Health Education and Training Institute Higher Education Course Monitoring and Review Policy

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Summary	Principles and procedures for staff engaging in course review, monitoring and improvement activities.
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Authoring Portfolio	Mental Health
Contact	Director
Consultation	as per Document History
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Related documents	Health Education and Training Institute Higher Education Academic Quality Assurance Policy Health Education and Training Institute Higher Education Academic Quality Assurance Framework Health Education and Training Institute Higher Education External Referencing and Benchmarking Policy and Procedures Health Education and Training Institute Higher Education Higher Education Award Courses and Units Approval Policy Health Education and Training Institute Higher Education Student Feedback Policy.
Review date	July 2023
Risk Assessment	As per Attachment 1 to this document

Issued under the authority of the Health Education and Training Institute Higher Education Governing Council

Health Education and Training Institute Higher Education Course Monitoring and Review Policy

Policy Statement

Higher Education Training Institute (HETI) Higher Education undertakes course monitoring and review over a seven-year cycle as part of its Academic Quality Assurance Framework in provide order to ensure the continuous improvement of its courses in accordance with the requirements of the Higher Education Standards (HESF) (2015), accrediting bodies, such as the Tertiary Education Quality Standards Authority (TEQSA) and accrediting professional bodies, and HETI Higher Educations' strategic goals and priorities.

HETI Higher Education uses the results of regular course monitoring and review to mitigate future risks to the quality of the education d and to guide and evaluate improvements to its courses (Higher Education Standard 5.7).

Aims and Objectives

1. This policy outlines principles and procedures for staff engaging in course review, monitoring and improvement activities on behalf of HETI Higher Education.

2. This policy applies to all staff involved in course monitoring, review and improvement activities on behalf of HETI Higher Education.

Definitions

3. Course: a program of study consisting of at least 600 hours of study leading to an award of HETI Higher Education (Graduate Certificate Graduate Diploma, Master's Degree) which when successfully completed is conferred on the graduand by the HETI Higher Education Governing Council.

4. Course Monitoring: formal, informal, regular and systematic processes of analysing and reporting course, unit and teaching performance data in order to establish and maintain continuous improvement.

5. Course Review: formal evaluation of an existing higher education course at mid and end points of the accreditation period in accordance with the relevant HESF standards.

6. Agreement rates: for quantitative survey items; the percentage of those respondents who nominate agree and strongly agree.

7. Disagreement rates: for quantitative survey items, the percentage of those respondents who nominate disagree and strongly disagree.

Overview

8. The Higher Education Standards (HESF) (2015) require course monitoring and review of the following areas:

   a. course design, learning outcomes and content, including assessment methods

   b. student performance data, especially the success of student cohorts against comparable courses of study in relation to progression rates, attrition rates, success rates, completion times and rates and moderation of assessment[1].

9. Course monitoring and review are core elements within the HETI Higher Education Academic Quality Framework and the Plan-Do-Study-Act (PDSA) cycle of management that underpins the quality management process.

Principles

10. Course monitoring and review activities are tools designed to implement HETI Higher Education's *Academic Quality Framework[2]* goals of promoting 'a climate of continuous reflection on the relevance and effectiveness of the educational programs being offered' by questioning 'the beliefs and mindsets, values, traditions and habits underpinning our educational practices' thus 'linking quality assurance with quality enhancement'.

11. The outcomes or results of course monitoring and review are used to provide evidence of the validity of current practice, especially in relation to the accreditation requirements of TEQSA and relevant professional associations, and/or to clearly indicate areas for further improvement as well as to inform strategic planning and decision-making.

Procedures

The Course Review Cycle

12. In accordance with HESF Standard 5.3.1 all courses will be subject to a seven-year cycle of review overseen by the peak academic governance bodies of HETI Higher Education, involving systematic monitoring of units and teaching after each period of study, annual

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[1] Commonwealth Australia (2015) *Higher Education Standards Framework*, p.10-12

[2] See Quality Assurance Framework p. 3

course reports, a mid-cycle course review and a full course review at the end of the accreditation period in preparation for an application for renewal of accreditation.

Monitoring of units and teaching at the end of each period of study

13. The quality of units and teaching will be monitored at the end of each period of study in which the unit has been delivered in order to make improvements based on feedback from students and any other observations/reflections deriving from other sources such as peers and supervisors' feedback, developments in the discipline and unit Facilitators' professional development and/or evaluation of the unit.

14. The Higher Education Project Support Officer is responsible for collecting the survey data and calculating agreement and disagreement rates for each individual quantitative item, providing a graphic and/or tabular representation of overall results and recording student responses to open-ended questions. Survey results are then provided to the Learning Pathways manager.

15. The Learning Pathways Manager is responsible for the analysis of student feedback data and identifies:

    a. Units and teaching that have been evaluated as satisfactory or better;
    b. Units and teaching that have been evaluated as needing improvement in certain areas;
    c. Units and teaching that have been evaluated as needing action and support;
    d. Trends in the performance of units and teachers, such as analysis against previous feedback and overall course and institutional performance.

16. Units and teaching may be identified as satisfactory if the agreement rates for the majority of qualitative items are at 80% or above and student qualitative responses are consistently positive about the quality of the unit and its teaching.

17. Units and teaching may be identified as requiring support if the disagreement rates for the majority of the quantitative items are more than 20% and/or if student qualitative responses are predominantly critical of the quality of the unit and/or its teaching.

18. The Learning Pathways Manager presents the report of student feedback data to the Director of Education and Training and the Director of Psychiatry and Mental Health Programs for discussion and review.

19. After discussion and review by the Directors, for units identified as satisfactory or needing only minor improvements:

   a. The Learning Pathways Manager provides the student feedback results to the Unit Facilitators for review.

   b. Unit Facilitators review the survey results for their unit(s) in conjunction with other sources of data about unit and teaching quality, such as peer review and/or focus group discussion that may have been utilised during the teaching period.

   c. Unit Facilitators use all the relevant data to develop the Unit Monitoring and Improvement Plan and submit it to the Learning Pathways Manager.

20. After discussion and review by the Directors, for units identified as unsatisfactory and/or requiring action and support:

   a. The Directors and the Learning Pathways Manager conduct a confidential discussion of the student feedback results with the Unit Facilitator at which the issues raised by the student feedback are outlined, and the Unit Facilitator is invited to respond. The Unit Facilitator may refer to other sources of data about unit and teaching quality, such as peer review and/or focus group discussion that may have been utilised during the teaching period and/or previous student feedback results.

   b. The confidential discussion between the Directors, Learning Pathways Manager and Unit Facilitator may result in the following outcomes:

      i. A need for action and support is agreed upon by all parties

      ii. The Directors and Learning Pathways Manager accept the response of the Unit Facilitator that there may be extenuating circumstances that explain the unsatisfactory student survey results

      iii. Agreement cannot be reached concerning the analysis and use of the survey data, in which case the Unit Facilitator may refer to the conditions for resolution of disputes concerning the survey data in the HETI Higher Education Student Feedback Policy.

   c. In cases covered by Clause 20 b. i and ii, the Unit Facilitator under the supervision of the Learning Pathways Manager and Directors develops the Unit Monitoring and Improvement Plan.

   d. If appropriate, the Unit Monitoring and Improvement Plan may include targets for improvement and the resources required to implement improvement solutions.

e. The Learning Pathways Manager is responsible for monitoring the Unit Monitoring and Improvement Plan in the next iteration of the unit and for reporting progress to the Directors.

21. The Directors are responsible for reviewing and approving all Unit Monitoring and Improvement Plans. Where the Directors disagree concerning approval of a Unit Monitoring and Improvement Plan, final responsibility for approval rests with the Director Education and Training.

22. The Director Education and Training may refer Unit Monitoring and Improvement Plans to the Teaching and Learning Committee under the following circumstances:

    a. for additional consultation
    b. where Directors cannot reach an agreement
    c. where the discipline area falls outside their areas of expertise
    d. any other circumstances in which referral is deemed appropriate by the Director Education and Training.

23. The Directors may reject or impose conditions upon their approval of Unit Monitoring and Improvement Plans that propose changes to units that:

    a. breach HETI Higher Education Policies;
    b. breach conditions associated with compliance with the Higher Education Standards Framework (2015) and the Australian Qualification Framework (AQF);
    c. trigger the conditions under which TEQSA may adjudicate that a new course accreditation application is required or that a material change notification is required;
    d. are not feasible.

24. Once approved by the Directors, the Learning Pathways Manager is responsible for collating all approved Unit Monitoring and Improvement Plans, for storing them in the Records Management System and for ensuring that all significant changes to units are included in the Annual Course Report (see Clause 29 of this policy).

25. Once approved by the Directors, improvements proposed to units may be implemented in the next offering by the Unit Facilitator and/or specialisation lead.

26. In cases covered under Clause 19, the Unit Facilitator is responsible for monitoring the implementation of the improvements to assess their effectiveness at the end of the relevant teaching period.

27. In cases covered under Clause 20, the Learning Pathway Manager is responsible for monitoring the Unit Monitoring and Improvement Plan in the next iteration of the unit and for reporting progress to the Directors.

28. The Learning Pathways Manager is responsible for providing a report concerning an overview of student feedback data and the Unit Monitoring and Improvement Plans to the Teaching and Learning Committee for discussion and review.

29. The Teaching and Learning Committee submits the reviewed report to the HETI Higher Education Academic Board for discussion, review and approval.

Annual Course Reports

30. Annual Course Reports will be completed by the Learning Pathways Manager and submitted for consideration by the Teaching and Learning Committee and the Academic Board.

31. In accordance with HESF Standards 5.3.3 and 5.3.4, Annual Course reports will provide information on the following areas:

- changes made to the Course as a result of the previous report
- attrition/retention rates, including by mode of delivery
- completion rates, including by mode of delivery
- success rates, pass rates, including by mode of delivery and student cohort
- student enrolments, including by mode of delivery and student cohort
- student evaluation results
- academic integrity breach numbers and actions
- external referencing and benchmarking activities and results
- the results of monitoring and review including unit monitoring forms
- justified recommendations for future action for improvement
- any other area deemed relevant from time to time by HETI Higher Education.

32. The Teaching and Learning Committee is responsible for reviewing the Annual Course Report and may seek clarification of any aspect of the report and provide advice to the Learning Pathways Manager concerning the report before forwarding the completed report to Academic Board.

33. The Academic Board may seek clarification of any aspect of the report, seek additional information and/or amendment of the report, and require follow-up action and report of the results of such action before accepting the report.

34. The Academic Board will forward the Annual Course Report to the Governing Council for its consideration and response.

Midcycle and Full Reviews of Courses - Content

35. Mid-cycle and full course reviews will be conducted in relation to the requirements of HESF Standard 5.3.2 and the regulatory accreditation processes of TEQSA and relevant professional bodies in the following areas:

- the design of the course
- the content of the course
- the expected learning outcomes
- the methods of assessment for those outcomes
- the extent of student achievement of those outcomes
- emerging developments in the relevant field
- modes of delivery
- the changing needs of students
- the data provided in Annual Course Review reports
- student performance data by group, admission pathway, mode of delivery
- implications of student performance data for admission criteria, delivery methods and strategies, and support resources and strategies
- student feedback and evaluations of the course
- identified risks to the quality of the course of study
- external referencing and benchmarking activities
- compliance with relevant standards of the Higher Education Standards Framework (2015)

- any other area identified by HETI Higher Education, TEQSA and/or any accrediting professional body
- justified recommendations for future action for improvement.

Procedures for Midcycle and Full Course Reviews

36. Midcycle and Full Course Reviews will be completed by teams led by the Learning Pathways Manager.

37. Midcycle and Full Course Reviews require external referencing and benchmarking external review through the external members of the Course Advisory Committee and other external reviewers as approved by HETI Higher Education.

Midcycle Course Reviews

38. Midcycle Course Reviews are made up of the following elements:

    a. The Directors form a Course Review Team (CRT) to analyse course data over the period since the last review. Such data will include annual course reports and any other feedback generated over the period. The CRT is made up of the Directors, Learning Pathways Manager, internal staff engaged in the teaching of the course, current students and/or alumni but the Directors may co-opt external members. The Directors may delegate responsibilities for the management of the CRT to the Learning Pathways Manager.

    b. The CRT produces a Course Review Report (CRP) with a description and analysis of course performance and recommendations for changes as needed for submission to the relevant EAC. The CRP draws attention to recommendations for course changes that may require notification to TEQSA as Material Changes[3]. Notification to TEQSA of material changes needs to occur when there are:

        - changes to the titles of courses
        - changes to course learning outcomes
        - discontinuation of courses
        - notable reduction in course duration
        - change of mode

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[3] See https://www.teqsa.gov.au/latest-news/publications/material-change-notification-policy for the conditions under which TEQSA must be notified of a material change.

- introduction of new majors or specialisations, and
- replacement or redesign of more than 50% of units within a course, which in TEQSA's eyes may constitute a new course.

c. The EAC considers the CRP and responds to its recommendations.

d. The CRT revises CRP on the basis of EAC recommendations.

e. The CRT submits revised CRP to EAC for approval if substantial modifications to the report were required.

f. The CRT submits revised CRP to Learning and Teaching Committee which reviews and forwards it to the Academic Board.

g. The Academic Board considers and either approves CRP recommendations for revisions to the course and/or requires further information/action.

h. The Academic Board reports the results of the Midcycle Review to the Governing Council for its consideration and response.

i. The Learning Pathways Manager communicates required changes to the course unit Facilitators and teachers who implement them. The Learning Pathways Manager monitors and reports through Annual Course Reports on the progress of the course changes and the resultant improvements

Full Course Review

39. Full Course Reviews are usually conducted at least every seven years as part of the Renewal of Accreditation application process with TEQSA.

40. In addition, renewal of accreditation with other concurrent accreditation bodies, such as the Royal Australian and New Zealand College of Psychiatrists (RANZCP) and the Royal Australian College of General Practitioners (RACGP), may be required. In such cases, the processes of the concurrent accreditation bodies would be followed according to the requirements of those organisations. The results of the accreditation with the professional body, where applicable, would be shared with TEQSA.

41. Full Course Reviews are made up of the following elements:

a. The Directors form a Course Review Team (CRT) to analyse course data over the period since the last review. Such data will include annual course reports and any other feedback generated over the period. The CRT is made up of the Directors, Learning Pathways Manager, internal staff engaged in the teaching of the course, current students and/or alumni but the Directors may

co-opt external members. The Directors may delegate responsibilities for the management of the CRT to the Learning Pathways Manager.

b. The CRT produces a Course Review Report (CRP) with recommendations for changes to course content, structure, units, course learning outcomes and any other significant changes for submission to the EAC.

c. The EAC considers the CRP and responds to its recommendations.

d. The CRT revises the course on the basis of EAC recommendations.

e. The CRT submits the revised course to EAC for approval.

f. The revised course may also be submitted to other external experts as identified and approved by HETI Higher Education.

g. The CRT submits the revised course to Learning and Teaching Committee which reviews and forwards it to the Academic Board.

h. The Academic Board considers and either approves the revised course and/or requires further information and/or action.

i. The Academic Board reports the results of the Full Course Review to the Governing Council for its consideration and response.

j. The revised course is the basis of the TEQSA Renewal of Accreditation Application documents.

k. The TEQSA Renewal of Accreditation Application is submitted to Academic Board and approved for submission to TEQSA and relevant professional bodies.

Roles and responsibilities

42. The Director Education and Training and Director Psychiatry and Mental Health Program have a shared responsibility for teaching and learning performance, for implementation of this policy and for leadership of the teams undertaking full course reviews.

43. The Learning Pathways Manager is responsible for the monitoring of the quality of the course, its units and teaching, Annual Course Reports and for leadership of the teams undertaking mid-cycle reviews.

44. The External Advisory Committee is responsible for providing advice about curriculum design standards for current or proposed courses and the validity and relevance of courses and proposed courses to prospective students, the health sector, professional bodies and to the community, adopting open and transparent processes.

45. The Learning and Teaching Committee (LTC) is responsible for making recommendations to the Health Education and Training Institute Higher Education Academic Board on changes to existing courses, curriculum review and renewal.

46. The Academic Board has the delegated responsibility for the oversight of all academic activities associated with courses at HETI Higher Education.

Related Documents

Health Education and Training Institute Higher Education *Academic Quality Assurance Policy*

Health Education and Training Institute Higher Education *Academic Quality Assurance Framework*

Health Education and Training Institute Higher Education *External Referencing and Benchmarking Policy and Procedures*

Health Education and Training Institute Higher Education *Higher Education Award Courses and Units Approval Policy*

Health Education and Training Institute Higher Education *Student Feedback Policy.*

DOCUMENT HISTORY

Version	Issued	Status	Author	Reason for Change
v0.1	January 2019	Draft	David Baxter	External consultant review by David Baxter
v0.1	4 February 2019	Draft	Silke O'Callaghan	Endorsed by the Teaching and Learning Committee
V0.2	8 March 2019	Draft	David Baxter	Review and Minor amendments to the policy.
V0.3	14 March 2019	Draft	Silke O'Callaghan	Academic Board review on 28.02.2019 and amendments to the policy
V0.3	19 March 2019	Draft	Leila Sara	Out of Session endorsement by the Academic Board
v0.3	27 March 2019	Draft	Rhonda Loftus	Approved by the Governing Council
v1.0	24 April 2019	Final	Jana Chadid	Format amendments, update TRIM reference, published version
v1.1	03 February 2020	Noted	Susan Grimes	Organisational changes; new position title, and responsibilities. Noted by the T&L Committee.
v1.1	14 February 2020	Final	-	Published
v1.2	02 June 2020	Draft	Susan Grimes	Used 'academic credit' instead of 'credit points' and added 'expressed as hours of study' as required for clarity.
v1.2	02 July 2020	Final	-	Published Approved by the DET. Noted by T&L Committee and HEAB.

IMPLEMENTATION CHECKLIST – COMPLIANCE SELF ASSESSMENT

Assessed by:	Date of Assessment:		
IMPLEMENTATION REQUIREMENTS	**Not commenced**	**Partial compliance**	**Full compliance**
1.			
	Notes:		
2.			
	Notes: **Relevant Director**		
3.			
	Notes: TRIM reference number -		
4.			
	Notes:		
5.			
6.			
	Notes:		

RISK ASSSESSMENT

<Document Title>

1.	**Policy/Process being assessed**		**Notes**
	Document Number		
	Publication date		
	Scheduled review date		
	Date of this risk assessment		
	Name & position of assessing officer		
2.	**Summary of policy purpose (from PD Cover Page)**		
3.	**Agency (HETI) key roles & responsibilities as per PD**		
4.	**Risk Assessment**		
4.1	**Identification of risks – what might happen & how?**		
	1.		
	2.		
4.2	**Analysis of risks – combined estimate of the consequence & likelihood of the risk, using NSW Health Risk Matrix (attached)**		
	• **Consequence:**		
	• **Likelihood:**		
	• **Risk rating:**		
4.3	**Evaluation of risks – comparison of the level of risk as determined against a predetermined criteria to determine whether a level of risk is acceptable or needs to be treated.** Risk level assessed after implementing treatment: • **Consequence:** • **Likelihood:** • **Risk rating:** **Evaluation –**		

Risk Assessment Approval

Name & position of approving T2 Officer:	
Date:	