LYCEUM CAMPUS

ACADEMIC QUALITY ASSURANCE AND ENHANCEMENT FRAMEWORK

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LYCEUM CAMPUS

2024

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SRI LANKA

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Version 2

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OVERVIEW

.Quality and standards form the foundation on what the value and reputation of higher education are based. Students and taxpayers rightly expect a high quality student experience and consistently robust standards of awards. Implementing quality assurance practices is crucial for ensuring excellence in education and training.

Development of quality system in higher education was driven on the one hand by the competitive pressure , and, on the other hand by growing concerns from stakeholders demanding assurance of institutional programme quality and their graduates.

Quality is primarily the responsibility of the higher education institution itself. Each higher degree institution awarding degrees is responsible for assuring quality of their programmes and awards.There is no one model that fits all .It is up to each institution to decide and adopt what model fits it best and if it suits ,using the experiences of other higher education institutions within their country or internationally. Higher education institutions have an obligation to demonstrate quality, efficiency and effectiveness through a systematic approach to quality assurance and quality enhancement policy.

If Lyceum Campus is to achieve its aspiration to be a dynamic and knowledge based higher education institution , then it will need to demonstrate that it takes the quality of its programmes and awards seriously and is willing to put into place a *Quality Assurance System* as the means of assuring and demonstrating that quality.

To achieve these aims the institution needs to   focus on establishing and developing a robust Quality Assurance System which includes :

(a) *Quality Policy* : "*To continually strive for excellence and enhance the effectiveness of core activities of learning and teaching , research and innovation, student learning experience ,community engagement and outreach and in the sustenance of overall governance*" ;

(b) *Strategic Plan* which provides the overarching framework in the higher education institution activities by outlining clear strategic directions , values and fundamental principles to guide

the Institution towards achieving its Mission and Vision and for continuous improvement of quality;

(c) *Quality Assurance Framework* that sets out principles of good practices ,guidelines rules and regulations ,codes of practices by-laws and associated procedures for implementing , monitoring and evaluating and improving the processes and leadership and management structures. Continuous improvement of quality is key in the application of the Quality Assurance Framework.

(d) A Central Directorate at institutional level namely **"Quality Monitoring and Enhancement Directorate"** under the purview of the President,Vice-Chancellor responsible for implementation of the Quality Assurance Framework and the overall management of the Quality System of the Institution . The Directorate drives the internal quality assurance system centrally and through its Internal Quality Assurance Cells (IQACs) of the Faculties which come under the respective Deans..

Commonly higher education institutions develop the processes of strategic management and quality improvement independently, but usually simultaneously, because the processes of strategic management and the processes of quality assurance overlap. Accordingly integration of both these administrative processes is crucial.

The integration of quality assurance processes within the strategic management processes is a critical factor in developing a thriving *culture of quality*. This procedure also requires a continuous assessment quality assurance process because of the changing nature of the operations.The integration of quality assurance processes with the strategic management of the HEIs can be achieved by integrating quality assurance standards within the institution's *Strategic Plan*; this is referred to as the *institutionalization of quality assurance processes.*

Sustainable Development Goals have highlighted the importance of using quality assurance to advance inclusiveness,equity and lifelong learning within the sector.

Quality assurance has become an evolving reality and it will need to keep on changing to remain relevant and efficient in a rapidly changing higher education landscape .

Chapter 1.The document sets out in Chapter 1, the basic *concepts related to Quality* in higher education.

Chapter 2 is the Campus's ***Academic Quality Policy*** statement that aligns with the Lyceum Campus's purpose, mission,and strategic direction. It provides guidance for the development , implementation and the monitoring of sustainable quality assurance and enhancement procedures and practices to achieve a level of excellence in which defined standards are significantly and consistently exceeded and continuous improvement plans are functioning effectively.

Chapters 3 and 4 delve into the Lyceum Campus's *Academic Quality Assurance and Enhancement Framework* (AQAEF) policy that underpins our commitment to academic excellence.It sets out the Campus's approach to quality assurance and enhancement by embedding principles of good practice in quality and compliance management in accordance with the quality standards of its regulatory bodies. and acts as a yard-stick for evaluating and reviewing the Lyceum campus-wide operations, infrastructure ,programmes , and services for continuous improvement and customer-centric provision.

Appendix

Policies and processes are the main pillars of a coherent institutionl quality assurance and enhancement system Formal policies and procedures provide a framework within which the institution develops and maintains the effectiveness of their quality assurance and enhancement systems.They also help to provide public confidence in institutional autonomy.

Foe easy reference the Lyceum Campus Policies and processes relevant to quality assurance and enhancement have been listed under Chapter 4.1 and detailed documents are provided here.

1 QUALITY IN HIGHER EDUCATION: ESSENCE AND CONCEPTS

To effectively implement quality assurance in higher education it is essential to understand the key concepts that underpin the process. The primary concepts, structures, and procedures associated with quality in higher education are addressed in this chapter.

1.1 Quality concept in higher education

Literature reveals that quality in higher education is a complex and somewhat elusive concept. It is contextual and multidimensional covering all aspects of higher education including the inputs to the system, the processes and outputs of the system. As quality is a dynamic concept there is a continual need for enhancement of procedures.

Of the many definitions three widely used in higher education are referred to here. Defined as '*fitness for purpose*' quality is conceived in relation mission,goal and objetives of the institution.(Woodhouse 1999).

The concept of "*value for money"* refers to the institution's ability to demonstrate efficient and effective use of its human,physical and financial resources.

The concept of *"Transformative "* refers to the institution's ability to contribute to the enhancement of the knowledge and understanding , skills,competence and attitudes of students.

1.2 Quality Assurance

1.2.1 Concepts

Quality Assurance is an ill-defined concept that generally consists of different processes. In terms of higher education quality assurance systems consist of a continuum of mechanisms that build on each other . nsequently they evolve as a system, and a change in any one of them naturally has repercussions on the others.When new processes for the assessment of quality in higher education are developed they usually form part of the processes that are already in place in a system.Quality assurance has been defined as an all- embracing term referring to an on-going , continuous process of evaluating (*assessing ,monitoring , guaranteeing , maintaining and improving*) the quality of a higher education system, institution ,or programme.(UNESCO IIPP 2004)

As a regulatory mechanism quality assurance focuses on both accountability and improvement , providing information and judgements through an agreed and consistent process and well established criteria.

Many systems make a distinction between internal quality assurance(IQA) and external quality assurance (EQA). *Internal quality assurance* is intra-institutional practices in view of monitoring and improving the quality of higher education. Quality assurance activities depend on the existence of the necessary institutional mechanisms ,preferably sustained by a solid quality culture.

External quality assurance is inter- institutional schemes of assuring the quality of higher education institutions and programmes. It refers to the actions of an external body which may be a quality assurancy agency or anybody other thn the institution that assesses its operations or that of its programmes in order to determine whether it is meeting the agreed or pre-determined standards . (UNESCO 2004)

A particular approach to quality assurance is *quality audit*, which does not assess quality or performance per se but the quality of quality assurance mechanisms. It is a method to evaluate the strengths and weaknesses of the quality assurance mechanisms adopted by an institution in order to monitor and improve the activities and services of a subject, programme, or whole institution.

Accreditation is the most widely used method of external quality assurance.It is based on assessment and evaluation methods but it makes an explicit judgement on whether a programme,or an institution meets particular quality standards . .Accreditation therefore inevitably involves some kind of benchmarking and a set of existing quality criteria. It is a process by which a an external body evaluates the quality of an higher educational institution as a whole or a specific educational programme in order to formally recognize it as having met certain pre-determined minimal criteria or standards. The result of this process is usually the awarding of a status (a yes/no decision) of recognition and sometimes of a license to operate with a time-limited validity.

,Integration between Internal and External Quality Assurance

Internal and external quality assurance procedures complement each other in many ways.The functional link between the IQA and EQA is illustrated in Figure......As depicted and implied through closed circuit diagram IQA should be the main element of quality assurance system where it should

undertake regular monitoring and reporting.The self assessments undertaken regularly with documented activities ,outcomes,improvements planned provide the foundation for the Self Evaluation Report (SER) for EQA.The SER so prepared forms the basis for external quality reviews undertaken by external agencies. In addition as in the Figure....... the Institutional Review Report of EQA is expected to serve as feedback to IQA.Internal quality assurance in turn spearheads the follow up actions on the findings of EQA report.. In other words *findings of one informs the other*.

An internal quality assurance process with preparation of a self-assessment report is a critical core element of the external quality assurance process. The two processes have to be harmonized for maximum benefit. Both are essential for enhancement of quality.

Benchmarking is a crucial concept in quality assurance as it enables institutions to compare their performance against best practices and established standards. It involves gathering and analysing data from similar institutions to identify areas for improvement and set benchmarks for quality. By benchmarking their performance against others institutions can gain insights into effective practices , identify gaps in their programmes and adapt strategies to enhance quality. Benchmarking can be done internally by comparing different programmes within the same institution or externally , by comparing performance with other institutions nationally or internationally.

1.2.2 International Principles for   Quality in Higher Education Institutions (source : CHEA,CIQG 2018Council's international Quality Group for Accreditation in HE)

i. Quality assurance and achievement in higher education are the core responsibilities of higher education service providers and their staff;
ii. The education of students should always meet high-quality standards regardless of the learning outcomes realized;
iii. The quality of tertiary education is judged by how well it responds to society's needs , and builds and maintains public trust;
iv. Local and central governments play a significant role in encouraging and supporting high quality higher education;

v. It is the responsibility of higher education institutions and assurance and accreditation bodies to strongly commit to and regularly reaffirm responsibility for the quality;

vi. Quality assurance and accreditation bodies , working with higher education institutions and their management, staff, and students, are responsible for implementing processes, tools, and learning comes measures that help to build a common understanding of quality ;and

vii. High quality higher education must be flexible, creative, and innovative , development and evolution are essential to meet the needs of students , to establish public confidence, and to preserve diversity .

1.2.3 Approaches and methods for quality assurance

Three main processes of higher education quality evaluations are *assessment, audit* and *accreditation.*

a) *Assessment*

Assessment often called evaluation measures the quality of outputs, and makes graded judgement about quality It might be based on *self-review* internally by the institution itself (IQA) or based on assessment by EQA peers.

Quality assessment typically focus on :

- Self-evaluation
- review by a panel of experts
- Analysis of statistical information and/or use of performance indicators or best practices benchmarking
- Surveys of students , graduates,employers,professional bodies,
- Testing the knowledge , skills and competence of students

b) *Audit*

Quality Audit is a process of examining the suitability of institutional procedures for assuring quality and standards and whether the arrangements are implemented effectively and achieve the stated objectives ; the conformity of the planned quality procedures in relation to its stated objectives.

c) Accreditation

Accreditation is a process in which institution's services and operations are examined by an external accrediting agency to determine whether an institution or programme meets threshold quality criteria by examining the mission, resources, and relevant processes of the institution or programme.If met institution or programme is accredited.

1.3 Internal Quality Assurance System in higher education

1.3.1. Concept

Internal Quality Assurance System (IQAS) aims to establish a systematic process for the management and continuous improvement of all aspects of the official qualifications included in its educational offer. This is the means used to carry out the continuous monitoring and periodic evaluation of programmes to ensure that the objectives and the needs of students and society are met.

The IQAS enables the institution to obtain quantitative and qualitative information , to make decisions regarding he training offered,its internal management, thus supporting continuous improvement. This system integrates various mechanisms, and procedures relating both to the collection and analysis of information on the different aspects of the curriculum and how this information will be used for monitoring , review and decision making. It provides information concerning quality of the institution's activities and provide advice and recommendations on how to improve these activities.A good quality assurance system is both a management instrument for higher education institutions and a practical tool for regular improvement of day-to-day activities.

The establishment of an IQAS in a higher education institution is often regarded as the most critical element in creating a sustainable framework for maintaining quality. Crucial part of an IQA system is the creation of a culture of quality and enhancement.

1.3.2 The 4-step Continuous Improvement Cycle

The Plan-Do-Check-Act cycle developed by Edward Deming ,with an acronym of PDCA ,is a four-step model for cyclical quality assurance system. This is also referred to as " quality cycle". This model when applied to any higher education institution activity , supports a systematic and continuous cycle of improvement.

The four stages in detail are :

1. **Plan**-formulation of plans, policies, ,processes, timelines,and responsibilities for achieving outcomes intended to maintain or improve quality including performance standards ,measures,indicators,targets,and methods and frequency for performance measuring and reporting.

2. **Do** (implement)) ---implementation of the planned or rearranged policies procedures,guidelines and templates, workplan and calendar of events,through structures, mechanisms, and instruments in order to execute

3. **Check** (Review) evaluating and reporting : independent governance review;internal self-assessments and audits; evaluation framework;moderation of assessment;programme and subject reviews on analysing results and identifying areas working well, and which needs improvement

4. **Act** (Improve)—Learning and improving **: ongoing** identification of improvements to be incorporated into new or reformulated plan, policies, and processes in order to contribute to enhanced or improved outcomes. Good practices identified and disseminated..

Once all the four stages are completed to satisfaction , the improvement is standardized. The standardized work is the result of the improvement initiative but should not stop here.With the changing circumstance or new technique the standardized process or service is again subjected to further improvement thus repeating the PDCA Cycle over again. Thus the four stages of the quality cycle is an iterative process that is repeated over time to *drive continuous improvement.*

.The main function of the internal quality assurance (IQA) is to regulate the quality cycle .

1.3.3 Principles that underpin the internal quality assurance system

The general principles include:

a. . Academic and student-centred *values;*

b. *Institutional autonomy*, academic freedom and transparency;

c. *Data collected through metrics* includingstudent retention and progress, student engagement and satisfaction, graduate destination, learning resources , external engagement feedback, institutional benchmarks

d. Using Key *external reference points* for example legislation, external accreditation requirement, Sri Lanka Qualifications Framework (SLQF), Subject Benchmark Statements (SBS) , to guide the development of policies and processes;

e. *Stakeholder engagement* with key stakeholders namely – current students, graduates of the Campus, employers, professional statutory and regulatory bodies, staff of the Campus,wider academic community,funding bodies and other stakeholders through consultation, representation, and feedback mechanisms;

f. *Evidence-based* consideration with decisions underpinned by analysis of data;

g. *Dynamic link between internal and external QA processes; External peer review* for review processes , to ensure decisions are consistent with sector based practices

h. *Sharing best practices* to inform effective decision making and innovation;

i. More attention to internal processes; and cyclical quality monitoring process and commitment to *continuous improvement* fostering quality culture;

j. *Communicating results of assessments :* An effective quality assurance system must do more than simply assess the quality. Equal emphasis must be placed upon communicating the results of the assessments to the interested parties both to satisfy the demands of accountability and to enable higher education

1.3.4 Creating and maintaining Sustainable Internal Quality Assurance System

Higher education institutions should commit themselves explicitly to the development of a culture which recognizes the importance of quality, and quality assurance , in their work. To achieve this the institutions should develop and implement a strategy for the establishment of a *sustainable quality assurance system.*

Essential factors necessary in the process of developing and sustaining quality assurance system include :

a. Formally articulating a commitment to quality assurance (QA) and quality enhancement (QE) via a ***policy for QA*** that is made public and form part of the institution's strategic management.. and ensuring that it is robustly persued and implemented.

b. Explicitly and implicitly articulating the importance of quality as an underlying theme and ***core value*** in key documents of the Campus such as the ***Strategic Plan ,***

c. *Quality Assurance Framework* *that* explicitly displays Institution's commitment for quality. and specify responsibilities and processes by which the standards of academic programmes and the quality of student learning experiences are managed, assured and enhanced. The Quality Policy is robustly pursued and implemented in practice,evaluated and periodically reviewed.

d. A firm *regulatory framework* with QA policies providing a road map for day-to-day operations , they ensure compliance with laws and regulations for guidance

e. Establishment of an **institutional** *Quality Assurance unit* for administration and identifying its structure with clear delineation of roles, responsibilities, mechanisms and processes in place to drive quality assurance planning, and development .

f. **IQA needs to occupy a central place** in the institution and the institution needs to develop capacity to undertake IQA to mainly focus on the teaching learning aspects, research and scholarship, community engagement , governance and infrastructure.

g. Allocation of *adequate resources* to QA activities

h. *Willingness to engage in self-evaluation*. ie self-reflecting on their strengths and weaknesses for the purpose of enhancement .This is a major component of the culture of continuous improvement which is a fundamental principle underlying quality assurance in higher education.

i. Organizing, facilitating, and coordinating the *annual* and *periodic reviews* of institutional activities to assure and enhance their effectiveness .Evaluation processes must be followed by processes for development and improvement plans .Improvement initiatives should be integrated into operational plans in order to initiate the *Quality Cycle.(that is PDCA cycle) .* **The** cycle would be repeated again and again for continuous improvement of quality.

j. *Internalizing of QA practices* promoted through a well established and robust awareness raising programme involving all members of academic and academic support staff , academic services, staff, administrative officers

k. *.Leading by example*: demonstrating an overt commitment in word and deed the quality assurance and quality enhancement at all levels within the campus , up to and including leadership at the highest levels

l. *Recognising and rewarding:* There needs to be a system of incentives targeted at rewarding high performance.the means of motivating staff to practicing quality assurance may include

excellence awards,, reporting upon and acknowledging excellence in reports and communications,

m. *Empowerment* of staff via staff induction and continuous professional development in quality assurance and communication ensuring that staff have the necessary knowledge and skills to carry out and disseminate quality assurance activities throughout the institution

n. *Student participation* in quality assurance processes: in the form of membership in programme development committees,self-evaluation report teams, learning outcomes development teams, feedback instruments etc

o. well integrated system of *multidirectional communication* is crucial .Information about organizational quality assurance activities need to be disseminated to different departments ,staff and students throughout the institution and to stakeholders.This enhances peer learning and sharing of best practices experience among staff. to disseminate information about QA activities to the staff, students, and other stakeholders

When such quality assurance activities are carried out with the appropriate support certain changes occur in the institutional culture , leading to a '*culture of quality*'. The existence of such a culture is an indication that QA has become integrated into the "fabric"of the higher education institution. *Quality assurance is truly institutionalized and will be sustained.*

1.4 Quality Enhancement

Traditionally quality in higher education has always placed an emphasis on quality assurance.This has led to the perception by academics that when measuring performance they just need to comply with the bureaucratic requirements as prescribed by quality standards and criteria.

If higher education is to benefit from the implementation of quality assurance processes the emphasis must not be on compliance but rather on enhancement.

Quality enhancement refers to improvement od educational quality brought through cycles of continuous improvement and innovation so that it becomes the culture of an educational institution . High quality results from a conscious desire to improve

1.5 Quality Culture

Crucial part of an internal quality assurance system is the creation of a culture of quality .In the quality culture perspective quality is not beheld as a process that can be operated through evaluation and measurement procedures alone, but as values and practices , that are shared by the institutional community and that have to be nurtured , by the respective academic units.

The approach demands the involvement of multiple internal and external stakeholders , acknowledging the fact that a quality culture cannot be implemented from above , although a strong leadership may be necessary for starting and promoting the process in the first place.

Development of a quality culture to underpin a successful quality system requires:

   a.   a transparent and active commitment to quality at all levels;
   b.   willingness to engage in critical self-evaluation ;
   c.   A firm regulatory framework : clarity and consistency of procedures;
   d.   explicit responsibilities for quality control and quality assurance;
   e.   a drive to obtain feedback from a variety of internal and external stakeholders ;
   f.   a clear commitment to identify and disseminate good practices;
   g.   prompt ,appropriate and managerial action to redress problems,and complaints by students;
   h.   partnership and cooperation, sharing of experiences and team working;and
   i.   external critical evaluation from a variety of sources including formal external evaluation, external peers, internal peer reviews *and support.*

1.6 Trends and innovations in Quality Assurance in Higher Education(Source UNESCO 2021)

Quality assurance has become an evolving reality and it will need to keep on changing to remain relevant and efficient in a rapidly changing higher education landscape..

 Quality assurance related challenges are :

   ▪   Enrolment expansion
   ▪   The emergence of diverse higher education providers, mainly driven by the digital revolution
   ▪   Internalization
   ▪   Shifting boundaries between institutional autonomy and accountability

- The need for greater societal engagements on the part of higher education institutions

RecentAapproaches:

a) Quality in teaching and learning with a greater focus on student learning outcomes and their links to National Quality Frameworks in its use to assure the quality of HEIs.In the past focus **had been** on inputs and outputs of HEIs.More recently importance of teaching and learning aim to measure and evaluate learning and teaching through various qualitative and quantitative metrics and to rank HEIs using these metrics.

b) In line with student centered approach the assessment of learning outcomes and of teaching learning has been a significant development in EQA.

c) Emergence of initiatives and approaches aimed at addressing the specific needs for quality assurance in relation to new and alternative providers ,in particular.ODL and MOOCs.

d) more focused approaches to EQA assessment of quality of internationalization at institutional level.

e) Approaches aimed at enhancing the efficiency and cost-effectiveness of EQA operations. EQA is increasingly criticized as a bureaucratic and costly options for systems and HEIs entailing a high workload for institutions and their staff and not always providing evidence of positive change. Some of the approaches aimed at improving the efficiency of QA operations include 'cluster accreditation', and the use of technology to manage self assessments.ie online submission of self assessments reports.

f) Questions are currently being raised as to whether QA , as we know today , can remain relevant to the context of the digital age.Today digital credentiating has become a new trend and it offers new perspectives to QA. Non-formal and informal learning are increasingly recognized , including as part of formal qualifications.QA would need to adopt a broader definition of what is meant by higher education programmes and credentials.It would need to focus on modules and courses rather than Programmes.

g) Given the evolving nature of QA , the societal engagement of higher education is likely to attract greater attention and gain a more important role in QA processes. This is triggered on the one hand by the Sustainable Developmental Goals , and on the other hand by the need to reinforce both stakeholders trust in higher education and its benefits to society at a time where knowledge is needed more than ever.

The above mentioned new trends not only position QA as an evolving practice , but also demonstrate that it is a professional field where innovations have been quite rapid , since the turn of the millenium ,with a new generation of EQA practices emerging.

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2. ACADEMIC QUALITY POLICY, LYCEUM CAMPUS

2.1 Introduction

The Lyceum Campus's approach to quality is in compliance with the provisions of the Lyceum Campus Ordinance 2022. It is informed by internal and external standards and requirements, for example from the UGC's Quality Assurance Council, Ministry of Education (SCAQA), SriLanka Medical Council, Sri Lanka Qualifications Framework (SLQF 2015) and UGC Review Manuals 2015;2019 .It also takes its lead from national and International best practices.(Higher Education Institution Review Manuals ;UGC 2015; 2019; 2023).

The Lyceum Campus acknowledges that it is ultimately responsible for the academic standards of awards made in its name and for the quality of its students' learning experiences.

This policy has been formulated aiming to fulfill our Mission as defined in our Strategic Plan (2023-2027) " *To contribute to the wider world through the pursuit of education , research, knowledge transfer and service at the highest levels of excellence*"

The Campus has adopted the idea of quality as " fitness for purpose", a concept that emphasizes the need to conform to generally recognized standards for higher degree institutions.

2.2..Purpose

Purpose of the policy is to :

a. formally articulate the Lyceum Campus's commitment and the role of Quality Assurance at the campus ;
b. to explain the campus's Quality Assurance Framework and quality assurance methodology;
c. to foster a culture of quality throughout the Campus;
d. To guide the ongoing development and implementation and monitoring of sustainable quality assurance processes , procedures, and practices in the Campus;
e. To act as a yard-stick for evaluating and reviewing the campus-wide operations, programmes, and services for continuous improvement and customer-centric provision;and

f. Provides guidance for meeting and exceeding the national legislative and statutory requirements and benchmarks that will put the Campus at a competitive level nationally and internationally.

2.3 Objectives of the Policy

An effective institutional quality policy assesses quality against the institution's mission and strategic objectives.The Lyceum Campus has adopted the idea of quality as " fitness for purpose", a concept that emphasizes the need to conform to generally recognized standards for higher degree institutions.

To achieve this the Policy has the following objectives:

a) To demonstrate to the Campus staff students and governing bodies and the stakeholders that quality procedures are in place for the purpose of establishing, ascertaining, maintaining, and improving the quality of education, training and research and related services,that it provides ;

b) To maintain public confidence , especially that of stakeholders , in the quality and standards achieved by the students and staff;

c) To confirm that quality procedures are effective in enabling the units of the Campus to achieve the level of quality and the objectives which the campus aspires under its vision and strategic plan;

d) To foster and sustain a quality culture supported by ongoing learning and innovation in all units of the Campus , and by providing feedback to all staff and students on ways and opportunities for continuous improvement;

e) To facilitate quality enhancement based on recommendations, arising from reviews and other initiatives ,and by highlighting effective practices to be shared among internal audience;

f) To publish reports on quality reviews in order to provide to external stakeholders and interests and to wider public on the **quality of** education and training , research and related services, that it provides; and

g) To be prepared for periodic external institutional/programme reviews of the Campus quality assurance procedures.

2.4   Scope .

The policy applies to all functional units and to all employees of the Lyceum Campus

2.5 Policy Statement

The Quality Assurance System in higher education in Sri Lanka holds strong quality assurance expectations of self-accrediting higher education institutions. Key reference Points include**:**

a. Sri Lanka Qualifications Framework (SLQF)
b. Quality Assurance Council (QAC) of the University Grants Commission (UGC)
c. Subject Benchmarks Statements (SBS) of the respective discipline/subjects(UGC)
d. Standards and guidelines prescribed by the Professional Bodies where relevant e.g. , Sri Lanka Medical Council (SLMC)
e. Manuals for Reviews of Sri Lankan Universities and Higher Education Institutions (UGC 2015, 2019,2022)
f. Codes of Practice

This policy is committed to :

a. Establishment of a *Quality Assurance Framework* so as to realise its Mission, Goals, and Strategic Priorities, and to meet obligations as a self-accrediting Higher Education Institution;
b. involve the adoption of systematic management procedures to monitor performance and to ensure achievement and improvement of the quality of systems , processes and outputs;
c. give internal and external stakeholders confidence in the management of operations , management,governance and outcomes; to ensure that the campus meets both the expectations and performance measures in the higher education sector ,and national and international quality assurance standards;
d. develop the Quality Assurance at the Campus and support through policies, principles,attitudes,actions,and procedures that assure quality through a continuous improvement philosophy;
e. More specifically the Quality Policy aims to provide a framework for an efficient and functional quality assurance system with enforceable rules and procedures focusing on:

- Establishing and development of a *Central Quality Monitoring and Enhancing Directorate* (QMED) to govern and oversee the implementation and effectiveness of the *Quality Assurance Framework of the Lyceum Campus;*

- Establishing and development of a quality culture in both academic and support services domains;

- Empowerment of staff in the development, implementation,and execution of quality assurance systems , processes, procedures, and mechanisms based on the annual appraisal meetings with the individuals and line managers;

- Monitoring of quality assurance actions within functional units of the campus (Faculties/Departments/Divisions/Support services.). Each functional unit consistently reviewing all its existing policies, procedures, practices, and regulations to ensure that they are in line with the *Regulatory Framework of the Lyceum Campus.*

2.6 Principles

The Quality Policy is underpinned by statutory quality related requirements and by Lyceum Campus's commitment to fostering a culture of quality and applying international best practices throughout the Campus.

The policy is based on the following principles:

Fostering a quality culture

A quality culture to be sustained by the whole Campus the following basic principles have to be largely shared and accepted :Development of a ' quality culture' to underpin a successful quality system that reqires :

- placing students at the centre;
- transparent and active commitment to quality at all levels;
- willingness to engage in critical self-evaluation;

- a firm internal regulatory framework with clear and consistent procedures;
- explicit and clearly assigned responsibilities for quality assurance;
- a drive to obtain feedback from a variety of internal and external stakeholders;
- a clear commitment to identify and disseminate good practices ;
- prompt , appropriate and sensitive managerial action to redress problems ,supported by adequate information; and
- inspirational leadership at all levels.

Quality commitment

The campus community actively endorses and demonstrate support for the quality policy.

Quality responsibility

Quality is accepted as the responsibility of all staff and is upheld across the campus, whilst the purpose and direction are set by the campus leadership.All staff understand how their individual activities affect the srtrategic goals of the campus. staff are trained,supported and resourced appropriately in order to deliver services and products consistent with the institutional requirements.

Quality data and information

Processes are in place to ensure the consistent collection and analysis of data and information to enhance evidence-based decision making

Responsiveness and resolution

Campus is committed to responding in a timely manner to the views of all stakeholders , and to the prompt resolution of issues. The Campus is committed to responding to student feedback and sets benchmarks against which to measure this feedback.

Continuous enhancement

Staff are expected to engage in critical, honest, and timely self-review with reflection and implementation of lessons learnt. Planned external and internal reviews promote consistent evolution of practices and procedures to ensure their ongoing suitability and adequacy. Sharing of good

practice, and responsiveness to the ideas of others , are central features of enhancement. Continuous enhancement of quality also depends on professional development of staff.

Effective internal communication

All members of the staff have the organizational freedom to identify, document,and communicate any issues related to the processes of the quality assurance system and their effectiveness to the QMED through the heads of depts/staff intranet/suggestion box.

Customer focus and Accountability

All the campus operations are based on the established customer requirements and stakeholder involvement. Initiatives are determined and nurtured for continued relevant delivery,quality research output and improved institutional performance.Campus is accountable to its stakeholders for the quality and standards of its academic provision and awards.

Policy review

Policy is reviewed periodically through policy review excercises for continuous quality improvement and to ensure that they are in line with the campus strategy and mission.

2.7 Implementation of the policy

o The Council provides governance oversight of the importance of the policy through the campus level organ ,**Quality Monitoring and Enhancement Directorate** (QMED) . It is responsible for the overall management of quality assurance activities at the Campus. The QMED functions as the President's secretariat on quality assurance issues.

o **QMED** provides the technical support for the comprehensive implementation of the policy,including the management of audits and all compliance processes.It is also responsible for capacity building to implement the Policy.

The responsibility and authority of QMED also includes**:**

o Ensuring the processes needed for a quality assurance system are established , implemented and maintained;

- o Ensuring that quality assurance reviews are held as scheduled,and monitoring of actions arising from the review meetings are carried out;
- o Developing the annual quality audit schedule and ensuring that the schedule is endorsed and approved;
- o Championing continual improvement arising from quality assurance reviews , stakeholder feedback and quality audits ;
- o Monitoring and improving stakeholder satisfaction through quality meetings and stakeholder feedback;
- o Reporting to Academic Syndicate (senate) and Council on the performance of the quality assurance system and any need for improvement;

Academic Syndicate : facilitates and monitors the development of a culture of continuous improvement for enhanced academic excellence;

Committees of Academic Syndicate: --Academic Quality and Standards Committee of the Academic Syndicate is responsible for the Campus -wide implementation management and quality assurance of the policy

Boards of Departments and Faculties-:--ensure implementation of the policy within their areas of responsibility

All staff—quality is taken to be everyones responsibility in the campus , hence the intent and application of the policy is to be embedded in the daily work of all staff.

2.8. Quality Policy responsibility, review and dissemination

- The Director QMED shall ensure that the quality policy is a true and accurate representation of the applicable policies and procedures and that it is kept up-to-date at all times
- The policy shall be made available in a non-editable format on the Lyceum Campus portal. All employees who are involved in the Quality Policy and related activities shall have a thorough understanding of the Policy.Lyceum Campus's quality assurance and quality enhancement processes shall be circulated in accordance with this Policy
- All requests for revisions shall be addressed to the Director QMED .This Policy shall be reviewed every two years and amendments , if required, shall be made after formal approval

by the relevant authorization body (Council/Academic Syndicate) and superseded versions of the policy shall be retained for future reference.

- Compliance with this policy is mandatory and any exceptions shall be reported to the relevant authorization body (Council/Academic Syndicate).

2.9 For the Policy to Accomplish:

Following basic principles need to be observed by the Campus Community for the Quality Policy to be successful:

a) Compliance with current legislation to be guaranteed;

b) Academic programmes   aligned with the campus's internal capabilities and strategy and enable to respond to society's needs and expectations;

c) Set objectives linked to quality management and use this policy as a basis for defining them;

d) Ensure that all members of the Campus staff are aware of , understand, and apply the quality policy;

e) Make the quality policy accessible to stakeholders and put in place the necessary accountability mechanisms;

f) Promote a culture of continuous improvement in all areas of the campus, seeking sustained improvement in the performance of internal quality Campus's actual needs.assurance system, and the satisfaction of all stakeholders through the participation of individuals and teams and the review and refinement of the proceses, that have been implemented;

g) Foster creativity and innovation to develop ways of learning that helps to train officials and citizens, who are able to respond to the new global change;

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3 ACADEMIC QUALITY ASSURANCE AND ENHANCEMENT FRAMEWORK (AQAEF) —PART 1 --General

3.1 Introduction

As a Degree Awarding Institute for the purpose of developing Higher Education , leading to the award of Degree under Section 25A of the Universities Act ,No.16 of 1978the Campus is committed to ensuring the quality of its higher degree operations and the integrity of its qualifications.

The Lyceum Campus designed an Academic Quality Assurance and Enhancement Framework(AQAEF) which underpins the Campus's commitment to academic excellence. The Framework sets the structure within which Campus manages continuing assurance and enhancement of the academic quality of Campus's higher education provision. It is intended to act as a convenient reference point providing an accessible structure for dealing with quality assurance matters and supporting and sharing of good practices. It forms part of Campus's academic governance and directly reflects the general and academic regulations for Campus students.

The Framework is designed to provide a robust , evidence – based coordinated approach to quality assurance and to ensure that the Campus delivers on the vision for education laid out in the Campus's Strategic Plan and meet the expectations laid out in Qualifications Framework

In doing so it makes reference to the following external reference points :

a. Sri Lanka Qualifications Framework (SLQF, UGC and MoHE Sri Lanka,2015)
b. Quality Assurance Council (QAC) of the University Grants Commission (UGC)
c. Subject Benchmarks Statements (SBS) of the respective discipline/subjects (QAC, SriLanka 2004-todate)
d. Standards and guidelines prescribed by the Professional Bodies where relevant e.g. , Sri Lanka Medical Council (SLMC)
e. Manuals for Reviews of Sri Lankan Universities and Higher Education Institutions (UGC 2015, 2019,2022) and
f. Codes of Practice

Guided by the first publication of *Lyceum Campus Academic Quality Assurance Framework(2022) ,* approved by the Academic Syndicate (Senate) and Council in 2022 (year of inauguration of the Lyceum Campus) and cognizant of the on-going institutional, and national

discourses on new developments , the purpose of this second version of the *Academic Quality Assurance and Enhancement Framework* (2024*)* is to update the Campus's overall policy and processes on internal quality assurance and enhancement and external reviews.

This edition of the Framework builds on the experience acquired and embedded over the past three years to support the achievement of the vision and strategies that comprise the strategic plan ,and in particular the major initiatives planned for the coming years.

3.2 Objectives

The Objectives are to enable the Campus :

a. to demonstrate to the Campus staff , students, governing bodies and external stakeholders that quality procedures are in place for the purpose of establishing,ascertaining,maintaining, and improving the quality of education , training,and research and related services ;

b. to maintain public confidence , especially that of external stakeholders , in the quality and standards achieved by the Campus;

c. To confirm that the quality procedures are effective in enabling the functional units of the Campus (Faculty/Departments/Divisions/unit/Support services)to achieve the level of quality and the objectives which the Campus aspires under its vision and Strategic Plan;

d. to foster and sustain a quality culture supported by ongoing learning and innovation in all functional units of the Campus , and by providing feedback to all staff and students on ways and opportunities for continuous improvement;

e. to facilitate quality enhancement based on recommendations arising from reviews and other initiatives and by highlighting effective practices to be shared among internal audience;

f. to demonstrate alignment with legislative provisions and compliance with relevant standards and guidelines and other applicable national and international guidelines;

g. to publish reports on quality reviews in order to provide to external stakeholders and to wider public on the quality of education and training , research and related services that it provides.

In order to achieve these objectives the Framework requires :

a. Ensuring adequate allocation of resources, financial in particular;

b. Ensuring the provision of comprehensive guidelines to support the work of staff , including professional development of staff, in relation to quality assurance and enhancement processes and requirements;

c. Coordinating activities that ensure the quality of the learning opportunities and support available to students , for example by identifying and disseminating good practice;

d. Ensuring all relevant policies , procedures and strategies in relation to learning, teaching and assessment and in relation to quality assurance are approved , relevant, and up-to-date , and established effectively;

e. Coordinating initiatives and schemes which promote excellence in learning and teaching and assessment including staff development initiatives;

f. Monitoring the operation of internal quality assurance (IQA) procedures and revise these procedures where appropriate

g. Producing annual and where appropriate periodic reports on key areas of quality assurance (QA) and enhancement (QE) including annual monitoring , accurate and up-to-date documents for validation and review, visiting, examining, and accreditation visits and experts;

h. Ensuring that arrangements for QA and QE reflect the respective expectations of all relevant professional, statutory, and regulatory bodies;and

i. Contributing to preparations for internal institutional audits when requested; and to provide reports and monitor follow up action in the light of any reviews.

3.3 Purpose of this edition

The purpose is to build on experience acquired and the progress achieved over the past three years , since the adoption in 2022 of the first Quality Assurance Framework and to continue to enhance effectiveness of its core activities of teaching, learning and research and of all related support services , in particular , major initiatives planned for the coming years ,taking account of the Goals of the Campus's Strategic Plan 2023-2027.

This will be achieved through:

1. Organisation's approach to linking strategic principles and direction with planning and quality management supported by a compliance process and regular auditing ;

2. Clear and transparent plans , systems, policies, and procedures relating to quality of education and Campus's related services are in place , accessible, implemented , regularly monitored, reviewed and improved.

3. Opportunity is provided for appropriate internal and external involvement in the maintenance of quality and standards including through use of feedback from students, graduates, employers, staff, and other stakeholders.

4. The various activities associated with quality assurance are distributed across the operations of different committees and the academic syndicate, ultimately under the auspices of council.They occur throughout the year , with appropriate reporting to the council and its committees .

3.4 Scope

3.4.1 The Academic Quality Assurance and Enhancement Framework policy applies to

     a. Governance bodies and committees of Lyceum Campus;

     b. Academic and non-academic staff employed at or contracted to the Campus.This includes members of executive and senior management , administrative,technical and support staff , senior administrative and professional staff and academic staff; and

     c. Organizational units such as Faculties and Departments and Support systems, staff and functions of the Campus , inclusive of the Campus community and students .

3.5 Principles underpinning Academic Quality Assurance and Enhancement Framework

To further strengthen continuous improvement and to encourage enhancement through the framework, following are a set of principles which should be embedded into all activities where possible:

a. Aligning activities with the intent, purpose and values;

b. Encompassing the 4-phase Quality Cycle of PDCA;

c. Encouraging a culture of self-reflection and peer review so that strengths and weaknesses may be identified and addressed;

d. Collaborating with other colleagues across boundaries;

e. Embracing student-focused approach where student participation and feedback informs all phases of the quality cycle

f. Actively engaging with the community to meet its needs;

g. Using evidenced-based practices , informed by scholarly reviews and utilizing qualitative and quantitative data for effective decision making and strategy evaluation;

h. Identifying and using relevant internal and external benchmarks and good practices to set goals and strive for improvement;

i. alignment with the Campus's risk management principles;

j. ensuring that the quality assurance processes are clearly communicated to staff and students with good practice being identified,and shared across the campus to aid quality enhancement;

k. use of qualitative information and quantitative data for identifying improvement opportunities , monitoring impact,and judging the effectiveness of changes;

l. Collective responsibility of every member staff for quality assurance and quality enhancement of all aspects of the Campus; and

m. All staff undergo induction and initial training upon appointment and receive initial targeted support to undertake their role.

n. Use of the following external reference points to benchmark success and areas for improvement

1. Sri Lanka Qualifications Framework (SLQF)
2. Quality Assurance Council (QAC) of the University Grants Commission (UGC)
3. Subject Benchmarks Statements (SBS) of the respective discipline/subject
4. Standards and guidelines prescribed by the Professional Bodies where relevant e.g. , Sri Lanka Medical Council (SLMC)
5. Manuals for Reviews of Sri Lankan Universities and Higher Education Institutions (UGC 2015, 2019,2022)
6. Codes of Practice (UGC QAC)

3.6 The Framework

As stated above under 3.1 Academic Quality Assurance and Enhancement Framework (AQAEF) sets the structure within which continuing assurance and enhancement of the academic quality of the

Campus's higher education provision is managed. It reflects a strong commitment to evidence-based decision making and continuous improvement. At an organizational level it is intended to guide the activities that will contribute to the development of a campus-wide culture of ongoing quality assurance to achieve the campus's strategic objectives and desired outcomes.

It serves as a guide in linking the many operational and developmental processes in the Campus's functions in order for the Campus to realise its mission statement which is " *To contribute to the wider world through the persuit of education,research,knowledge transfer and service at the highest levels of excellence"*

3.6.1 Operational Principles of the Framework

a. All plans will align with the campus's strategic plan;

b. Campus Council is regularly informed (at least annually) on progress against Strategic Plan targets and Key Performance Indicators;

c. All organizational units conduct annual operational planning process that is informed by the Campus's Academic Quality Assurance and Enhancement Framework and is aligned with budget processes. The unit under review can be an academic Department, Division, Administration Unit, supporting Unit , Faculty. or a Programme/Course of Study;

d. All organizational unit plans contain performance indicators, performance targets, and quality improvement strategies;

e. The effectiveness of quality assurance procedures applied across the Campus is evaluated on a periodic process through a cyclic independent external review of our own IQA procedure conducted by Quality Monitoring and Enhancement Directorate (QMED);

f. The Organisational Review Policy and Schedule developed by the Academic Quality and Standards Committee (AQSC) of the Campus and approved by the President is used to guide the reviews to be undertaken ;

g. The scope of reviews of academic departments is holistic in that they comprehend research and scholarship, education, public engagement, and interactions with internal support units. Particular emphasis is placed on quality of the student educational experience;

h. The focus of quality reviews of administrative and support services is on the quality and effectiveness of the services provided , processes and systems that support that services,

overall contribution to the strategic development and effective operation of the campus work environment and development opportunities of staff;

i. All organizational units are expected to identify quality principles to assure quality and compliance where required;

j. The Campus Council will establish a review process for itself and relevant governance committees.All reviews will incorporate relevant process benchmarking;

k. An evidenced-based approach will underpin the monitoring and review component of the PDCA cycle. Institutional performance data will be identified , stored and reported to internal and external stakeholders. Feedback from students and staff and other stakeholders will be incorporated in monitoring and review processes;

l. A schedule for reporting institutional data will be developed by the AQSC;

m. The main findings and recommendations from reviews are reviewed by the Council; and

n. QMED prepares an annual report for the AQSC that includes a report on quality committee activities and presented to the Council as Annual Report of the QMED.

3.6.2 Dimensions and activities encompassed in Academic Quality Assurance and Enhancement Framework

Academic Quality Assuarance and Enhancement Framework entails a key set of activities which support the' *PDCA ' quality cycle* and the quality assurance/enhancement principles . Using this model , examples of the key activities that the Lyceum Campus undertakes in each of the four dimensios are set out below.

1) Dimension .**PLAN** : *This includes the setting of the strategic intent, purpose and values of the Campus with the development of a structure and set of policies which provide a coordinated approach to their attainment:*

a. Development with stakeholder involvement of the Strategic plan and Campus plan providing intent,purpose and set of values;

b. Development of Campus level performance measures and operational performance targets;

c. An annual planning framework and cycle based on core data analysis,which engages all departments/divisions in :

      o Strategic planning;

- o Budget planning
- o student load planning;
- o workforce planning;and
- o risk management.

d. Appropriate governance and committee structures with delegated authority to operationalize policy and plans;

e. Policies and procedures for reviews and for course performance and academic program reporting;

f. A Performance Management Programme to link individual's work and development to the Campus Plan;

g. Strategic priorities mapped to allocation of resources;

h. Objectives of the system and its processes , resources needed to deliver results

i. Development of new programmes

j. Academic programme plans

k. Identification and planning to meet student needs

l. Risk managemen plans

m. Identification of good practices

n. learning and teaching plan

o. Quality assurance and accreditation plan

2) **Dimension DO/DEPLOY---***implementing the Plan through a management structure that operationalises goals :*

a. Effective committees that implement planned strategies and assign responsibilities;

b. Representation on committees from all relevant areas of impact;

c. Implementation of Campus   policies, processes procedures, guidelines and templates by Departments/Divisions/Units;

d. Allocation of funds to areas of identified strategic importance;

e. Implementation of recommendations from departmental reviews;

f. implementation of student subject, course and teacher evaluations;

g. student participation in various areas of student learning experience;

h. implementation of staff opinion survey;

i.   student and stakeholder focus groups as part of departmental reviews; and

j.   engagement with Campus Alumni.

3) Dimension CHECK/ REVIEW (results)—

a.   Annual review of the Campus Plan to reflect current priorities identified during the quality assurance and enhancement cycle;

b.   Annual reporting of actual performance against both strategic (Campus Plan) and operational plns (Departments);

c.   Monitoring of KPIs to assist in assessing performance against strategic intent;

d.   Monitoring implementation of recommendations identified through reviews by appropriate committee structures and managers;

e.   Monitoring of course evaluation requirements and outcomes through appropriate committee structures;

f.   Review of annual programme performance and departmental academic programme reports;

g.   Review of annual student course, subject,and teacher evaluations;

h.   Review of staff opinion survey results;

i.   Monitoring and where applicable measure processes and resulting products and services against policies

j.   Study results of implementation stage

k.   Gather feedback

l.   Multi-layered tiered approach to evaluate and review across the Campus:

➢ *Level 1*-Department/division/unit level reviews: subject, course , student surveys and feedback forums (ON_GOING)

➢ *Level 2* External checks: against reference points e.g. governance and management; SBS (PERIODICALLY every 3 years)

➢ *Level 3* peer review of programmes/courses/strategic and operational plans, Annual business plans,policy frameworks, (ANNUAL/ PERIODIC every 5 years))

➢ *Level 4* External strategic reviews: national/international comparison of data and themes aligned to strategic priorities, industries, partners or alumni (ONCE PER 7 YEARS)

There is no hierarchy in evaluation as each level impacts on and feeds into other levels. There is a strong partnership approach which involves students, industry/employers and staff each having an important role to play in evaluation and reviews.

- Compare results to see if the plan's objectives and requirements have been met

4 Dimension ACT/IMPROVE—*reflection and taking actions to improve performance*

a. Reflection on programme performance reports and departmental academic programme report outcomes and integrating strategies for improvement into departmental plans;

b. Integration of recommendations of externalreviews and programme accreditations into the Campus annual planning cycle;

c. Reflection on targets and adapting strategies to meet revised targets;

d. Budget re-forecast reviews and changes made to reflect changing environment;

e. Development of actions to address recommendations on opinion survey of staff;

f. Collection and analysis of student feedback and incorporation of results into curriculum and professional prograns;

g. Feedback to students on changes made as a result of programme or subject evaluations ;

h. Campus approach to student learning experience;

i. Reflection on community needs and integration of relevant strategies into departmental plans;

j. Benchmarking internally within departments and externally with similar disciplines and developing strategies to improve;

k. Feedback sought from students on improvements as a result of student based questionnaires;

l. Feedback sought from staff on improvements as a result of staff survey;

m. Communication of good practice from within Campus and within other relevant organisations and industries;

n. Professional development /staff training

o. Implementation of audits /review recommendations/completion of corrective action requests

Closing the Loop

Campus/Unit should then evaluate the results of executed strategies and action plans to determine whether they achieved the desired outcomes , i.e.,the assessment process is repeated , and the plan is

updated as necessary. This phase of the assessment process represents 'closing the loop' in outcome assessment.

A cyclic PDCA is recurring that is , it is necessary throughout the entire process to plan , execute and measure results , analyse them,find improvements put them into practice , and then start a new cycle. This approach leads to *continuous improvement.*

Student input to the Framework

Students play a key role in achieving the framework , and thereby in ensuring the quality of education.They will be engaged to help evaluate their respective programme as a whole., as well as the individual teaching sessions that they receive.

Current mechanisms used by institutions to capture the student voice include:

- Surveys
- Evaluation
- Special project focus groups

Mechanisms make use of :

a. questionnaires and other data gathering instruments to collect feedback,
b. utilizing student representatives to sit on various Campus-wide committees
c. carrying out student consultative events
d. involving students in Campus projects
e. Encouraging students to participate in discussion forums available on-line
f. Carrying out QA processes, including course and programme reviews

Staff Development

The success of the framework relies on contribution of staff to quality assurance practices.Both academic and administrative staff are involved in the delivery of the framework at ground level.

Training for this is reflected through comprehensive staff development strategies , peer review and appraisal.Staff development includes all individuals involved in students's education.

Communicating the Framework

In ensuring adequate communication across the campus a number of approaches may be utilized including:

a. Providing schedules for audit and review
b. Reporting of the Framework from monitoring and evaluation
c. Disseminating updates to procedures and any necessary changes resulting from monitoring processes
d. Recording and commending good practice
e. The Director of QMED is responsible for the initial dissemination of all quality Through cross-membership of the campus's management , department and programme structures , information will be distributed regularly and appropriately to all relevant staff and students.

Project monitoring Committee members are then responsible for communicating changes to practice or policy that may impact on the quality of education delivered.

3.7 Quality control

Evaluation does not make sense if there are no actions to enhance the quality and to overcome the shortcomings.Therefore, it is necessary to have opportunities , for both quality control and quality improvements.

Quality control is the process of ensuring compliance with standards set to maintain and enhance quality.One of the major activities under quality control is *Quality Audit.* The quality audit is a process of assessment used to check that procedures are in place to ensure quality,integrity or standards of provision and outcomes. The following questions must be considered in assessment:

a. Are we doing the right things? (checking the context, goals or objectives)
b. Are we using the right things? (checking inputs)

c.   Are we doing things right? (checking processes)

d.   Are we achieving the right thing? (checking outputs)

e.   Are we making a desirable change in our society? (Checking outcomes/impacts)

3.8 Continuous improvement and quality culture

Quality improvement is based on the principle that every aspect of the work of the Campus can be improved continuously and that evaluation , both internal and external , are practices that serve that improvement. It is constructive and formative, is evaluative as well as descriptive, and is evidence - based and data-driven . All members of the Campus community have a stake and role in quality assurance and improvement at the Campus. It is considered and accepted that through continuous quality improvement all staff should take personal responsibility for their own professional quality and standards in all their activities.

The creation and maintenance of a culture of quality is fundamental to the effectiveness of the Campus's quality system, and therefore there is ongoing   education across the Campus about quality assurance and improvement and the Academic Quality Assurance Framework of the Campus.

Underlying the effectiveness of the quality framework is the need for Campus management to ensure that all members of the Campus community are part of the quality culture and are made aware of the following :

a.   all elements of the quality framework;

b.   those aspects of Campus operations, including structures policies , principles ,procedures, plans and practices that affect , guide ,or direct their activity as part of the quality culture ; and

c.   where the related accountabilities, delegations. and responsibilities lie.

All members of the campus governance are responsible for ensuring that a quality assurance culture is adopted,

3.9 Implementation of the Academic Quality Assurance and Enhancement Framework

Implementation of the Framework is coordinated by the Apex Body for QA " Quality Monitoring and Enhancement Directorate"..The Quality Monitoring and Enhancement Directorate of the Lyceum Campus is an institution - level organ responsible for implementation of the Academic Quality Assurance Framework and the overall management of quality assurance activities at the Lyceum Campus.(see section 3.13 for details)

Framework for quality assurance is implemented via quality reviews of departments/divisions/units/programme/course and through the implementation of campus-wide policies and procedures.

3.10 Leadership Management and Governance of the Academic Quality Assurance and Enhancement Framework

At the Campus on an operational level overall responsibility for the quality assurance of the academic programmes of Study is with the Deans of respective Faculties..They are supported by the Director of the Quality Monitoring and Enhancement Directorate (QMED) in achieving all obligations;

The Director/QMED , coordinates the operational management of quality assurance reviews. The Director/QMED prepares an annual schedule of reviews for approval by the President.. *Each functional Unit will be reviewed once in three years to start with and later once in five years.*

The Deans, Department Chairs , Programme /Directors as well as specific theme leaders are each directly responsible for the regular review and quality assurance of specific areas identified based on individual's expertise. .

3.11 Ensuring Regular Reporting to the Council and Academic syndicate

Reports on any areas of significance pertaining to the quality of the programmes shall be reported regularly to the QMED Directorate. In addition periodically detailed reviews of each of the main areas of focus and the effectiveness of quality assurance procedures pertaining to that area shall take place , with an overall review of quality assurance processes annually at the end of each academic year.

QMED collates reports and information from the various committees /sub committees of the Council and Academic Syndicate and senior staff of the Campus and presents to both Council and Academic Syndicate at each meeting , consolidated and comprehensive documents for the Council's perusal.

All reporting committees and staff are guided by the reporting schedule (Appendix1)The response/comments/feedback/updates are circulated back to the committees and staff by the QMED.

QMED is assisted by a Programme Assistant .to ensure that there is comprehensive ,meaningful and timely reporting   to, from, and between the apex boards and other committtees , departments,and senior staff at the campus so that boards can monitor and continuously strive to improve the quality and performance of the campus's operations and its contribution to higher education.

In ensuring adequate communication across the Campus a number of approaches will be utilized including:

- Reporting schedules for audit and review
- Reporting findings from monitoring and evaluation
- Disseminating updates to procedures and any necessary changes resulting from monitoring processes
- Recording and commending good practice

The Director of QMED is responsible for the initial dissemination of all quality assurance processes. Members of the IQACs of Faculties are then responsible for communicating changes to practice or policy that may impact on the quality of education provided.

3.12 Review of the Academic Quality Assurance and Enhancement Framework

Academic Syndicate and Council review the Framework following completion of each of the 5-year Strategic Plan to ensure a continual process of review and enhancement of Campus's approach to managing quality and standards and to keep the Framework current and in line with national and global trends.

In the intervening period minor changes may be made by QMED and approved by the   Academic Quality and Standards Committee (AQSC), a joint committee of the Council and the Academic Syndicate.

In order to support the AQAEF Campus has developed a wide range of policies , procedures, and operational manuals which guide the decision making of every aspect of Campus's operations relating to quality and standards. These policies procedures and manuals are periodically reviewed in accordance with the Policy Committee.

3.13 Quality Monitoring and Enhancement Directorate (QMED) of the Lyceum Campus ,

Lyceum Campus has established a central *Quality Monitoring and Enhancement Directorate* (QMED) which drives the internal quality assurance (IQA) system of the Lyceum Campus centrally and campus-wide through its Internal Quality Assurance Cells (IQAC) of the Faculties.The Quality Monitoring and Enhancement Directorate is headed by a Director. It   is a institution - level organ responsible for implementation of the Academic Quality Assurance Framework of the Lyceum Campus and the overall management of quality assurance activities at the Lyceum Campus. The Directorate functions directly under the office of the President of the Campus as the President's Secretariat on quality assurance issues.

.The Directorate will use the Framework as the basis for promotion,monitoring and evaluation of quality in the campus.The Directorate will place emphasis on overall institutional performance. The Academic Quality Assurance Framework forms the basis for the promotion of quality in the campus and covers all functions of the campus.

The QMED ensures that there is comprehensive, meaningful, and timely reporting to, from ,and between the apex Boards and other committees , departments, senior staff at the Campus so that Boards can monitor and continuously strive to improve the quality and performance of the Campus's operations .

To achieve the standards expected .QMED takes responsibility for , including the following :

- ▪ Ensuring use of the following external reference points to benchmark success and areas for improvement

1. Sri Lanka Qualifications Framework (SLQF)
2. Quality Assurance Council (QAC) of the University Grants Commission (UGC)
3. Subject Benchmarks Statements (SBS) of the respective discipline/subjects(UGC, QAC Sri Lanka 2004-todate)
4. Standards and guidelines prescribed by the Professional Bodies where relevant e.g. , Sri Lanka Medical Council (SLMC)
5. Manuals for Reviews of Sri Lankan Universities and Higher Education Institutions (UGC 2015, 2019,2022)
6. Codes of Practice (UGC 2004)

- Development , implementation auditing and evaluation of a QA framework which comprises strategy,standards,policies, processes, and mechanisms;
- Development of the Quality Assurance Manual, templates, and tools;
- Monitoring of the implementation of the QA policies/procedures/mechanisms at all Campus's levels;
- Provision of support in all academic/professional accreditation activities and external assessment activities;
- Suggestion of improvements to the Campus , its processes, structure, resources ,programmes ,teaching and learning methods, to ensure the quality of teaching ,learning, and research;
- Establishment of effective channels of communication to ensure the dissemination of good practices within the Campus;
- Effective management of all QA issues pertaining to academic issues;
- Preparation of reports for QA audits and the maintenance of a central repository of QA reports , dates, and information

4. ACADEMIC QUALITY ASSURANCE AND ENHANCEMENT FRAMEWORK:PARTII: Elements of the Framework

The Academic Quality Assurance and Enhancement Framework comprises the following elements ,which are interrelated and act to draw together diverse individuals and information in a coherent and holistic view of quality :

1. Campus Legislation and Regulatory Requirements;
2. Campus Governance: Key Institutional bodies , and their Committees;
3. Campus Quality Assurance Processes:
    i. Campus-wide oversight
    ii. Ongoing Programme Evaluation/Course
    iii. Developing a new Programme/Course
    iv. Accountabilities and Responsibilities

4..1 LEGISLATION AND REGULATORY REQUIREMENTS

4.1.1 Introduction

Campus's policy is defined as a high level statement or principle that outlines non-discretionary governing intentions and actions to reflect and guide the campus's decision making,practice and conduct.

The Campus has developed a comprehensive suite of policies in order to ensure effective governance of its academic and non-academic operations.

These policies are supported by a variety of procedures, forums, templates, guidelines, and system to ensure that policy decisions are effectively implemented across the Campus.

The council and the Academic Syndicate as the peak governing bodies have oversight for quality assurance related and non-academic policies and academic related policies respectively.

Both bodies ensure that all policies align to the campus's strategic direction and all regulatory requirements.

4.1.2 Roles and Responsibilities

Key roles for policy management of Campus include:

Responsible Officers : as the primary point of contact for any given policy .They are responsible for implementation , proposing amendments, conducting reviews, in accordance with the 4-year review cycle establishing strategies for communication.

The approving body is either Council for the quality assurance related and non-academic policies or the Academic Syndicate for the approval of academic related policies. The Council retains the authority to approve policies relating to student grievances.

Governance and Policy Management : oversees the publication of the policies, provides guidance during policy development, review and approval phases , undertakes quality assurance checks for consistency, and compliance, and publisise policy guidelines and tools.

The Academic Syndicate : ensure that policies are implemented , disseminated, and systematically reviewed. In practice these tasks are undertaken supported by Quality Monitoring and Enhancement Directorate (QMED).

Policy Record management : A Register of policies and approval records will be maintained by the QMED on behalf of the Council

Policy Implementation and dissemination: As part of the paperwork submitted to the approving body , implementation and communication strategies for any new , revised and/or rescinded policies will be clearly outlined.

This will include the identification of stakeholders and appropriate notification methods and timelines.

Approved policies are readily and easily accessible to all relevant stakeholders and maintained within the campus.intranet,website,or its management portal.

All academic governance and non-confidential educational policies are publicly available via the campus website.

4.1.3 Statutory requirements of the following legislations and regulatory requirements are:
- Sri Lanka Qualifications Framework
- Regulatory bodies for professional accreditation of Campus qualifications
- Ministry of Education
- Sri Lanka Medical Council

4.1.4 Lyceum Campus's Regulatory Framework of Quality Assurance comprises the following legal instruments.

..The Instruments include Ordinances, Regulations, Rules, policies , procedures ,Codes of Practices, By-laws, guidance documents of the Campus.

Instruments of Governance

- o Ordinances are the **principal legal instruments** by which the Campus is established and governed.

- o In order to facilitate the operation of the Ordinances , provisions have been made for a series of instruments providing for a wide area of **subsidiary legislation** in the Regulatory Framework.

Subsidiary instruments : of the Campus relating to quality assurance include :

Academic(AC)

Lyceum Campus Code of Practice on Programme Design ,Development and Approval   (AC 01)
Lyceum Campus By-laws on Examination Procedure , Offences and Punishment (AC 06)
Lyceum Campus Manual of Procedure for conducting examinations (AC 11)
Lyceum Campus Policy and Procedure on Conflict of interest of Staff of Faculty of Medicine (AC 15
Lyceum Campus Feedback mechanisms for underperforming students of Facultyof Medicine (AC 16)
Lyceum Campus Manual of Procedure for conducting examinations , Faculty of Medicine (AC 17)
Lyceum Campus policy and Programme Closure , Faculty of Medicine (AC 18)
Lyceum Campus TOR of the Curriculum Development Committee , Faculty of Medicine (AC 19)
Lyceum Campus Examination By-laws and Regulations of the MBBS Degree Programme (AC 21)

Governance and Management (GV)

Lyceum Campus President's Advisory Board (GV 04)
)
Lyceum Campus Code of Practices for Good Governance (GV 06)
Lyceum Campus Code of Conduct for members of Academic Syndicate and its Committees (GV 07)
Lyceum Campus Board of Discipline (GV 10)
Lyceum Campus By-laws on Student Conduct and Discipline (GV 11)
Lyceum Campus Governance Structure Version 2 (GV 12   )

Human Resources (HR)

Lyceum Campus Code of Conduct for Academic Staff (HR 04)
Academic Appointments, Professional Development and Promotions Framework , Faculty of Medicine, Lyceum Campus, (HR 05)

Quality (QU),

Lyceum Campus Academic Quality Assurance Framework- policy Version 2 (QU 01)
Lyceum Campus Internal Quality Assurance Cells of Faculties (QU 04)
Lyceum Campus Code of Practice on Annual Programme Monitoring and Review Process and Procedure (QU 05)
Lyceum Campus Code of Practice on Internal Periodic Programme Review Process and Procedure (QU 06)
Lyceum Campus Academic Quality Assurance and Enhancement Framework Version 2 (OU 07)

Research (RS)

Lyceum Campus Code of Good Practices for Research (RS 01)

Student Affairs (SA)

Lyceum Campus Student Charter/Code of Conduct (SA 01)
Lyceum Campus Student Support and Welfare Policy (SA 02)
Lyceum Campus Admission Complaints and Appeals Procedure (SA 04)
Lyceum Campus Polcy on Career Education and Career Guidance (SA 05)
Lyceum Campus Policy and Procedure for Student Complaints (SA 06)
Lyceum Campus Student Enrollment Agreement Form (SA 07)
Lyceum Campus Student Handbook , Faculty of Medicine (SA 08)

4.2 CAMPUS GOVERNANCE ARRANGEMENTS : KEY AUTHORITATIVE BODIES AND THEIR COMMITTEES

Governance is related to the organizational structure and decision making processes that determine the characteristics of each institution as well as its mission , values and how they relate to the context. Governance refers as well to the funding system, institutional roles responsibilities and education policies.

As set out in the Ordinance No.3 of the Lyceum Campus this includes the following:

4.2.1 Council and Corporate Governance

The Council is the principal executive and policy making body and the supreme Governing Authority of the Lyceum Campus with overall responsibility for the administration of the Campus. 'Council is   responsible for overseeing the administration of the campus. determining their future direction,and monitoring progress against the Strategic Plan. Council is also responsible for

monitoring of financial operations and governance arrangements and ensures all policies are approved by the relevant committees. The Council Committees assist the Council in the effective discharge of its responsibilities.

The President has oversight of functions of the Quality Monitoring and Enhancement Directorate (QMED) and the work, operations and governance of the following standing committees of direct relevance to quality assurance .

Quality Monitoring and Enhancement Directorate (QMED) headed by a Director functioning directly under the purview of the, the President. as a section in the Presidential secretariat . It has an overall responsibility for the implementation of the Academic Quality Assurance Framework (AQAF) policy .It serves as a regulating mechanism to ensure quality operations are coordinated , monitored, and managed with maximum effectiveness and efficiency across the Campus

. It is managed by a Management Committee consisting of the Heads of Faculties, Heads of Non-Academic and Administrative units, members of external Council, and student representatives from faculties and student representation. QMED will drive the internal quality assurance system centrally and Faculty-wide through the Faculty level Internal Quality Assurance Cells (IQAC).of the Faculties.(Appendix 2)

Committees of the Council relevant to quality assurance are:

- *Academic Quality and Standards Committee* (AQSC) , a joint Standing Committee with the Academic Syndicate
- *Admissions committee* is a joint standing committee of the Council with Academic Syndicate.
- *Finance committee*
- Policy committee.
- Student Welfare committee , a joint committee with Academic Syndicate

4.2.2 Academic Syndicate (Senate) is responsible for **Academic Governance**. .It is the supreme academic authority constituted in accordance with Ordinance 3 of the Lyceum Campus ,.

.It is responsible to the Council for assuring quality , integrity,and the maintenance of standards in all academic activities including teaching , scholarship and research and compliance with relevant

regulatory external regulatory requirements , including Sri Lankan Qualifications Framework and Subject Benchmarks Statements of the UGC, Sri Lanka..

The Academic Syndicate has oversight of the work , operations and governance of the following standing committees of direct relevance to Quality Assurance: The relevant Committees under the purview of Academic Syndicate are:

- *Admission Committee* , a joint committee of Council and Academic Syndicate
- *Curriculum planning and development committee*
- *Higher Degrees Committee*
- *Library committee*
- *Research Committee*

4.2.3 Faculties

Faculties and Departments make up the academic structure of the Campus and each play a role in organizing the teaching and research the Campus does.Each Faculty is a home to multiple departments , each of which focus on more specific areas of teaching and research.

Each Faculty is governed by a Faculty Board chaired by the Dean.

Faculty Boards are responsible for the provision ofadequate teaching and facilities for research.

Faculty Boards are responsible to the Academic Syndicate for the structure and content of the undergraduate and postgraduate programmes/courses and examinations under their aegis.

4.2.4   Medical Education Directorate (to be filled)

4.3 QUALITY ASSURANCE PROCESSES

Concept

The Lyceum Campus is autonomous, independent and not state-owned. Based on this principle the Campus   operates rigorous internal quality assurance processes that ensure all programmes are subject to regular review , and where necessary adjustment. These   internal quality assurance processes are crucial to safeguard public confidence in academic standards and the quality of teaching and research.

Quality assurance processes involves the development and implementation of policies and procedures,guidelines, monitoring mechanisms ,internal and external evaluation and active self-improvement exercises to critical areas such as QA governance and management, student admissions,course design, programme management and delivery,assessment,student feedback and participation,student support,complaints access transfer and progression.

The processes set out below are indicative of the approaches taken in the Lyceum Campus and can be seen in practice operating across the Campus .Key processes are given under the below mentioned titles:

1. Institution-wide Oversight
2. On-going Programme/course Evaluation
3. Developing new programs /courses

4.3.1 Institutuion - -wide oversight

Institution -wide oversight is a critical *institutional governance function* performed by Council, Committees and external bodies across the Campus. It refers to actions taken throughout the Campus to review/monitor the Campus and its policies , plans, programmes, and projects to ensure that the policies and strategies are implemented as intended, expected results are being achieved , activities comply with policies, laws and regulations, develop areas of concern and continuous improvement is taking place.

Campus-wide quality is ensured through:

4.3.1.1 The development of quality assurance policies and procedures to critical areas such as QA governance and management, student admissions,course design, programme management and delivery,assessment,student feedback and participation,student support,complaints access transfer and progression. (**details under section...........Regulatory framework for QA)**

4.3.1.2 Academic governance through the *institutional committee structure* at different levels such as Department, Faculties, Academic Syndicate and , Council.Written reports with decisions and recommendations , will be made by these committees to the respective governance bodies .In some cases these reports will only comprise an annual report , or will only be brought forward when a matter is raised that requires the attention of the bodies..

- ✓ **Council** is the governing body of the Campus.it is the employing body and is responsible for the Campus's overall organizational structure and for its finances,property,investments and business. Council Committees include :

- ✓ *Presidents advisory committee; Academic quality and standards committee; Admissions committee; Student admission policy and procedure , faculty of medicine; audit committee; board of discipline; finance committee ; policy committee; strategic plan committee ; student welfare committee(..........)*

- ✓ Whilst the council is collectively responsible and accountable for institutional activities , within that the academic syndicate has responsibility for the academic activities of the campus , including all aspects of the operations of the campus that have a bearing on teaching ,research and the welfare , supervision and discipline of students. **Academic Syndicate** Committees of Lyceum Campus include :

- ✓ *Library committee; curriculum planning and development committee; study leave committee ; higher degrees committee;   examination disciplinary committee ;   convocation committee(.........)*

4.3.1.3   Strategic management and academic syndicate and QMED provides oversight in terms of *direction and maintenance of academic standards* and reports annually to Council

4.3.1.4   *.Institutional level monitoring*   including through the Lyceum Campus Quality Monitoring and Enhancement Directorate (QMED) (......) ,Lyceum Campus Academic Quality and Standards Committee (AQSC),(.............), and Quality audits

4.3.1.5   Effectiveness of policies, procedures and monitoring mechanisms as provided for under legislation*. Institutional review of academic policies, regulation* for example by Lyceum Campus Policy Committee;   Lyceum Campus Academic Quality and Standards Committee

4.3.1.6, Institutional analysis of student conduct, complaints and appeals reported to the QMED and to the Council each academic session.These procedures ensure that matters can be dealt with efficiently , that the Campus's standards are maintained , and that it will take seriously concerns raised by its students or about its students where necessary.

4.3.1.7   Internal approaches to *ensure that academic provision is compliant* with   Sri Lanka Qualifications Framework (SLQF) for e.g. In creation of new Programme and Course Approval

Procedures(Lyceum Campus Code of Practice on Programme Design Development,and Approval Process and Procedure (..................)

4.3.1.8 *Student conduct , complaints , Academic Appeals*

Campus legislation sets out the circumstances in which students will be subject to disciplinary or fitness to practice measures and detail the procedures to be followed in the event of reported student misconduct or fitness to practice concerns.The Campus also has processes which enable students to make representations against progress decisions which have had a negative effect on them or their future career (academic appeals) ; to express dissatisfaction with their experience at the campus , or the service it provides (student complaints) or, under special circumstances , if all other avenues have been exhausted but an issue remains unresolved, raise a grievance to campus council.

These procedures ensure that matters can be dealt with efficiently , that the campus's standards are maintained,and that it will take seriously concerns raised by its students or about its students where necessary.

Data on these processes are reported to the Quality Monitoring and Enhancement Directorate (QMED) each session.QMED may take action , as necessary in response to this data.This data is also reported to the Council each academic session.

4.3.2 On-going Programme Monitoring and Evaluation

Monitoring and evaluation of higher education is an essential process within institutions' internal quality assurance mechanisms, , forming a fundamental part of the academic cycle.They cover all provision that leads to their awards and assuring the standard of those qualifications .They ensure that institutions'academic provision enables students to achieve the intended learning outcomes of programmes/courses.They evaluate student attainment of academic standards and allow institutions to confirm that their portfolio aligns with their mission and strategic priorities.

Effective monitoring and evaluation is an ongoing activity incorporated into everyday standard practice .Formal activities -such as annual monitoring and periodic review of programmes – are set in place on a routine basis.

4.3.2.1   *Student Evaluation Surveys*

Student evaluation surveys focus groups, student-staff liaison committees , and student representation on other committees (chosen or elected to represent their fellow students participate in decision making processes at the faculty level *)* are used to capture student feedback including on structure, content ,and teaching delivery , and feed into review discussions The analysis of these surveys allows for greater student involvement and good practice may be to consider the results with student focus groups to be able to gain a greater understanding of their meaning and feedback loops are closed.

Student feedback should be sought via internal means and feedback mechanisms , whereby student views are recorded and used to contribute to the cycle of continuous improvement .Faculties and Departments are expected to ask students for feedback on a regular basis.This can via student representatives on committees ,staff-student committees and course-specific surveys.Feedback relating to quality of education should be addressed by Faculty (or Department) Boards.Closing the loop is an essential part of this process .

4.3.2.2 *Annual monitoring of student completion rates,* (ratio of students who successfully complete an educational programme within a defined period) *assess outcomes and performance* against sector-wide and institution trends

4.3.2.3Annual External Examiner reports (for taught programme annually offer independent , objective and subject -specific advice on modes of assessment and learning outcomes.

External examiners are appointed to provide the Campus with impartial and independent advice and informed comment on Campus's academic standards and student achievement in relation to those standards , through oversight of the assessment process at the module and programme/award leval., ensuring they remain rigorous and fair.The expectation is that any concerns expressed by external examiners will be addressed by Faculty and Department Boards.Concerns will be reported to the Academic Syndicate and Council.

4.3.2.4Annual External advisors or Moderators on Academic Standards complement and enhance the work of subject- and programme-level examiners in setting and maintaining academic standards and providing external assurance of the quality of the Campus's awards.

4.3.2.5Cyclical institutional annual and periodic programme review

Lyceum Campus is committed to maintaining academic standards and delivering consistently high standards of quality in its programmes , thereby ensuring that they provide an excellent academic experience and enable student achievement to be reliably assessed.

Within the obligations set out by the SCAQA of Ministry of Education, and in line with the Sri Lank Qualifications Framework (SLQF) ,Campus has in place explicit, effective, strategic approaches to quality assurance and enhancement.

A key element of the Campus's Academic Quality Assurance and Enhancement Framework is the annual and periodic review of educational provision in order to be able to determine and demonstrate that required academic standards are being consistently met. Further modules and programmes are monitored in terms of standards , student achievement and opportunities for enhancement on an ongoing basis.

4.3.2.5.1 Cyclical Annual Programme Monitoring

Annual Programme Monitoring takes place at the end of each academic year and is required for all approved programmes .

The purpose of annual programme monitoring is to consider objectively: whether the programme continues to be well designed and is of high quality and consistent with SLQF ; whether assessment arrangements are reliable; student attainment ,whether students are achieving threshold standards and the intended learning outcomes; support available to students; student feedback.

Programme Coordinators have responsibility for monitoring all the programmes for which they are Programmme Director, and seeking input from other programme Directors for the monitoring of any combined degree programmes for which they are responsible.

The Programme Coordinator should collate and review data on student attainment outcomes on the programme ;consider the outcomes of Module Review ;consider the comments of External Examiners ;and consider the relevant student feedback .

In addition The Programme Director should consider the attainment data the feeback from students and external examiners , and taking account of this consideration , undertake an overall reflection of the performance of the programme and any enhancements or amendments to the programme that

require to be progressed in order to ensure continuing appropriateness and quality of student learning experience .

This reflection should include matters such as :programme content,assessment approaches,student achievement of learning outcomes;any professional accreditation requirements.

The Annual Programme Monitoring Report should be completed to record : data on student attainment;key reflections on the feedbackfrom students and external examiners;key reflections on the programme;enhancements or amendments planned along with corresponding timecales for implementation.

Annual programme review reports are considered at the Faculty's Curriculum Development Committee .key outcomes , including any plans for enhancement , should be reported to the Faculty Board.

Outcome--As a result of reviewing the above information , programme/course teams may decide to make changes to course content , structure, assessment or delivery to further enhance the student learning experience. The outcomes of the review are reported to the Department and Faculty Board. Issues arising from monitoring are properly considered, reflected on and acted upon at each stage, at the respective department/Faculty and at AQSC. Responses are also provided at each stage-*closing the feedback loop*-and ensuring that actions and outcomes are reported back to staff and students, as a crucial element of Annual Monitoring and review.

A full description of the Annual Monitoring of Programmes is contained *in the " Code of Practice on annul monitoring and review process and procedure* ....

4.3.2.5.2 Cyclical Quinquennial Periodic Programme Reviews

As part of overall approach to institutional review , the Campus carries out programme reviews of specified subject-areas on a five-yearly (quinquennial) cycle.

A programme review includes scrutiny of :

- o The strategic approach to quality and enhancing teaching and learning
- o All credit-bearing provision at undergraduate level study,

- o Enhancement of teaching and learning
- o Approaches to identifying and sharing good practice

The aims of each review are to:

- o Undertake an objective review of provision, critical reflection on practice and on national and international best practice;
- o Produce reliable confirmation that the academic standards of awards are secure and that provision is of high quality and being enhanced;
- o Consider areas of strength or weakness in relation to key performance indicators (KPIs) ;honours degrees awarded, employability, student cohorts ,equality and diversity.
- o Consider the effectiveness of the academic support and learning resources provided/available to students;
- o Consider the ways in which student engagement takes place and hoe student feedback is considered and acted upon;
- o Consider themes arising from external examiner reports and responses to these themes;
- o Give a central role to quality enhancement through dialogue on the approach to enhancement , enhancement that has been or is being progressed, and areas in which quality could be improved;
- o Consider the subject -area's use of relevant external and internal benchmarks in the design and delivery of its programmes including the subject benchmark statements and the SLQF;and
- o Recognize and commend areas of positive practice and make recommendations for future development.

Each review takes place through a process of preparation of an self-evaluation report (SER) prepared by the subject area;consideration of the SER by a review panel of 4-5 members and including internal senior academic and external member who is a subject specialist appointed by the Faculty Board;a Review Meeting in which the Review Panel meets with groups of staff and students from the subject area to consider the SER and supporting documents ; preparation of a ReviewRreport which includes areas of commendation and a set of recommendations

The outcome is a detailed Review Report that highlights strengths and achievements, and includes recommendations for change that are aimed at strengthening provisions and further enhancing the

teaching and learning provision, and the student experience. Report is submitted to the Academic Syndicate.

At the conclusion of the review exercise , the campus will decide whether to extend the period of approval of a programme for a further five year period and what changes need to be made to ensure the continuing validity and relevance of the provision.

As a result of monitoring described above , the campus may decide to close a programme or degree.If closure is recommended measures must be taken to notify and protect the interests of those involved, in particular those of students enrolled on or accepted for admission to , the programme . The Code of Practice on Programme Design and development and Approval states clearly that processes orderly withdrawl of programmes/courses are as important as those for design, approval and review.for closure.

The code of practice on *Internal Periodic Programme Review and Procedure* provides comprehensive detail on review and is provided to subject areas at the outset of preparation for each review

4.3.2.6 *Cyclical re-accreditation* by professional , statutory and regulatory bodies where programmes require *external quality assurance (EQA) of higher education institutions and accreditation* .

External quality assurance consists of a set of systematic evaluation processes through external peer reviews, , including regular self assessments ,on aspects of institutions made by departments to ensure that institutions meet pre-defined standards and criteria and maintain accountability ..Institutions that meet pre-defined standards . EQA involves an assessment of including strategic mission, its governance structure, teaching learning environment ,research output and research training, its staffing profile, programme offerings and student achievement.

External quality assurance (EQA) or review is an important component of the Quality Assurance (QA) framework of any higher education system.

Programme review is offered by an external body to all undergraduate programmes which have completed at least one cycle or graduated atleast one batch of students. Thereafter it may be carried out every five years.

Programme Review Process involves the following

important stages :

- Self assessment document from the Campus
- Desk review and Review team's visit to the campus
- Report and judgement
- Follow up

Self evaluation and self-assessment report (SER)

Months before the intended review , the team appointed by the Faculty responsible for delivering the programme of study compiles a self-evaluation report (SER)on the respective study programme in liaison with Internal Quality Assurance Cell (IQAC) of the Faculty and in consultation with relevant stakeholders..

The SER reflects the self-assessment of the quality of the study programme and its strengths, weaknesses and areas for improvement. should reflect self assessment of the faculty of the quality of the study programme and is strengths, weaknesses and improvement.The SER becomes a key document that provides point of reference for the review team to understand the faculty and the programme of study.

The SER should reflect the following aspects pertaining to the particular programme of study.:

- degree of internalization of best practices and level of achievement of standards
- degree to which the claims are supported by documented evidence
- accuracy of the data and statements made in the SER
- should be concise and analytical, self-explanatory, with references to all relevant evidence

The self-evaluation is also a key reference point for the review team and sets the context for the review visit. The purpose of the SER is to provide the review team, with an account of the performance of the institution/ programme, with respect to specific 'criteria'. Every claim of compliance and level of attainment has to be supported with multiple sources of documentary evidence, which is a major requirement of the SER.

Desk review and Review Team's visit to Campus

The aim is to consider evidence furnished by the faculty to verify the claims made in the SER. The review team carefully read the documentation provided by the faculty as evidence.The SER, together with the supporting documents, will be assessed by an external Peer Review Team of accredited reviewers from the External Agency, after careful scrutiny of the documentary evidence provided by the faculty.for the 'criteria' .

Review will draw upon the following principal sources of evidence:

- The Campus's self evaluation prepared for the review,
- Evidence referenced in the SER
- degree of internalization of best practices as prescribed in the Programme Review Manual (UGC 2015)
- Use of local codes of practice and other appropriate instruments developed or adopted by the Lyceum Campus,
- Use of national benchmarks and guidelines as available,
- Information gathered by the review team during the review visit

Review Visits

Aim of the review visit is to get a clear picture of the campus's processes in operation,and to clarify the claims made in the SER. The review team ensure having meetings with

- academic staff of the faculty/department/division
- members of the IQAC
- members of the non-academic staff
- students or student representatives
- representatives of alumni
- other stakeholders such as moderators, external examiners, extended faculty,/visiting staff

Review team may request for selected on-going teaching learning activities and laboratory work and a tour of the main campus .

During the visit review team will:

- examine and verify the claims in the campus's self-evaluation

- review with the campus any specific concerns arising from reviews of subjects, or professional body reviews done before the visit;
- gather any further evidence necessary to enable it to form a view on the effectiveness of the campus's arrangements for the management of quality and standards including the functioning of the AQSC and its reporting mehnisms;
- assess to , subject, programme reviews have been addressedwhat extent the recommendations and criticisms made by the previous programme reviews have been addressed.

At the conclusion of the review visit , an interactive meeting is held between the review team and the following:

- Dean of the Faculty
- Heads of the Departments
- Academic Coordinators
- Senior members of the academic staffChair and members of IQAC
- Student representatives of the Faculty Board
- Representatives from Academic Support Staff

Review Chair will present the highlights of the findings and facilitate an interactive discussion.

Report and Judgement

The final outcome of the External Peer Review of a programme of study is a Programme Review Report.

The Report is expected to cover the following:

1) the peer review process,
2) the findings of the review,
3) documents perused,
4) analysis of the evidence provided
5) ,facilities available
6) ,teaching learning processes
7) observed,issues identified and discussions held.
8) review team's reflections and conclusions on the level of accomplishment by the faculty with regard to the quality and standard of the programme that has been reviewed.

9) will also include commendations on the accomplishments by the faculty and recommendations for quality enhancement.

The review teams assessment of the level of accomplishment of quality expected of an academic programme is based on the grading of overall performance .

Follow-up

Campus should ensure that the facultiy , departments,and support units have access to the report. It is expected that concerned academics,administrators, and support staff should read at least the sections relevant to them, their reactions have to be ontained in a formal manner and discussed in special meetings of the Curriculum Development and Evaluation Committee,Faculty Boards,Academic Syndicate and Council.

A comprehensive follow up action plan has to be drawn up and integrated into the current action plan.

The Academic Standards and Quality Committee and other relevant committees should continue to monitor the progress in redressing defects and enhancing quality.

4.3.2.7 **Programme specifications** (taught programmes)A definitive record of each programme/course and qualification is maintained by the Campus *to act as a reference point for the delivery , assessment , monitoring and review of the programme.*They should be accessible to academic and professional services staff, students, internal and external examiners , professional and statutory bodies , and academic reviewers. Programme specifications include information on educational aims, intended learning outcomes, learning and teaching methods ,and modes of assessment and are updated as and when amendments to the programmme or learning outcomes *are approved.*

4.3.3 Developing New Programmes/Courses

Programme of study is defined as a stand- alone approved curriculum followed by a student , which contributes to a qualification from a degree awarding body.Where a programme is made up of more than one self-contained , formally structured units,they are referred to as courses/modules.The process of programme design , development and approval are an essential part of higher education providers' internal quality assurance and process..Programme design and development of a programme is crucial for ensuring that it is relevant and sustainable.

The Lyceum Campus's policy on programme design approval, monitoring, review and modifying them including closure of programme are contained in its by-laws,regulations,and codes of practices.

Related instruments of the Lyceum Campus are:

- Academic Quality Assurance and Enhancement Framework , Lyceum Campus
- Code of Practice on Annual Programme Monitoring and Review, Process and Procedure Lyceum Campu
- Code of Practice on Internal Periodic Programme Review Process and Procedure
- Regulation on Academic Quality and Standards Committee
- Programme Closure, Faculty of Medicine , Lyceum Campus

There are many general principles and reference points that may be considered when designing and developing a new programme .

These include :

1. Projected student demand and the nature of students
2. Campus's Goals and mission
3. Appropriate use has been made of external reference points such as SLQF, Subject Benchmark Statements, requirements of Professional,Statutory,and Regulatory bodies
4. Aims and ILOs are appropriate to the level of the programme (-its place in the SLQF) and LOs relate to the overall aims
5. Curriculum content and design is informed by current research and scholarship, promotes learning,demonstrates progression through parts of the programme and will enable students to achieve the ILOs
6. Modes of assessment are clearly linked to ILOs and will enable students to achieve of all of all the ILOs
7. Arrangements for feedback to students on assessment performance are clearly specified
8. the balance of the proogramme-for example, in relation to the academic and practical elements,personal development and academic outcomes, breadth and depth of curriculum
9. the coherence of the programme
10. the award title, to ensure it reflects the ILOs of the programme
11. how the ILOs of the programme will be demonstrated and assessed

12. how the design and content of the curriculum and the assessment strategy will allow students appropriate learning opportunities to achieve the ILOs

13. that the necessary resources are available to support the programme

14. programme specification

15. student employability has been considered as part of the curriculum development process.

Programme validation

Purpose of the validation process for a new programme is to ensure:

- An appropriate rationale for the introduction of the programme, including market demand and graduateemployability

- Course content is current and engaging and provide students with opportunity to gain relevant knowledge , skills,and experience within the discipline area

- Underpinning learning teaching and assessment strategies allow for the provision of a high quality ,inclusive learning experience for students

- Alignment with all relevant reference points, including SLQF,relevant SBS, and any professional or regulatory body requirements

- Programme documentation provide clear ,accurate and accessible summary of the programme for students and other stakeholders

- Appropriate staffing

- Appropriate resourcing (including relevant and up-to-date reading lists and use of technology enhanced learning)

- Compliance with internal academic regulations

New programmes are designed and developed as per rules and guidelines set out in the *Lyceum Campus Code of Practice on Programme Design , Develoment and Approval* (..............................)

Programmes/Courses are monitored by the respective Departments of Study/ Academic Syndicate using the *Lyceum Campus Code of Practice on Annual Monitoring of Programmes* (annex..)

4.3.4 Course/module review

After every delivery of a Course/Module , a Course/Module Review should take place in line with the following steps:

The Module Coordinator should : collate and review data on student attainment outcomes on the module;consider the feedback provided by students through Module Evaluation; consider the comments of external examiners;consider relevant feedback from the Student Staff Consultative Committee.the Coordinator should reflect on this information and consider any enhancements or amendments to the module that require to be progressed in order to ensure continuing appropriateness and quality of student learning experience.

The Module Review Report should be completed to record: the data gathered on student attainment ;key reflections on the feedback from Module Evaluation , external examiners, and an overall reflection on the performance of the module; enhancements or amendments planned along with corresponding timescales for implementation.

Completed Module Review Reports require to be signed off by the Head of Department / Division .

Each semester the outcomes of Module Review should be considered and discussed by the relevant Department / Divisional committee . Key outcomes , including any plans for enhancement ,should be reported to the Departmental Committee .

The Head of the Department has the overall responsibility for ensuring that appropriate follow-up activity is taken and can choose to assign accountability as appropriate within the faculty to ensure this is progressed.

4.4 Accountabilities and responsibilities for Quality Assurance and Enhancement

Policies and procedures of the Campus contribute wholly, or in part, to Quality Assurance, Quality Enhancement and Quality Improvement or compliance with relevant External standards or requirements. Responsibilities for implementation and review of these policies and procedures are identified through the specification of a Responsible Officer.

In the broader context:

The President of the Campus is responsible and accountable to the academic syndicate of the campus management and quality assurance and compliance with external standards across all of the campus's activities and enterprises

a) **Quality monitoring and Enhancement Directorate** under the purview of the President of the Campus , is a regulating mechanism to ensure that quality operations are coordinated monitored and managed with maximum efand quality of education.fectiveness across the campus to ensure high academic standards.. It has ; Campus -wide responsibility for coordinating and conducting quality assurance processes .

Director is responsible to:

- lead the developmemt of an action plan for the following year with clearly specified actions ,and responsibilities for the completion of actions specified and target dates for completion.
- To play a leading role in internalizing and institutionalizing the AQAEF in order to promote academic standards of the awards and quality of student experience a cross all the campus's provisions.
- To ensure that there are effective and integrated quality management processes and proedures in place across the campus and thse are followed by the faculties and departments.
- To serve as an active member of the committees of both council and academic syndicate with responsibility for oversight of academic standards and and educational quality.

b) **Academic Syndicate** as the top academic , policy making and monitoring body, is responsible for the quality management of the institution overall. It is responsible and accountable to the President for Quality Assurance, Quality Enhancement and Quality Improvement in the areas of academic governance, academic integrity, student participation and well being , student grievances and complaints, programme design, course delivery, research and research training , staffing/scholarship, learning and teaching ,pedagogy, curriculum;

The Campus's Academic Syndicate devolves to the IQACs, the responsibility for the implementation of quality assurance management procedures and the monitoring of academic standards across its educational provision.

c) the *President* is responsible and accountable to the senate for university management and quality assurance and compliance with external standards across all of the Campus activities and enterprises;Council for Campus management and Quality Assurance and compliance with External Standards across all of the Campus activities ;

d) **Deputy President** in collaboration with the QMED within the office of the president is responsible and accountable to the president, for quality assurance, quality enhancement, quality improvement and compliance with relevant external standards and internal standards in the areas of academic integrity,student participation,teaching,and institutional quality assurance and student grievances and complaints, research, research training, academic research integrity.

e) *Deans of Faculties* is responsibleand accountable to the president for quality assurance, quality enhancement and quality improvement and compliance with relevant external standards and internal standards in the areas of staffing,learningand teaching,pedagogy,curriculum, and research and research training;; in collaboration with Academic Syndicate are responsible and accountable to the President for Quality Assurance, Quality Enhancement and Quality Improvement in the areas of academic governance, academic integrity, student participation and well being , student grievances and complaints, programme design, course delivery, research and research training , staffing/scholarship, learning and teaching ,pedagogy, curriculum;

f) *Finance manager* is responsible and accountable to the President and CEO for Quality Assurance in the areas of financial and investment management , facilities and infrastructure, safety and security ,enterprise risk, workplace health and safety;

g) *Registrar* is responsible and accountable to the President and CEO for Quality Assurance, Quality Enhancement and Quality Improvement in the areas of information and

communication technology, information management (including communications, marketing, and promotion) student recruitment ,human resources ;

h) *Faculties and Departments* are responsible and accountable to their respective Dean for Quality Assurance, Quality Enhancement and Quality Improvement in the areas of staffing/scholarship learning and teaching, pedagogy, curriculum, and research and research training;

Each Department is required to have a *Quality Assurance Committee* with reporting responsibilities to the QMED. ---Membership shall include :

- Head of Department
- Programme Coordinators of programmes within the Departments
- Student representation
- -Coordinatior IQAC of the Faculty

The committee shall convene at least twice a year.

Department QA committee shall be responsible for:

- o assisting the work of the IQAC of Faculty
- o SWOT analysis in the Department and or programme
- o evaluation of the Department or programme focusing on , but not limited to the following elements:,
- The effectiveness of teaching and the resources available for tha purpose
- -programmes and degree titles in relation to the scientific objectives of theeach programme
- -the research work and its synergy with teaching
- -administration,student welfare and teaching support
- -sufficiency of the number and quality of academic and teaching staff
- --Reporting the findings to the respective Department Committee

Role of Faculties, Departments , Divisions, Study Programmes,and Academic Staff

- Role of these would be the most important one and most difficult.
- Since the quality of teaching learning is mainly in their hands , the motivation, attitude, and action is key for quality assurance and quality enhancement. It is therefore important to include them in the process of setting up the system and implementation , inform them about their requirements , needs, goals, especially about the benefits.

- **Individual lecturers should make use of quality instruments in** form of evaluations and tools like the PDCA cycle which support them in their endeavour for quality.

- In the end, Faculty , Department, Division , study programmes are a key stakeholder when it comes to defining the specific quality of teaching learning.

- They know where the problems and challenges are to be found and where potential for enhancement exists. The QMED should support them in doing so.

- A fundamental requirement is their active participation and motivation with the quality enhancement being part of their everyday work.This kind of commitment is often seen as one of the necessary pillars to establish a 'quality culture'.

- These are responsible for day-to-day programme/course management.Subject experts are best placed to provide the detailed academic scrutiny required of a robust quality assurance system. Faculty Boards are responsible to the Academic Syndicate for ensuring the provision of appropriate instruction and adequate facilities for research in the subjects of the Faculties for preparing the teaching programmes of the Faculty , and for ensuring that the teaching given is of a high standard.

- Department committees report quality assurance and other issues through their Faculty Boards.

All employees of the Campus , through their supervisor , are responsible and accountable to their supervisor , for implementing the campus's quality assurance cycle including improvement actions , through their supervisor , are responsible and accountable to their supervisor for implementing the Campus's Quality Assurance Cycle   including improvement actions as they pertain to each employee's work and area of operation.

5.1 Bibiliography

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5.2 Terminology

Certain key words /phrases used in this document are defined/explained below adopting/adapting definitions in the UK Quality Code and UGC-HETC Manuals.

- **Academic Award** is the outcome of successful completion of a course, or programme of study, that leads to a qualification such as a degree, diploma or certificate or other formal recognition as defined by the relevant national quality frameworks.
- **Academic experience** is students' experience of studying on their programme , and their experience of any other resources, support facilities and opportunities that the HEI make available to support students' learning
- **Academic Quality** refers to how and how well the Higher Education Institution (HEI) supports students to enable them to achieve their awards.It covers learning , teaching, and assessment and all the different resources (human, physical, and financial) and processes a

HEI puts in place to help students' progress , achieve their qualification and fulfill their potential.

- **Academic Standards** are the standards that individual degree awarding bodies set and maintain for the award of their qualifications or their academic credit (Threshold standards or they may exceed).Threshold academic standards are the minimum acceptable level of achievement that a student has to demonstrate to be eligible for a qualification or the award of a credit.

- **Assessment Standards** are measurable indicators that provide the basis of comparison for making judgments concerning the performance of an instructional activity , programme or institution.

- **Codes of Practices , Policies and Guidance**

- Supplementing the Regulations , there are a number of academic and academic related documents which set out the procedures to be followed in specific areas.

- **Credit**

  A unit used in the expression and calculation of the academic value /volume of learning of the courses taken by a learner.According to SLQF norms one (1) credit is equivalent to 50 notional hours..

- **Enhancement** is the process by which an HEI systematically improves the quality provision and the way in which students' learning is supported. Quality enhancement naturally forms part of effective quality assurance.

- **Evaluation** is a periodic assessment of the relevance, efficiency, effectiveness , impact and/or sustainability of an activity of intervention.

- **External Quality Assurance (EQA)** is an assessment performed by an organization external to the HEI to assess the status and standards of operation of the institution or its programmes to see whether it meets the pre-determined standards/benchmarks.

- **Feedback mechanism:** mechanisms for obtaining information from students/staff /other stakeholders in a process that contributes to the assessment of its quality and effectiveness.

- **Grievance redressal :** mechanisms for receiving, processing, and addressing dissatisfaction expressed, complaints and other formal requests made by learners , staff and other stakeholders on the institutional provisions promised and perceived.

- **Internal Quality Assurance (IQA)** is an internal system of monitoring to ensure that policies and mechanisms are in place and to make sure that the institution is meeting its own objectives and pre-determined standards.

- **Monitoring** is a management tool that operates during programme implementation to carry out a continuous or on-going collection and analysis of information about implementation and to review programmes with a view to correcting problems as they arise,

- **Programme** is used to describe any stand alone , approved curriculum followed by a student , which contributes to a qualification of a degree awarding body or otherwise carries academic credit.

- **Ordinances**

  Ordinances provide the exercise of powers .They distribute the authority of Council and Academic Syndicate to committees and to executive officers and control use of that authority.They establish the main elements of the Campus's organizational structure.

- **Qualification** is used to describe the formal recognition that the student has achieved the intended learning outcomes and passed the assessments required to meet the academic standards set by a degree awarding body or awarding organization.

- **Quality Assurance (QA)** is an all embracing term referring to an on going

  continuous process of evaluating the quality of higher education system , institution or a programme. As a regulatory mechanism quality assurance focuses on both accountability and improvement.

- **Quality System** : The integrated management system helps us maintain and develop the quality of university operations. It explains how HEI operations are planned, implemented, evaluated, and developed. It is a collection of measures and methods used to ensure that we are progressing towards and achieving our goals.

- **Regulations:**   :Regulations contain principles and standards designed to control/govern/conduct/provide direction at a detailed level .

- **Regulatory Framework** : In order to facilitate the operation of the ORDINANCES of the Lyceum Campus ,and governance provisions made for a series of 'Appropriate Instruments' . Instruments include By-laws,Regulations, Rules , Codes of Practices , Codes of Conduct.

- **Sri Lanka Qualification Framework (SLQF)** : Fnationally consistent framework for all higher education qualifications offered in Sri Lanka.It offers a uniform system in naming a

qualification,the designators,and qualifiers of each qualification awarded by HEIs in Sri Lanka.

- **Subject Benchmark statements SBS)** : It provides a set of reference points for key features of a programme,its intended learning outcomes,and the standards as deemed appropriate by the subject community.They describe the characteristics of a graduate in the subject and usually indicate both optimum and threshold levels.

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