

# Section F

## Internal Quality Audit

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### Abbreviations in this section

|      |  |
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| EC   | Education Committee                      |
| IQA  | Internal Quality Audit                   |
| LTEC | Learning and Teaching Enhancement Centre |
| QAE  | Quality Assurance and Enhancement        |

## Definition

1. Internal Quality Audit (IQA) is a University process which is designed to investigate specific quality-related issues or procedures with a view to finding solutions and providing support for quality assurance procedures where necessary. It provides an important way, in a devolved quality assurance system, of assuring Academic Council that significant problems are not only identified by quality assurance procedures, but can be rectified.

## Purpose

2. IQA may be undertaken by the University as part of its routine monitoring of its quality assurance processes but may also be prompted due to a specific need, as identified by the Education Committee (EC) for example.
3. IQA may also be used in order to review student outcomes and/or experience in relation to an institutional theme (usually identified through the analysis of external and internal metrics), rather than in relation to an individual subject area or service.
4. IQA is a process that focuses on enhancement, improvement and dissemination of good practice, and is not a systematic search for and identification of problems, or a “naming and shaming” exercise.
5. IQA has the following main purposes:
  - audit of ongoing effectiveness of current procedures, with a focus on enhancement, improvement, and dissemination of good practice
  - audit of compliance, where evidence has emerged of significant non-compliance with agreed procedures
  - investigation of specific problems, for example where a course team needs help with an apparently intractable difficulty or where quality assurance procedures reveal a significant issue
  - facilitation of cross-university discussion between faculties and directorates on topics of common concern
  - identification of action or support required at a local or institutional level
6. In some cases, there may be a degree of overlap between these purposes.

## Process

7. The Education Committee (EC) has overall responsibility for the approval and monitoring of IQAs. EC will receive the report of the meeting and the consequent action plan.
8. The scope, remit, format and timeframe of each IQA will be decided on a case-by-case basis, following discussions between the PVC Education, QAE, LTEC and other relevant departments.

9. A panel will be selected for each IQA. The panel will usually be chaired by the PVC Education (or their nominee). The panel will include representatives from within the University and, if appropriate, an external representative. The panel may also include a student representative. The panel will be supported by a representative from QAE.
10. Depending on the scope and remit, the IQA may incorporate one or more of the following:
  - The analysis of evidence (*see below*)
  - A review of sector practice
  - Consideration of external requirements
  - Meetings with staff and students
11. On some occasions, it may be agreed that a desk-based review is appropriate. This may be the case when a specific problem relates to a niche aspect of delivery (e.g. an issue at a collaborative partner) which would not apply across the University. In addition, a desk-based review may be commissioned where a problem has arisen that requires rapid remedy. In these instances the initial discussion will determine who will undertake the desk-based investigation and the evidence set to be reviewed. A threshold against which further action would be required should it be reached may be set.
12. One outcome of a desk-based review may be the initiation of a full IQA of that area.
13. Once an IQA is initiated, QAE will formally notify relevant faculties/departments and will arrange the date for the IQA. The Head of Quality Assurance and Enhancement is responsible for overseeing and advising on the details of the arrangements for the IQA.

### **Documentary Evidence**

14. It is likely that IQA will predominantly draw upon existing evidence and there will be no requirement for the provision of additional evidence specifically for the review. However, this will be agreed during the initial discussions.
15. QAE will issue the request for evidence to the faculty(ies)/department(s) being audited. Requests for evidence will be kept to a minimum and issued to those being audited as quickly as possible.
16. The evidence requested will normally be made available by the faculty(ies)/department(s) in the IQA event base room on the day of the event.
17. For some IQAs it may be agreed that faculties or departments should submit a contextual document for consideration by the IQA panel. Although there is no set format for the contextual document, faculties/departments may like to consider the guidelines outlined below when producing this document.
18. Contextual documents should:

- typically be no more than four A4 sides in length
- introduce and explain the processes in place within the faculty/department for the process/area which is being reviewed, in the context of University procedures
- introduce and explain the layout of the evidence which will be provided in the base room
- update the panel on progress made against recommendations agreed during last IQA (where applicable)
- make specific reference to any processes in place to deal with collaborative provision covered within the scope of the IQA
- highlight any strengths or weaknesses with the current process
- highlight any developmental or forward-looking areas, either within the faculty or University.

### **Main IQA event**

19. The focus of the main IQA event is to review the ongoing effectiveness of current procedures, with a focus on enhancement, improvement and dissemination of good practice or to identify problems and issues and to suggest possible solutions. It is not the role of IQA to apportion blame for any problem being investigated.
20. The event is likely to be organised over either one or two days, depending on the amount of documentation to be reviewed, and will include a short meeting between the panel and key faculty/departmental staff (where appropriate).

### **Internal Quality Audit Reports**

21. The report of the IQA is written by the QAE representative. IQA reports are generally brief, comprising a summary of the process, a list of participants, the recommendations made by the audit team to those being audited and recommendations made by the audit team to the University. Reports contain sufficient discursive content to provide the rationale and context for the recommendations. Draft reports are circulated to participants within three working weeks of the IQA, and the agreed report is considered by the EC.
22. The faculty/department that was subject to the IQA is required to produce a response to the report, normally in the form of an action plan appropriate to the particular audit topic. This may include proposals for dissemination and reviews of existing procedures. This will be considered and approved by the EC.
23. Follow-up actions arising from the action plan will be monitored by the EC.