



University of  
South Australia

## Quality assurance and improvement: Programs, courses and teaching arrangements

**POLICY NO:** A-35A.20

**DATE OF APPROVAL:** 5 April 1993

### **AMENDMENTS:**

- 15 July 1994
- Academic Board Resolution 94/6/120
- 10 October 1994
- Registrar – June 1995
- Registrar – November 1995
- Academic Board Resolution 2000/4/62
- Registrar – November 2000
- Academic Board Resolution 2001/9/189
- 23 November 2001
- Academic Board Resolution 2002/5/92
- Academic Board Resolution 27 June 2003
- 10 November 2006
- Academic Board Resolution 2008/7/124
- Director: Student and Academic Services – January 2011
- Academic Board Resolution 2011/8/166
- Director: Student and Academic Services – 28 January 2014
- Academic Board Resolution 2015/3/63
- Director: Student and Academic Services – 30 May 2017
- Vice-Chancellor – December 2019
- Director: Student and Academic Services – April 2021
- Registrar and Director: Student and Academic Services - January 2023
- Registrar and Director: Student and Academic Services – October 2023

**REFERENCE AUTHORITY:** Provost and Chief Academic Officer

### **CROSS-REFERENCES:**

- [Assessment Policy and Procedures \(AB - 68\)](#)
- [A-38: Advisory Structures](#)
- [C-34: Review](#)
- [Program Approval Manual](#)
- [RES-15: Quality Assurance and Improvement in Higher Degrees by Research](#)

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### **Purpose**

Quality assurance and continuous improvement of the University's educational programs are fundamental to the mission of the University of South Australia.

This policy establishes the framework for evaluating the quality and viability of all programs and for the systematic monitoring and review of programs and courses. It is based on the following principles:

1. The University is committed to a cycle of evaluation and improvement as part of academic planning. Within this cycle, academic staff and teaching teams are required to: review the content and focus of their courses; evaluate and reflect on student learning resulting from their teaching practice, curriculum design and approaches to assessment; and make appropriate revisions as required.
2. The University recognises that the resources available to develop and sustain programs may affect their quality. The University will evaluate the value, relevance and viability of its programs to ensure available resources are used to maximum effect.
3. The University will use multiple sources of qualitative and quantitative data in the evaluation of its courses, programs and teaching, including feedback from students and stakeholders.

The evaluations and reviews conducted under this policy and their outcomes form part of the University's program approval and review procedural framework.

### **Scope**

This policy applies to all coursework programs offered by the University.

### **Definitions**

**ASSQC:** Academic Strategy, Standards and Quality Committee

**Benchmarking** means the comparison of performance and process against best practice and performance in the higher education sector or elsewhere with the aim of improving University courses, programs and teaching. Wherever possible, national and international reference points will be used.

**Continuous improvement** means the ongoing review cycle designed to progressively improve courses, programs and teaching outcomes.

**Evaluation of quality** means:

- a. the systematic consideration of stakeholder views and benchmarking activities about the quality of programs and courses; and,
- b. the aggregation, analysis and interpretation of students' feedback about their perceptions of their courses to inform judgments about the quality of programs.

**Evaluation of viability** means the assessment of the viability of programs based on performance against an agreed set of indicators, and referenced against University-based targets.

**Professional accreditation** means the formal process of assessment and review by a relevant accrediting body leading to formal recognition that a program meets the standards required to ensure that graduates possess the competencies necessary to begin professional practice. Professional accreditation may include the requirement for graduates to gain formal registration with the relevant statutory body before they can begin professional practice.

**Quality assurance** means the application of monitoring, review and evaluation processes to ensure that the University's teaching and learning processes and outcomes are meeting the standards defined by the University, through this policy and its broader strategic goals.

**Re-accreditation Report** means a submission prepared by the academic unit for the re-accreditation of a program.

## Policy

### 1. Program accreditation

- 1.1 University programs will be accredited for a *maximum* period of five years from the date of (re)accreditation.
- 1.2 Where appropriate, the accreditation period may be aligned with external professional accreditation requirements approved as part of the Coursework Program Approval procedures.
- 1.3 Where the relevant external professional accreditation is granted for a period less than five years, the Academic Unit, through Academic Strategy, Standards and Quality Committee (ASSQC), may choose to renew their internal accreditation at the same time, up to the maximum period of five years.
- 1.4 The Provost and Chief Academic Officer may approve a variation to the period for which a program is accredited. The variation may operate to extend the period for which a program is accredited up to a maximum of one year.
- 1.5 By the end of the fourth year of (re)accreditation, or as aligned to an external professional accreditation review, Academic Units are required to provide a re-accreditation report, in accordance with section 7 below. If it has been identified that amendments to the program are required, these should be carried out during the fifth year of the (re)accreditation cycle. See Appendix A.
- 1.6 Where a program is being withdrawn and not replaced, the program will be subject to a phase-out plan in accordance with policy *A-45: Program Transition* enabling students to progress through the award. Where a phase out plan is in place the University considers that a program has met the requirements of this policy and will remain accredited for the approved phase-out period.

### 2. Program monitoring and review

- 2.1 On an annual basis, the University will review the performance of its programs based on the University's program performance data and any additional strategic measures as determined by the Academic Board from time to time, on advice from the Provost and Chief Academic Officer.
- 2.2 The annual review of performance may identify amendments to ensure the ongoing success of the program. Any amendments to programs will be undertaken in accordance with the Program Approval Manual.

- 2.3 Programs whose performance is consistently below University targets and benchmarks may be required to show cause as to why the program should not be withdrawn.

### 3. Course evaluation

- 3.1 ASSQC will develop, review and monitor the course and teacher evaluation survey, for the evaluation of courses and teaching. Academic Board will approve the survey.
- 3.2 The University will evaluate each course each time it is offered, or if offered more than once in an academic year, at least annually, using the approved course and teacher evaluation survey.
- 3.3 Any amendments to courses identified through the evaluation will be undertaken in accordance with the Program Approval Manual.

### 4. Responsibility

- 4.1 Responsibility for implementing the arrangements outlined in this policy rests jointly with Academic Units, ASSQC and Academic Board.

## Procedures

### 5. Course evaluation

- 5.1 Every course must be evaluated using the University's course and teacher evaluation survey each time it is offered, or if offered more than once in an academic year, at least annually.
- 5.2 Where an Academic Unit believes it would be inappropriate to apply the course and teacher evaluation survey for a course or an offering of that course, the Executive Dean, or delegate, may authorise an alternative evaluation mechanism.
- 5.3 Other evaluative mechanisms may be used to complement the course and teacher evaluation survey, for example, learning analytics data and trends, focus groups, peer review and benchmarking.
- 5.4 A short summary of changes and improvements arising from the course and teacher evaluation will be placed on the Course Homepage or equivalent before the course is next taught, to inform students about the value of their feedback.

### 6. Program monitoring and review

- 6.1 A review of performance for all coursework programs will be undertaken every year as specified in clause 2 of this policy.
- 6.2 The Provost and Chief Academic Officer will meet with each Executive Dean, or delegate, and, relevant Academic Unit staff, to review the performance of each program.
- 6.3 Where the process identifies programs of concern (clause 2.3), the Provost and Chief Academic Officer will recommend to ASSQC that:
- the program's evaluation and re-accreditation review be brought forward; or
  - the Executive Dean, or delegate, be required to show cause as to why the program should not be withdrawn.
- 6.4 Programs identified for review under clause 6.3.a. above, will form part of the annual schedule of program evaluation and re-accreditation established by ASSQC.
- 6.5 ASSQC will report annually to Academic Board on:
- the actions taken in response to the annual monitoring of program performance; and

- b. the status of the University's academic program profile as measured against University strategic objectives.

## 7. Program evaluation and re-accreditation

- 7.1** ASSQC will establish an annual schedule for program evaluation and re-accreditation to ensure that all programs are evaluated for the purposes of re-accreditation in the penultimate year of the accreditation period.
- 7.2** Programs that have not undergone program evaluation and review processes in accordance with this policy are considered non-compliant offerings. Executive Deans, or delegates, must determine further action to be taken in relation to non-compliant programs, including the expedition of internal accreditation processes, or program withdrawal.
- 7.3** The evaluation processes and reporting are managed by the program areas. Executive Deans, or delegates, will establish processes to:
- gather and analyse responses from relevant external stakeholders, for example, professional associations, employer groups, and accrediting bodies; and
  - ensure staff who teach courses in the program participate in the analysis and interpretation of program performance data, including reporting on program outcomes against national benchmarks.
- 7.4** Student evaluation of a program will be achieved by aggregating data from the results of the University's course and teacher evaluation survey for the core courses that comprise the major streams of the program, as listed in the program schedule. The Program Director is responsible for interpreting the program schedule to determine core courses and major streams.
- 7.5** The Academic Unit will prepare a [re-accreditation report](#) of no more than ten pages, for the re-accreditation of the program. This report will present a case for re-accreditation based on analysis of program performance data over the accreditation period, other relevant information and evidence of:
- the ongoing relevance and viability of the program and how it will continue to contribute to the strategic goals of the University
  - the aims and objectives of the program and how the program structure and teaching arrangements support those objectives
  - the effectiveness of the program design and approaches to curriculum innovation including, for example, blended delivery and practice-based learning
  - the effectiveness of the teaching and learning and authentic assessment arrangements and how those arrangements contribute to student learning, and align with and develop core capabilities and graduate qualities
  - processes to monitor the achievement of student learning outcomes including processes for external benchmarking against comparable programs of study
  - processes to monitor the ongoing performance of the program and how student feedback and other stakeholder feedback, including employers and professional bodies, is used to monitor and improve the program and its outcomes
  - processes for effective program management and coordination, particularly processes to ensure that service teaching providers, or double degree partners, make effective contribution to the program
  - the overall performance of the program against national and international benchmarks. The Re-accreditation Report will identify areas for improvement and how those improvements will be implemented.

- 7.6 Where a program is externally accredited, the Re-accreditation Report may refer to or replicate relevant information submitted as part of the external process.
- 7.7 Any amendments to programs arising from the evaluation will be undertaken in accordance with the Program Approval Manual.
- 7.8 The Re-accreditation Report will be considered by the Academic Unit board. The Re-accreditation Report and any supporting program amendments will together form the submission for re-accreditation or withdrawal of the program to ASSQC and Academic Board.
- 7.9 ASSQC will report annually to Academic Board on the outcomes of the program evaluation and re-accreditation process.

## **8. Vice Chancellor's Review**

- 8.1 Programs subject to a Vice Chancellor's Review in accordance with policy *C-34: Review* are not required to present a Re-accreditation Report for that review period, where the information provided for the Vice Chancellor's review is equivalent to that required within a Re-accreditation Report.



### Appendix A: Timeline for a program due for re-accreditation

#### Example:

If a program is due to be re-accredited at the end of 2017, the program re-accreditation report is to be completed by the end of 2016. The Academic Unit then has one year to complete any amendments that have been identified during the review for re-accreditation. The program is accredited from 2018 until the end of 2022, with the re-accreditation report due by the end of 2021.

#### Timeline for a program due for re-accreditation at the end of 2017

2016	2017		2018	2019	2020	2021	2022		2023	2024	2025	2026	2027	
Re-accreditation report due	Prepare any amendments required	Program re-accredited	Program re-accredited for 5 years (no report due)	No report due	No report due	Re-accreditation report due	Prepare any amendments required	Program re-accredited	Program re-accredited for 5 years (no report due)	No report due	No report due	Re-accreditation report due	Prepare any amendments required	Program re-accredited

← five year accreditation period →