of current or proposed curriculum. Seeks input from external academic experts and/or industry representatives as stakeholders. Reports to the *Academic Board* on the continuing compliance of curriculum and program design with the *Threshold Standards 2015*. Obtains external advice on programs undergoing major review or external re-accreditation cycles.

#### *Program Monitoring Committee*

Collects diverse data on the performance of programs and students, providing a major annual report to *Academic Board*, with minor interim reporting each quarter. Reviews data on enrolment rates, progression, completion rates, data on student grievances, appeals and outcomes, quality of teaching survey feedback from students and data for staff professional development and promotion. Decides on student grievance and appeal cases. Works with the *Program Advisory Committee* on benchmarking projects and quality assurance.

#### **Conflicts of interest**

To ensure reviews are carried out as objectively as possible, staff members who were part of the initial development, delivery and assessment of the program are not permitted to participate in the *Academic Board* evaluation of the program.

#### **Major program review**

The *Academic Board* is responsible for conducting a major program review every five years at minimum of every higher education program delivered at SI. New programs undergo a major review after one year of accreditation, and every five years following that.

A key responsibility of the Program Director is to work with two senior academic staff members to gather and synthesise evidence for the *Academic Board* for the purpose of the major review. During this process, they will liaise with the academic management committees as necessary.

The finalised evidence will be included as a report for the *Academic Board* who will review and re-approve the program as appropriate.

These reviews are comprehensive and include an evaluation of:

- The design and content of the program in terms of:
  - Alignment with AQF
  - Alignment with the *Higher Education Standards Framework*
  - Engagement with current and emerging developments in the field
  - Its foundation in relevant theoretical frameworks and rigorous academic research
- The success of program delivery across different modes
- The expected learning outcomes
- The extent of students achieving expected learning outcomes
- The methods of assessment
- The learning and teaching resources provided

- How student needs have changed
- Potential risks to program quality

For a comprehensive list of requirements for initial program approval (and, by extension, re-approval), refer to the *Program Development and Approval Policy*.

To this end, SI summarises and utilises information relating to each unit in the program, such as:

- Benchmarking data (for more information, refer to the *Benchmarking Policy*)
- Input from external academic and industry experts
- Student attrition, progress, and completion rates
- Student experience survey data
- Staff feedback
- Graduate feedback, and information on graduate pathways such as further study and work
- Assessment and grade distributions
- Research on recent changes in the industry or discipline that must be integrated into the program
- Research on best practice in terms of pedagogy

The *Academic Board* must review evidence about the program and provide its review findings in writing. This may include:

- Approval or disapproval of suggestions for improvement
- Adjustment of suggestions for improvement
- Request for further information or re-submission
- Identify resourcing issues
- Define a timeline for implementation of improvement measures

### ***Ongoing program review***

Major program reviews will be informed by ongoing program monitoring and reporting in accordance with the *Compliance Calendar*.

Ongoing reporting additionally allows the early detection of risks to quality and compliance, and the continual improvement of programs outside of the major review cycle. An early major review may also be triggered through the ongoing monitoring process if major problems arise (see “early and targeted reviews” below).

The academic management committees, taking advice from senior academic and support staff, will monitor and submit regular reports to the *Academic Board*.

The *Learning and Teaching Committee* monitors and reports on:

- The standard of quality of teaching and learning
- Staffing
- Library and learning resources
- Academic and non-academic student support needs
- Facilities
- Student admission, progression, and graduation policies

- Staff professional development
- Academic objectives and benchmarks for achievement.

The *Program Advisory Committee* monitors and reports on:

- The quality of current or proposed curriculum
- Input on program content, program design, learning outcomes, and graduate attributes from external academic experts and/or industry representatives as stakeholders
- Compliance and program design with regards to the *2015 Threshold Standards*
- Benchmarking projects and quality assurance.

The *Program Monitoring Committee* monitors and reports on:

- Enrolment rates, progression, completion rates,
- Data on student grievances, appeals and outcomes
- Quality of teaching survey feedback from students
- Benchmarking projects and quality assurance.

Ongoing reporting to the *Academic Board* in the form of reports will include information about the success of improvements made since the previous review and advice for the *Academic Board* about future changes and improvements, including where necessary further investment in infrastructure or resources.

The *Academic Board* will review and consider conclusions and recommendations for future improvements. Where the *Academic Board* finds concerns with program performance, a major program review may be triggered ahead of schedule.

This ongoing monitoring is crucial to improving quality and mitigating future risks to the quality of programs.

### ***Early and targeted reviews***

A negative report may alert the *Academic Board* that a major program review is needed sooner than planned.

The *Academic Board* may also initiate a targeted review in response to a particular issue such as:

- An identified risk or need
- Consistent failure to reach the benchmark in a certain area
- Organisational or environmental change

Additionally, targeted reviews may be initiated by external accreditors or auditors.

### ***Review outcomes***

For all reviews, a final report will be produced summarising its findings.

This report will be submitted to the *Program Monitoring Committee* for finalisation.

Once finalised, the report will be submitted to the *Academic Board*, along with any necessary supporting

materials.

### ***Review by Academic Board***

Members of the *Academic Board* under the *Conflict of Interest Policy* must declare any conflicts of interest present when reviewing a program. The *Academic Board* must complete the major review and present its findings to the responsible Program Director, the Dean, and the *Corporate Governance Board*, within 28 days of receiving all materials required to undertake a major program review.

Outcomes under re-approval can include:

- Approval of advice to make changes to the program
- Amendments to advice for program changes
- Requests to the Program Director for changes to the program
- Requests for further information
- Setting timelines for implementation for program improvements.

The *Academic Board* review will not involve any staff members who were involved in the design, delivery or review of the program. The *Academic Board* must determine its response to the major program review and provide a summary of its findings in writing to the Program Director within a month of receiving it.

Where a program has been re-approved for delivery by the *Academic Board*, the responsible Program Director working with the Dean will lead the process of developing an external reaccreditation application for TEQSA.

### ***Implementing improvements***

The *Academic Board* will determine which recommendations to implement for improvement of the program and develop implementation plans with clear responsibilities and reporting arrangements.

Changes must be implemented in accordance with the limits of authority defined in the *Delegations Register*. As such, the *Academic Board* may be required to submit improvement plans to the *Corporate Governance Board* for approval.

The positions and/or bodies responsible for implementing improvements must provide a report on implementation as per the planned reporting arrangement. This report will be considered part of the ongoing monitoring and reporting on higher education programs at SI.

### ***Unsatisfactory performance***

A major program review may identify serious issues with the program. The *Academic Board* may then recommend:

- Significant alterations and improvements to the program
- More frequent ongoing monitoring of the program moving forward
- The discontinuation of the program

In the event that a program is discontinued, the rights and wellbeing of students will be prioritised. For more information please refer to the *Program Discontinuation Policy*.

### **Record-keeping**

Detailed records of all review processes will be kept, including all reports, supporting material, and action plans determined by Boards and Committees.

See *Data and Records Integrity Policy* for more information.

## **Policy Implementation and Monitoring**

The *Academic Board* is responsible for academic oversight at SI including oversight of quality delivered through programs.

The *Academic Board* will review all periodic reports from relevant committees and staff members.

Additionally, the *Academic Board* will review all relevant student complaints, concerns raised by staff members, and instances of student or staff misconduct on an ongoing basis.

Based on these monitoring activities, The *Academic Board*, in accordance with the *Compliance Calendar*, must provide a report to the *Corporate Governance Board* and ensure that findings are taken into account in planning, quality assurance and improvement processes.

## **Definitions**

**Academic Board:** the governing body responsible for academic matters, including learning and teaching, program approval, workforce planning, academic staff appointments, research and professional development, academic policies and procedures, overseeing student grievances and appeals processes. The *Academic Board* reports to the *Corporate Governance Board*.

**Australian Qualifications Framework (AQF):** National guidelines that regulate Australian post-compulsory education and training qualifications. The framework identifies learning outcomes for each AQF level and qualification, policy requirements, educational and economic objectives, governing and monitoring arrangements.

**Benchmarking:** A process in which comparable services, activities or products are analysed to identify strengths and weaknesses as a learning tool with the aim of improving the product.

**Program Director:** The most senior academic staff member responsible for the delivery of a specific program at SI. The Program Director is responsible for the planning and development of a program, particularly unit curriculum information, and works in conjunction with other senior academic staff.

**Dean:** The most senior member of academic staff at SI who is the principal point of contact between the *Corporate Governance Board*, the *Academic Board*, and academic staff. The Dean is responsible for the operations of the SI.

## Review schedule

This policy will be reviewed by the *Academic Board* every three years.

Version History				
Version number:	Approved by:	Approval date:	Revision notes:	Next review date:
1	Academic Board	5/3/2018		5/3/2021

### ▲ Related Documents

<a href="#">↗ Benchmarking Policy</a>
<a href="#">↗ Program Development and Approval Policy</a>
<a href="#">↗ Program Discontinuation Policy</a>
<a href="#">↗ Data and Records Integrity Policy</a>
<a href="#">↗ Delegations Register</a>
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<a href="#">↗ Corporate Governance Board - Terms of Reference</a>
<a href="#">↗ Learning and Teaching Committee - Terms of Reference</a>
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End of document: "Program Review and Continual Improvement Policy"

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