ASEAN UNIVERSITY NETWORK QUALITY ASSURANCE

GUIDE TO AUN-QA ASSESSMENT AT INSTITUTIONAL LEVEL

VERSION 2.0

ASEAN University Network

AUN-QA
A Touch of Quality

**ASEAN UNIVERSITY NETWORK
QUALITY ASSURANCE:
GUIDE TO AUN-QA ASSESSMENT
AT INSTITUTIONAL LEVEL**

PUBLISHED BY:

Paving Forward: The formation of the squares
represent the holistic image of the institution with
colour blocks as AUN-QA Members.The meaning
behind the design illustrates AUN-QA development
from the Programme Level Assessment to the
Institutional Level Assessment, with an aim to uplift
higher education standard among ASEAN countries.

Guide to AUN-QA Assessment at Institutional Level

Version 2.0

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Contents

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The guidebook is prepared and written by Mr. Johnson Ong Chee Bin, AUN-QA Expert and member of the Technical Team with inputs from the members of AUN-QA Council, Technical Team and Pilot Institutional Assessment Team as listed below.

Foreword

AUN-QA Network is established as the ASEAN quality assurance network in higher education with the responsibility to promote quality assurance in higher education institutions, raise the quality of higher education, and collaborate with both regional and international bodies for the benefit of the ASEAN community.

Since the inception of the AUN-QA assessment at the programme level in 2007, more than 200 study programmes have been assessed by AUN-QA Network and AUN-QA members and associate members have benefited from the assessment. However, the effect in improving the quality of institutional management of education, research, and service is limited at the programme level as the focus of improvement is often incremental and at the micro level.

The institutional approach to quality assurance considers the institution as a whole, including its strategic, systemic and functional quality assurance in education, research and service. Its objectives are to enhance the quality of education, research and service holistically; and to assess the effectiveness of the internal quality assurance system. Thus, institutional quality assessment supports the progressive development goal of AUN-QA Network towards institutional quality assurance in higher education in ASEAN.

The 2nd version of the AUN-QA Framework for Institutional Level is redesigned as a transnational quality assurance framework to support the ASEAN Economic Community (AEC) and to promote cross-border mobility for students and faculty members and internationalisation of higher education. It is aligned with the ASEAN Quality Assurance Framework (AQAF), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015 – Part 1) and Baldrige Performance Excellence Framework (Education -2015/16).

Lastly, I would like to acknowledge and express my sincere gratitude to Mr. Johnson Ong Chee Bin, AUN-QA Expert and Member of the Technical Team, for redesigning the 2nd version of the AUN-QA Framework for Institutional Level and writing the guidebook; and to the members of the AUN-QA Council, Technical Team and Pilot Institutional Assessment Team for their contributions to the development of the 2nd version of the AUN-QA Framework for Institutional Level.

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Preface

This guidebook is the 2nd version of the **Guide to AUN-QA Assessment at Institutional Level**. It documents the new criteria and the process of AUN-QA assessment at institutional level and provides associated resources including checklist and templates in the appendices.

The guidebook is divided into four main sections:

1. **Introduction to AUN-QA Framework.** This section gives an overview of the AUN-QA Framework.

2. **AUN-QA Framework for Institutional Level.** This section describes the AUN-QA Framework and associated criteria for assessment at institutional level.

3. **Institutional QA Assessment.** This section provides a step-by-step guide for conducting the AUN-QA assessment at institutional level.

4. **Appendices.** This section contains checklist and templates.

1. Introduction to AUN-QA Framework

1.1 Quality Assurance (QA) in Higher Education

Quality in higher education is not a simple one-dimensional notion about academic quality. In view of the varied needs and expectations of stakeholders, quality in higher education can be said to be a multi-dimensional concept.

The World Declaration on Higher Education for the Twenty First Century: Vision and Action (October 1998), Article 11, Qualitative Evaluation considers quality in higher education as "a multi-dimensional concept, which should embrace all its functions, and activities; teaching and academic programmes, research and scholarship, staffing, students, buildings, facilities, equipment, services to the community and the academic environment. Internal self-evaluation and external review, conducted openly by independent specialists, if possible with international expertise, are vital for enhancing quality."

To develop, implement, sustain and improve the level of quality in higher education, an institution needs to install a quality assurance system. The Regional Report of Asia and the Pacific (UNESCO, 2003b) defines quality assurance in higher education as "systematic management and assessment procedures to monitor performance of higher education institutions".

1.2 AUN-QA Framework

ASEAN University Network (AUN) recognises the importance of quality in higher education, and the need to develop a holistic quality assurance system to raise academic standards and enhance education, research and service among its member universities. In 1998, it mooted the AUN-QA Network which led to the development of AUN-QA Framework. Since then, the network has been promoting, developing, and implementing quality assurance practices based on an empirical approach where quality assurance practices are tested, evaluated, improved and shared. The evolution of AUN-QA Network and its development in quality assurance are depicted in Figure 1.1.
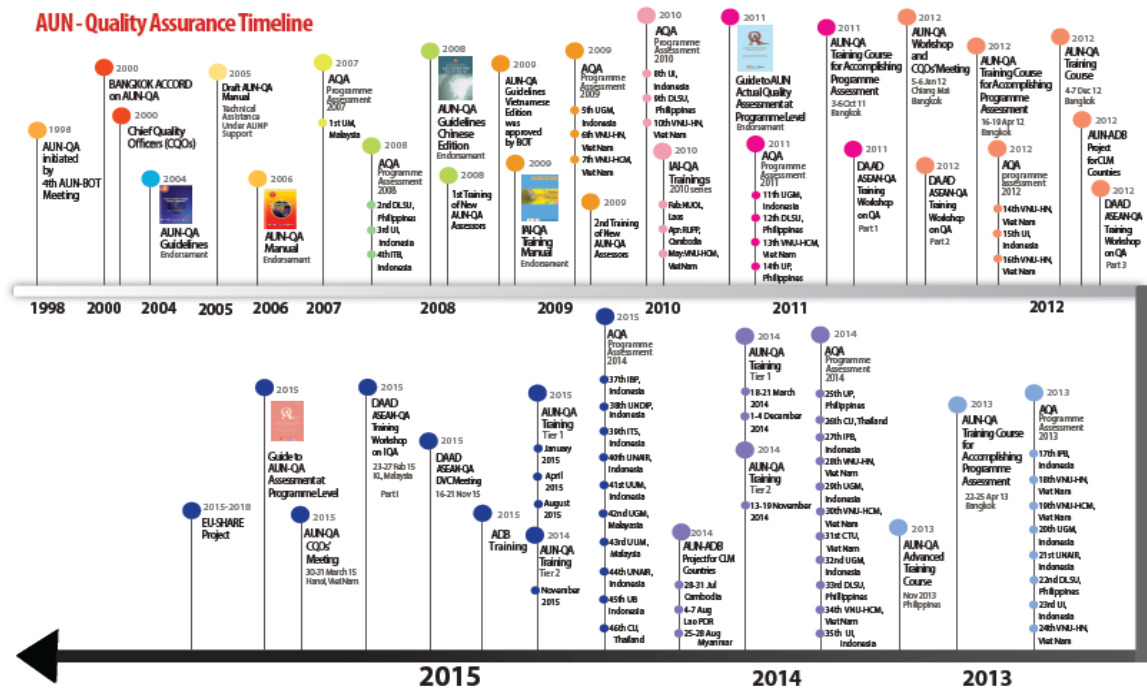
Figure 1.1 – Evolution of AUN-QA Network

The AUN-QA Framework for higher education institution comprises strategic, systemic and functional QA as illustrated in Figure 1.2.
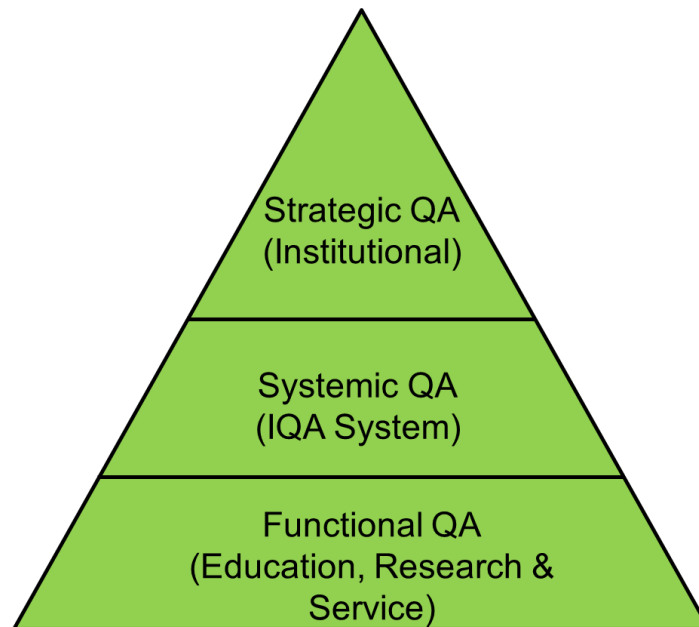
Figure 1.2 – AUN-QA Framework for Higher Education Institution

Based on the AUN-QA Framework, two types of external QA assessment are carried out by AUN-QA Network as follows:

1.2.1 AUN-QA Assessment at Programme Level

The AUN-QA Framework for Programme Level focuses on the quality of educational activities with regard to the following dimensions:

- quality of input
- quality of process
- quality of output

The 3rd version of the AUN-QA Framework for Programme Level assessment is documented in Figure 1.3.
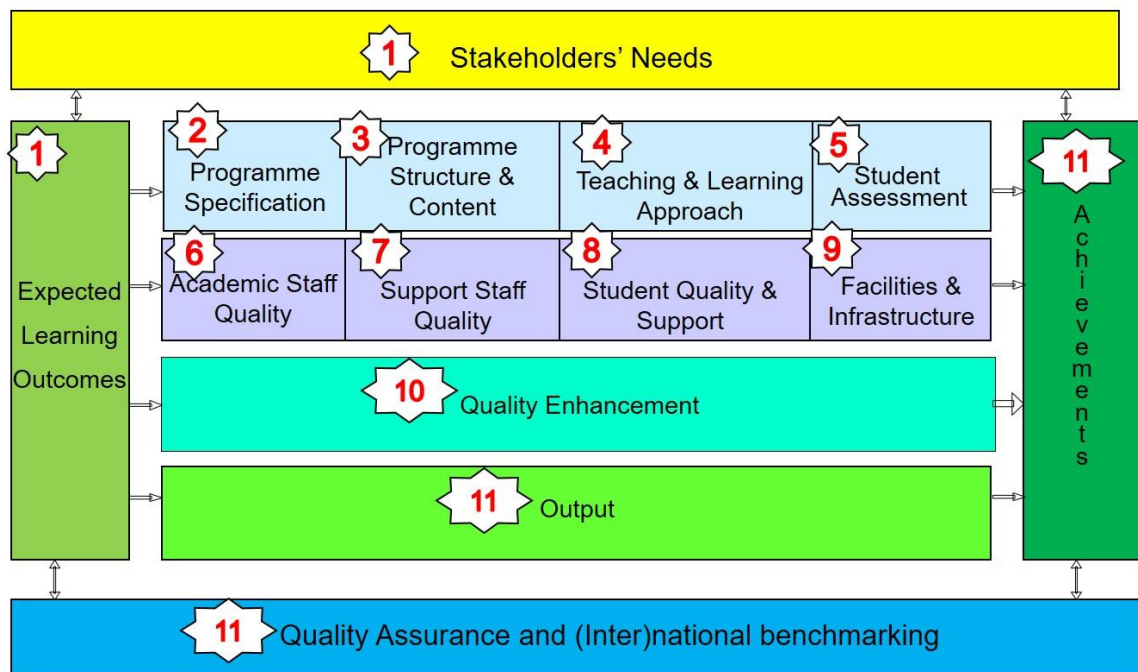
Figure 1.3 – AUN-QA Framework for Programme Level (3rd Version)

1.2.2 AUN-QA Assessment at Institutional Level

The 2nd version of the AUN-QA Framework for Institutional Level is designed as a holistic framework encompassing strategic QA, systemic QA and functional QA as illustrated in Figure 1.4.
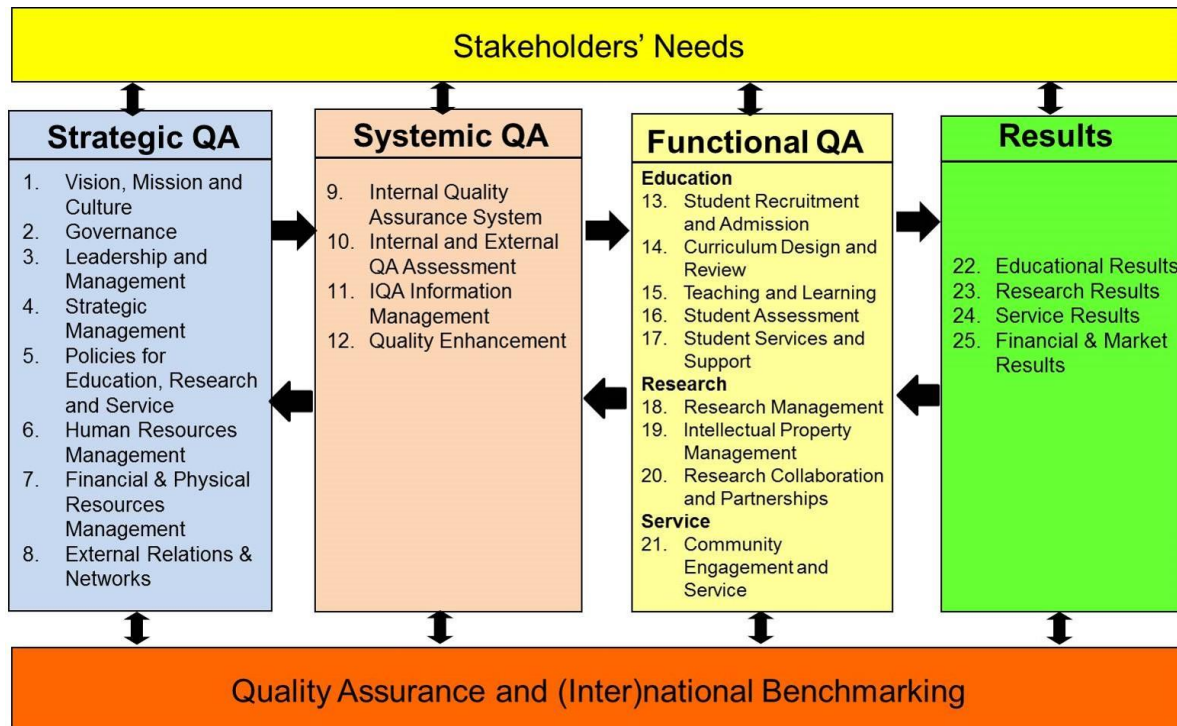
Figure 1.4 – AUN-QA Framework for Institutional Level (2nd Version)

Quality assurance at institutional level starts with the needs of the stakeholders which are translated into the institution's strategic quality assurance system. The strategic QA is cascaded into the systemic QA or internal quality assurance system, and the functional quality assurance in education, research, service and other strategic areas defined by the institution. This in turn drives the results of the institution which serve as feedback to the quality assurance system for continual enhancement and to satisfy stakeholders' needs. Institutions should continuously seek best practices to achieve excellence in education, research and service.

1.3 Alignment of AUN-QA Framework for Institutional Level with Other QA Frameworks.

The 2nd version of the AUN-QA Framework for Institutional Level is redesigned as a transnational quality assurance framework to support the ASEAN Economic Community (AEC) and to promote cross-border mobility for students and faculty members and internationalisation of education. It is aligned with Principe 3 – Internal Quality Assurance of the ASEAN Quality Assurance Framework (AQAF), Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015 – Part 1) and Baldrige Performance Excellence Framework (Education - 2015/16) as illustrated in Figure 1.5.
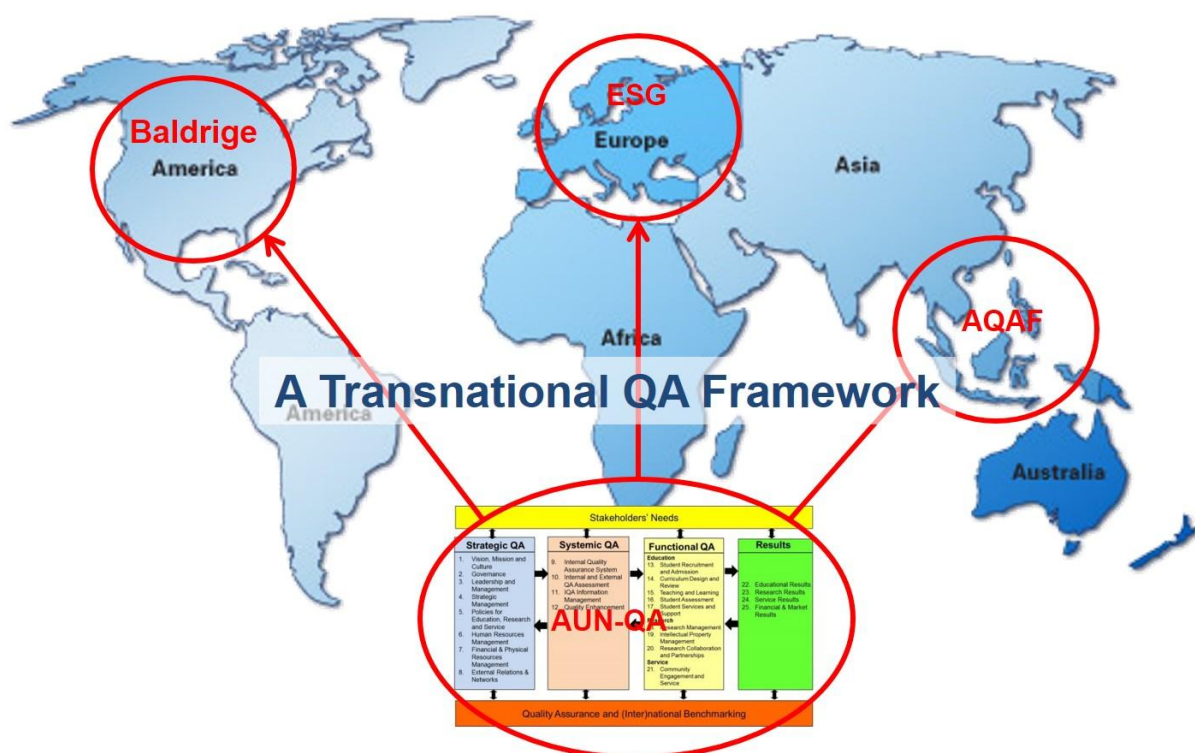
Figure 1.5 - Alignment of AUN-QA Framework for Institutional Level with Other QA Frameworks

The AUN-QA Framework for Institutional Level is aligned with the Principle 3 – Internal Quality Assurance (IQA) of the AQAF. The 10 principles of IQA in AQAF are listed below.

3.1. The institution has primary responsibility for quality.

3.2. Quality assurance promotes the balance between institutional autonomy and accountability.

3.3. Quality assurance is a participatory and cooperative process across all levels incorporating involvement of academic staff, students, and other stakeholders.

3.4. A quality culture underpins all institutional activities including teaching, learning, research, services and management.

3.5. A structured and functional internal quality assurance system with clearly defined responsibilities is established.

3.6. The quality system is promulgated and supported by the top management to ensure effective implementation and sustainability.

3.7. Sufficient resources for establishing and maintaining an effective quality system within the institution should be provided.

3.8. The institution should have formal mechanisms for approval, periodical reviews and monitoring of programmes and awards.

3.9. Quality is regularly monitored and reviewed for purposes of continuous improvement at all levels.

3.10. Relevant and current information about the institution, its programmes, achievements, and quality processes is accessible to public.

Source: ASEAN Quality Assurance Framework (AQAF)

Figure 1.6 shows the relationship of AUN-QA Framework for Institutional Level with Principle 3 – IQA of the AQAF.

P/C	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
2		√	√		√	√												√	√		√	√	√	√	√
3	√	√	√	√	√			√	√	√	√	√	√	√	√		√	√		√	√				
4	√		√	√																					
5							√		√	√	√	√		√	√	√	√	√	√		√				
6	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
7						√	√		√	√	√	√						√	√						
8		√									√		√	√	√	√									
9	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
10	√	√	√		√	√		√	√		√		√	√	√		√	√	√	√	√	√	√	√	√

Figure 1.6 - Relationship of AUN-QA Framework for Institutional Level with Principle 3 – IQA of the AQAF

The AUN-QA Framework for Institutional Level is also aligned with the Part 1 - Standards and Guidelines for Internal Quality Assurance of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015). The 10 standards for internal quality assurance in the Part 1 of ESG 2015 are listed below.

1.1 Policy for quality assurance
Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

1.2 Design and approval of programmes
Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

1.3 Student-centred learning, teaching and assessment
Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

1.4 Student admission, progression, recognition and certification
Institutions should consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression, recognition and certification.

1.5 Teaching staff
Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

1.6 Learning resources and student support
Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

1.7 Information management
Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

1.8 Public information
Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

1.9 On-going monitoring and periodic review of programmes
Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

1.10 Cyclical external quality assurance
Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

Source: Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015)

Figure 1.7 shows the relationship of AUN-QA Framework for Institutional Level with the ESG 2015 (Part 1).

	S/C	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
Part 1 of ESG 2015 (IQA)	1.1	√	√	√	√	√	√	√	√	√	√	√	√						√	√	√	√				
	1.2														√	√	√									
	1.3															√	√					√				
	1.4							√						√							√					
	1.5						√									√			√	√	√	√				
	1.6							√									√									
	1.7											√	√				√						√	√	√	√
	1.8											√		√												
	1.9											√	√		√	√	√	√					√	√	√	√
	1.10										√															

Figure 1.7 - Relationship of AUN-QA Framework for Institutional Level with the ESG 2015 (Part 1).

In addition, the AUN-QA Framework for Institutional Level is also aligned with the Baldrige Performance Excellence Framework (Education – 2015/16). The 7 criteria categories of the Baldrige Performance Excellence Framework are listed below.

Category 1 – Leadership
Category 2 – Strategy
Category 3 – Customers
Category 4 – Measurement, Analysis and Knowledge Management
Category 5 – Workforce
Category 6 – Operations
Category 7 – Results

Source: 2015–2016 Baldrige Performance Excellence Framework (Education)

Figure 1.8 shows the relationship of AUN-QA Framework for Institutional Level with the Baldrige Performance Excellence Framework (Education).

Baldrige Performance Excellence Framework (Education)	C/C	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
	AUN-QA Criteria at Institutional Level																									
	1	√	√	√																						
	2		√		√	√	√	√	√	√									√		√	√				
	3	√		√		√			√				√		√	√	√		√		√	√				
	4	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
	5						√									√		√								
	6							√	√	√	√	√	√	√	√	√	√	√	√	√	√					
	7		√	√			√				√			√	√		√	√	√	√			√	√	√	√

Figure 1.8 - Relationship of AUN-QA Framework for Institutional Level with the Baldrige Performance Excellence Framework (Education).

1.4. Documentation Convention

The documentation convention in this manual is as follows:

The requirements of each AUN-QA criterion are given in a box. To facilitate implementation and assessment of each criterion, the list of statements of each criterion is translated into sub-criterion listed in the checklist. The number in in the sub-criterion corresponds with the number indicated besides the criterion in the box. The sub-criterion is also indicated with the letter "P", "D", "C" or "A" representing each stage of the Plan-Do-Check-Act cycle. Explanation of key concepts of the criterion is given, where applicable. Diagnostic questions and sources of evidence are listed to help practitioners to discover their QA practices. Essential documents that required translation into English are listed with "*". The complete checklist for AUN-QA Assessment at Institutional Level is documented in Appendix A.

2. AUN-QA Framework for Institutional Level

The 2nd version of the AUN-QA Framework for Institutional Level is designed as a holistic framework encompassing 25 criteria in strategic QA, systemic QA and functional QA as illustrated in Figure 2.1.
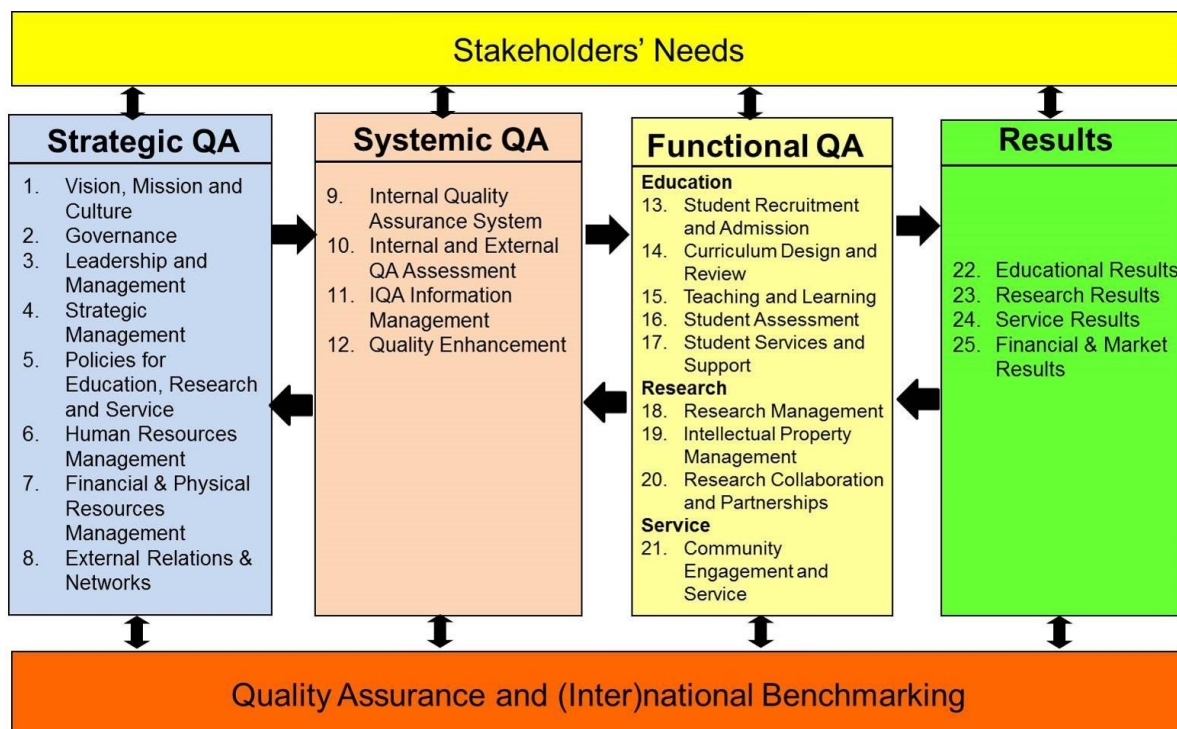
Figure 2.1 – AUN-QA Framework for Institutional Level (2nd Version)

The AUN-QA criteria category, and the number of associated criteria and sub-criteria are listed below.

Criteria Category	No. of Criteria	No. of Sub-Criteria
Strategic QA	8	37
Systemic QA	4	19
Functional QA	9	39
Results	4	16
Total	**25**	**111**

The breakdown of each AUN-QA criteria category, its associated criteria and the number of sub-criterion in each criterion are listed below.

Criteria Category	Strategic QA	
Criterion No.	**Criterion**	**No. of Sub-Criterion**
1	Vision, Mission and Culture	5
2	Governance	4
3	Leadership and Management	4
4	Strategic Management	4
5	Policies for Education, Research and Service	4
6	Human Resources Management	7
7	Financial and Physical Resources Management	5
8	External Relations and Network	4
Total		**37**

Criteria Category	Systemic QA	
Criterion No.	**Criterion**	**No. of Sub-Criterion**
9	Internal Quality Assurance (IQA) System	6
10	Internal and External QA Assessment	4
11	IQA Information System	4
12	Quality Enhancement	5
Total		**19**

Criteria Category		Functional QA	
Criterion No.	**Criterion**		**No. of Sub-Criterion**
Education			
13	Student Recruitment and Admission		5
14	Curriculum Design and Review		5
15	Teaching and Learning		5
16	Student Assessment		4
17	Student Services and Support		4
Research			
18	Research Management		4
19	Intellectual Property Management		4
20	Research Collaboration and Partnerships		4
Service			
21	Community Engagement and Service		4
Total			**39**

Criteria Category	Results	
Criterion No.	Criterion	No. of Sub-Criterion
22	Educational Results	4
23	Research Results	6
24	Service Results	4
25	Financial and Market Results	2
Total		**16**

2.1. Vision, Mission and Culture

AUN-QA Criterion 1

1.1 Senior Leaders ensure that the vision and mission meet stakeholders' needs and to their satisfaction. Stakeholders' needs and satisfaction may be gathered from surveys, dialogues, focus group discussions, statutory and regulatory requirements etc.

1.2 Senior Leaders foster institutional culture including a set of values to align with the vision and mission of the institution. The culture and values promote desirable behaviours of leaders and employees to achieve the strategic goals of the institution.

1.3 The vision, mission and culture are articulated, cascaded and demonstrated for implementation. The vision, mission and culture are articulated in policies, guidelines, programmes and communication media; and cascaded to all levels of staff. Senior leaders and management staff are seen as role models in demonstrating desired behaviours.

1.4 Review of the vision, mission and culture is carried out to meet stakeholders' needs and to their satisfaction. The review may include but not limited to management review meeting, strategic planning, cultural audit, organisational performance, internal and external assessment or audit.

1.5 The vision, mission and culture, and their development processes are improved to meet stakeholders' needs and to their satisfaction.

AUN-QA Criterion 1 – Checklist

1		Vision, Mission and Culture	1	2	3	4	5	6	7
1.1	P	Senior Leaders ensure that the vision and mission meet stakeholders' needs and to their satisfaction.							
1.2	P	Senior Leaders foster culture including a set of values to align with the vision and mission of the institution.							
1.3	D	The vision, mission and culture are articulated, cascaded and demonstrated for implementation.							
1.4	C	Review of the vision, mission and culture is carried out to meet stakeholders' needs and to their satisfaction.							
1.5	A	The vision, mission and culture, and their development processes are improved to meet stakeholders' needs and to their satisfaction							
		Overall opinion							

Explanation

The vision describes the desired future state of the institution. It addresses the direction of the institution and what it wants to be in the future. On the other hand, the mission describes the purpose of the institution and what it intends to achieve for its stakeholders. Culture can be defined as shared values, beliefs, norms and behaviours of a group of people. These three elements should be aligned and provided direction for strategic planning and formulation of strategic goals and policies of the institution.

Diagnostic Questions

- How relevant is the institution's vision and mission to its purpose and existence?
- How stakeholders are engaged and involved in crafting the vision and mission?
- How the shared values are translated into desired behaviours?
- How the institution's vision, mission and culture are reviewed?
- How the vision, mission and culture are communicated to employees?
- What enhancements have been made to refine the vision, mission and culture?
- How senior leaders are personally involved in communicating and demonstrating the shared values of the institution?

Sources of Evidence

- Vision and mission statements*
- Organisational values*
- Strategic plans
- Management review minutes
- Internal and external assessment/audit reports
- Surveys, dialogues, focus group discussions
- Policies, guidelines and programmes

2.2 Governance

AUN-QA Criterion 2

2.1 Governance system including board, council, senate and/or advisory committee is established to set strategic directions given the specific context of the institution, and to ensure accountability, sustainability and transparency as well as to mitigate potential risks. Governance may include but not limited to the approval of strategic direction, financial and resource plans, management controls and risks, compliance with statutory and regulatory requirements, code of conduct and ethics, policies on conflict of interest, disclosure, reporting and audits.

2.2 Decisions from governance bodies are translated into action plans, policies and guidelines to safeguard corporate and academic governance, and in maintaining a governance system that practises good corporate citizenship, protects the interests of stakeholders and fulfils its responsibility to the community and the environment.

2.3 Review of the governance system of the institution is carried out. Such review should be objective, transparent and independent.

2.4 The governance system of the institution is improved for institutional effectiveness and better risk management.

AUN-QA Criterion 2 – Checklist

2		Governance	1	2	3	4	5	6	7
2.1	P	Governance system including board, council, senate and/or advisory committee is established to set strategic directions given the specific context of the institution, and to ensure accountability, sustainability and transparency as well as to mitigate potential risks.							
2.2	D	Decisions from governance bodies are translated into action plans, policies and guidelines for implementation.							
2.3	C	Review of the governance system of the institution is carried out.							
2.4	A	The governance system of the institution is improved for institutional effectiveness and better risk management.							
		Overall opinion							

Explanation

Governance refers to the structures, mechanisms, and processes by which an institution is controlled and directed against balancing the interests of the stakeholders and public accountability. The governance system should:

- have external members and use a full range of expertise required for effective governance of the higher education institution;
- protect the academic integrity and quality of the higher education through academic governance arrangements that provide a clear separation between corporate and academic governance, including a properly constituted academic board and course advisory committees;
- ensure that all delegations (including financial, academic and managerial) are appropriate, documented, observed and regularly reviewed; and
- monitor potential risks of the higher education operations and ensure that the higher education institution has strategies to mitigate these risks.

Diagnostic Questions

- − What are the governance system and structure of the institution?
- − What are the criteria for appointing member to the various governance bodies in the institution?
- − What are the roles and responsibilities of the governance bodies?
- − How corporate and academic governance is sustained?
- − How the governance is responsible to the community and the environment?
- − How the governance system and structure is evaluated?
- − What enhancements have been made to improve governance and mitigate potential risks?

Sources of Evidence

- Plans, policies and guidelines
- Structures of governing bodies*
- Appointment letters of members to governance bodies
- Risk management plan*
- Audit reports of governance system and structure*
- Minutes of meeting

2.3   Leadership and Management

AUN-QA Criterion 3

3.1 Senior Leaders establishes management structure with defined roles and responsibilities, decision-making, communication and reporting to achieve the vision, mission and culture; and strategic goals of the institution. All appointments to management position are approved and made in consideration of institutional and/or regulatory requirements.
3.2 Senior leaders are personally involved in communicating and engaging stakeholders in driving the vision, mission and culture; and strategic goals of the institution.
3.3 Review of the leadership and management structure of the institution is carried out. Review of leadership may include peers, direct reports, board of directors or its equivalent and employees.
3.4 The leadership and management structure of the institution are improved for management effectiveness and to achieve desired levels of organisational performance.

AUN-QA Criterion 3 – Checklist

3		Leadership and Management	1	2	3	4	5	6	7
3.1	P	Senior Leaders establishes management structure with defined roles and responsibilities, decision-making, communication and reporting to achieve the vision, mission and culture; and strategic goals of the institution.							
3.2	D	Senior leaders involve in communicating and engaging stakeholders in driving the vision, mission and culture; and strategic goals of the institution							
3.3	C	Review of the leadership and management structure of the institution is carried out.							
3.4	A	The leadership and management structure of the institution are improved for management effectiveness and to achieve desired levels of organisational performance.							
		Overall opinion							

Explanation

Senior leaders are top management of the institution and those reporting directly to them. Often they consist of the members of the board, chancellor and vice-chancellor, rector or president and those that directly reporting to them. Senior leaders are usually appointed or elected based on institutional and regulatory requirements. They serve as a pivotal role in guiding the organisation in achieving its strategic goals. Organisation chart and job descriptions are used to define management structure, roles and responsibilities, decision making and reporting.

Diagnostic Questions

  - What kind of management structure does the institution have?
  - How the management structure is aligned to the vision, mission and culture; and the strategic goals of the institution?
  - What are the roles and functions of the management and organisational units?
  - How senior leaders are appointed or elected?
  - How do senior leaders engage key stakeholders in driving the vision, mission and strategic goals of the institution?
  - How leadership and management structure are evaluated?
  - What enhancements have been made to improve leadership and management structure?

Sources of Evidence

- Organisation charts*
- Job descriptions*
- Official appointment letters
- Strategic plans
- Vision and mission statements
- Review reports of leadership and management*

2.4. Strategic Management

AUN-QA Criterion 4

4.1 Strategy planning is carried out to fulfill the vison, mission and culture as well as the strategic goals of education, research, service and/or other defined strategic areas. The planning encompasses strategy development, implementation and evaluation, and considers the internal capabilities, external environment and inputs from stakeholders.

4.2 Strategic plan is cascaded and translated into long and short-term action plans for implementation at all levels. The strategic goals are translated into organisational unit and individual goals.

4.3 Key performance indicators and targets are established to measure the performance of strategic goals of the institution. The performance of the institution and its organisational units serves as the input for review.

4.4 The strategic planning process as well as key performance indicators and targets are improved to meet the strategic goals of the institution.

AUN-QA Criterion 4 – Checklist

4		Strategic Management	1	2	3	4	5	6	7
4.1	P	Strategy planning is carried out to fulfill the vison, mission and culture as well as the strategic goals of education, research and service.							
4.2	D	Strategic plan is cascaded and translated into long and short-term action plans for implementation.							
4.3	C	Key performance indicators and targets are established to measure the performance of strategic goals of the institution.							
4.4	A	The strategic planning process as well as key performance indicators and targets are improved to meet the strategic goals of the institution.							
		Overall opinion							

Explanation

The strategic management is an iteration process that encompasses strategy planning, development, implementation and evaluation. Strategic management tools may include but not limited to balanced scorecard, management by objectives, Hoshin Kanri, scenario planning, SWOT analysis, forecasting and projections or other approaches to envision the future.

Strategic plan is the output of strategic planning and it is often conceived based on the institution's external environment and internal capabilities. The plan should address both current and future challenges and risks as well as the vision and mission of the institution.

Diagnostic Questions

- How stakeholders are involved in the strategic management?
- What tools are used in the strategic management?
- How the strategic plans are aligned to the vision, mission and culture of the institution?
- How the long and short-term plans are aligned to the strategic plans?
- What key performance indicators are established to measure and monitor the achievement of strategic goals?
- How the review of strategic management and goals is carried out?
- What enhancements have been made to improve the strategic management and goals of the institution?
- How organisational goals are aligned to the SMART principle (i.e. Specific, Measurable, Achievable, Relevant and Time-bound)?

Sources of Evidence

- Strategic plans*
- Annual plans and workplans*
- Reports on the achievement of key performance indicators/targets*
- Minutes of strategic planning
- Minutes of management and staff meetings
- Audit reports

2.5   Policies for Education, Research and Service

AUN-QA Criterion 5

5.1 System to formulate policies for education, research and service is established. It is essential that stakeholders are consulted, involved or participated in the formulation process. Policies may include but not limited to code of ethics for education, research and service, academic freedom, protection of human subjects and animals, conflict of interest, legal and financial accountability, as well as how the institution contributes to society.

5.2 Process to monitor the compliance of policies is documented, communicated and implemented.

5.3 Review of policies for education, research and service is carried out. Mechanisms may include but not limited to external reviews, internal and external assessment, compliance audits and peer observation. Relevant indicators should be established to measure benefits to and satisfaction of stakeholders.

5.4 Policies for education, research and service are improved for institutional effectiveness and to meet stakeholders' needs and to their satisfaction.

AUN-QA Criterion 5 – Checklist

5		Policies for Education, Research and Service	1	2	3	4	5	6	7
5.1	P	System to formulate policies for education, research and service is established.							
5.2	D	Process to monitor the compliance of policies is documented, communicated and implemented.							
5.3	C	Review of policies for education, research and service is carried out.							
5.4	A	Policies for education, research and service are improved for institutional effectiveness and to meet stakeholders' needs and to their satisfaction							
		Overall opinion							

Explanation

Policy establishes parameters for the decision making rather than specifically stating what should or should not be done. It is often implemented as a procedure or protocol.

Guideline is a statement that helps to determine the course of action. Sometimes, it is written as a rule or instruction that shows how things should be done or should not be done.

Code of ethics states the principles and expectations governing the behaviours of individuals and organisation in the conduct of their work or business.

Academic freedom can be described as the freedom of academic staff, researchers and students to teach, learn, and pursue knowledge and research taking into consideration the interests of all stakeholders.

Education policies and guidelines address the purpose and objectives of education, the methods to achieve them and the tools for measuring their effectiveness. They may include but not limited to educational philosophy, academic freedom, code of ethics, student intake, class size, teaching and learning approach, student assessment, credit system, graduation requirements etc.

Research policies, guidelines and research ethics set the direction and objectives of research, research activities, standards and ethical practices, responsibilities and accountability of research units and staff involving in research activities within the institution. They are the guiding principles for institution to achieve its research goals and aspirations. It is important that they are aligned to the vision and mission of the institution.

The code of ethics for research may include but not limited to:

- Ethical conduct for carrying out research
- Rights and responsibilities of institution and researchers
- Rights of experimental subjects and animals
- Rights and responsibilities of funding agencies
- Confidentiality and security of research data, records and results
- Conflicts of interest

Contribution to society has become an expected role of higher education institutions as they are often regarded as key institutions in nation building and a catalyst in both social and economic development and transformation. The most explicit mission of higher education institutions is the production of knowledge workers and research to benefits mankind and society. Contribution to society from staff, students and alumni may include nation development, economic development, social and cultural development, environmental sustainability, public healthcare, natural disasters and emergencies etc.

Diagnostic Questions

Educational Policies

- How the educational policies are aligned to the vision and mission of the institution?
- How the educational polices are formulated and reviewed? Who were involved?
- How the educational polices are translated into daily activities and practices?
- How the educational policies are articulated and communicated to stakeholders?

Research Policies

- What are the institution's policies, guidelines and code of ethics for research?
- How the research policies, guidelines and ethics are formulated? How stakeholders are involved?
- How the research policies, guidelines and ethics are communicated, implemented and evaluated?
- How the research policies, guidelines and ethics are aligned to the vision and mission of the institution?

<u>Service Policies</u>

- What role does the institution play in the nation building, and social and economic development?
- What are the key contributions? How they relate to the mission of the institution?
- How such contributions are regulated and measured?
- How such contributions benefit the society and the institution?

Sources of Evidence

- Educational policies, guidelines, ethics and academic freedom*
- Faculty handbook
- Student handbook
- Research policies, guidelines and ethics*
- Regulations or laws on research in higher education
- Service policies, guidelines and ethics*
- Review, audit and assessment reports

2.6 Human Resources Management

AUN-QA Criterion 6

6.1 Human resource planning (considering succession, promotion, re-deployment, termination, and retirement) is carried out to fulfill the needs for education, research and service. Both long and short-term human resource planning covering full-time and part-time staff is established to support the vision, mission and strategic goals of the institution.

6.2 Recruitment and selection criteria including ethics and academic freedom for appointment, deployment and promotion are determined and communicated. A system of setting such criteria for all categories of staff is in place.

6.3 Competences including leadership skills of various staff categories are identified and established.

6.4 Training and developmental needs of staff are identified and activities are implemented to fulfill them. Activities may include, but not limited to scholarships, seminars, conferences, workshops, symposiums, online courses or community of practices.

6.5 Performance management system including rewards, recognition and coaching/mentoring schemes is implemented to motivate and support education, research and service.

6.6 Review of the human resource plans, policies, procedures, and schemes is carried out to ensure that they are relevant and up-to-date in supporting education, research and service. Relevant human resource indicators should be used to aid the review.

6.7 The human resource plans, policies, procedures, and schemes are improved to support education, research and service.

AUN-QA Criterion 6 – Checklist

6		Human Resources Management	1	2	3	4	5	6	7
6.1	P	Human resource planning (considering succession, promotion, redeployment, termination, and retirement) is carried out to fulfill the needs for education, research and service.							
6.2	P	Recruitment and selection criteria including ethics and academic freedom for appointment, deployment and promotion are determined and communicated.							
6.3	P	Competences including leadership skills of various staff categories are identified and established.							
6.4	D	Training and developmental needs of staff are identified and activities are implemented to fulfill them.							
6.5	D	Performance management system including rewards, recognition and coaching/mentoring schemes is implemented to motivate and support education, research and service.							
6.6	C	Review of the human resource plans, policies, procedures, and schemes is carried out.							
6.7	A	The human resource plans, policies, procedures, and schemes are improved to support education, research and service.							
		Overall opinion							

Explanation

People are the single most important capital in higher education institution as the quality of the institution depends on the quality of its leaders and employees. It is important that they are recruited based on merits, qualifications and experiences that fit with the job functions and organisational culture.

Competences of leaders and employees should be identified and evaluated, and relevant training and development activities are organised to equip them with relevant knowledge, skills and attitude to carry out their roles effectively.

Motivation is a key consideration in the design and implementation of performance management system, compensation and recognition schemes, and work-life balance. A conducive environment is essential to support education, research and service as well as the well-being of the employees.

Diagnostic Questions

Academic and Support Staff

- What are the competencies and qualifications of staff members?
- How the competencies and expertise of the staff match their roles?
- What challenges do institutions meet or encounter with regards to human resources, such as age distribution, difficulties in filling vacancies or in attracting qualified academic staff? How do institutions handle these challenges?
- How many Master's and PhD degree holders are there among the academic and support staff?
- What policy is pursued with regard to the employment of academic and support staff in education, research and service?
- How mentoring and/or training of junior/new academic and support staff are carried out?
- How satisfied are staff members with their work arrangements?
- How the staff-to-student ratio is determined?
- What is the accountability of academic staff in terms of roles, responsibilities, academic freedom, and professional ethics?
- What indicators are used to measure the quantity and quality of academic and support staff?

<u>Staff Management</u>

- How manpower planning of academic and support staff is carried out?
- What are the recruitment and promotion criteria of academic and support staff?
- What is the performance management system for academic and support staff?
- What is the succession plan for key appointment holders in education and research?
- What is the career development plan for academic and support staff?
- How satisfied are academic and support staff members with the HR policy?
- What is the future development of HR policy for academic and support staff?
- How academic and support staff members are prepared for their tasks?
- What indicators are used to measure the satisfaction level of academic and support staff?

<u>Training and Development</u>

- Who is responsible for academic and support staff training and development activities?
- What are the training and development process and plan? How are training needs identified?
- How the training and development plan reflects the institution and organisational unit mission and objectives?
- What is the system to develop strategic and technical competencies of academic and support staff?
- What indicators are used to measure the training and development activities and their effectiveness?
- What percentage of payroll or budget is allocated for training of academic and support staff?

Sources of Evidence

- Manpower plan*
- Employee profiles in terms of age, gender, qualification, etc.*
- Career and succession plans*
- Recruitment criteria*
- Training needs analysis*
- Training and development plan and budget*
- Peer review and appraisal system*
- Student feedback
- Award and recognition schemes
- Staff workload
- Organisation chart*
- HR policies
- Staff handbook
- Job descriptions
- Employment contracts

2.7　Financial and Physical Resources Management

AUN-QA Criterion 7

7.1 System to plan, implement, audit and improve the financial resources of the institution to support its vision, mission and strategic goals in education, research and service is established and implemented. Key financial procedures and practices relating to education, research and service should meet institutional and regulatory requirements. Financial statements and reports should be accurate and up-to-date.

7.2 System to plan, maintain, evaluate and improve the physical facilities and infrastructure such as teaching and learning facilities, laboratories, equipment and tools etc. to meet the needs of education, research and service is established and implemented. Management and monitoring of the facilities and infrastructure is in place to ensure that they are adequate and relevant.

7.3 System to plan, maintain, audit and improve the IT facilities and infrastructure such as computers, networks, backup, security and access rights to meet the needs of education, research and service is established and implemented. Management and monitoring of the IT facilities and infrastructure is in place to ensure that they are adequate, relevant and up-to-date.

7.4 System to plan, maintain, evaluate and improve the academic resources such as library resources, teaching aids, online databases, etc. to meet the needs of education, research and service is established and implemented. Management and monitoring of the academic resources is in place to ensure that they are adequate, relevant and up-to-date.

7.5 System to plan, implement, evaluate and improve the environment, health and safety and access to people of special needs is established and implemented. The environment, health and safety policies and practices should meet institutional and regulatory requirements. Conducive environment for teaching and learning as well as promoting the well-being of staff and students are essential.

AUN-QA Criterion 7 – Checklist

7		Financial and Physical Resources Management	1	2	3	4	5	6	7
7.1	P D C A	System to plan, implement, audit and improve the financial resources of the institution to support its vision, mission and strategic goals in education, research and service is established and implemented.							
7.2	P D C A	System to plan, maintain, evaluate and improve the physical facilities and infrastructure such as teaching and learning facilities, laboratories, equipment and tools etc. to meet the needs of education, research and service is established and implemented.							
7.3	P D C A	System to plan, maintain, audit and improve the IT facilities and infrastructure such as computers, networks, backup, security and access rights to meet the needs of education, research and service is established and implemented.							
7.4	P D C A	System to plan, maintain, evaluate and improve the academic resources such as library resources, teaching aids, online databases, etc. to meet the needs of education, research and service is established and implemented.							
7.5	P D C A	System to plan, implement, evaluate and improve the environment, health and safety and access to people of special needs is established and implemented.							
		Overall opinion							

Explanation

The financial and physical resources are the hardware of the higher education institution. Providing adequate, relevant and up-to-date resources is essential to support the strategic goals of education, research and service as well as to provide a conducive and safe environment for teaching, learning and research. Effective management and monitoring of these resources will ensure that the needs of stakeholders are well-catered for and that the resources are well maintained and effectively utilised.

Diagnostic Questions

<u>Financial Resources</u>

- How relevant are the financial policies, procedures and practices in meeting the strategic goals of the institution?
- How strategic planning and financial planning are aligned?
- How budgets are allocated for education, research and service?
- Where are the sources of funding for education, research and service come from?
- How financial authority is delegated?
- Who appoints internal and external auditors to carry out financial audits?

<u>Physical Facilities and Infrastructure</u>

- How the facilities (such as lecture-halls, seminar rooms, laboratories, reading rooms, and computer rooms) meet the needs of students and staff?
- How sufficient are the laboratory facilities and tools?
- How the laboratories meet the relevant regulatory requirements?
- How sufficient are the teaching aids and tools available to students and staff?
- How facilities and infrastructure are maintained?
- How up-to-date are the development and upgrading plans?

<u>IT Facilities and Infrastructure</u>

- How sufficient are the hardware and software available to meet the needs of education and research?
- What is the policy for replacing or renewing hardware and software?
- How the IT facilities and infrastructure are maintained?
- How up-to-date are the IT development and upgrading plans?
- How the wifi coverage and bandwidth adequate meet the demands of students and staff?
- How secured are the computer systems and networks?
- How computers and networks are protected from viruses and hacking?

<u>Academic Resources</u>

- How the library is equipped for education and research?
- How accessible and reachable is the library (location, opening hours)?
- What is the budget for purchasing and subscripting collections, online databases and journals?
- What library services are provided to support education and research?

<u>Environment, Health and Safety</u>

- − How environment, health and safety policies and practices protect the safety and lives of staff and students?
- − How committed is the institution in protecting the environment?
- − How staff and students are involved in the fire and safety, and emergency drills?
- − How facilities for people with special needs are determined and funded?

Sources of Evidence

- Financial reports and statements*
- Budgets of organisational units*
- Financial documents and records
- Internal and external audit reports
- Campus development and upgrading plans*
- List of facilities, equipment, computer hardware and software, etc.*
- Facilities booking, utilisation rates, downtime/uptime, operating hours*
- Maintenance plans and records
- Safety, health and environmental policies*
- Emergency plans
- Student and staff feedback
- Budgets for facilities and infrastructure
- Library collections and online database/journal subscriptions*

2.8 External Relations and Networks

AUN-QA Criterion 8

8.1 Plan for external relations, networks and partnerships is established to achieve the vision, mission and strategic goals of the institution. Partners and networks may include but not limited to business and industry, universities, professional bodies, alumni, government and non-government organisations.

8.2 Policies, procedures and agreements to foster external relations, networks and partnerships are implemented. Memorandum of Understanding (MoU), partnership contracts or agreements, collaboration partnerships, charters etc. are common mechanisms used to establish and maintain partnership or relationship. Contract or agreement should include critical details such as period of partnership, terms and conditions and mutual expectations.

8.3 Review of the external relations, networks and partnerships is carried out.

8.4 External relations, networks and partnerships are improved to achieve the vision, mission and strategic goals of the institution.

AUN-QA Criterion 8 – Checklist

8		External Relations and Networks	1	2	3	4	5	6	7
8.1	P	Plan for external relations, networks and partnerships is established to achieve the vision, mission and strategic goals of the institution.							
8.2	D	Policies, procedures and agreements to foster external relations, networks and partnerships are implemented.							
8.3	C	Review of the external relations, networks and partnerships is carried out.							
8.4	A	External relations, networks and partnerships are improved to achieve the vision, mission and strategic goals of the institution.							
		Overall opinion							

Explanation

External relations, networks and partnerships are extension of the higher education institution. They are resources and capabilities that institution can take advantage of and value-add to the organisation. These establishments should help institution to achieve its strategic goals and bring benefits to stakeholders. Benefits may include enriching students' learning experiences, increasing student mobility, credit transfers, improving systems and processes, cross-border education, collaborative or joint education and research etc.

Diagnostic Questions

- How the goal of establishing external relationship or partnership is aligned with the institution's vision and mission?
- What benefits can the partnership and network bring to its stakeholders?
- How partners and networks are chosen?
- What criteria are used to identify, select, evaluate and renew partnership?

Sources of Evidence

- Memorandum of Understanding (MoU)
- Partnership contracts/agreements
- Letter of Intent*
- Alumni charters*

2.9   Internal Quality Assurance (IQA) System

AUN-QA Criterion 9

9.1 *Structures, roles and responsibilities and accountability of IQA are established to meet the strategic goals and quality assurance of the institution. The quality assurance unit(s) and its affiliations should guide the institution in raising the quality of education, research and service as well as other defined strategic areas.*

9.2 *Strategic QA plan encompassing strategies, policies, stakeholders' engagement and activities as well as QA promotion and training is established to meet the strategic goals and quality assurance of the institution. To raise commitment, appropriate ways to engage the stakeholders in developing the QA plan should be carried out.*

9.3 *The strategic QA plan is cascaded and translated into long and short-term action plans for implementation. The strategic QA plan is translated into strategic goals of the QA unit(s) and its affiliations.*

9.4 *System to document, review and communicate QA policies, systems, processes and procedures is implemented. Documentation should be systematically filed, stored, archived and updated. Communication to stakeholders should be planned and tailored to its purpose.*

9.5 *Key performance indicators and targets are established to measure the performance of the quality assurance in the institution. Results of performance indicators should be released to relevant stakeholders in a timely manner for improvement.*

9.6 *The strategic QA planning process and key performance indicators and targets are improved to meet the strategic goals and quality assurance of the institution.*

AUN-QA Criterion 9 – Checklist

9		Internal Quality Assurance (IQA) System	1	2	3	4	5	6	7
9.1	**P**	Structures, roles and responsibilities and accountability of IQA are established to meet the strategic goals and quality assurance of the institution.							
9.2	**P**	Strategic QA plan encompassing strategies, policies, stakeholders' engagement and activities as well as QA promotion and training is established to meet the strategic goals and quality assurance of the institution.							
9.3	**D**	The strategic QA plan is cascaded and translated into long and short-term action plans for implementation.							
9.4	**D**	System to document, review and communicate QA policies, systems, processes and procedures is implemented.							
9.5	**C**	Key performance indicators and targets are established to measure the performance of the quality assurance in the institution.							
9.6	**A**	The strategic QA planning process and key performance indicators and targets are improved to meet the strategic goals and quality assurance of the institution.							
		Overall opinion							

Explanation

The institution has a primary responsibility for quality in education, research and service. It is essential that each institution establishes a structured IQA system that makes it effective in monitoring, evaluating and improving the quality of education, research and service continually. The organisation of the IQA system can be centralised, decentralised or a hybrid of both. There is no one model or system that can fit all institutions. Each institution has to build its own system that fits best to its history, vision and mission, culture, strategic goals, development needs, and institutional and regulatory requirements. The IQA system should also complement the external quality assurance system and context where the institution operates in.

Diagnostic Questions

- What is the institution's policy on IQA?
- What is the institution's strategy on quality of education, research and service?
- How the IQA system is organised?
- What are the roles and responsibilities of QA units, faculties, departments for assuring quality?
- How stakeholders are engaged and involved in QA?
- How the IQA system is implemented, evaluated and improved?
- How the IQA system complements the external quality assurance system?
- How top management is committed in supporting the IQA system?
- How the IQA system is aligned to the vision, mission and culture of the institution?
- Who is responsible for the awareness and training of QA?
- What is the plan for QA awareness and training?
- What QA competences are needed for staff to carry out their QA roles effectively?
- How are training needs in QA identified?
- How the QA training plan reflects the institution and QA unit mission and objectives?
- What indicators are used to measure the QA awareness and training activities and their effectiveness?

Sources of Evidence

- Strategic QA plans and goals*
- Annual plan or workplan of QA unit(s)*
- Internal and external QA assessment/audit reports
- QA manual, policies and procedures
- Organisation chart of QA unit(s)*
- Job description of QA personnel
- Minutes of meeting
- Reports on performance of IQA system
- QA events
- Regulations or laws on quality assurance in higher education
- QA awareness and training plans*
- Training needs analysis*
- Induction and training programmes
- Training records and attendance
- Training indicators

2.10   Internal and External QA Assessment

AUN-QA Criterion 10

10.1 *Plan for internal and external QA assessment is established to meet institutional and regulatory requirements. Internal and external assessment is necessary to ensure that policies, systems, processes and procedures remain relevant and effective in meeting the strategic goals of the institution.*

10.2 *The internal and external QA assessment is regularly carried out by trained and independent staff and/or experts. Criteria to appoint internal assessors and assigned areas for assessment should be established to ensure that assessment is objective, evidence-based and independent.*

10.3 *The findings and results of the internal and external QA assessment are reviewed. Strengths and weaknesses of the QA system should be identified and analysed.*

10.4 *The internal and external QA assessment processes are improved to meet the strategic goals of the institution.*

AUN-QA Criterion 10 – Checklist

10		Internal and External QA Assessment	1	2	3	4	5	6	7
10.1	P	Plan for internal and external QA assessment is established.							
10.2	D	The internal and external QA assessment is regularly carried out by trained and independent staff and/or experts.							
10.3	C	The findings and results of the internal and external QA assessment are reviewed.							
10.4	A	The internal and external QA assessment processes are improved to meet the strategic goals of the institution.							
		Overall opinion							

Explanation

Internal assessment is often carried out by the institution for the purpose of improving the effectiveness of the QA system. It can be defined as the process of systematic gathering, quantifying, and using of information in view of judging the QA effectiveness of an education institution or programme.

External assessment is the process by which a third party evaluates the quality of an education institution or programme in order to formally recognise it as having met certain pre-determined minimal criteria or standards. It is usually termed as "accreditation" or "certification". It is sometimes conducted to meet the regulatory requirements of the country the institution operates in.

Internal and external assessment provides the institution with the opportunity to:

- review strategic plan and goals
- promote and improve quality
- Gather voices of stakeholders
- learn and share best practices
- seek recognition

The assessment process should adhere to the following principles:

- Independence – the basis for the impartiality, integrity and objectivity of the assessment conclusions; and
- Evidence-based – the rational basis for reaching reliable and truthful assessment conclusions in a systematic process. Evidence should be based on records and statements of fact or information which are relevant to the assessment criteria or standards.

Diagnostic Questions

- What is the policy on QA assessment and assessment process?
- How internal assessors are appointed and trained?
- How internal assessors are assigned?
- How the areas of QA assessment are determined?
- How assessment findings and results are documented and reported?
- What is being done to the assessment findings and results?

Sources of Evidence

- Policy and procedure on QA assessment*
- Internal and external assessment plans*
- Internal and external assessment reports
- Appointment letters of internal assessors
- Training records of internal assessors
- Appointment of external quality assurance agency
- Preventive and corrective action plans

2.11 IQA Information Management

AUN-QA Criterion 11

11.1 *Plan for IQA information management including collection, processing and reporting data and information to and from stakeholders in supporting education, research and service is established. An institution may collect information and generate knowledge through various mechanisms including but not limited to surveys, dialogues, focus group discussions, tracer studies, research, market analysis, competitive analysis and benchmarking.*

11.2 *IQA information including data analytics is relevant, accurate and readily available to stakeholders in a timely manner that aid decision making while assuring integrity, confidentiality and security of them. Information about the institution, awards, programmes and courses, achievements and quality assurance etc. should be accurate, relevant and up-to-date and readily available to stakeholders. Data analytics may include but not limited to trend analysis, projections, comparisons, cause-and-effect analysis, and correlation and variance analysis. The confidentiality and security policy and procedures should be communicated to all relevant staff and external parties such as vendors, suppliers, partners etc.*

11.3 *Review of IQA information management system, and the quantity and quality of data and information as well as the integrity, confidentiality and security of them is carried out to ensure that they are relevant and aid decision making.*

11.4 *The management of IQA information and their plans, processes and policies are improved to support education, research and service.*

AUN-QA Criterion 11 – Checklist

11		IQA Information Management	1	2	3	4	5	6	7
11.1	P	Plan for IQA information management including collection, processing and reporting data and information to and from stakeholders in supporting education, research and service is established.							
11.2	D	IQA information including data analytics is relevant, accurate and readily available to stakeholders in a timely manner that aid decision making while assuring integrity, confidentiality and security of them.							
11.3	C	Review of IQA information management system, and the quantity and quality of data and information as well as the integrity, confidentiality and security of them is carried out							
11.4	A	The management of IQA information and their plans, processes and policies are improved to support education, research and service.							
		Overall opinion							

Explanation

IQA Information management system is the "brain" of the institution where knowledge is generated from the data and information collected to aid learning, improvement, planning and decision making.

As the old saying goes "garbage in, garbage out". The quality of knowledge generated by the institution depends highly on the quality of data and information collected. A robust system to ensure that all data and information are accurate, reliable and relevant is critical. As personal and sensitive data and information of stakeholders are collected, processed and stored, it is the responsibility of the institution to ensure the confidentiality and security of them.

Data analytics and knowledge management are the twin pillars of knowledge creation. Data analytics can be described as the systematic process of transforming information into knowledge, and knowledge management is the process of capturing, distributing and using it to help the institution to achieve its strategic goals.

Diagnostic Questions

- What mechanisms are used to collect data and information from stakeholders?
- How effective are the mechanisms for collecting data and information?
- How data and information are organised and stored?
- How data, information and knowledge are used for decision making, learning, improvement and planning?
- How the confidentiality and security of data is assured?
- How information is available and accessible in a timely and secured manner?
- How risks in the IQA information management system are mitigated?
- How reliable and effective is the IT backup system?

Sources of Evidence

- IQA Information management plans*
- Data records
- Data structure
- Data warehouse
- Confidentiality and security policy
- Data analytics
- Management and operational reports

2.12   Quality Enhancement

AUN-QA Criterion 12

12.1 Plan to continually enhance institutional quality including policies, systems, processes, procedures and resources to seek best practices in education, research and service is established. The plan demonstrates the institution's commitment and its contribution to the holistic development of quality assurance.

12.2 Criteria for selecting comparative and benchmarking information and partners to improve performance are established. The partners may include educational and non-educational establishments with the singular purpose of seeking continual improvement and organisational learning.

12.3 Comparative and benchmarking information to enhance QA practices and encourage innovation is carried out for key processes and performance results in education, research and service identified by the institution.

12.4 Review of the process for selection and use of comparative and benchmarking information is carried out to ensure that they remain relevant and effective.

12.5 The process for selection and use of comparative and benchmarking

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		information is improved to continually seek best practices in education, research and service.

AUN-QA Criterion 12 – Checklist

12		Quality Enhancement	1	2	3	4	5	6	7
12.1	P	Plan to continually enhance institutional quality including policies, systems, processes, procedures and resources to seek best practices in education, research and service is established.							
12.2	P	Criteria for selecting comparative and benchmarking information and partners to improve performance are established.							
12.3	D	Comparative and benchmarking information to enhance QA practices and encourage innovation is carried out.							
12.4	C	Review of the process for selection and use of comparative and benchmarking information is carried out.							
12.5	A	The process for selection and use of comparative and benchmarking information is improved to continually seek best practices in education, research and service							
		Overall opinion							

Explanation

Quality enhancement is a planned strategic initiative that is implemented for the purpose of quality assurance and improving the quality of the institution and its constituents. It is the continuous search for improvement and seeking best practices.

The confidence and trust of stakeholders and general public in higher education is established and maintained through an effective quality assurance system and enhancement activities which ensure that the IQA system is robust, regularly monitored and periodically reviewed, thereby securing its continuing relevance and effectiveness.

Diagnostic Questions

- How the QA enhancement plan is aligned to the strategic QA plan?
- How benchmarking partners are selected?
- What is the benchmarking process?
- How organisational leaning in benchmarking is documented and shared?
- How benchmarking process and the criteria for selecting benchmarking partners are reviewed?
- What enhancements have been made to improve the benchmarking process?

Sources of Evidence

- QA enhancement plans*
- Strategic QA plans*
- Benchmarking criteria for partners
- Benchmarking reports
- Benchmarking process*
- Performance reports

2.13   Student Recruitment and Admission

AUN-QA Criterion 13

13.1 *Plans, policies and communication for student admission to various programmes are established. Channels to disseminate such information may include but not limited to websites, social media, outreach activities, publications, press media, emails, and marketing collaterals.*

13.2 *Criteria to select quality students for each programme are established. Criteria may include but not limited to admission tests, national examination, past academic performance, language proficiency, and regulatory requirements.*

13.3 *Procedures to monitor the implementation of the recruitment and admission of students are in place.*

13.4 *Measures are established to monitor student recruitment and admission. Measures may include but not limited to enrolment figures, cut-off points, results of admission tests, trends, targets, ratios, correlation analysis and GPA.*

13.5 *Student recruitment and admission are improved to ensure that they remain relevant and effective.*

AUN-QA Criterion 13 – Checklist

13		Student Recruitment and Admission	1	2	3	4	5	6	7
13.1	P	Plans, policies and communication for student admission to various programmes are established.							
13.2	P	Criteria to select quality students for each programme are established.							
13.3	D	Procedures to monitor the implementation of the recruitment and admission of students are in place.							
13.4	C	Measures are established to monitor student recruitment and admission.							
13.5	A	Student recruitment and admission are improved to ensure that they remain relevant and effective							
		Overall opinion							

Explanation

The quality of the output depends a lot on the quality of the input. This means that the quality of the entering students is a key factor in determining the quality of graduates which depends on the selection criteria and process.

Selection criteria of students should be reliable and valid. Validity is about the accuracy in which a test, interview, and so on measures what it intends to measure. For example, criteria that are valid would allow institution to make prediction about the performance of the students (quality) based on the score of an admission test (predictor).

Diagnostic Questions

- How student intakes are monitored and analysed?
- How students are selected? Who selects them?
- What criteria are used for admitting local and foreign students?
- What policy is pursued with regard to the intake of local and foreign students?
- What measures are taken to influence the quality and the size of the intake?
- How the student selection criteria are related to the quality of students admitted?

Sources of Evidence

- Student selection process and criteria*
- Trend of student intakes
- Student handbook
- Publications such as brochures, pamphlets, prospectus etc.
- Press media
- Social media
- Marketing collaterals

2.14 Curriculum Design and Review

AUN-QA Criterion 14

14.1 *System to design, develop, monitor, review and approve curricula for all study programmes and courses with input and feedback from stakeholders is established to ensure that they remain relevant and up-to-date.*

14.2 *System to formulate and align expected learning outcomes of the programme and its courses to the stakeholders' needs is established. Expected learning outcomes should be formulated systematically based on an established educational taxonomy.*

14.3 *Syllabi and delivery plans of the programme and its courses are documented, communicated and delivered based on the expected learning outcomes. Programme and course specifications are used to document how the expected learning outcomes would be achieved.*

14.4 *Review of the curriculum design and review process, and curricula is carried out. The review may include but not limited to internal and external review panels, internal and external assessment, and benchmarking.*

14.5 *The curriculum design and review process, and curricula are improved to ensure that they remain relevant and up-to-date to meet the changing needs of the stakeholders.*

AUN-QA Criterion 14 – Checklist

14		Curriculum Design and Review	1	2	3	4	5	6	7
14.1	P	System to design, develop, monitor, review and approve curricula for all study programmes and courses with input and feedback from stakeholders is established.							
14.2	P	System to formulate and align expected learning outcomes of the programme and its courses to the stakeholders' needs is established.							
14.3	D	Syllabi and delivery plans of the programme and its courses are documented, communicated and delivered based on the expected learning outcomes.							
14.4	C	Review of the curriculum design and review process, and curricula is carried out.							
14.5	A	The curriculum design and review process, and curricula are improved to ensure that they remain relevant and up-to-date to meet the changing needs of the stakeholders.							
		Overall opinion							

Explanation

Curriculum design and review process consists of three phases – design, development and review.

The design phase may include but not limited to the following activities :

- Determining stakeholders' needs
- Formulating expected learning outcomes of the programme
- Setting student admission requirements
- Determining programme structure and content
- Setting approach to teaching and learning
- Setting approach to student assessment
- Determining subject matter experts and resources
- Aligning to national qualification framework and subject benchmarks
- Marketing and promotion of programme

The development phase may include but not limited to the following activities :

- Formulating expected learning outcomes of the course and lessons
- Developing course syllabus and delivery plan
- Determining teaching and learning methods
- Setting student assessment

The review phase may include but not limited to the following activities :

- Reviewing the needs of the stakeholders
- Evaluating the achievement of the expected learning outcomes
- Evaluating the relevancy and currency of the programme and courses and their contents
- Evaluating the teaching and learning methods
- Evaluating the student assessment
- Evaluating the quality of students

Diagnostic Questions

- − Who is responsible for designing the curriculum?
- − How academic staff and students are involved in the curriculum design?
- − What are the roles of the stakeholders in the design and review of the curriculum?
- − How changes to the curriculum come about? Who takes the initiative?
- − Who is responsible for implementing the curriculum?
- − When designing curriculum, how is benchmarking with other institutions done?
- − What are the roles of curriculum committee(s)?
- − What are the roles of examination committee(s)?
- − How the programme and its courses are evaluated?
- − How evaluation is done systematically?
- − How students are involved in evaluating the curriculum and courses?
- − What actions are taken to improve the curriculum and its design process?

Sources of Evidence

- Curriculum design, review and approval process*
- Minutes of meetings of curriculum committee
- Stakeholder's inputs
- Results of assessment and examination
- Reports from external examiners
- Programme and course feedback
- Reports from surveys, focus group, dialogue, tracer study etc.
- Regulatory requirements
- Curriculum evaluation reports*

2.15. Teaching and Learning

AUN-QA Criterion 15

15.1 *System to select appropriate teaching and learning activities that are aligned to the educational philosophy and the achievement of the expected learning outcomes is established. Stakeholders' feedback, students' evaluation and students' performances are key inputs to determine the effectiveness of the teaching and learning activities.*

15.2 *System to engage, assign and approve academic staff deployment based on merit, qualification, expertise and experience is implemented. The quantity and quality of academic staff (full-time and part-time) should be appropriate for the study programmes and courses which they are assigned to teach.*

15.3 *Teaching and learning activities enhance life-long learning and are constructively aligned to the achievement of the expected learning outcomes.*

15.4 *Teaching and learning activities are monitored and evaluated for quality and improvement. Monitoring and evaluation instruments may include but not limited to student evaluation or course feedback, peer evaluation or observation, curriculum evaluation, expert review panels and internal and external QA assessment.*

15.5 *The educational philosophy and teaching and learning activities are improved to achieve the expected learning outcomes, quality of teaching and learning and life-long learning.*

AUN-QA Criterion 15 – Checklist

15		Teaching and Learning	1	2	3	4	5	6	7
15.1	P	System to select appropriate teaching and learning activities that are aligned to the educational philosophy and the achievement of the expected learning outcomes is established.							
15.2	D	System to engage, assign and approve academic staff deployment based on merit, qualification, expertise and experience is implemented.							
15.3	D	Teaching and learning activities enhance life-long learning and are constructively aligned to the achievement of the expected learning outcomes.							
15.4	C	Teaching and learning activities are monitored and evaluated for quality and improvement.							
15.5	A	The educational philosophy and teaching and learning activities are improved to achieve the expected learning outcomes, quality of teaching and learning and life-long learning.							
		Overall opinion							

Explanation

The teaching and learning approach is often dictated by the educational philosophy of the institution. Educational philosophy can be defined as a set of related beliefs that influences what and how students should be taught. It defines the purpose of education, the roles of teachers and students, and what should be taught and by what methods.

The selected teaching and learning methods should facilitate the achievement of the expected learning outcomes, create a conducive environment for learning, promote deep learning and motivate students to learn and discover knowledge themselves.

Diagnostic Questions

- What is the educational philosophy?
- How diversity of learning environment is promoted including exchange programme, internship and community service?
- How teaching and learning methods are aligned with the expected learning outcomes?
- How technology is used in teaching and learning?
- How teaching and learning approach is evaluated? What teaching methods are used? How the chosen methods fit into the learning outcomes of the courses?
- What are the barriers that prevent these desired teaching and learning methods from being used (number of students, infrastructure, teaching skills, etc.)?

Sources of Evidence

- Educational philosophy*
- Evidence of action learning such as project, practical training, assignment, industrial attachment, etc.
- Student feedback
- Course evaluation
- Learning Management System (LMS)
- Programme and course specifications*
- Internship reports
- Reports of community service

2.16 Student Assessment

AUN-QA Criterion 16

> 16.1 *System to plan and select appropriate types of student assessment during the course of study is established. Student assessment should cover student admission, continuous assessment and final/exit test before graduation.*
>
> 16.2 *The student assessment is constructively aligned to the achievement of the expected learning outcomes. In fostering constructive alignment, a variety of assessment methods should be adopted and be congruent with the expected learning outcomes. They should measure the achievement of all the expected learning outcomes of the programme and its courses.*
>
> 16.3 *The student assessment methods and the results of the assessment are reviewed to ensure validity, reliability and fairness and the achievement of the expected learning outcomes. Mechanisms to ensure validity, reliability and fairness may include but not limited to marking schemes, rubrics, examination regulations and appeal procedure.*
>
> 16.4 *The types of student assessment and assessment methods are improved to ensure their validity and reliability towards the achievement of expected learning outcomes.*

AUN-QA Criterion 16 – Checklist

16		Student Assessment	1	2	3	4	5	6	7
16.1	P	System to plan and select appropriate types of student assessment during the course of study is established.							
16.2	D	The student assessment is constructively aligned to the achievement of the expected learning outcomes.							
16.3	C	The student assessment methods and the results of the assessment are reviewed to ensure validity, reliability and fairness and the achievement of the expected learning outcomes.							
16.4	A	The types of student assessment and assessment methods are improved to ensure their validity and reliability towards the achievement of expected learning outcomes.							
		Overall opinion							

Explanation

Student assessment is one of the most important elements of higher education. The outcomes of such assessment have a profound effect on students' future careers. It is therefore important that assessment is carried out professionally at all times and takes into account the extensive knowledge that exists on testing and examination processes. Assessment also provides valuable information for institutions about the efficiency of teaching and learner support. Student assessment is expected to:

- be designed to measure the achievement of the expected learning outcomes;
- be fit for purpose, whether diagnostic, formative or summative; have clear and published grading and marking criteria;
- be undertaken by people who understand the role of assessment in the students' progression towards achieving the knowledge and skills associated with their intended qualification; where possible, not relying on the evaluation of one single examiner;
- take account of all the possible consequences of examination regulations;
- have clear regulations covering student absence, illness and other mitigating circumstances;
- ensure that assessment is conducted securely in accordance with the institution's stated procedures;
- be subjected to administrative verification in ensuring the effectiveness of the procedures.
- inform students about the assessment being used for their programmes, what examinations or other assessment methods they will be subjected to, what will be expected of them, and the criteria that will be applied to the assessment of their performance.

Diagnostic Questions

- How entry assessment is carried out on new students?
- How exit assessment is carried out on departing (graduating) students?
- To what extent do the assessment and examinations cover the content of the courses and programme? To what extent do the assessment and examinations cover the objectives of the courses and of the programme as a whole?
- What is the process for designing criterion-referenced assessment?
- What are the assessment methods used?
- How rubrics are designed and used?
- What are the assessment/examination regulations?
- What safeguards are put in place to ensure objectivity?
- How satisfied are the students with the procedures? What about complaints from students?
- What are the rules for re-assessment and are students satisfied with these?

Sources of Evidence

- Student assessment, project work, thesis, final examination, etc.
- Rubrics*
- Marking scheme*
- Moderation process
- Appeal procedure*
- Programme and course specifications*
- Examination regulations
- Minutes of meeting of examination board

2.17   Student Services and Support

AUN-QA Criterion 17

17.1 *Student services and support; and student monitoring system are planned. Student services and support may include but not limited to academic advice, counselling, co-curricular activities, grievances handling, and other student support services. Student monitoring system includes tracking student progress, academic performance and workload.*

17.2 *Student services and support; and student monitoring system are implemented to meet the needs of stakeholders. Qualified support staff with relevant competencies is assigned to deliver the desired level of service quality. Student monitoring system is used to aid student learning, improve student well-being and enhance educational policies and procedures.*

17.3 *Review of student services and support; and student monitoring system is carried out to seek improvements and to raise the quality of services provided.*

17.4 *Student services and support; and student monitoring system are improved to meet stakeholders' needs and to their satisfaction.*

AUN-QA Criterion 17 – Checklist

17		Student Services and Support	1	2	3	4	5	6	7
17.1	P	Student services and support; and student monitoring system are planned.							
17.2	D	Student services and support; and student monitoring system are implemented to meet the needs of stakeholders.							
17.3	C	Review of student services and support; and student monitoring system is carried out.							
17.4	A	Student services and support; and student monitoring system are improved to meet stakeholders' needs and to their satisfaction.							
		Overall opinion							

Explanation

The provision of student services and support is to create a conducive environment for learning and to support students in their academic pursuits. Support staff appointed to provide the student services and support should be adequate and trained to meet the needs of students. Student monitoring system is necessary for tracking and monitoring students' academic performances so that appropriate actions can be taken in a timely manner to aid student learning, improve personal well-being and enhance educational policies and procedures.

Diagnostic Questions

- What indicators are used to monitor student progress and performance?
- How the data in the monitoring system is used?
- What roles do academic staff members play in providing academic advice and support to students?
- How special attention is given to help first year students and underperformed students?
- How specific support is given to provide study skills for students with problems?
- What assistance is given to students in completing their internships and thesis writing?
- How students are advised on problems concerning course options, change of options, interruption or termination of studies?
- How information is provided to students on career prospects?
- How the quality of student services and support is measured?
- How satisfied are students with the support services available?

Sources of Evidence

- Student records
- Student academic results
- Student feedback
- Student monitoring system*
- Student attendance
- Student handbook
- Survey results
- List of student services and support*
- Service performance indicators

2.18   Research Management

AUN-QA Criterion 18

18.1 *System to oversee, direct, implement, monitor and review research activities, resources, research staff quality and research related activities is established. The governance and management of research activities should be distinctively separated so as to comply with all institutional and regulatory requirements and to protect the safety and welfare of all employees and experimental subjects.*

18.2 *Strategic approach to source for research funding and to promote research, innovation, collaboration, research excellence is implemented to achieve the vision and mission of the institution. It should be broadly aligned with the national and agency research objectives, the advancement and discovery of new knowledge and contribution to the betterment of the society and mankind.*

18.3 *Key performance indicators are used to evaluate the quantity and quality of research. These may include but not limited to number of research projects, research funds and grants, awards, publications, collaborative projects, research partnerships, patents and copyrights.*

18.4 *Research management is improved to raise the level of research and innovation.*

AUN-QA Criterion 18 – Checklist

18		Research Management	1	2	3	4	5	6	7
18.1	P	System to oversee, direct, implement, monitor and review research activities, resources, research staff quality and research related activities is established.							
18.2	D	Strategic approach to source for research funding and to promote research, innovation, collaboration, research excellence is implemented to achieve the vision and mission of the institution.							
18.3	C	Key performance indicators are used to evaluate the quantity and quality of research.							
18.4	A	Research management is improved to raise the level of research and innovation.							
		Overall opinion							

Explanation

Research is one of the three key pillars of higher education institutions. It is not only critical to the development of the institution but also to the cultural, economic, social and environmental development of the society.

Research provides the foundation for the advancement of knowledge as well as the discovery of new knowledge. It is the source of new ideas, methods, techniques and innovation across a wide range of disciplinary and multi-disciplinary areas. However, its contribution and impact to the development of the university and the betterment of the society against the investment and risks involved should be calculated.

Diagnostic Questions

- How the organisation and governance for research is defined?
- What is the institution's strategy on research?
- How research is organised at the faculties and research centres?
- What are the roles and responsibilities of QA units, faculties, and centres for assuring quality in research?
- How stakeholders are engaged and involved in research activities?
- How the research strategies and policies are implemented, evaluated and improved?
- How the research activities are aligned to the vision and mission of the institution?
- How research funds are secured and tracked?
- What are the key performance indicators for research activities?
- How the impact of research and contribution to society are measured?
- How outputs of research are measured?

Sources of Evidence

- Strategic plans*
- Research plans and strategies*
- Organisation chart of Research Units and centres*
- Job description of academic and research staff
- Minutes of meeting
- Reports on performance of research activities*
- Regulations or laws on research in higher education
- Memorandum of Understanding (MoU)
- Agreements and contracts with other universities and organisations
- Research proposals
- Sources and amount of research fund

2.19 Intellectual Property Management

AUN-QA Criterion 19

19.1 *System to manage and protect inventions, patents, copyrights, research results is established. The intellectual property management framework should encourage and protect research, innovation, invention, creative work, technology transfer and commercialisation. It should also meet institutional and regulatory requirements.*

19.2 *System to record, store and retrieve intellectual property is implemented.*

19.3 *System to review the management of intellectual property is carried out.*

19.4 *The management of intellectual property is improved to protect the university and research staff, and public interests.*

AUN-QA Criterion 19 – Checklist

19		Intellectual Property Management	1	2	3	4	5	6	7
19.1	P	System to manage and protect inventions, patents, copyrights, research results is established.							
19.2	D	System to record, store and retrieve intellectual property is implemented.							
19.3	C	System to review the management of intellectual property is carried out.							
19.4	A	The management of intellectual property is improved to protect the university and research staff, and public interests.							
		Overall opinion							

Explanation

Intellectual property is a broad term for the various rights which the law provides to protect creative work, and especially to protect economic investment in creative effort. It includes copyrights, patents, designs, trademarks, inventions, and research data, records and results.

Research conducted by or on behalf of, or supported by the institution should also comply with the intellectual property rights policy established by the institution.

Diagnostic Questions

- What are the institution's policies to protect intellectual property rights?
- How the intellectual property rights policy complied with national and international regulatory requirements?
- How intellectual property is measured?
- How incubation and commercialisation are supported by the institution?
- How research data, records and results are captured, stored and published?

Sources of Evidence

- Patents, copyrights, trademarks
- Research data, records and results*
- Research publications
- Institutional and regulatory requirements
- Incubation and commercialisation

2.20 Research Collaboration and Partnerships

AUN-QA Criterion 20

20.1 System to establish research collaboration and partnerships to meet research goals is established. Partnerships may include but not limited to business and industrial corporations, universities and associations, professional and research bodies, government and non-government organisations. *20.2 Policies and procedures to foster collaboration and partnerships are implemented. Memorandum of Understanding (MoU), partnership contracts or agreements, collaboration partnerships etc. are common mechanisms used to establish and maintain partnership or relationship. Contract or agreement should include critical details such as period of partnership, terms and conditions, intellectual property rights and research ethics.* *20.3 System to review the effectiveness of research collaboration and partnerships is carried out.* *20.4 Research collaboration and partnerships are improved to meet research goals.*

AUN-QA Criterion 20 – Checklist

20		Research Collaboration and Partnerships	1	2	3	4	5	6	7
20.1	P	System to establish research collaboration and partnerships to meet research goals is established.							
20.2	D	Policies and procedures to foster collaboration and partnerships are implemented.							
20.3	C	System to review the effectiveness of research collaboration and partnerships is carried out.							
20.4	A	Research collaboration and partnerships are improved to meet research goals.							
		Overall opinion							

Explanation

Research collaboration and partnerships are extended arms of the higher education institutions. They can complement the research activities and help close the gaps of research limitations and constraints of the institution. The collaboration and partnerships should support the vision and mission of the institution and add value to the relationship.

Diagnostic Questions

- How the goal of establishing research collaboration or partnership is aligned with the institution's vision and mission?
- What benefits can the collaboration and partnership bring to the institution and its stakeholders?
- How partners are chosen?
- What criteria are used to identify, select, evaluate and renew collaboration and partnerships?

Sources of Evidence

- Memorandum of Understanding (MoU)*
- Partnership contracts/agreements*
- Letter of Intent*
- Institutional and regulatory requirements

2.21   Community Engagement and Service

AUN-QA Criterion 21

21.1 *Plan to engage community and to provide service to meet the vision and mission of the university is established. Community engagement and services may include but not limited to the provision of consulting services, professional advices, editorial services and community service.*

21.2 *Policies and guidelines for community engagement and service are implemented. Policies, guidelines and procedures may include accountability, compliance, legal and financial, code of ethics and conflict of interest.*

21.3 *System to measure and monitor the community engagement and services is carried out. Relevant indicators should be established to measure benefits and satisfaction of stakeholders.*

21.4 *The provision of community service and community engagement is improved to meet stakeholders' needs and to their satisfaction.*

AUN-QA Criterion 21 – Checklist

21		Community Engagement and Service	1	2	3	4	5	6	7
21.1	P	Plan to engage community and to provide service to meet the vision and mission of the university is established.							
21.2	D	Policies and guidelines for community engagement and service are implemented.							
21.3	C	System to measure and monitor the community engagement and services is carried out.							
21.4	A	The provision of community service and community engagement is improved to meet stakeholders' needs and to their satisfaction.							
		Overall opinion							

Explanation

Higher education institution is not only responsible for education and research but also responsible for serving the society. Community engagement and service provide learning opportunities to students and staff beyond the classroom. They also expose students to a holistic experience in learning and character development. The provision of community engagement and service should meet the vision and mission of the institution and bring mutual benefits to the institution and the society.

Diagnostic Questions

- What role does the institution play in the local, regional and international community?
- What are the key services provided? How they relate to the mission of the institution?
- How is the income from such services regulated?
- How satisfied are the stakeholders with the services provided?
- What benefits are derived from the community engagement and service?

Sources of Evidence

- Letter of Intent*
- Service contracts/agreements
- Programme/course specifications*

2.22 Educational Results

AUN-QA Criterion 22

22.1 *The pass rates and dropout rates of all study programmes and courses are established, monitored and benchmarked for improvement.*
22.2 *The average time to graduate for all study programmes is established, monitored and benchmarked for improvement.*
22.3 *Employability of graduates of all study programmes is established, monitored and benchmarked for improvement.*
22.4 *The satisfaction levels of stakeholders on the quality of graduates are established, monitored and benchmarked for improvement.*

AUN-QA Criterion 22 – Checklist

22	Educational Results	1	2	3	4	5	6	7
22.1	The pass rates and dropout rates of all study programmes and courses are established, monitored and benchmarked for improvement							
22.2	The average time to graduate for all study programmes is established, monitored and benchmarked for improvement							
22.3	Employability of graduates of all study programmes is established, monitored and benchmarked for improvement							
22.4	The satisfaction levels of stakeholders on the quality of graduates are established, monitored and benchmarked for improvement.							
	Overall opinion							

Explanation

In assessing the quality assurance system, institutions not only have to evaluate the quality of the process, but also the quality of output and its graduates. In evaluating the quality of the graduates, institutions have to monitor the achievement of the expected learning outcomes, pass rates and dropout rates, the average time to graduation and the employability of graduates.

After analysing the input, process and output, institutions have to analyse the satisfaction of its stakeholders. There should be a system to collect and measure stakeholders' satisfaction. The information collected should be analysed and benchmarked for making improvements to the programmes, quality practices and quality assurance system.

The educational results should be presented by faculty, programme category, and programme type.

Diagnostic Questions

Pass Rates and Dropout Rates

- What is the system to monitor pass rates and dropout rates of students?
- What does the department think of the pass rates? If not satisfactory, what measures have been taken to improve the pass rates?
- How high is the dropout rate? What are the explanations for the dropout rate?
- Where do the dropout students go to?

Average Time to Graduation

- What does the department think of the average time to graduate?
- What measures have been taken to promote graduation and to shorten the average time to graduate?
- What effect do these measures have?

Quality of Graduates

- How satisfactory is the quality of the graduate?
- How the achieved standards match the expected standards?
- How graduates get their jobs? What are the career prospects of graduates over the last few years?

Employability of Graduates

- What percentage of graduates found a job within six months of graduation over the past five years? What percentage of graduates found a job within a year?
- What percentage of graduates is still unemployed 1 year after graduation?

Stakeholders' Satisfaction

Staff:

- What mechanisms are available to staff to express their satisfaction or dissatisfaction about the programme, resources, facilities, processes, policies, etc.?
- What indicators are used to measure and monitor the satisfaction level of staff?
- What initiatives are carried out to raise the satisfaction level of staff? How effective are they?

Students:

- How the department knows about what the students think about the courses, programme, teaching, examinations, etc.?
- How does the department cope with the feedback and complaints from students?

Alumni (Graduates):

- What is the opinion and feedback of the graduates about the competencies that they acquired?
- How is the feedback from the alumni used to improve the programme?

Labour Market

- How satisfied are employers with the quality of the graduates?
- What are the specific complaints about the graduates?
- What specific strengths of the graduates are appreciated by the employers?

Sources of Evidence

- Performance reports of education*
- Stakeholders' satisfaction trends
- Graduates, alumni and employers surveys
- Press reports
- Employment surveys
- Employment statistics
- Stakeholders feedback

2.23   Research Results

AUN-QA Criterion 23

23.1 *The type and volume of research by academic and research staff are established, monitored and benchmarked for improvement.*
23.2 *The type and volume of research by students are established, monitored and benchmarked for improvement.*
23.3 *The type and volume of research publications are established, monitored and benchmarked for improvement.*
23.4 *The type and volume of intellectual property are established, monitored and benchmarked for improvement.*
23.5 *The amount of research fund for each type of research activity is established, monitored and benchmarked for improvement.*
23.6 *The result of research and innovation, including commercialisation, incubation, establishment of start-ups, etc., is established, monitored and benchmarked for improvement.*

AUN-QA Criterion 23 – Checklist

23	Research Results	1	2	3	4	5	6	7
23.1	The type and volume of research activities by academic and research staff are established, monitored and benchmarked for improvement.							
23.2	The type and volume of research activities by students are established, monitored and benchmarked for improvement.							
23.3	The type and volume of research publications including citations are established, monitored and benchmarked for improvement.							
23.4	The type and volume of intellectual property are established, monitored and benchmarked for improvement.							
23.5	The amount of research fund for each type of research activity is established, monitored and benchmarked for improvement.							
23.6	The result of research and innovation, including commercialisation, incubation, establishment of start-ups, etc., is established, monitored and benchmarked for improvement.							
	Overall opinion							

Explanation

The research results of the institution, faculties, research centres as well as from staff, and undergraduates and postgraduates should be established, monitored and benchmarked for improvement.

The research results should be categorised by faculty, research centre, academic staff and students.

Diagnostic Questions

- What types of research activities are carried out by the faculties, research centres, staff and students?
- How the research activities are aligned to the research goals? How they are aligned to the vision and mission of the university and faculty?
- What is the trend of research quantity and quality over time?
- How research activities are benchmarked for improvement?
- How staff and students are motivated to carry out research?

Sources of Evidence

- Performance reports of research*
- Strategic research plans and goals*
- Press releases
- Publications and citations
- Registration of patents, trademarks, copyrights
- Incubation and commercialisation
- Research funds

2.24 Service Results

AUN-QA Criterion 24

24.1 The type and volume of community engagement and service; and contribution to society are established, monitored and benchmarked for improvement.
24.2 The societal impact and achievement of the community engagement and service; and contribution to society are established, monitored and benchmarked for improvement.
24.3 Impact on students and staff of community engagement and service is established, monitored and benchmarked for improvement.
24.4 The satisfaction of stakeholders in community engagement and service; and contribution to society is established, monitored and benchmarked for improvement.

AUN-QA Criterion 24 – Checklist

24	Service Results	1	2	3	4	5	6	7
24.1	The type and volume of community engagement and service; and contribution to society are established, monitored and benchmarked for improvement.							
24.2	The societal impact and achievement of the community engagement and service; and contribution to society are established, monitored and benchmarked for improvement.							
24.3	Impact on students and staff of community engagement and service is established, monitored and benchmarked for improvement.							
24.4	The satisfaction of stakeholders in community engagement and service; and contribution to society is established, monitored and benchmarked for improvement.							
	Overall opinion							

Explanation

The service results of the institution, faculties, staff and students should be established, monitored and benchmarked for improvement.

The service results should be categorised by faculty, academic staff and students.

Diagnostic Questions

- What types of community engagement and service are carried out by the institution, faculties, staff and students?
- How community engagement and service is aligned to the institution's goals?
- What is the trend of community engagement and service over time?
- How community engagement and service is benchmarked for improvement?
- What impacts and benefits does community engagement and service bring about?

Sources of Evidence

- Performance reports of community engagement and service*
- Strategic plans and goals
- Press releases
- Students reports and feedback
- Community feedback

2.25 Financial and Market Results

AUN-QA Criterion 25

25.1 Financial performance and indicators for education, research and service are established, monitored and benchmarked for improvement. 25.2 Market performance and indicators for education, research and service are established, monitored and benchmarked for improvement.

AUN-QA Criterion 25 – Checklist

25	Financial and Market Results	1	2	3	4	5	6	7
25.1	Financial performance and indicators for education, research and service are established, monitored and benchmarked for improvement.							
25.2	Market performance and indicators for education, research and service are established, monitored and benchmarked for improvement.							
	Overall opinion							

Explanation

The financial and market results of the institution should be established, monitored and benchmarked for improvement. Financial performance and indicators may include but not limited to balance sheet, income/expenditure statement, return of investment, and ratio analysis.

Market performance and indicators may include but not limited to national and international competitive rankings, market size or share, awards, and stakeholders' satisfaction.

Diagnostic Questions

- What is the trend of financial performance over time? What factors influence the trend?
- What is the trend of market performance over time? What factors influence the trend?
- How satisfied are stakeholders with the financial performance of the institution?
- How satisfied are stakeholders with the market performance of the institution?

Sources of Evidence

- Financial reports*
- Financial statements
- National and international rankings*
- Statistics of student enrolment*
- Minutes of board meeting
- Strategic plans and goals*

3. Institutional QA Assessment

3.1 Introduction to Institutional QA Assessment

Assessment can be defined as a general term that embraces all methods used to judge the performance of an individual, group or organisation. Self-assessment is the process of critically reviewing the quality of one's own performance at institutional, system or programme level.

Institutional quality assessment in higher education, therefore, can be defined as a systematic assessment of strategic, systemic and functional quality assurance in education, research, service as well as the results and effectiveness of the quality assurance system of the institution. It aims to determine if the institution has met the stated quality criteria and their requirements.

3.2 Eligibility for Institutional QA Assessment

To be eligible for institutional QA assessment under the AUN-QA network, the applying institution or university must fulfil the following conditions at the time of application:

- an AUN member university or associate member of AUN-QA Network;
- has at least <u>five</u> (5) of study programmes assessed and certified by AUN-QA Network with their certificates remain valid at the time of application;
- has at least <u>five</u> (5) valid AUN-QA certified study programmes maintained throughout the validity of the Certificate for AUN-QA at Institutional Level; and
- for renewal of the Certificate for AUN-QA at Institutional Level, the certified institution must fulfil the requirements for the submission of the interim report.

An institution and its affiliates are considered to be an entity if they report to the same governing body and senate or its equivalent. They can choose to have one university, a few or all of the universities that report to the same governing body and senate or its equivalent to be assessed in one AUN-QA institutional assessment. However, if an institution has two universities with each of them reporting to a separate governing body and senate, then the institution cannot be assessed as an entity in one AUN-QA institutional assessment. They have to be assessed separately in two AUN-QA institutional assessments.

Institutions and universities accepted for institutional QA assessment must also complied with the requirements stated in the "Guidelines for AUN Quality Assessment and Assessors (Version 2)".

In addition to all the above conditions, the final decision to accept the application for AUN-QA institutional assessment rests with the AUN-QA Council.

3.3 Requirements for the Submission of Self-Assessment Report (SAR)

SAR submitted by the applying university shall meet the following requirements:

- Part 2 of the SAR should be strictly written according to the Checklist for AUN-QA Assessment at Institutional Level as documented in Appendix A;
- The SAR should be translated into English language that is easy for the assessors to comprehend. A glossary of abbreviations and terminologies used in the report should be provided;
- The SAR should be submitted and made available in both hardcopy and softcopy to each assessor and AUN Secretariat at least 3 months before the site assessment;
- The submitted SAR will be treated as the "final and official" document and no changes will be entertained;
- Supporting documents and evidences should be made available, clearly labelled and displayed in the discussion room for assessors; The SAR should not be more than 120 A4 pages in the main report (excluding appendices) and printed in a consistent typeface with font size 12. The appendices should be made in a separate bound document; and
- The content of the SAR should consist of:

Part 1: Organisation Profile

This section describes the organisation profile of the institution. It should address the overview of the organisation and structure of the institution (main campus) and its affiliates (branch campuses), governing board, workforce, educational programmes, key research and services, operating environment and challenges etc.

Part 2: AUN-QA Criteria and Requirements

This section contains the write-up on how the institution or university addresses the AUN-QA criteria and their requirements. Follow the criteria listed in the self-assessment checklist (see Appendix A).

Part 3: Self-Assessment of Institutional QA

This section documents the organisation of the self-assessment of institutional QA at the institution, its strengths and weaknesses and improvement plan as well as the completed Checklist for AUN-QA Assessment at Institutional Level as in Appendix A.

Part 4: Appendices

Glossary, supporting documents and evidences.

3.4 Requirements for Stakeholders' Interviews

Interviews with stakeholders such as key members of the governing board, key management staff, administrative heads, committees, support staff, students, alumni and employers are arranged as part of the site assessment and their inputs and feedback form part of the objective evidence. It is important that the interviewees are selected based on the following requirements:

- True representation of the population. For example, students selected for the interview should represent each cohort in year 1, year 2, year 3 and year 4. There should also be a mix of male and female with varied academic achievements based on the population profile. Likewise for the academic and support staff, the representation of the interviewees should be selected based on the proportion to the category of staff and size of the faculty and administrative department;
- For the selection of alumni members, the institution should arrange to have alumni who graduated within 5 years, between 5 and 10 years and beyond 10 years;
- For the selection of employers, the institution should arrange for key employers of the graduates and not more than 30% of them should be the alumni of the university;
- The size of each interview session should be between 10 and 20 interviewees. It should not exceed 25 interviewees per session;
- Each interviewee is not allowed to be represented in more than one stakeholder's interview session;
- A listing of the interviewees with basic information about the interviewees must be provided to the assessors at least <u>two week</u> before the site assessment. The information to be included in the list is tabulated below.

Stakeholder	Information of interviewee
Governing Board/Committees	Name, designation, appointment and organisation
University staff	Name, designation, appointment and department
Students	Name, year of study and programme
Alumni members	Name, graduation year and graduation degree
Employers	Name, designation and employer name

- As the interviews are held in strict confidentiality, voice and video recording of the session is not allowed; and
- To ensure forthright exchanges of views, no staff member of the applying university is allowed at interviews with students, alumni and employers.

3.5   Preparation of Self-Assessment Report (SAR)

Figure 3.1 illustrates the approach for preparing SAR which encompasses Plan-Do-Check-Act (PDCA) cycle.
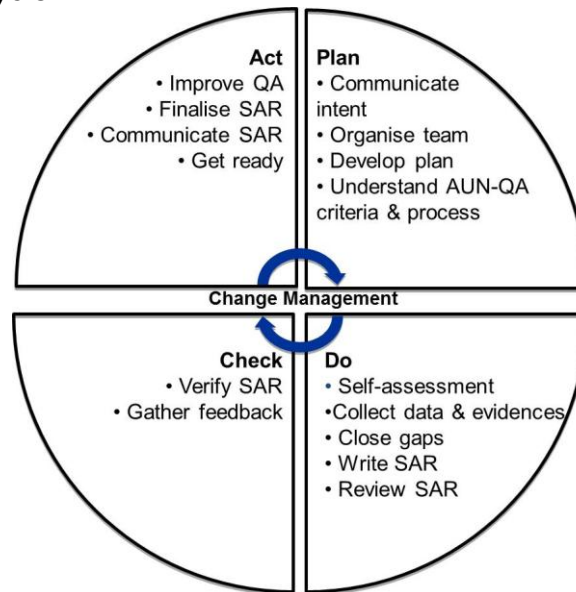
Figure 3.1 – PDCA Approach to SAR Development

The "Plan" phase starts with the communication of intent for institutional QA assessment. Appoint a leadership team consists of key management staff to be responsible for overseeing the writing of the SAR. Several working teams consisting of key people representing various departments may be formed to write part of the SAR. These SAR working teams will report to the SAR leadership team. As part of the change management process, early engagement with the stakeholders is crucial to get their buy-in and commitment before the start of the institutional QA assessment. A clear timetable should be set up to develop the SAR (see Figure 3.2). Each member in the SAR working team should be made responsible for collecting and analysing data and information, and writing the SAR. Each member must have a good understanding of the AUN-QA criteria and their requirements before proceeding to the next phase.

	Activity/Month	1	2	3	4	5	6	7	8	9	10	11	12	Deadline	Assigned to	Status
P L A N	Communicate Intent	█														
	Organise Team	█														
	Develop Plan		█													
	Understand AUN QA criteria and process		█	█												
D O	Self-assessment			█												
	Collect data & evidences				█	█	█	█	█	█						
	Close gaps						█	█	█	█						
	Write SAR						█	█	█	█						
	Review SAR							█	█	█						
C H E C K	Verify SAR									█	█					
	Gather Feedback										█					
A C T	Improve QA											█	█			
	Finalise SAR											█	█			
	Communicate SAR												█			
	Get Ready												█			
	Change Management	█	█	█	█	█	█	█	█	█	█	█	█			

Figure 3.2 - Typical Project Timeline for SAR Development.

The "Do" phase involves identifying the gaps in the institutional QA system in meeting the AUN-QA criteria and their requirements. Data collection is a critical step in this phase as it helps to quantify the existing quality assurance practices as well as to identify what the institution needs to do to meet the AUN-QA criteria. Solutions to close the gaps should be implemented before proceeding to write and review the SAR.

The "Check" phase involves verifying the SAR as well as the quality assurance practices; and giving feedback to improve them. An independent team should be appointed to assess the SAR and the existing quality assurance practices against the AUN-QA criteria. Recommendations to improve the SAR and close the gaps in the existing quality assurance practices should be made.

The "Act" phase involves implementing the recommendations raised in the "Check" phase and finalising the SAR before communicating the SAR to the relevant stakeholders and getting ready for external assessment by AUN-QA Network.

3.6 Self-Assessment Report (SAR)

A typical self-assessment project would take about a year to prepare. However, the duration depends on the stage of development, availability of data and information and the maturity of the institutional QA system of the institution. Before the AUN-QA assessment, it is important that the top management, SAR leadership and working teams and staff have a common comprehension and understanding of the AUN-QA criteria and their requirements. Training and communications should be established to ensure this. The SAR should be written in an objective, factual and complete manner and it should follow the Checklist for AUN-QA Assessment at Institutional Level (See Appendix A).

Below are some guidelines for preparing an effective SAR are:

- The SAR is an account of the institutional QA system. It should be both descriptive and analytical. The diagnostic questions provided in each of the AUN-QA criteria can help the institution to discover or evaluate their QA practices.
- The SAR should follow a specific format based on the AUN-QA criteria and checklist.
- Illustrate clearly what, where, when, who and how the QA systems or practices are implemented and managed to fulfil the criteria. This will help in putting all the related information together.
- Focus on information and data (objective evidences) that directly address the criteria. The report has to be concise and factual. Provide trends and statistics to show achievements and performance. The quantitative data and results provided in the SAR and evidences should be accurate, consistent and reliable.
- When analysing an institution's own quality, it is not only important to look for evidence on how far the criteria have been met but also seek best practices from other institutions for benchmarks and improvement.
- The first 3 parts of the SAR for institutional assessment should consist of:

Part 1: Organisation Profile

This section describes the organisation profile of the institution. It should address the overview of the organisation and structure of the institution (main campus) and its affiliates (branch campuses), governing board, workforce, educational programmes, key research and services, operating environment and challenges etc.

1. Organisational Description

   a. Vision, mission and values of the institution.

   b. Organisational structure of the institution and its affiliates including the latest organisation chart.

   c. Organiational structure of the governing board or its equivalent including the latest organisation chart.

d. Educational programmes offered by the institution and its affiliates. Provide a summary of the study programmes offered by the institution using the table provided (Figure 3.3). A listing of all the study programmes by faculty indicating the name and award of study programmes, awarding body, year the programme was first offered, accreditation status, number of students etc. should be documented in the appendix.

Faculty	Undergraduate		Postgraduate		Others (Please specify)	
	No. of Programmes	No. of Students	No. of Programmes	No. of Students	No. of Programmes	No. of Students

Figure 3.3 - Summary of Study Programmes Offered by the Institution.

e. List the research centres or centres of excellence located in the institution and its affiliates as in Figure 3.4 below.

No.	Name of Research Centre/Centre of Excellence	Year the Centre was Established	Key Research Areas	Number of Academic and Research Staff

Figure 3.4 - List of Research Centres/Centres of Excellence

f. Academic staff profile of the institution and its affiliates. Provide a summary of the academic staff profile in Figure 3.5 below. List the academic rank, full-time and part-time, PhD holders and other relevant details of academic staff by faculty in the appendix.

Academic and Research Staff Category (please specify)	Full-Time		Part-Time	
	Headcounts	%PhD	Headcounts	%PhD
Total				

Figure 3.5 – Summary of Academic Staff Profile

g. According to the organisation chart, list the category and number of management and non-management staff in Figure 3.6.

Staff Category (Please specify)	No. of Staff in Each Category		
	Full-Time	Part-Time	Total
Total			

Figure 3.6 - Category and Number of Management and Non-Management Staff

2. Organisational Environment

   a. Describe the regulatory environment in which the institution operates in and how it affects the operation of the institution.

   b. Describe the key strategic challenges faced by the institution in the operating environment and how it plans to overcome them.

   c. Describe the strategic strengths and opportunities of the institution in the operating environment and how it takes advantage of them.

Part 2: AUN-QA Criteria and Requirements

This section contains the write-up on how the institution addresses the AUN-QA criteria and requirements. Applicants can use the following guidelines to help them:

   a. Present the write-up according to the 25 criteria as listed in the Checklist for AUN-QA Assessment at Institutional Level (Appendix A).

   b. Use a systematic approach to capture information and evidences to directly address the AUN-QA criteria and requirements. The approach may include ADRI (Approach-Deployment-Results-Improvement), PDCA (Plan-Do-Check-Act) or 5Ws and 1H (Why, What, When, Where, Who and How).

   c. Use diagrams or flowcharts to illustrate clearly how the approach mentioned in the response is implemented.

   d. All responses should be concise and factual. Statements should be supported with data wherever appropriate.

   e. The Results Category of the criteria requires results to demonstrate progress (performance trends), achievement (performance levels against targets) and comparisons of performance with that of competitors and/or benchmarks.

Part 3: Self-Assessment of Institutional QA

• Organisation of the self-assessment of institutional QA at the institution
• Summary of strengths - summarise the points that the institution considers to be its strengths and mark the points that the institution is proud of.
• Summary of Weaknesses - indicate which points the institution considers to be weak and in need of improvement.
• Improvement plan – recommendations to close the gaps identified in the self-assessment and the action plan to implement them.
• Completed the Checklist for AUN-QA Assessment at Institutional Level (Appendix A).

3.7   Institutional QA Assessment Process

To ensure that the quality assessment is objective, independence, creditable and reliable, AUN-QA Network adopted the fundamental principles for assessment process and assessors as stated in the ISO 19011 standard. These principles are listed below.

The three principles that relate to the conduct of the AUN-QA assessors are:

- Ethical conduct – the foundation of professionalism;
- Fair presentation – the obligation to report truthfully and accurately; and
- Due professional care – the application of diligence and judgment to assessment.

The Two other principles that relate to the AUN-QA assessment process are:

- Independence – the basis for the impartiality and objectivity of the assessment conclusions; and
- Evidence – the rational basis for reaching reliable and reproducible assessment conclusions in a systematic assessment process. Evidences are based on records and statements of fact or information which are relevant to the assessment criteria and are verifiable.

Adherence to these fundamental principles is a prerequisite for all AUN-QA assessment in providing an objective, independence, creditable and reliable assessment process and outcome.

All quality assessments carried out by the AUN-QA Network follow a systematic process through the Plan-Do-Check-Act (PDCA) or Deming Cycle as illustrated in Figure 3.7.
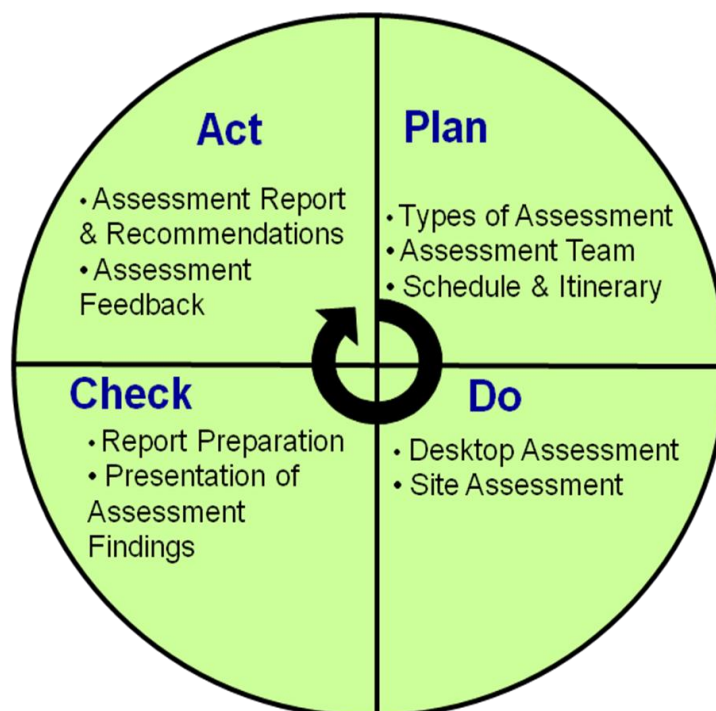
Figure 3.7 – PDCA Approach to AUN-QA Assessment

3.7.1 Plan Phase

The "Plan" phase consists of:

- Types of Assessment
- Assessment Team
- Schedule & Itinerary

The planning of AUN-QA assessment depends on the types of QA assessment requested by the applying institution. The two types of external assessment carried out by AUN-QA Network are institutional QA and programme QA. The planning of institutional QA assessment by AUN-QA Network is documented below.

The institutional QA assessment panel will be appointed by the Chairperson of the AUN-QA Council based on the assessor's background, experience and language ability as well as the above principles of assessment. The members of the assessment panel shall be from different universities and countries other than the country the institution operates in. The Chair of the institutional QA assessment panel in consultation with the Chairperson of the AUN-QA Council shall appoint the lead assessor and assessor(s) of each assessment panel as documented in Figure 3.8.
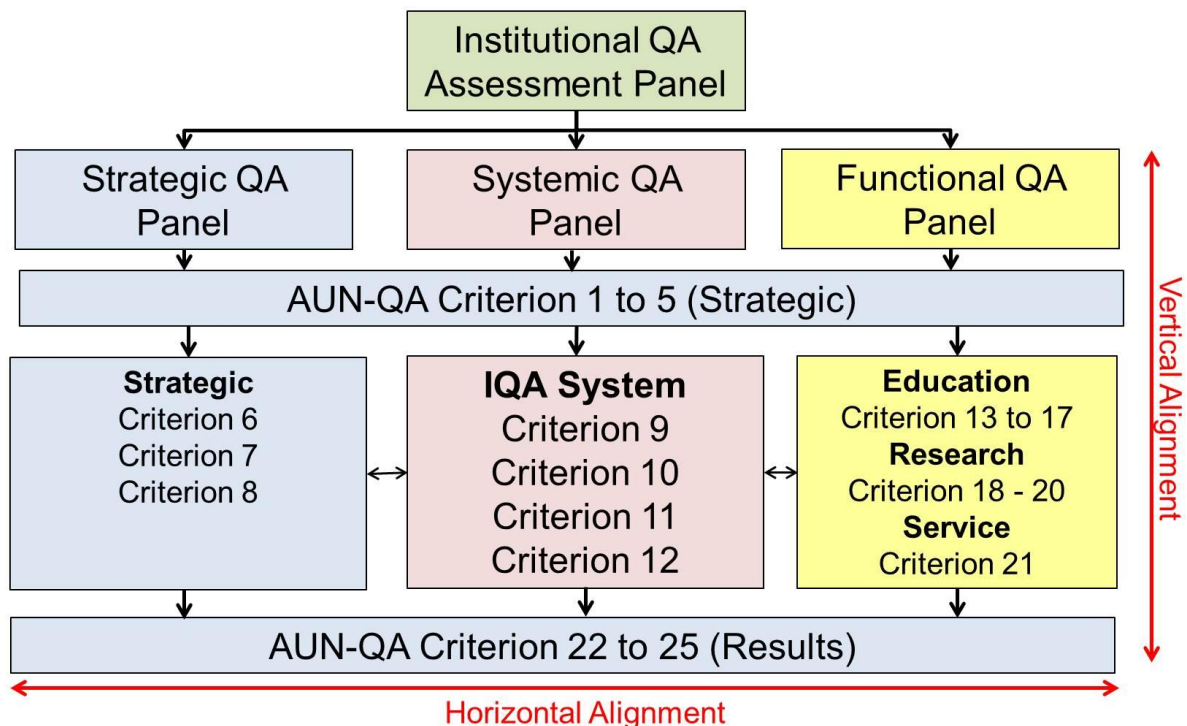
Figure 3.8 – Structure of AUN-QA Institutional Assessment Panel

The Chair of the institutional QA assessment panel will lead and oversee the entire institutional QA assessment and assign the scope of assessment as follows:

The Strategic QA Panel consists of the Chair of the institutional assessment panel and at least one other assessor. At least one assessor should have management or administrative background. The team will lead the assessment of common AUN-QA criteria 1 to 5, assessment of criteria 6 to 8 and criteria 22 to 25.

The Systemic QA Panel consists of lead assessor and at least one other assessor. At least one assessor should have IQA background. The team will co-assess the common AUN-QA criteria 1 to 5 and criteria 22 to 25, and lead the assessment for criteria 9 to 12.

The Functional QA Panel consists of lead assessor and at least one other assessor. At least one assessor should have academic background. The team will co-assess the common AUN-QA criteria 1 to 5 and criteria 22 to 25, and lead the assessment for criteria 13 to 21.

Each assessment panel should comprise at least 2 members from different countries and universities. The lead assessor and assessor(s) in each panel should decide on their roles and assignment before, during and after the assessment.

The lead assessor of each assessment panel will coordinate the assessment with the Chair of the institutional assessment panel. He/she will be responsible for leading the assessment and stakeholders' interviews, assigning of roles and assessment areas/criteria and moderating the assessment findings and results. In general, an assessor should perform the following roles based on the scope assigned:

- Preparing assessment plan and checklist
- Communicating and clarifying assessment requirements
- Planning and carrying out assigned responsibilities effectively and efficiently
- Making observations on curricula, processes, facilities and quality improvements
- Reporting the assessment findings and results
- Retaining and safeguarding documents pertaining to the assessment

Before the site assessment, the Chair of the institutional QA panel and the lead assessors will decide and agree on the assessment itinerary and the areas to assess in each panel. The areas to be assessed may include selected faculties, schools or colleges and academic departments; research centres or centres of excellence; study programmes; committees, and administrative departments. The proposed assessment itinerary will be discussed and finalised with AUN Secretariat and the management representatives of the institution to be assessed.

A typical Itinerary for an AUN-QA institutional assessment (see Figure 3.9) will spread over 6 days and it will normally consist of:

- Opening meeting – Welcome speeches, token exchange and photo taking
- Interviews with key members of governing board or its equivalent, key management staff, Deans, Administrative Department Heads, Programme Chairs, faculty members, supporting staff, students, alumni and employers
- Site tour (teaching facilities, laboratories, workshops, libraries, general facilities etc.)
- Document review; and discussion and report preparation by assessment panel
- Breaks, lunches and dinners
- Closing meeting - Presentation of preliminary assessment findings

Date/ Time	Activities		
	Strategic QA Panel	Systemic QA Panel	Functional QA Panel
Day 1			
Arrival and Pick-up of Assessors and Staff from AUN Secretariat			
1700 –1900	Pre-site assessment meeting of assessment panel and AUN Secretariat (at hotel)		
1900 onwards	Dinner		
Day 2			
09.00 – 09.30	Opening Session (Welcome Speeches, Token Exchange and Photo Taking)		
09.30 - 10.00	Break		
10.00 – 11.00	Meeting with President/Vice-Chancellor		
11.00 – 12.30	Meeting with Deputy Presidents/Deputy Vice-Chancellors for Education/Academic Affairs, Research, Administration/Service and other (if applicable)		
12.30 – 13.30	Lunch with Board Members (Chairman and at least 2 other board members) and senior management (President and Deputy Presidents/Vice-Chancellor and Deputy Vice-Chancellors)		
13.30 – 14.30	Meeting with Governing Board (Chairman and at least 2 other board members)		
14.30 – 16.00	Campus Tour (split by assessment panels)		
16.00 – 16.15	Break		
16.45 – 17.00	Assessment Panel Meeting		
17.00 onwards	Welcome Dinner		

Date/ Time	Activities		
	Strategic QA Panel	**Systemic QA Panel**	**Functional QA Panel**
Day 3			
09.00 – 10.30	Meeting with Members of the Senate or its equivalent (other than President and Deputy Presidents/Vice-Chancellor and Deputy Vice-Chancellors and Deans)		
10.30 – 10.45	Break		
10.45 – 12.15	Meeting with Director of Human Resources and Key Support Staff	Meeting and Document Review with Director and Key Staff of Central QA Office	Meeting with Directors of Research Centres/Centres of Excellence
12.15 – 13.30	Lunch		
13.30 – 15.00	Meeting with Director of Finance and Key Support Staff	Meeting and Document Review with Director and Key Staff of Central QA Office	Meeting with Directors of IP/Entrepreneurship/ Innovation Centre/ Research Management Centre
15.00 – 15.15	Break		
15.15 - 16.30	Meeting with Director of Campus Development and Key Support Staff	Meeting and Document Review with Head and Key Staff of QA Office at Faculty X	Meeting with Deans of Faculty/College/School
16.30 - 17.00	Assessment Panel Meeting		
17.00 onwards	Dinner (Free & Easy)		
Day 4			
09.00 - 10.30	Meeting with Director of IT Department and Key Support Staff	Meeting and Document Review with Head and Key Staff of QA Office at Faculty Y	Meeting with Vice-Deans, Department Heads and Committee Heads of Faculty X
10.30 – 10.45	Break		
10.45 – 12.15	Meeting with Director of Library Resources and Key Support Staff	Meeting and Document Review with Head and Key Staff of QA Office at Faculty Z	Meeting with Faculty Members (Full-time and Part-time) of Faculty X
12.15 – 13.30	Lunch		
13.30 – 15.00	Meeting with Director of Environment, Health & Safety and Key Support Staff	Meeting with Registrar and Key Support Staff	Meeting with Vice-Deans, Department Heads and Committee Heads of Faculty Y
15.00 – 15.15	Break		
15.15 – 16.30	Meeting with Director of External Relations and Key Support Staff	Meeting with Director of Admission and Key Support Staff	Meeting with Faculty Members (Full-time and Part-time) of Faculty Y
16.30 – 17.00	Assessment Panel Meeting		
17.00 onwards	Dinner (Free and Easy)		

Date/ Time	Activities		
	Strategic QA Panel	**Systemic QA Panel**	**Functional QA Panel**
Day 5			
09.00 - 09.45	Meeting with Staff Union		Meeting with Undergraduate and Postgraduate Students of Faculty X and Y
09.45 – 10.30	Meeting with Student Union		
10.30 – 10.45	Break		
10.45 – 12.15	Meeting with Alumni of the Institution		
12.15 – 13.15	Lunch		
13.15 – 14.45	Meeting with Employers of the Institution		
14.45 – 15.00	Break		
15.00 – 17.00	Clarification Meeting (Optional)/Assessment Panel Meeting and Report Preparation		
17.00 onwards	Dinner and Report Preparation (at hotel)		
Day 6			
0900 – 11.00	Presentation of Assessment Findings		
11.00 – 11.30	Closing Session		
11.30 onwards	Lunch and Departure of Assessors		

Figure 3.9 – Typical Itinerary for an AUN-QA Institutional Assessment

3.7.2 Do Phase

The "Do" phase involves desktop and site assessment.

Desktop Assessment

Desktop assessment is the first initial step before the site assessment. It is a document review exercise which involves a preliminary assessment of the quality assurance system based on the SAR and available documents. The desktop assessment facilitates the development of an assessment plan. The AUN-QA Assessment Planning Template (see Appendix B) is used for this purpose. The desktop assessment allows the following preparatory work to be done:

- Clarifying SAR and quality assurance practices
- Identifying strengths and weaknesses of the quality assurance practices
- Identifying gaps in meeting the AUN-QA criteria
- Identifying possible areas for improvement
- Crafting questions for stakeholders' interviews
- Identifying sources of evidence for verification

The purpose of assessment planning is to gather evidence of practices that meet AUN-QA criteria and requirements. The plan should include:

- Sources of information and evidence
- Strategy employed to gather the evidence as well as identifying documents and records for review. Strategy may include interview, site visit, document review, website access, etc.
- Identify individuals to be interviewed and plan schedule of interviews and site tour
- Prepare questions needed to gather the evidence

The SAR is the most critical document for desktop assessment and it should be given to the assessors at least 3 months before the site assessment. It should cover all the criteria listed in the checklist. If any of the criteria are not documented, the assessors should clarify with the contact person of the institution. Assessors should identify data, information, records and documents mentioned in the report and verify them against the physical documents during the site assessment.

The PDCA approach is a good tool to apply in assessment planning. Questions can be formulated at each stage of the PDCA (see Figure 3.10).

Figure 3.10 – PDCA Approach in Formulating Questions

For example at the "Plan" stage, questions on what, when and why can be used to establish objectives and processes that deliver results based on AUN-QA criteria and organisational profile. At the "Do" stage, questions can revolve around implementation and who are involved. At the "Check" stage, questions on monitoring and measuring performance and processes can be formulated.

Lastly, at the "Act" stage, assessors can plan questions on actions to continually improve performance. Adopt the 5Ws (why, what, where, who and when) and 1H (How) questioning technique during the interview.

To facilitate the desktop assessment and planning, a template for desktop assessment at institutional level is documented in Appendix B.

Site Assessment

Site assessment or site visit consists of an opening meeting with key management representatives of the institution and the AUN-QA assessment panel and AUN Secretariat. The opening meeting is normally followed by interviews with the various stakeholders. Site tour may be arranged before or between the interviews. The assessment will conclude with a closing meeting.

An opening meeting with the host university management representatives should be held at the start of the site assessment. The purpose of the brief opening meeting is to:
- Introduce the members of the assessment team to the host university's management representatives
- Establish official communication links between the assessment team and the host university
- Review scope and objectives of the assessment
- Clarify details of the assessment plan and schedule
- Allow the host university to introduce the university and its key management staff

Typical opening statements by the chairperson of the assessment team are as follows:

"Good morning ladies and gentlemen. My name is XXX and my colleagues are YYY. We are the assessment panel from the AUN-QA Network.

At the request of your university, we are glad to make a quality assessment at the institutional level under the AUN-QA criteria and requirements. The scope of the assessment will cover the XXX campus of the institution. We will be looking at the activities that are relevant to these areas. We will be following a schedule as agreed earlier and do let us know if there are any changes. The assessment will take about 6 days.

A closing session will be held on the final day of the assessment where we will be presenting the preliminary assessment findings.

Before we proceed, is there anything that you would like to ask? (Pause for a second).

Thank you and you may now introduce the members in your team."

<u>Interviews</u>

Interviews with various stakeholders are normally pre-arranged by the host university prior to the site assessment. In this interview, the team can ask for clarification of any obscurities and explanation of any topics that are not clear.

The interviews with the stakeholders provide a very rich source of information, but the information needs to be checked and cross-validated with objective evidence and other relevant stakeholders. All stakeholders' interviews should be held according to the requirements stated in this manual and the "Guidelines for AUN-QA Assessment and Assessors, Version 2".

In each interview, the assessor will usually go through several steps including informing the interviewees about the purpose of the interview, gather background information about the interviewees and conducting the actual interview.

Objectives of Interview are to:

- Gather information and evidences
- Clarify and verify SAR and practices
- Give interviewees opportunity to present the full picture

It is important for the assessors to talk less and listen more as the purpose of the interview is to ensure a fair and objective view of the assessment. In preparing the interview, the assessor should consider the following:

- Know the interviewees
    - Language
    - Education
    - Specialisation or area of interests

- Plan the questions
    - Focus on the criteria
    - Phrase questions as neutrally as possible to avoid bias
    - Use open-ended questioning technique (5Ws and 1H) to probe for information
    - Use close-ended questions to confirm information
    - Manage time to cover different criteria and interviewees

An interviewing process consists of 3 phases as follows:

- Introduction
- Questioning
- Conclusion

At the introduction phase, the following items should be carried out:

- Introduce the assessment panel
- Explain purpose of the interview
- Put interviewees at ease
- Get to know the background of interviewees (e.g. years of service or study, current position, scope of work, etc.), if necessary

During questioning, do take note of the following factors:

- Use reassuring tones and approach in a respectful manner
- Assure interviewees that the session is strictly confidential and no information will be attributed to any one individual
- Lead the discussion
- Take note
- Keep to the agenda
- Watch your time

Use effective questioning techniques:

- Ask one question at a time. Give interviewees ample time to respond before moving to the next question.
- Use open-ended questions to probe for information.
- Use close-ended questions to confirm information.
- Avoid leading questions
- Try to use neutral language. Avoid words like never, bad, good, always, weak, etc.

Before concluding the interview, do the following:

- Ask if interviewees have anything else to add. This gives them some control over the interview and a chance to tell you something important that might not be on the list.
- Thank the interviewees for their time

Four basic techniques in active listening are:

1. Mirroring. Restating what the interviewee says using different words. Restate in such a way as to encourage the interviewee to go on.
2. Using silences. Silence may make people feel uncomfortable in a conversation. However, not every gap in a conversation needs to be filled. Distinguish between positive and negative silences where the interviewee is thinking. During a negative silence where the interviewee is not able to respond, provide help.
3. Acknowledging. Remind the interviewee periodically that you are listening with words like "Yes", "I see", "Um..m". Use body language like nodding and eye contact without interrupting the interviewee unnecessarily.

4. Open-ended questioning. Use questions that encourage the interviewees to think further rather than give a straight "Yes" or "No" answer. Close ended questions often cut the natural flow of the interviewee's thoughts, make them feel interrogated and put them on the defensive.

<u>Objective Evidence</u>

Evidence should be collected on all matters related to the assessment objectives and scope. Checklist can be used to aid the collection of evidence. Evidence should be collected through:

- Interviews
- Examination of documents/records (physical and electronic)
- Observation of activities and facilities
- Site tour
- Use of statistical methods such as sampling can be used to increase efficiency during assessment. However, the sample should be a fair representation of the area under examination.

Site tour can be planned before or between interviews. The site tour normally includes visit to lecture halls, tutorial rooms, laboratories, workshops or practical rooms, libraries and computer labs. Special attention should be paid to the environment in the facilities, condition of the equipment and tools, cleanliness and maintenance of the facilities. Site tour also provides the assessors an opportunity to clarify the findings or SAR with other staff and students.

3.7.3 Check Phase

The "Check" phase involves report preparation and presentation of the assessment findings (Appendix D).

At the end of the assessment, prior to preparing the final report, the assessment team may hold a clarification meeting with the host university's management representatives and those responsible for the quality assurance system.

The purpose of the meeting is to:

- present the preliminary results of the assessment
- ensure that the results of the assessment are clearly understood
- provide an opportunity for clarification
- conclude the assessment

The meeting is part of the "Check" phase and it helps the assessors to prepare an objective and factual report. It gives the assessors and assessees an opportunity to clarify doubts and to seek a better understanding of the QA processes and how the AUN-QA criteria are being fulfilled. It helps to identify and agree on the areas for improvement and provides the motivational force for the university to improve its QA system. The 2-way communication in the "Check" phase would make the university more receptive to the findings and help to build a closer and enduring relationship between the assessors and the university.

Assessment Report

The objectives of assessment report are:

- Level of performance based on AUN-QA criteria and requirements
- Key strengths of institution
- Areas for improvement

The steps to prepare assessment report are illustrated in Figure 3.11.

Review Assessment Findings	• Verify evidence
Identify Strengths	• Areas which meet criteria • Areas which are best practices
Establish Areas for Improvement	• Areas which need improvement • Areas which are major weaknesses
Clarify Findings	• Confirm areas in doubt • Agree on improvement areas • Presentation of findings at closing meeting
Establish Ratings	• Establish and agree on level of performance or rating • Reconciliation of ratings between teams for common criteria
Prepare Final Report	• Using AUN-QA Assessment Results Template • Final report

Figure 3.11 – Steps in Preparing Assessment Report

To prepare a creditable and objective report, the assessment panel has to verify the evidences gathered and agree on the strengths and weaknesses of the QA practices adopted by the institution. Next is to establish the gaps against the AUN-QA criteria and suggest areas for improvement. Based on the findings, the assessment panel has to establish and agree on the level of performance or rating. Any differences should be resolved through factual and objective evidences against the best known practices. Reconciliation of ratings of common criteria should be carried out to ensure consistency of results.

A 7-point rating scale is used for AUN-QA assessment. It provides universities and assessors an instrument for scaling their verdicts and to see how far they have progressed in their AUN-QA journey. The 7-point rating scale is described below.

Rating	Description
1	**Absolutely Inadequate** The QA practice to fulfil the criterion is not implemented. There are no plans, documents, evidences or results available. Immediate improvement must be made.
2	**Inadequate and Improvement is Necessary** The QA practice to fulfil the criterion is still at its planning stage or is inadequate where improvement is necessary. There is little document or evidence available. Performance of the QA practice shows little or poor results.
3	**Inadequate but Minor Improvement Will Make It Adequate** The QA practice to fulfil the criterion is defined and implemented but minor improvement is needed to fully meet them. Documents are available but no clear evidence to support that they have been fully used. Performance of the QA practice shows inconsistent or some results.
4	**Adequate as Expected** The QA practice to fulfil the criterion is adequate and evidences support that it has been fully implemented. Performance of the QA practice shows consistent results as expected.
5	**Better Than Adequate** The QA practice to fulfil the criterion is better than adequate. Evidences support that it has been efficiently implemented. Performance of the QA practice shows good results and positive improvement trend.
6	**Example of Best Practices** The QA practice to fulfil the criterion is considered to be example of best practices in the field. Evidences support that it has been effectively implemented. Performance of QA practice shows very good results and positive improvement trend.
7	**Excellent (Example of World-class or Leading Practices)** The QA practice to fulfil the criterion is considered to be excellent or example of world-class practices in the field. Evidences support that it has been innovatively implemented. Performance of the QA practice shows excellent results and outstanding improvement trends.

The rating for each criterion is given holistically from a scale of 1 to 7. However, rating for each sub-criterion will only be used by the assessors to derive the score for each criterion using Appendix C and will not be disclosed to the institution.

The overall rating for strategic QA, systemic QA, functional QA and results will be given holistically based on the ratings of the criteria under each area. For institution to receive the AUN-QA Network certificate, at least a rating of 4 and above must be obtained for Strategic QA, Systemic QA, Functional QA and Results. The certificate will be valid for a period of 5 years and an interim report has to be submitted by the institution to AUN-QA Network Secretariat after 2 years from the assessment date.

Before making the final presentation to the management of the institution, the assessment panel should clarify any doubts and agree on the areas for improvement with the key management staff of the institution, if necessary. The report should not be judgemental such as using the word "frequently". Instead state the comment factually and indicate the importance of having the practice or process. The final report should be prepared using the AUN-QA Assessment Report Template in Appendix E.

In writing feedback report, do adhere to the following guidelines:

- Feedback must be:
    - Objective
    - Based on evidence
    - Encouraging
    - Part of a "learning" process
- Feedback must not:
    - Ridicule
    - Mandate solution
    - Be insensitive to the overall effort
    - Ignore the achievement made

Constructive feedback is fundamental to an effective assessment. It would help the institution to determine its readiness in meeting AUN-QA criteria and requirements. It also provides the basis for feedback on areas that the institution needs to improve. Constructive feedback should:

- Use clear, simple, grammatically correct and complete sentences. They help to reduce the time needed to clarify points.
- Avoid jargons or acronyms
- Use positive tone, be specific to guide improvement and comment only on areas contained in the criteria.
- Be non-prescriptive – state observations and improvement areas rather than solutions.

A closing meeting is usually done by the Chair of the institutional QA assessment panel. Typical closing meeting statements include:

"Good morning ladies and gentlemen. On behalf of the assessment panel, I would like to thank you and your staff for the hospitality and assistance which you have given us throughout the assessment. We have enjoyed the friendly atmosphere during the assessment.

First, I would like to reiterate the purpose and scope of this assessment under the AUN-QA criteria at institutional level. The assessment has been carried out on the basis of a prepared plan which involved examining a representative sample of the activities. With your kind consent, I will present the preliminary results and findings from the team. A final report will be sent to your university at a later date."

3.7.4 Act Phase

The "Act" phase involves preparing the final report and the assessment feedback. The final report consists of a summary and the detailed assessment results (see Appendix E). A typical summary of the report is reproduced below.

This report is based on the information provided in the self-assessment report (SAR), evidences, site tour and interviews with selected stakeholders including key management of the governing body and institution, academic and support staff, students, alumni and employers. It should be read together with the preliminary findings presented at the closing session where the key strengths and areas for improvement were highlighted.

The AUN-QA assessment at institutional level covers 25 criteria and each criterion is assessed based on a 7-point scale. The summary of the assessment results is as follows:

Criteria	Score
Strategic QA	
1. Vision, Mission and Culture	
2. Governance	
3. Leadership and Management	
4. Strategic Management	
5. Human Resources Management	
6. Policies for Education, Research and Service	
7. Financial and Physical Resources Management	
8. External Relations and Networks	
Systemic QA	
9. Internal Quality Assurance (IQA) System	
10. Internal and External QA Assessment	
11. IQA Information Management	
12. Quality Enhancement	
Functional QA	
13. Student Recruitment and Admission	
14. Curriculum Design and Review	
15. Teaching and Learning	
16. Student Assessment	
17. Student Services and Support	
18. Research Management	
19. Intellectual Property Management	
20. Research Collaboration and Partnerships	
21. Community Engagement and Service	
Results	
22. Educational Results	
23. Research Results	
24. Service Results	
25. Financial and Market Results	

Based on the assessment results, XXX institution has fulfilled/not fulfilled the requirements of AUN-QA Framework for Institutional Level. For institution to receive the AUN-QA Network certificate, at least a rating of 4 and above must be obtained for Strategic QA, Systemic QA, Functional QA and Results.

After the assessment panel has completed and sent a copy of the report to AUN-QA Network Secretariat, they will forward it together with a copy of the feedback report (Appendix F) to the university being assessed. The purpose of the feedback report is to help in improving the assessment process.

4.   Appendices

Appendix A – Checklist for AUN-QA Assessment at Institutional Level
Appendix B – AUN-QA Assessment Planning for Institutional Level Template
Appendix C – AUN-QA Assessment Report for Institutional Level
              (Working Copy for Assessors) Template
Appendix D – AUN-QA Assessment Presentation for Institutional Level
              (Sample Slide Template)
Appendix E – AUN-QA Assessment Report for Institutional Level Template
Appendix F – AUN-QA Assessment Feedback Report

Appendix A

Checklist for AUN-QA Assessment at Institutional Level

1		Vision, Mission and Culture	1	2	3	4	5	6	7
1.1	P	Senior Leaders ensure that the vision and mission meet stakeholders' needs and to their satisfaction.							
1.2	P	Senior Leaders foster culture including a set of values to align with the vision and mission of the institution.							
1.3	D	The vision, mission and culture are articulated, cascaded and demonstrated for implementation.							
1.4	C	Review of the vision, mission and culture is carried out to meet stakeholders' needs and to their satisfaction.							
1.5	A	The vision, mission and culture, and their development processes are improved to meet stakeholders' needs and to their satisfaction							
		Overall opinion							
2		**Governance**							
2.1	P	Governance system including board, council, senate and/or advisory committee is established to set strategic directions given the specific context of the institution, and to ensure accountability, sustainability and transparency as well as to mitigate potential risks.							
2.2	D	Decisions from governance bodies are translated into action plans, policies and guidelines for implementation.							
2.3	C	Review of the governance system of the institution is carried out.							
2.4	A	The governance system of the institution is improved for institutional effectiveness and better risk management.							
		Overall opinion							

3		**Leadership and Management**	1	2	3	4	5	6	7
3.1	P	Senior Leaders establishes management structure with defined roles and responsibilities, decision-making, communication and reporting to achieve the vision, mission and culture; and strategic goals of the institution.							
3.2	D	Senior leaders involve in communicating and engaging stakeholders in driving the vision, mission and culture; and strategic goals of the institution.							
3.3	C	Review of the leadership and management structure of the institution is carried out.							
3.4	A	The leadership and management structure of the institution are improved for management effectiveness and to achieve desired levels of organisational performance.							
		Overall opinion							
4		**Strategic Management**							
4.1	P	Strategy planning is carried out to fulfill the vison, mission and culture as well as the strategic goals of education, research and service.							
4.2	D	Strategic plan is cascaded and translated into long and short-term action plans for implementation.							
4.3	C	Key performance indicators and targets are established to measure the performance of strategic goals of the institution.							
4.4	A	The strategic planning process as well as key performance indicators and targets are improved to meet the strategic goals of the institution.							
		Overall opinion							
5		**Policies for Education, Research and Service**							
5.1	P	System to formulate policies for education, research and service is established.							
5.2	D	Process to monitor the compliance of policies is documented, communicated and implemented.							
5.3	C	Review of policies for education, research and service is carried out.							
5.4	A	Policies for education, research and service are improved for institutional effectiveness and to meet stakeholders' needs and to their satisfaction.							
		Overall opinion							

6		**Human Resources Management**	1	2	3	4	5	6	7
6.1	P	Human resource planning (considering succession, promotion, redeployment, termination, and retirement) is carried out to fulfill the needs for education, research and service.							
6.2	P	Recruitment and selection criteria including ethics and academic freedom for appointment, deployment and promotion are determined and communicated.							
6.3	P	Competences including leadership skills of various staff categories are identified and established.							
6.4	D	Training and developmental needs of staff are identified and activities are implemented to fulfill them.							
6.5	D	Performance management system including rewards, recognition and coaching/mentoring schemes is implemented to motivate and support education, research and service.							
6.6	C	Review of the human resource plans, policies, procedures, and schemes is carried out.							
6.7	A	The human resource plans, policies, procedures, and schemes are improved to support education, research and service.							
		Overall opinion							

7		Financial and Physical Resources Management	1	2	3	4	5	6	7
7.1	P D C A	System to plan, implement, audit and improve the financial resources of the institution to support its vision, mission and strategic goals in education, research and service is established and implemented.							
7.2	P D C A	System to plan, maintain, evaluate and improve the physical facilities and infrastructure such as teaching and learning facilities, laboratories, equipment and tools etc. to meet the needs of education, research and service is established and implemented.							
7.3	P D C A	System to plan, maintain, audit and improve the IT facilities and infrastructure such as computers, networks, backup, security and access rights to meet the needs of education, research and service is established and implemented.							
7.4	P D C A	System to plan, maintain, evaluate and improve the academic resources such as library resources, teaching aids, online databases, etc. to meet the needs of education, research and service is established and implemented.							
7.5	P D C A	System to plan, implement, evaluate and improve the environment, health and safety and access to people of special needs is established and implemented.							
		Overall opinion							
8		**External Relations and Networks**							
8.1	P	Plan for external relations, networks and partnerships is established to achieve the vision, mission and strategic goals of the institution.							
8.2	D	Policies, procedures and agreements to foster external relations, networks and partnerships are implemented.							
8.3	C	Review of the external relations, networks and partnerships is carried out.							
8.4	A	External relations, networks and partnerships are improved to achieve the vision, mission and strategic goals of the institution.							
		Overall opinion							

9		Internal Quality Assurance (IQA) System	1	2	3	4	5	6	7
9.1	P	Structures, roles and responsibilities and accountability of IQA are established to meet the strategic goals and quality assurance of the institution.							
9.2	P	Strategic QA plan encompassing strategies, policies, stakeholders' engagement and activities as well as QA promotion and training is established to meet the strategic goals and quality assurance of the institution.							
9.3	D	The strategic QA plan is cascaded and translated into long and short-term action plans for implementation.							
9.4	D	System to document, review and communicate QA policies, systems, processes and procedures is implemented.							
9.5	C	Key performance indicators and targets are established to measure the performance of the quality assurance in the institution.							
9.6	A	The strategic QA planning process and key performance indicators & targets are improved to meet the strategic goals and quality assurance of the institution.							
		Overall opinion							
10		**Internal and External QA Assessment**							
10.1	P	Plan for internal and external QA assessment is established.							
10.2	D	The internal and external QA assessment is regularly carried out by trained and independent staff and/or experts.							
10.3	C	The findings and results of the internal and external QA assessment are reviewed.							
10.4	A	The internal and external QA assessment processes are improved to meet the strategic goals of the institution.							
		Overall opinion							

11		IQA Information System	1	2	3	4	5	6	7
11.1	P	Plan for IQA information management including collection, processing and reporting data and information to and from stakeholders in supporting education, research and service is established.							
11.2	D	IQA information including data analytics is relevant, accurate and readily available to stakeholders in a timely manner that aid decision making while assuring integrity, confidentiality and security of them.							
11.3	C	Review of IQA information management system, and the quantity and quality of data and information as well as the integrity, confidentiality and security of them is carried out.							
11.4	A	The management of IQA information and their plans, processes and policies are improved to support education, research and service.							
		Overall opinion							
12		**Quality Enhancement**							
12.1	P	Plan to continually enhance institutional quality including policies, systems, processes, procedures and resources to seek best practices in education, research and service is established.							
12.2	P	Criteria for selecting comparative and benchmarking information and partners to improve performance are established.							
12.3	D	Comparative and benchmarking information to enhance QA practices and encourage innovation is carried out.							
12.4	C	Review of the process for selection and use of comparative and benchmarking information is carried out.							
12.5	A	The process for selection and use of comparative and benchmarking information is improved to continually seek best practices in education, research and service.							
		Overall opinion							

13		**Student Recruitment and Admission**	1	2	3	4	5	6	7
13.1	P	Plans, policies and communication for student admission to various programmes are established.							
13.2	P	Criteria to select quality students for each programme are established.							
13.3	D	Procedures to monitor the implementation of the recruitment and admission of students are in place.							
13.4	C	Measures are established to monitor student recruitment and admission.							
13.5	A	Student recruitment and admission are improved to ensure that they remain relevant and effective							
		Overall opinion							
14		**Curriculum Design and Review**							
14.1	P	System to design, develop, monitor, review and approve curricula for all study programmes and courses with input and feedback from stakeholders is established.							
14.2	P	System to formulate and align expected learning outcomes of the programme and its courses to the stakeholders' needs is established.							
14.3	D	Syllabi and delivery plans of the programme and its courses are documented, communicated and delivered based on the expected learning outcomes.							
14.4	C	Review of the curriculum design and review process, and curricula is carried out.							
14.5	A	The curriculum design and review process, and curricula are improved to ensure that they remain relevant and up-to-date to meet the changing needs of the stakeholders.							
		Overall opinion							

15		Teaching and Learning	1	2	3	4	5	6	7
15.1	P	System to select appropriate teaching and learning activities that are aligned to the educational philosophy and the achievement of the expected learning outcomes is established.							
15.2	D	System to engage, assign and approve academic staff deployment based on merit, qualification, expertise and experience is implemented.							
15.3	D	Teaching and learning activities enhance life-long learning and are constructively aligned to the achievement of the expected learning outcomes.							
15.4	C	Teaching and learning activities are monitored and evaluated for quality and improvement.							
15.5	A	The educational philosophy and teaching and learning activities are improved to achieve the expected learning outcomes, quality of teaching and learning and life-long learning.							
		Overall opinion							
16		**Student Assessment**							
16.1	P	System to plan and select appropriate types of student assessment during the course of study is established.							
16.2	D	The student assessment is constructively aligned to the achievement of the expected learning outcomes.							
16.3	C	The student assessment methods and the results of the assessment are reviewed to ensure validity, reliability and fairness and the achievement of the expected learning outcomes.							
16.4	A	The types of student assessment and assessment methods are improved to ensure their validity and reliability towards the achievement of expected learning outcomes.							
		Overall opinion							

17		**Student Services and Support**	1	2	3	4	5	6	7
17.1	P	Student services and support; and student monitoring system are planned.							
17.2	D	Student services and support; and student monitoring system are implemented to meet the needs of stakeholders.							
17.3	C	Review of student services and support; and student monitoring system is carried out.							
17.4	A	Student services and support; and student monitoring system are improved to meet stakeholders' needs and to their satisfaction.							
		Overall opinion							
18		**Research Management**							
18.1	P	System to oversee, direct, implement, monitor and review research activities, resources, research staff quality and research related activities is established.							
18.2	D	Strategic approach to source for research funding and to promote research, innovation, collaboration, research excellence is implemented to achieve the vision and mission of the institution.							
18.3	C	Key performance indicators are used to evaluate the quantity and quality of research.							
18.4	A	Research management is improved to raise the level of research and innovation.							
		Overall opinion							
19		**Intellectual Property Management**							
19.1	P	System to manage and protect inventions, patents, copyrights, research results is established.							
19.2	D	System to record, store and retrieve intellectual property is implemented.							
19.3	C	System to review the management of intellectual property is carried out.							
19.4	A	The management of intellectual property is improved to protect the university and research staff, and public interests.							
		Overall opinion							

20		**Research Collaboration and Partnerships**	1	2	3	4	5	6	7
20.1	P	System to establish research collaboration and partnerships to meet research goals is established.							
20.2	D	Policies and procedures to foster collaboration and partnerships are implemented.							
20.3	C	System to review the effectiveness of research collaboration and partnerships is carried out.							
20.4	A	Research collaboration and partnerships are improved to meet research goals.							
		Overall opinion							
21		**Community Engagement and Service**							
21.1	P	Plan to engage community and to provide service to meet the vision and mission of the university is established.							
21.2	D	Policies and guidelines for community engagement and service are implemented.							
21.3	C	System to measure and monitor the community engagement and services is carried out.							
21.4	A	The provision of community service and community engagement is improved to meet stakeholders' needs and to their satisfaction.							
		Overall opinion							
22		**Educational Results**							
22.1		The pass rates and dropout rates of all study programmes and courses are established, monitored and benchmarked for improvement							
22.2		The average time to graduate for all study programmes is established, monitored and benchmarked for improvement							
22.3		Employability of graduates of all study programmes is established, monitored and benchmarked for improvement							
22.4		The satisfaction levels of stakeholders on the quality of graduates are established, monitored and benchmarked for improvement.							
		Overall opinion							

23		Research Results	1	2	3	4	5	6	7
23.1		The type and volume of research activities by academic and research staff are established, monitored and benchmarked for improvement.							
23.2		The type and volume of research activities by students are established, monitored and benchmarked for improvement.							
23.3		The type and volume of research publications including citations are established, monitored and benchmarked for improvement.							
23.4		The type and volume of intellectual property are established, monitored and benchmarked for improvement.							
23.5		The amount of research fund for each type of research activity is established, monitored and benchmarked for improvement.							
23.6		The result of research and innovation, including commercialisation, incubation, establishment of start-ups, etc., is established, monitored and benchmarked for improvement.							
		Overall opinion							
24		**Service Results**							
24.1		The type and volume of community engagement and service; and contribution to society are established, monitored and benchmarked for improvement.							
24.2		The societal impact and achievement of the community engagement and service; and contribution to society are established, monitored and benchmarked for improvement.							
24.3		Impact on students and staff of community engagement and service is established, monitored and benchmarked for improvement.							
24.4		The satisfaction of stakeholders in community engagement and service; and contribution to society is established, monitored and benchmarked for improvement.							
		Overall opinion							

25		**Financial and Market Results**							
25.1		Financial performance and indicators for education, research and service are established, monitored and benchmarked for improvement.							
25.2		Market performance and indicators for education, research and service are established, monitored and benchmarked for improvement.							
		Overall opinion							

AUN-QA ASSESSMENT PLANNING (INSTITUTIONAL LEVEL)

AUN-QA Assessment No.:	Date of Assessment:
Name of Institution:	
Address of Institution:	
Name of President/Vice-Chancellor:	
Name of Management Representative/Designation:	Email:
Assessment Panel (Name of Assessors):	

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
1. Vision, Mission and Culture	1.1 [P] Senior Leaders ensure that the vision and mission meet stakeholders' needs and to their satisfaction				
1. Vision, Mission and Culture	1.2 [P] Senior Leaders foster culture including a set of values to align with the vision and mission of the institution				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
1. Vision, Mission and Culture	1.3 [D] The vision, mission and culture are articulated, cascaded and demonstrated for implementation				
1. Vision, Mission and Culture	1.4 [C] Review of the vision, mission and culture is carried out to meet stakeholders' needs and to their satisfaction				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
1. Vision, Mission and Culture	1.5 [A] The vision, mission and culture, and their development processes are improved to meet stakeholders' needs and to their satisfaction				
2. Governance	2.1 [P] Governance system including board, council, senate and/or advisory committee is established to set strategic directions given the specific context of the institution, and to ensure accountability, sustainability and transparency as well as to mitigate potential risks				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
2. Governance	2.2 [D] Decisions from governance bodies are translated into action plans, policies and guidelines for implementation				
2. Governance	2.3 [C] Review of the governance system of the institution is carried out.				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
2. Governance	2.4 [A] The governance system of the institution is improved for institutional effectiveness and better risk management				
3. Leadership and Management	3.1 [P] Senior Leaders establishes management structure with defined roles and responsibilities, decision-making, communication and reporting to achieve the vision, mission and culture; and strategic goals of the institution				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
3. Leadership and Management	3.2 [D] Senior leaders involve in communicating and engaging stakeholders in driving the vision, mission and culture; and strategic goals of the institution				
3. Leadership and Management	3.3 [C] Review of the leadership and management structure of the institution is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
3. Leadership and Management	3.4 [A] The leadership and management structure of the institution are improved for management effectiveness and to achieve desired levels of organisational performance				
4. Strategic Management	4.1 [P] Strategy planning is carried out to fulfill the vison, mission and culture as well as the strategic goals of education, research and service				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
4. Strategic Management	4.2 [D] Strategic plan is cascaded and translated into long and short-term action plans for implementation				
4. Strategic Management	4.3 [C] Key performance indicators and targets are established to measure the performance of strategic goals of the institution				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
4. Strategic Management	4.4 [A] The strategic planning process as well as key performance indicators and targets are improved to meet the strategic goals of the institution				
5. Policies for Education, Research and Service	5.1 [P] System to formulate policies for education, research and service is established				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
5. Policies for Education, Research and Service	5.2 [D] Process to monitor the compliance of policies is documented, communicated and implemented				
5. Policies for Education, Research and Service	5.3 [C] Review of policies for education, research and service is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
5. Policies for Education, Research and Service	5.4 [A] Policies for education, research and service are improved for institutional effectiveness and to meet stakeholders' needs and to their satisfaction				
6. Human Resources Management	6.1 [P] Human resource planning (considering succession, promotion, redeployment, termination, and retirement) is carried out to fulfill the needs for education, research and service				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
6. Human Resources Management	6.2 [P] Recruitment and selection criteria including ethics and academic freedom for appointment, deployment and promotion are determined and communicated				
6. Human Resources Management	6.3 [P] Competences including leadership skills of various staff categories are identified and established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
6. Human Resources Management	6.4 [D] Training and developmental needs of staff are identified and activities are implemented to fulfill them				
6. Human Resources Management	6.5 [D] Performance management system including rewards, recognition and coaching/ mentoring schemes is implemented to motivate and support education, research and service				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
6. Human Resources Management	6.6 [C] Review of the human resource plans, policies, procedures, and schemes is carried out				
6. Human Resources Management	6.7 [A] The human resource plans, policies, procedures, and schemes are improved to support education, research and service				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
7. Financial and Physical Resources Management	7.1 [PDCA] System to plan, implement, audit and improve the financial resources of the institution to support its vision, mission and strategic goals in education, research and service is established and implemented				
7. Financial and Physical Resources Management	7.2 [PDCA] System to plan, maintain, evaluate and improve the physical facilities and infrastructure such as teaching and learning facilities, laboratories, equipment and tools etc. to meet the needs of education, research and service is established and implemented				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
7. Financial and Physical Resources Management	7.3 [PDCA] System to plan, maintain, audit and improve the IT facilities and infrastructure such as computers, networks, backup, security and access rights to meet the needs of education, research and service is established and implemented				
7. Financial and Physical Resources Management	7.4 [PDCA] System to plan, maintain, evaluate and improve the academic resources such as library resources, teaching aids, online databases, etc. to meet the needs of education, research and service is established and implemented				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
7. Financial and Physical Resources Management	7.5 [PDCA] System to plan, implement, evaluate and improve the environment, health and safety and access to people of special needs is established and implemented				
8. External Relations and Networks	8.1 [P] Plan for external relations, networks and partnerships is established to achieve the vision, mission and strategic goals of the institution				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
8. External Relations and Networks	8.2 [D] Policies, procedures and agreements to foster external relations, networks and partnerships are implemented				
8. External Relations and Networks	8.3 [C] Review of the external relations, networks and partnerships is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
8. External Relations and Networks	8.4 [A] External relations, networks and partnerships are improved to achieve the vision, mission and strategic goals of the institution				
9. Internal Quality Assurance (IQA) System	9.1 [P] Structures, roles and responsibilities and accountability of IQA are established to meet the strategic goals and quality assurance of the institution				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
9. Internal Quality Assurance (IQA) System	9.2 [P] Strategic QA plan encompassing strategies, policies, stakeholders' engagement and activities as well as QA promotion and training is established to meet the strategic goals and quality assurance of the institution				
9. Internal Quality Assurance (IQA) System	9.3 [D] The strategic QA plan is cascaded and translated into long and short-term action plans for implementation				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
9. Internal Quality Assurance (IQA) System	9.4 [D] System to document, review and communicate QA policies, systems, processes and procedures is implemented				
9. Internal Quality Assurance (IQA) System	9.5 [C] Key performance indicators and targets are established to measure the performance of the quality assurance in the institution				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
9. Internal Quality Assurance (IQA) System	9.6 [A] The strategic QA planning process and key performance indicators & targets are improved to meet the strategic goals and quality assurance of the institution				
10. Internal and External QA Assessment	10.1 [P] Plan for internal and external QA assessment is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
10. Internal and External QA Assessment	10.2 [D] The internal and external QA assessment is regularly carried out by trained and independent staff and/or experts				
10. Internal and External QA Assessment	10.3 [C] The findings and results of the internal and external QA assessment are reviewed				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
10. Internal and External QA Assessment	10.4 [A] The internal and external QA assessment processes are improved to meet the strategic goals of the institution				
11. IQA Information System	11.1 [P] Plan for IQA information management including collection, processing and reporting data and information to and from stakeholders in supporting education, research and service is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
11. IQA Information System	11.2 [D] IQA information including data analytics is relevant, accurate and readily available to stakeholders in a timely manner that aid decision making while assuring integrity, confidentiality and security of them				
11. IQA Information System	11.3 [C] Review of IQA information management system, and the quantity and quality of data and information as well as the integrity, confidentiality and security of them is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
11. IQA Information System	11.4 [A] The management of IQA information and their plans, processes and policies are improved to support education, research and service				
12. Quality Enhancement	12.1 [P] Plan to continually enhance institutional quality including policies, systems, processes, procedures and resources to seek best practices in education, research and service is established				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
12. Quality Enhancement	12.2 [P] Criteria for selecting comparative and benchmarking information and partners to improve performance are established				
12. Quality Enhancement	12.3 [D] Comparative and benchmarking information to enhance QA practices and encourage innovation is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
12. Quality Enhancement	12.4 [C] Review of the process for selection and use of comparative and benchmarking information is carried out				
12. Quality Enhancement	12.5 [A] The process for selection and use of comparative and benchmarking information is improved to continually seek best practices in education, research and service				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
13. Student Recruitment and Admission	13.1 [P] Plans, policies and communication for student admission to various programmes are established				
13. Student Recruitment and Admission	13.2 [P] Criteria to select quality students for each programme are established				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
13. Student Recruitment and Admission	13.3 [D] Procedures to monitor the implementation of the recruitment and admission of students are in place				
13. Student Recruitment and Admission	13.4 [C] Measures are established to monitor student recruitment and admission				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
13. Student Recruitment and Admission	13.5 [A] Student recruitment and admission are improved to ensure that they remain relevant and effective				
14. Curriculum Design and Review	14.1 [P] System to design, develop, monitor, review and approve curricula for all study programmes and courses with input and feedback from stakeholders is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
14. Curriculum Design and Review	14.2 [P] System to formulate and align expected learning outcomes of the programme and its courses to the stakeholders' needs is established				
14. Curriculum Design and Review	14.3 [D] Syllabi and delivery plans of the programme and its courses are documented, communicated and delivered based on the expected learning outcomes				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
14. Curriculum Design and Review	14.4 [C] Review of the curriculum design and review process, and curricula is carried out				
14. Curriculum Design and Review	14.5 [A] The curriculum design and review process, and curricula are improved to ensure that they remain relevant and up-to-date to meet the changing needs of the stakeholders				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
15. Teaching and Learning	15.1 [P] System to select appropriate teaching and learning activities that are aligned to the educational philosophy and the achievement of the expected learning outcomes is established				
15. Teaching and Learning	15.2 [D] System to engage, assign and approve academic staff deployment based on merit, qualification, expertise and experience is implemented				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
15. Teaching and Learning	15.3 [D] Teaching and learning activities enhance life-long learning and are constructively aligned to the achievement of the expected learning outcomes				
15. Teaching and Learning	15.4 [C] Teaching and learning activities are monitored and evaluated for quality and improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
15. Teaching and Learning	15.5 [A] The educational philosophy and teaching and learning activities are improved to achieve the expected learning outcomes, quality of teaching and learning and life-long learning				
16. Student Assessment	16.1 [P] System to plan and select appropriate types of student assessment during the course of study is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
16. Student Assessment	16.2 [D] The student assessment is constructively aligned to the achievement of the expected learning outcomes				
16. Student Assessment	16.3 [C] The student assessment methods and the results of the assessment are reviewed to ensure validity, reliability and fairness and the achievement of the expected learning outcomes				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
16. Student Assessment	16.4 [A] The types of student assessment and assessment methods are improved to ensure their validity and reliability towards the achievement of expected learning outcomes				
17. Student Services and Support	17.1 [P] Student services and support; and student monitoring system are planned				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
17. Student Services and Support	17.2 [D] Student services and support; and student monitoring system are implemented to meet the needs of stakeholders				
17. Student Services and Support	17.3 [C] Review of student services and support; and student monitoring system is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
17. Student Services and Support	17.4 [A] Student services and support; and student monitoring system are improved to meet stakeholders' needs and to their satisfaction				
18. Research Management	18.1 [P] System to oversee, direct, implement, monitor and review research activities, resources, research staff quality and research related activities is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
18. Research Management	18.2 [D] Strategic approach to source for research funding and to promote research, innovation, collaboration, research excellence is implemented to achieve the vision and mission of the institution				
18. Research Management	18.3 [C] Key performance indicators are used to evaluate the quantity and quality of research				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
18. Research Management	18.4 [A] Research management is improved to raise the level of research and innovation				
19. Intellectual Property Management	19.1 [P] System to manage and protect inventions, patents, copyrights, research results is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
19. Intellectual Property Management	19.2 [D] System to record, store and retrieve intellectual property is implemented				
19. Intellectual Property Management	19.3 [C] System to review the management of intellectual property is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
19. Intellectual Property Management	19.4 [A] The management of intellectual property is improved to protect the university and research staff, and public interests				
20. Research Collaboration and Partnerships	20.1 [P] System to establish research collaboration and partnerships to meet research goals is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
20. Research Collaboration and Partnerships	20.2 [D] Policies and procedures to foster collaboration and partnerships are implemented				
20. Research Collaboration and Partnerships	20.3 [C] System to review the effectiveness of research collaboration and partnerships is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
20. Research Collaboration and Partnerships	20.4 [A] Research collaboration and partnerships are improved to meet research goals				
21. Community Engagement and Service	21.1 [P] Plan to engage community and to provide service to meet the vision and mission of the university is established				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
21. Community Engagement and Service	21.2 [D] Policies and guidelines for community engagement and service are implemented				
21. Community Engagement and Service	21.3 [C] System to measure and monitor the community engagement and services is carried out				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
21. Community Engagement and Service	21.4 [A] The provision of community service and community engagement is improved to meet stakeholders' needs and to their satisfaction				
22.Educational Results	22.1 The pass rates and dropout rates of all study programmes and courses are established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
22.Educational Results	22.2 The average time to graduate for all study programmes is established, monitored and benchmarked for improvement				
22.Educational Results	22.3 Employability of graduates of all study programmes is established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
22.Educational Results	22.4 The satisfaction levels of stakeholders on the quality of graduates are established, monitored and benchmarked for improvement				
23.Research Results	23.1 The type and volume of research activities by academic and research staff are established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
23. Research Results	23.2 The type and volume of research activities by students are established, monitored and benchmarked for improvement				
23. Research Results	23.3 The type and volume of research publications including citations are established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
23.Research Results	23.4 The type and volume of intellectual property are established, monitored and benchmarked for improvement				
23.Research Results	23.5 The amount of research fund for each type of research activity is established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
23.Research Results	23.6 The result of research and innovation, including commercialisation, incubation, establishment of start-ups, etc., is established, monitored and benchmarked for improvement				
24. Service Results	24.1 The type and volume of community engagement and service; and contribution to society are established, monitored and benchmarked for improvement				

	Criteria	Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
24. Service Results	24.2 The societal impact and achievement of the community engagement and service; and contribution to society are established, monitored and benchmarked for improvement				
24. Service Results	24.3 Impact on students and staff of community engagement and service is established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
24. Service Results	24.4 The satisfaction of stakeholders in community engagement and service; and contribution to society is established, monitored and benchmarked for improvement				
25. Financial and Market Results	25.1 Financial performance and indicators for education, research and service are established, monitored and benchmarked for improvement				

Criteria		Strengths	Interview Questions	Sources of Evidence	Areas for Improvement
25. Financial and Market Results	25.2 Market performance and indicators for education, research and service are established, monitored and benchmarked for improvement				

AUN-QA ASSESSMENT REPORT (INSTITUTIONAL LEVEL)
(Working Copy for Assessors)

AUN-QA Assessment No.:	Date of Assessment:
Name of Institution:	
Address of Institution:	
Name of President/Vice-Chancellor:	
Name of Management Representative/Designation:	Email:
Assessment Panel (Name of Assessors):	

Report Summary

This report is based on the information provided in the self-assessment report (SAR), evidences, site tour and interviews with selected stakeholders including key management of the governing body and institution, academic and support staff, students, alumni and employers. It should be read together with the preliminary findings presented at the closing session where the key strengths and areas for improvement were highlighted.

The AUN-QA assessment at institutional level covers 25 criteria and each criterion is assessed based on a 7-point scale. The summary of the assessment results is as follows:

AUN-QA Criteria	Score
Strategic QA	
1. Vision, Mission and Culture	
2. Governance	
3. Leadership and Management	
4. Strategic Management	
5. Human Resources Management	
6. Policies for Education, Research and Service	
7. Financial and Physical Resources Management	
8. External Relations and Networks	
Systemic QA	
9. Internal Quality Assurance (IQA) System	
10. Internal and External QA Assessment	
11. IQA Information Management	
12. Quality Enhancement	

AUN-QA Criteria	Score
Functional QA	
13. Student Recruitment and Admission	
14. Curriculum Design and Review	
15. Teaching and Learning	
16. Student Assessment	
17. Student Services and Support	
18. Research Management	
19. Intellectual Property Management	
20. Research Collaboration and Partnerships	
21. Community Engagement and Service	
Results	
22. Educational Results	
23. Research Results	
24. Service Results	
25. Financial and Market Results	

Based on the assessment results, XXX institution has fulfilled/not fulfilled the requirements of AUN-QA Framework for Institutional Level. For institution to receive the AUN-QA Network certificate, at least a rating of 4 and above must be obtained for Strategic QA, Systemic QA, Functional QA and Results.

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
1. Vision, Mission and Culture	1.1 [P] Senior Leaders ensure that the vision and mission meet stakeholders' needs and to their satisfaction			
1. Vision, Mission and Culture	1.2 [P] Senior Leaders foster culture including a set of values to align with the vision and mission of the institution			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
1. Vision, Mission and Culture	1.3 [D] The vision, mission and culture are articulated, cascaded and demonstrated for implementation			
1. Vision, Mission and Culture	1.4 [C] Review of the vision, mission and culture is carried out to meet stakeholders' needs and to their satisfaction			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
1. Vision, Mission and Culture	1.5 [A] The vision, mission and culture, and their development processes are improved to meet stakeholders' needs and to their satisfaction			
2. Governance	2.1 [P] Governance system including board, council, senate and/or advisory committee is established to set strategic directions given the specific context of the institution, and to ensure accountability, sustainability and transparency as well as to mitigate potential risks			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
2. Governance	2.2 [D] Decisions from governance bodies are translated into action plans, policies and guidelines for implementation			
2. Governance	2.3 [C] Review of the governance system of the institution is carried out.			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
2. Governance	2.4 [A] The governance system of the institution is improved for institutional effectiveness and better risk management			
3. Leadership and Management	3.1 [P] Senior Leaders establishes management structure with defined roles and responsibilities, decision-making, communication and reporting to achieve the vision, mission and culture; and strategic goals of the institution			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
3. Leadership and Management	3.2 [D] Senior leaders involve in communicating and engaging stakeholders in driving the vision, mission and culture; and strategic goals of the institution			
3. Leadership and Management	3.3 [C] Review of the leadership and management structure of the institution is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
3. Leadership and Management	3.4 [A] The leadership and management structure of the institution are improved for management effectiveness and to achieve desired levels of organisational performance			
4. Strategic Management	4.1 [P] Strategy planning is carried out to fulfill the vison, mission and culture as well as the strategic goals of education, research and service			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
4. Strategic Management	4.2 [D] Strategic plan is cascaded and translated into long and short-term action plans for implementation			
4. Strategic Management	4.3 [C] Key performance indicators and targets are established to measure the performance of strategic goals of the institution			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
4. Strategic Management	4.4 [A] The strategic planning process as well as key performance indicators and targets are improved to meet the strategic goals of the institution			
5. Policies for Education, Research and Service	5.1 [P] System to formulate policies for education, research and service is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
5. Policies for Education, Research and Service	5.2 [D] Process to monitor the compliance of policies is documented, communicated and implemented			
5. Policies for Education, Research and Service	5.3 [C] Review of policies for education, research and service is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
5. Policies for Education, Research and Service	5.4 [A] Policies for education, research and service are improved for institutional effectiveness and to meet stakeholders' needs and to their satisfaction			
6. Human Resources Management	6.1 [P] Human resource planning (considering succession, promotion, redeployment, termination, and retirement) is carried out to fulfill the needs for education, research and service			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
6. Human Resources Management	6.2 [P] Recruitment and selection criteria including ethics and academic freedom for appointment, deployment and promotion are determined and communicated			
6. Human Resources Management	6.3 [P] Competences including leadership skills of various staff categories are identified and established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
6. Human Resources Management	6.4 [D] Training and developmental needs of staff are identified and activities are implemented to fulfill them			
6. Human Resources Management	6.5 [D] Performance management system including rewards, recognition and coaching/ mentoring schemes is implemented to motivate and support education, research and service			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
6. Human Resources Management	6.6 [C] Review of the human resource plans, policies, procedures, and schemes is carried out			
6. Human Resources Management	6.7 [A] The human resource plans, policies, procedures, and schemes are improved to support education, research and service			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
7. Financial and Physical Resources Management	7.1 [PDCA] System to plan, implement, audit and improve the financial resources of the institution to support its vision, mission and strategic goals in education, research and service is established and implemented			
7. Financial and Physical Resources Management	7.2 [PDCA] System to plan, maintain, evaluate and improve the physical facilities and infrastructure such as teaching and learning facilities, laboratories, equipment and tools etc. to meet the needs of education, research and service is established and implemented			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
7. Financial and Physical Resources Management	7.3 [PDCA] System to plan, maintain, audit and improve the IT facilities and infrastructure such as computers, networks, backup, security and access rights to meet the needs of education, research and service is established and implemented			
7. Financial and Physical Resources Management	7.4 [PDCA] System to plan, maintain, evaluate and improve the academic resources such as library resources, teaching aids, online databases, etc. to meet the needs of education, research and service is established and implemented			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
7. Financial and Physical Resources Management	7.5 [PDCA] System to plan, implement, evaluate and improve the environment, health and safety and access to people of special needs is established and implemented			
8. External Relations and Networks	8.1 [P] Plan for external relations, networks and partnerships is established to achieve the vision, mission and strategic goals of the institution			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
8. External Relations and Networks	8.2 [D] Policies, procedures and agreements to foster external relations, networks and partnerships are implemented			
8. External Relations and Networks	8.3 [C] Review of the external relations, networks and partnerships is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
8. External Relations and Networks	8.4 [A] External relations, networks and partnerships are improved to achieve the vision, mission and strategic goals of the institution			
9. Internal Quality Assurance (IQA) System	9.1 [P] Structures, roles and responsibilities and accountability of IQA are established to meet the strategic goals and quality assurance of the institution			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
9. Internal Quality Assurance (IQA) System	9.2 [P] Strategic QA plan encompassing strategies, policies, stakeholders' engagement and activities as well as QA promotion and training is established to meet the strategic goals and quality assurance of the institution			
9. Internal Quality Assurance (IQA) System	9.3 [D] The strategic QA plan is cascaded and translated into long and short-term action plans for implementation			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
9. Internal Quality Assurance (IQA) System	9.4 [D] System to document, review and communicate QA policies, systems, processes and procedures is implemented			
9. Internal Quality Assurance (IQA) System	9.5 [C] Key performance indicators and targets are established to measure the performance of the quality assurance in the institution			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
9. Internal Quality Assurance (IQA) System	9.6 [A] The strategic QA planning process and key performance indicators & targets are improved to meet the strategic goals and quality assurance of the institution			
10. Internal and External QA Assessment	10.1 [P] Plan for internal and external QA assessment is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
10. Internal and External QA Assessment	10.2 [D] The internal and external QA assessment is regularly carried out by trained and independent staff and/or experts			
10. Internal and External QA Assessment	10.3 [C] The findings and results of the internal and external QA assessment are reviewed			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
10. Internal and External QA Assessment	10.4 [A] The internal and external QA assessment processes are improved to meet the strategic goals of the institution			
11. IQA Information System	11.1 [P] Plan for IQA information management including collection, processing and reporting data and information to and from stakeholders in supporting education, research and service is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
11. IQA Information System	11.2 [D] IQA information including data analytics is relevant, accurate and readily available to stakeholders in a timely manner that aid decision making while assuring integrity, confidentiality and security of them			
11. IQA Information System	11.3 [C] Review of IQA information management system, and the quantity and quality of data and information as well as the integrity, confidentiality and security of them is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
11. IQA Information System	11.4 [A] The management of IQA information and their plans, processes and policies are improved to support education, research and service			
12. Quality Enhancement	12.1 [P] Plan to continually enhance institutional quality including policies, systems, processes, procedures and resources to seek best practices in education, research and service is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
12. Quality Enhancement	12.2 [P] Criteria for selecting comparative and benchmarking information and partners to improve performance are established			
12. Quality Enhancement	12.3 [D] Comparative and benchmarking information to enhance QA practices and encourage innovation is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
12. Quality Enhancement	12.4 [C] Review of the process for selection and use of comparative and benchmarking information is carried out			
12. Quality Enhancement	12.5 [A] The process for selection and use of comparative and benchmarking information is improved to continually seek best practices in education, research and service			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
13. Student Recruitment and Admission	13.1 [P] Plans, policies and communication for student admission to various programmes are established			
13. Student Recruitment and Admission	13.2 [P] Criteria to select quality students for each programme are established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
13. Student Recruitment and Admission	13.3 [D] Procedures to monitor the implementation of the recruitment and admission of students are in place			
13. Student Recruitment and Admission	13.4 [C] Measures are established to monitor student recruitment and admission			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
13. Student Recruitment and Admission	13.5 [A] Student recruitment and admission are improved to ensure that they remain relevant and effective			
14. Curriculum Design and Review	14.1 [P] System to design, develop, monitor, review and approve curricula for all study programmes and courses with input and feedback from stakeholders is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
14. Curriculum Design and Review	14.2 [P] System to formulate and align expected learning outcomes of the programme and its courses to the stakeholders' needs is established			
14. Curriculum Design and Review	14.3 [D] Syllabi and delivery plans of the programme and its courses are documented, communicated and delivered based on the expected learning outcomes			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
14. Curriculum Design and Review	14.4 [C] Review of the curriculum design and review process, and curricula is carried out			
14. Curriculum Design and Review	14.5 [A] The curriculum design and review process, and curricula are improved to ensure that they remain relevant and up-to-date to meet the changing needs of the stakeholders			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
15. Teaching and Learning	15.1 [P] System to select appropriate teaching and learning activities that are aligned to the educational philosophy and the achievement of the expected learning outcomes is established			
15. Teaching and Learning	15.2 [D] System to engage, assign and approve academic staff deployment based on merit, qualification, expertise and experience is implemented			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
15. Teaching and Learning	15.3 [D] Teaching and learning activities enhance life-long learning and are constructively aligned to the achievement of the expected learning outcomes			
15. Teaching and Learning	15.4 [C] Teaching and learning activities are monitored and evaluated for quality and improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
15. Teaching and Learning	15.5 [A] The educational philosophy and teaching and learning activities are improved to achieve the expected learning outcomes, quality of teaching and learning and life-long learning			
16. Student Assessment	16.1 [P] System to plan and select appropriate types of student assessment during the course of study is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
16. Student Assessment	16.2 [D] The student assessment is constructively aligned to the achievement of the expected learning outcomes			
16. Student Assessment	16.3 [C] The student assessment methods and the results of the assessment are reviewed to ensure validity, reliability and fairness and the achievement of the expected learning outcomes			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
16. Student Assessment	16.4 [A] The types of student assessment and assessment methods are improved to ensure their validity and reliability towards the achievement of expected learning outcomes			
17. Student Services and Support	17.1 [P] Student services and support; and student monitoring system are planned			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
17. Student Services and Support	17.2 [D] Student services and support; and student monitoring system are implemented to meet the needs of stakeholders			
17. Student Services and Support	17.3 [C] Review of student services and support; and student monitoring system is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
17. Student Services and Support	17.4 [A] Student services and support; and student monitoring system are improved to meet stakeholders' needs and to their satisfaction			
18. Research Management	18.1 [P] System to oversee, direct, implement, monitor and review research activities, resources, research staff quality and research related activities is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
18. Research Management	18.2 [D] Strategic approach to source for research funding and to promote research, innovation, collaboration, research excellence is implemented to achieve the vision and mission of the institution			
18. Research Management	18.3 [C] Key performance indicators are used to evaluate the quantity and quality of research			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
18. Research Management	18.4 [A] Research management is improved to raise the level of research and innovation			
19. Intellectual Property Management	19.1 [P] System to manage and protect inventions, patents, copyrights, research results is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
19. Intellectual Property Management	19.2 [D] System to record, store and retrieve intellectual property is implemented			
19. Intellectual Property Management	19.3 [C] System to review the management of intellectual property is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
19. Intellectual Property Management	19.4 [A] The management of intellectual property is improved to protect the university and research staff, and public interests			
20. Research Collaboration and Partnerships	20.1 [P] System to establish research collaboration and partnerships to meet research goals is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
20. Research Collaboration and Partnerships	20.2 [D] Policies and procedures to foster collaboration and partnerships are implemented			
20. Research Collaboration and Partnerships	20.3 [C] System to review the effectiveness of research collaboration and partnerships is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
20. Research Collaboration and Partnerships	20.4 [A] Research collaboration and partnerships are improved to meet research goals			
21. Community Engagement and Service	21.1 [P] Plan to engage community and to provide service to meet the vision and mission of the university is established			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
21. Community Engagement and Service	21.2 [D] Policies and guidelines for community engagement and service are implemented			
21. Community Engagement and Service	21.3 [C] System to measure and monitor the community engagement and services is carried out			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
21. Community Engagement and Service	21.4 [A] The provision of community service and community engagement is improved to meet stakeholders' needs and to their satisfaction			
22.Educational Results	22.1 The pass rates and dropout rates of all study programmes and courses are established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
22.Educational Results	22.2 The average time to graduate for all study programmes is established, monitored and benchmarked for improvement			
22.Educational Results	22.3 Employability of graduates of all study programmes is established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
22.Educational Results	22.4 The satisfaction levels of stakeholders on the quality of graduates are established, monitored and benchmarked for improvement			
23.Research Results	23.1 The type and volume of research activities by academic and research staff are established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
23.Research Results	23.2 The type and volume of research activities by students are established, monitored and benchmarked for improvement			
23.Research Results	23.3 The type and volume of research publications including citations are established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
23.Research Results	23.4 The type and volume of intellectual property are established, monitored and benchmarked for improvement			
23.Research Results	23.5 The amount of research fund for each type of research activity is established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
23.Research Results	23.6 The result of research and innovation, including commercialisation, incubation, establishment of start-ups, etc., is established, monitored and benchmarked for improvement			
24. Service Results	24.1 The type and volume of community engagement and service; and contribution to society are established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
24. Service Results	24.2 The societal impact and achievement of the community engagement and service; and contribution to society are established, monitored and benchmarked for improvement			
24. Service Results	24.3 Impact on students and staff of community engagement and service is established, monitored and benchmarked for improvement			

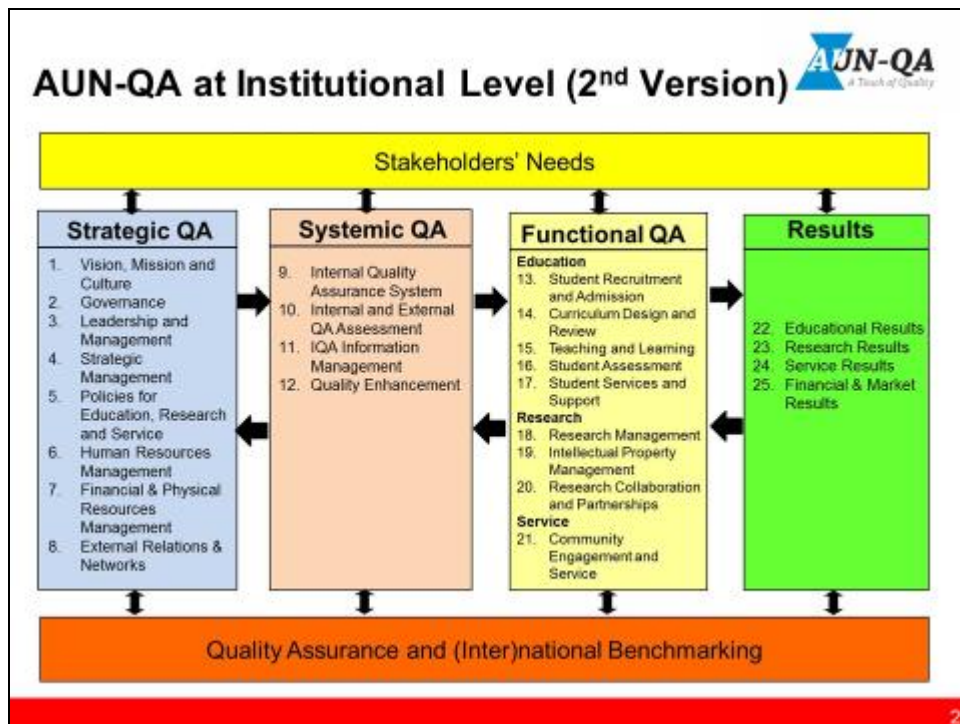| Criteria		Strengths	Areas for Improvement	Score (1 – 7)
24. Service Results	24.4 The satisfaction of stakeholders in community engagement and service; and contribution to society is established, monitored and benchmarked for improvement			
25. Financial and Market Results	25.1 Financial performance and indicators for education, research and service are established, monitored and benchmarked for improvement			

Criteria		Strengths	Areas for Improvement	Score (1 – 7)
25. Financial and Market Results	25.2 Market performance and indicators for education, research and service are established, monitored and benchmarked for improvement			

**AUN-QA Assessment Presentation for Institutional Level
(Sample Slide Template)**

Rating Scale

AUN-QA

Rating	Description
1	**Absolutely Inadequate** The QA practice to fulfil the criterion is not implemented. There are no plans, documents, evidences or results available. Immediate improvement must be made.
2	**Inadequate and Improvement is Necessary** The QA practice to fulfil the criterion is still at its planning stage or is inadequate where improvement is necessary. There is little document or evidence available. Performance of the QA practice shows little or poor results.
3	**Inadequate but Minor Improvement Will Make It Adequate** The QA practice to fulfil the criterion is defined and implemented but minor improvement is needed to fully meet them. Documents are available but no clear evidence to support that they have been fully used. Performance of the QA practice shows inconsistent or some results.

3

Rating Scale

AUN-QA

Rating	Description
4	**Adequate as Expected** The QA practice to fulfil the criterion is adequate and evidences support that it has been fully implemented. Performance of the QA practice shows consistent results as expected.
5	**Better Than Adequate** The QA practice to fulfil the criterion is better than adequate. Evidences support that it has been efficiently implemented. Performance of the QA practice shows good results and positive improvement trend.
6	**Example of Best Practices** The QA practice to fulfil the criterion is considered to be example of best practices in the field. Evidences support that it has been effectively implemented. Performance of QA practice shows very good results and positive improvement trend.
7	**Excellent (Example of World-class or Leading Practices)** The QA practice to fulfil the criterion is considered to be excellent or example of world-class practices in the field. Evidences support that it has been innovatively implemented. Performance of the QA practice shows excellent results and outstanding improvement trends.

4

1. Vision, Mission and Culture

Strengths

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1. Vision, Mission and Culture

Areas for Improvement

ASEAN University Network

AUN-QA ASSESSMENT REPORT (INSTITUTIONAL LEVEL)

AUN-QA Assessment No.:	Date of Assessment:
Name of Institution:	
Address of Institution:	
Name of President/Vice-Chancellor:	
Name of Management Representative/Designation:	Email:
Assessment Panel (Name of Assessors):	

Report Summary

This report is based on the information provided in the self-assessment report (SAR), evidences, site tour and interviews with selected stakeholders including key management of the governing body and institution, academic and support staff, students, alumni and employers. It should be read together with the preliminary findings presented at the closing session where the key strengths and areas for improvement were highlighted.

The AUN-QA assessment at institutional level covers 25 criteria and each criterion is assessed based on a 7-point scale. The summary of the assessment results is as follows:

AUN-QA Criteria	Score
Strategic QA	
1. Vision, Mission and Culture	
2. Governance	
3. Leadership and Management	
4. Strategic Management	
5. Human Resources Management	
6. Policies for Education, Research and Service	
7. Financial and Physical Resources Management	
8. External Relations and Networks	
Systemic QA	
9. Internal Quality Assurance (IQA) System	
10. Internal and External QA Assessment	
11. IQA Information Management	
12. Quality Enhancement	

AUN-QA Criteria	Score
Functional QA	
13. Student Recruitment and Admission	
14. Curriculum Design and Review	
15. Teaching and Learning	
16. Student Assessment	
17. Student Services and Support	
18. Research Management	
19. Intellectual Property Management	
20. Research Collaboration and Partnerships	
21. Community Engagement and Service	
Results	
22. Educational Results	
23. Research Results	
24. Service Results	
25. Financial and Market Results	

Based on the assessment results, XXX institution has fulfilled/not fulfilled the requirements of AUN-QA Framework for Institutional Level. For institution to receive the AUN-QA Network certificate, at least a rating of 4 and above must be obtained for Strategic QA, Systemic QA, Functional QA and Results.

Criteria		Strengths	Areas for Improvement
1. Vision, Mission and Culture	1.1 [P] Senior Leaders ensure that the vision and mission meet stakeholders' needs and to their satisfaction		
1. Vision, Mission and Culture	1.2 [P] Senior Leaders foster culture including a set of values to align with the vision and mission of the institution		

Criteria		Strengths	Areas for Improvement
1. Vision, Mission and Culture	1.3 [D] The vision, mission and culture are articulated, cascaded and demonstrated for implementation		
1. Vision, Mission and Culture	1.4 [C] Review of the vision, mission and culture is carried out to meet stakeholders' needs and to their satisfaction		

Criteria		Strengths	Areas for Improvement
1. Vision, Mission and Culture	1.5 [A] The vision, mission and culture, and their development processes are improved to meet stakeholders' needs and to their satisfaction		
2. Governance	2.1 [P] Governance system including board, council, senate and/or advisory committee is established to set strategic directions given the specific context of the institution, and to ensure accountability, sustainability and transparency as well as to mitigate potential risks		

Criteria		Strengths	Areas for Improvement
2. Governance	2.2 [D] Decisions from governance bodies are translated into action plans, policies and guidelines for implementation		
2. Governance	2.3 [C] Review of the governance system of the institution is carried out.		

Criteria		Strengths	Areas for Improvement
2. Governance	2.4 [A] The governance system of the institution is improved for institutional effectiveness and better risk management		
3. Leadership and Management	3.1 [P] Senior Leaders establishes management structure with defined roles and responsibilities, decision-making, communication and reporting to achieve the vision, mission and culture; and strategic goals of the institution		

Criteria		Strengths	Areas for Improvement
3. Leadership and Management	3.2 [D] Senior leaders involve in communicating and engaging stakeholders in driving the vision, mission and culture; and strategic goals of the institution		
3. Leadership and Management	3.3 [C] Review of the leadership and management structure of the institution is carried out		

Criteria		Strengths	Areas for Improvement
3. Leadership and Management	3.4 [A] The leadership and management structure of the institution are improved for management effectiveness and to achieve desired levels of organisational performance		
4. Strategic Management	4.1 [P] Strategy planning is carried out to fulfill the vison, mission and culture as well as the strategic goals of education, research and service		

Criteria		Strengths	Areas for Improvement
4. Strategic Management	4.2 [D] Strategic plan is cascaded and translated into long and short-term action plans for implementation		
4. Strategic Management	4.3 [C] Key performance indicators and targets are established to measure the performance of strategic goals of the institution		

Criteria		Strengths	Areas for Improvement
4. Strategic Management	4.4 [A] The strategic planning process as well as key performance indicators and targets are improved to meet the strategic goals of the institution		
5. Policies for Education, Research and Service	5.1 [P] System to formulate policies for education, research and service is established		

Criteria		Strengths	Areas for Improvement
5. Policies for Education, Research and Service	5.2 [D] Process to monitor the compliance of policies is documented, communicated and implemented		
5. Policies for Education, Research and Service	5.3 [C] Review of policies for education, research and service is carried out		

Criteria		Strengths	Areas for Improvement
5. Policies for Education, Research and Service	5.4 [A] Policies for education, research and service are improved for institutional effectiveness and to meet stakeholders' needs and to their satisfaction		
6. Human Resources Management	6.1 [P] Human resource planning (considering succession, promotion, redeployment, termination, and retirement) is carried out to fulfill the needs for education, research and service		

Criteria		Strengths	Areas for Improvement
6. Human Resources Management	6.2 [P] Recruitment and selection criteria including ethics and academic freedom for appointment, deployment and promotion are determined and communicated		
6. Human Resources Management	6.3 [P] Competences including leadership skills of various staff categories are identified and established		

Criteria		Strengths	Areas for Improvement
6. Human Resources Management	6.4 [D] Training and developmental needs of staff are identified and activities are implemented to fulfill them		
6. Human Resources Management	6.5 [D] Performance management system including rewards, recognition and coaching/ mentoring schemes is implemented to motivate and support education, research and service		

Criteria		Strengths	Areas for Improvement
6. Human Resources Management	6.6 [C] Review of the human resource plans, policies, procedures, and schemes is carried out		
6. Human Resources Management	6.7 [A] The human resource plans, policies, procedures, and schemes are improved to support education, research and service		

Criteria		Strengths	Areas for Improvement
7. Financial and Physical Resources Management	7.1 [PDCA] System to plan, implement, audit and improve the financial resources of the institution to support its vision, mission and strategic goals in education, research and service is established and implemented		
7. Financial and Physical Resources Management	7.2 [PDCA] System to plan, maintain, evaluate and improve the physical facilities and infrastructure such as teaching and learning facilities, laboratories, equipment and tools etc. to meet the needs of education, research and service is established and implemented		

Criteria		Strengths	Areas for Improvement
7. Financial and Physical Resources Management	7.3 [PDCA] System to plan, maintain, audit and improve the IT facilities and infrastructure such as computers, networks, backup, security and access rights to meet the needs of education, research and service is established and implemented		
7. Financial and Physical Resources Management	7.4 [PDCA] System to plan, maintain, evaluate and improve the academic resources such as library resources, teaching aids, online databases, etc. to meet the needs of education, research and service is established and implemented		

Criteria		Strengths	Areas for Improvement
7. Financial and Physical Resources Management	7.5 [PDCA] System to plan, implement, evaluate and improve the environment, health and safety and access to people of special needs is established and implemented		
8. External Relations and Networks	8.1 [P] Plan for external relations, networks and partnerships is established to achieve the vision, mission and strategic goals of the institution		

Criteria		Strengths	Areas for Improvement
8. External Relations and Networks	8.2 [D] Policies, procedures and agreements to foster external relations, networks and partnerships are implemented		
8. External Relations and Networks	8.3 [C] Review of the external relations, networks and partnerships is carried out		

Criteria		Strengths	Areas for Improvement
8. External Relations and Networks	8.4 [A] External relations, networks and partnerships are improved to achieve the vision, mission and strategic goals of the institution		
9. Internal Quality Assurance (IQA) System	9.1 [P] Structures, roles and responsibilities and accountability of IQA are established to meet the strategic goals and quality assurance of the institution		

Criteria		Strengths	Areas for Improvement
9. Internal Quality Assurance (IQA) System	9.2 [P] Strategic QA plan encompassing strategies, policies, stakeholders' engagement and activities as well as QA promotion and training is established to meet the strategic goals and quality assurance of the institution		
9. Internal Quality Assurance (IQA) System	9.3 [D] The strategic QA plan is cascaded and translated into long and short-term action plans for implementation		

Criteria		Strengths	Areas for Improvement
9. Internal Quality Assurance (IQA) System	9.4 [D] System to document, review and communicate QA policies, systems, processes and procedures is implemented		
9. Internal Quality Assurance (IQA) System	9.5 [C] Key performance indicators and targets are established to measure the performance of the quality assurance in the institution		

Criteria		Strengths	Areas for Improvement
9. Internal Quality Assurance (IQA) System	9.6 [A] The strategic QA planning process and key performance indicators & targets are improved to meet the strategic goals and quality assurance of the institution		
10. Internal and External QA Assessment	10.1 [P] Plan for internal and external QA assessment is established		

Criteria		Strengths	Areas for Improvement
10. Internal and External QA Assessment	10.2 [D] The internal and external QA assessment is regularly carried out by trained and independent staff and/or experts		
10. Internal and External QA Assessment	10.3 [C] The findings and results of the internal and external QA assessment are reviewed		

Criteria		Strengths	Areas for Improvement
10. Internal and External QA Assessment	10.4 [A] The internal and external QA assessment processes are improved to meet the strategic goals of the institution		
11. IQA Information System	11.1 [P] Plan for IQA information management including collection, processing and reporting data and information to and from stakeholders in supporting education, research and service is established		

Criteria		Strengths	Areas for Improvement
11. IQA Information System	11.2 [D] IQA information including data analytics is relevant, accurate and readily available to stakeholders in a timely manner that aid decision making while assuring integrity, confidentiality and security of them		
11. IQA Information System	11.3 [C] Review of IQA information management system, and the quantity and quality of data and information as well as the integrity, confidentiality and security of them is carried out		

<table>
Criteria		Strengths	Areas for Improvement
11. IQA Information System	11.4 [A] The management of IQA information and their plans, processes and policies are improved to support education, research and service		
12. Quality Enhancement	12.1 [P] Plan to continually enhance institutional quality including policies, systems, processes, procedures and resources to seek best practices in education, research and service is established		
</table>

Criteria		Strengths	Areas for Improvement
12. Quality Enhancement	12.2 [P] Criteria for selecting comparative and benchmarking information and partners to improve performance are established		
12. Quality Enhancement	12.3 [D] Comparative and benchmarking information to enhance QA practices and encourage innovation is carried out		

Criteria		Strengths	Areas for Improvement
12. Quality Enhancement	12.4 [C] Review of the process for selection and use of comparative and benchmarking information is carried out		
12. Quality Enhancement	12.5 [A] The process for selection and use of comparative and benchmarking information is improved to continually seek best practices in education, research and service		

Criteria		Strengths	Areas for Improvement
13. Student Recruitment and Admission	13.1 [P] Plans, policies and communication for student admission to various programmes are established		
13. Student Recruitment and Admission	13.2 [P] Criteria to select quality students for each programme are established		

Criteria		Strengths	Areas for Improvement
13. Student Recruitment and Admission	13.3 [D] Procedures to monitor the implementation of the recruitment and admission of students are in place		
13. Student Recruitment and Admission	13.4 [C] Measures are established to monitor student recruitment and admission		

Criteria		Strengths	Areas for Improvement
13. Student Recruitment and Admission	13.5 [A] Student recruitment and admission are improved to ensure that they remain relevant and effective		
14. Curriculum Design and Review	14.1 [P] System to design, develop, monitor, review and approve curricula for all study programmes and courses with input and feedback from stakeholders is established		

Criteria		Strengths	Areas for Improvement
14. Curriculum Design and Review	14.2 [P] System to formulate and align expected learning outcomes of the programme and its courses to the stakeholders' needs is established		
14. Curriculum Design and Review	14.3 [D] Syllabi and delivery plans of the programme and its courses are documented, communicated and delivered based on the expected learning outcomes		

Criteria		Strengths	Areas for Improvement
14. Curriculum Design and Review	14.4 [C] Review of the curriculum design and review process, and curricula is carried out		
14. Curriculum Design and Review	14.5 [A] The curriculum design and review process, and curricula are improved to ensure that they remain relevant and up-to-date to meet the changing needs of the stakeholders		

Criteria		Strengths	Areas for Improvement
15. Teaching and Learning	15.1 [P] System to select appropriate teaching and learning activities that are aligned to the educational philosophy and the achievement of the expected learning outcomes is established		
15. Teaching and Learning	15.2 [D] System to engage, assign and approve academic staff deployment based on merit, qualification, expertise and experience is implemented		

Criteria		Strengths	Areas for Improvement
15. Teaching and Learning	15.3 [D] Teaching and learning activities enhance life-long learning and are constructively aligned to the achievement of the expected learning outcomes		
15. Teaching and Learning	15.4 [C] Teaching and learning activities are monitored and evaluated for quality and improvement		

Criteria		Strengths	Areas for Improvement
15. Teaching and Learning	15.5 [A] The educational philosophy and teaching and learning activities are improved to achieve the expected learning outcomes, quality of teaching and learning and life-long learning		
16. Student Assessment	16.1 [P] System to plan and select appropriate types of student assessment during the course of study is established		

Criteria		Strengths	Areas for Improvement
16. Student Assessment	16.2 [D] The student assessment is constructively aligned to the achievement of the expected learning outcomes		
16. Student Assessment	16.3 [C] The student assessment methods and the results of the assessment are reviewed to ensure validity, reliability and fairness and the achievement of the expected learning outcomes		

Criteria		Strengths	Areas for Improvement
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Criteria		Strengths	Areas for Improvement
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Criteria		Strengths	Areas for Improvement
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Criteria		Strengths	Areas for Improvement
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AUN-QA ASSESSMENT FEEDBACK REPORT (INSTITUTIONAL LEVEL)

AUN-QA Assessment No.:	Date of Assessment:

Name of Institution:	

Name of President/Vice-Chancellor:	

Name Management Representative/Designation:	Email:

Address:	

Name of Assessors:	

Feedback on SAR Preparation (interpretation of criteria, writing of SAR, gathering of evidences and other problems faced in preparing the SAR)

Feedback on Assessment Process (Process: pre-assessment preparation, site assessment and final assessment results and presentation; Assessment: objectivity, independence, evidence-based, Assessment: itinerary, activities and duration)

Feedback on Usefulness of Assessment Report (improvement, planning, benchmarking purposes)

Other comments and suggestions to improve the AUN-QA Assessment