

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

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v2.0	31 August 2016	Final	Paul van Hauen	As approved by Health Education and Training Institute Higher Education Governing Council

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

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

The Health Education and Training Institute Higher Education Academic Quality Assurance Framework outlined in this document is reflective of the higher education standards which the Health Education and Training Institute Higher Education has in place to continuously improve its teaching, learning and assessment activities. This Framework is designed to achieve the following outcomes:

- provide a guide to the quality education experiences that students can expect;
- provide an informed instrument for benchmarking against other relevant higher education providers;
- establish processes for internal monitoring, quality assurance and quality improvement of all Health Education and Training Institute Higher Education programs and activities.

The Higher Education Academic Quality Assurance Framework will enable prospective students, and support enrolled students, to make informed choices through the specific expectations outlined for the provision of comprehensive, timely, accurate and publicly available information about the Health Education and Training Institute Higher Education programs and operation.

Definitions and conceptions of quality teaching are varied across contexts and evolve over time. They require adaptability and an empirical basis to remain useful for development. Instilling a culture of change will be key in ensuring relevance and sustainability. The Higher Education Academic Quality Assurance Framework is designed to facilitate such a change dynamic, and ensure alignment of differing approaches to the Health Education and Training Institute Higher Education Teaching and Learning Plan 2015 – 2018.

The Higher Education Academic Quality Assurance Framework provides systems and processes for evaluating the quality and viability of all programs, and for the systematic monitoring and review of programs and courses. It is based upon the following practices:

- Health Education and Training Institute Higher Education is committed to a cycle of evaluation and improvement as part of academic planning. Within this cycle, academic staff and teaching staff are required to:
  - review the content and focus of their courses and programs;
  - evaluate and reflect on student learning resulting from their teaching practice, curriculum design and approaches to assessment; and
  - make appropriate revisions as required.
- Health Education and Training Institute Higher Education recognises that the resources available to develop and sustain programs may affect their quality. The Health Education and Training Institute Higher Education will evaluate the value, relevance and viability of its programs to ensure available resources are used to maximum effect; and will accordingly advise the Health Education and Training Institute Higher Education Academic Board of its analyses and recommendations.

- Health Education and Training Institute Higher Education will use multiple sources of qualitative and quantitative data in the evaluation of its courses, programs and teaching, including feedback from students and stakeholders.

The Higher Education Academic Quality Assurance Framework enables a range and variety of monitoring and measuring methods and mechanisms to be utilized for regular comparison of performance and evaluation, resulting in reflection and improvement.

The Framework provides for flexibility and variety of approaches to effectively respond to changes and developments in, for example, modes of delivery, student needs, or in curriculum.

Through a structured, collaborative, learning process for comparing practices, processes or performance outcomes, comparative strengths and weaknesses as a basis for improvement will be identified. The Framework will also directly facilitate qualitative benchmarking, and benchmarking of policy coherence with similar learning organisations.

The Framework is designed to promote a climate of continuous reflection on the relevance and effectiveness of the educational programs being offered. The Framework will also question the beliefs and mindsets, values, traditions and habits underpinning our educational practices. Through the evidence based processes described in this Framework, there is a clear linking of quality assurance with quality enhancement.

### **Higher Education Academic Quality Assurance Framework – Domains:**

#### **1. Student Participation and Attainment (see also: Health Education and Training Institute Higher Education Academic Board Terms of Reference, and the Health Education and Training Institute Higher Education Teaching and Learning Plan 2015 - 2018)**

Students at the time of enrolment, and during their participation in learning programs, are provided with evidence of the Health Education and Training Institute Higher Education ongoing commitment to achieving excellence in teaching. The quality of the learning experienced by students is continuously monitored and is highly responsive to their changing learning needs. Active and direct student engagement in all aspects of the learning process enhances learning experience, and in turn creates awareness of the critical role this has in shaping the Health Education and Training Institute Higher Education quality assurance processes.

Student experience of courses and teaching will be collected and recorded through feedback using a variety of survey instruments, every time a course or program is conducted. The data collected will be used to inform the continuous improvement process in teaching and learning. Survey instruments will measure the following:

- **Academic Challenge:** the extent to which expectations and assessments challenge students to learn;
- **Active Learning:** students' efforts to actively construct knowledge;
- **Student and Staff Interactions:** the level and nature of students' contact and interaction with teaching staff;
- **Enriching Educational Experiences:** students' participation in broadening educational activities.
- **Supportive Learning Environment:** students' feelings of support

- **Applied to Practice Learning:** integration of clinical focused work experiences with teaching and learning activities.

The Health Education and Training Institute Higher Education quality assurance process will measure the satisfaction of students who complete their course / program requirements.

Graduates will be requested to complete a Graduate Satisfaction Survey (GSS). This survey is designed to capture the student perception of the quality of the teaching and their overall satisfaction with the course / program. The feedback received will provide valuable insights into the quality of the student learning experience.

Overall, the Health Education and Training Institute Higher Education Academic Quality Assurance Framework promotes a culture of ongoing dialogue between teachers and students, and enables collaboration for improving quality teaching and learning.

## 2. Learning Environment

The academic environment is the primary means by which students further their learning, capabilities and interests – making it a critical factor to student success. Student learning communities are considered from three perspectives. Firstly, an institutional perspective, that is the extent to which students feel they belong to and are engaged as a community of learners. Secondly, from a course / program perspective where students are engaged in actions that measure and enhance the design, content and delivery of courses and programs. Thirdly, from an individual perspective where students have access to distinct and varied learning communities within Health Education and Training Institute Higher Education, where students and staff can engage to achieve innovations and improvements to further support student learning.

Empirical and theoretical research has shown that participating in student learning communities, both formal and informal, improves academic outcomes. Health Education and Training Institute Higher Education will actively promote, support and engage with students and teaching staff through its academic quality assurance policy framework and procedures.

The following **“Principles to Promote Excellence in Teaching and Learning Practices at Health Education and Training Institute Higher Education”** will ensure the provision of a secure, supportive, yet challenging environment for teaching and learning and research supervision – an environment in which students will be stimulated to reach a high level of intellectual attainment.

### **2.1. All communication with students provides clarity of intent, consistency of purpose and enhances relationships between students and with academic staff.**

Practices:

- intended learning outcomes, including generic graduate attributes, and expectations are communicated effectively and discussed with students;
- effective and sympathetic guidance and advice is provided to students;
- communication between students and teaching staff is encouraged;
- opportunities for one-to-one discussion (student / teacher) is provided;

- alternative communication arrangements for students studying either internally, externally by distance education or online is provided.

## ***2.2. The learning environment is highly engaging and is a catalyst for creative and innovative thinking***

Practices:

- innovative methods of design and delivery of content and course material are identified and implemented;
- curiosity in the subject area is encouraged;
- independent learning by students is encouraged;
- critical thinking skills in students are developed;
- variety of teaching strategies and learning activities are provided.

## ***2.3. Subject matter expertise and in-depth knowledge research-informed scholarship are integral to teaching and learning***

Practices:

- recent developments in the field of study are incorporated into learning programs;
- scholarship / research within the subject area is undertaken;
- opportunities for students to relate their learning experience to the workplace / community is provided where appropriate;
- content and teaching strategies are reviewed regularly.

## ***2.4. Provision of effective assessment and feedback which is valid, fair, objective, peer reviewed and on-going***

Practices:

- assessment is linked to unit learning outcomes;
- expectations in relation to workload are realistic;
- explicit criteria for assessment activities are provided;
- consistent, constructive and helpful feedback on assessment is given;
- continuous assessment, both formative and summative, is carried out over the teaching semester.

## ***2.5. Teaching quality is continuously monitored and evaluated to ensure best practice***

Practices:

- the spread of assessment marks over academic years is monitored for variations;
- regular feedback from students is sought;
- feedback from workplace colleagues and peers to enhance teaching is encouraged;
- reflection on teaching practice occurs regularly;
- professional development activities in relation to teaching and subject area(s) are regularly undertaken.

### 3. Teaching

Students at Health Education and Training Institute Higher Education are assured that their teaching staff are suitably qualified. Teaching staff are appointed on the basis of their qualifications in the particular field of study and at a more advanced level than the qualification being taught. Academic staff that are responsible for research related activities will hold a doctoral qualification. This assurance to students will be realized through the assessment of teachers expertise based on a review of their formal academic qualifications, equivalent professional experience, or a combination of both.

Health Education and Training Institute Higher Education will engage teachers using the criteria of equivalencies in clinical or other experience as required. This will include recognition of the importance of Fellowship of respective Colleges for medical practitioners and associated membership of other relevant health professionals. The recognition of equivalent professional experience is an essential feature of teacher attributes for Health Education and Training Institute Higher Education. Courses of study are such that they require currency in expert practice to ensure the building of student capabilities in identified professional practice. Health Education and Training Institute Higher Education will determine how such professional experience and skills are assessed in terms of their equivalence to the specific knowledge and skills established in the learning outcomes of the required AQF level of course being taught. This will ensure that HETI Higher Education teaching staff will bring both academic rigour and cutting edge clinical practice to their teaching roles.

Support for quality teaching is evidenced through a wide range of activities that improve the quality of the teaching process, program content, and the learning conditions of students. Health Education and Training Institute Higher Education through its quality assurance process undertakes regular reviews of curriculum design and course content. Such reviews will also include assessment of the variety of learning contexts being utilised (including guided independent study, project-based learning, collaborative learning, experimentation, etc.) and initiatives such as:

- professional development activities;
- teaching innovation projects;
- teaching recruitment criteria;
- support to innovative pedagogy;
- communities of teaching and learning practice;
- organisation of management of teaching and learning;
- support to foster student achievement (e.g. counselling, career coaching, mentoring);
- students' evaluation (i.e. program ratings, evaluating learning experiences);
- self-evaluation of experimentations, peer reviewing, benchmarking of practices.

Promotion of an internal quality culture through implementation of the Health Education and Training Institute Higher Education Academic Quality Framework ensures that teachers understand the teaching and learning framework they operate within (at institution / program / student-teacher interaction levels). The Framework provides for engagement in a collaborative process to identify and articulate the pedagogical competencies that teachers require to deliver quality teaching and learning, and reflects the Health Education and Training Institute Higher Education mission and core values. The Higher Education Academic Quality Assurance



Framework will define a set of indicators for excellence in teaching that Health Education and Training Institute Higher Education may use to encourage improvement, evaluate performance, and take into account for decisions concerning tenure and promotion.

#### **4. Research and Research Training**

The Health Education and Training Institute Higher Education Academic Quality Assurance Framework enables a strengthening of the links between teaching and research. The quality assurance process exists to explore how the research activities of Health Education and Training Institute Higher Education affect the policies supporting teaching and learning (e.g. in terms of learning environment, curriculum design, and students assessment). Support is provided for academic staff involved in fostering quality teaching so that their engagement does not diminish their individual research activities in their field of expertise. Health Education and Training Institute Higher Education will build research capacity through promotion of research-teaching linkages, such as:

- demonstration of how research informs teaching;
- engagement in research-inspired teaching;
- development of graduate students' research-skills.

The Health Education and Training Institute Higher Education Academic Quality Assurance Framework facilitates cross-disciplinary and inter-professional development for teaching and research so as to increase mutual learning. The Higher Education Academic Quality Assurance Framework will encourage a culture of evidence-informed teaching practice, and use evaluations to deepen understanding of the relationships between inputs, processes and learning outcomes, and identify the external factors likely to affect them.

#### **5. Institutional Quality Assurance (QA)**

Quality assurance is designed to promote mutual trust and improve transparency while respecting the diversity of context and subject areas. The quality assurance process should not stifle diversity and innovation. It should foster vibrant intellectual and educational achievement, and contribute to a common frame of reference. Quality assurance creates a synergy of policies which serves teaching and learning improvement.

The Health Education and Training Institute Higher Education Quality Assurance Policy Statement features:

- a definition of quality teaching;
- relationship between teaching and research;
- Health Education and Training Institute Higher Education strategy for quality standards;
- the organisation of the QA system;
- responsibilities of academic staff;
- involvement of students in the quality assurance process;
- mechanisms by which the Policy is implemented, monitored and revised.

Effective quality assurance standards will ensure that Health Education and Training Institute Higher Education courses and programs are well designed, regularly monitored and periodically reviewed; thereby ensuring their continuing relevance and currency. This in turn will establish



and maintain the confidence of students and other Health Education and Training Institute Higher Education stakeholders.

### **5.1 Guidelines**

The quality assurance of the Health Education and Training Institute Higher Education programs and courses will include:

- development and publication of explicit intended learning outcomes;
- careful attention to curriculum and program design and content;
- specific needs of different modes of delivery (e.g. full time, part-time, distance-learning, e-learning) and types of higher education (e.g. vocational, academic, professional);
- availability of appropriate learning resources;
- formal program approval procedures by the national accreditation body;
- monitoring of the progress and achievement of students;
- regular periodic reviews of programs (including external panel members);
- regular feedback from Local Health Districts and Speciality Health Networks, Mental Health Networks, Ministry of Health Drug and Alcohol Office, Ministry of Health;
- participation of students in quality assurance activities.

## **6. Governance and Accountability**

The Health Education and Training Institute Higher Education academic quality assurance policy and framework requires the active involvement of multiple stakeholders – senior management, discipline / academic leaders, teaching staff, framework and unit coordinators, education support officers, and officers with responsibility for support services underpinning teaching, research and scholarship. Ultimate responsibility for, and oversight of, academic quality assurance, rests with the Health Education and Training Institute Higher Education Academic Board, which reports to Health Education and Training Institute Higher Education Governing Council.

The Higher Education Academic Quality Assurance Framework identifies leadership roles and responsibilities for fostering quality teaching and learning. The Framework also creates an environment where everyone (teacher, student, support staff, program leaders and Framework and unit coordinators) operates within a clearly identifiable leadership structure. Leadership responsibilities at all levels are matched with the resources and tools needed to deliver results. Leadership is a driver for change and is clearly identified at all levels. To enable leadership competencies at all levels, leadership competencies are being developed, based on the NSW Health Leadership Capability Framework.

Health Education and Training Institute Higher Education has established a specific unit dedicated to quality teaching and learning to explain, advocate and support the strategic objective of teaching quality and the effective implementation of the Health Education and Training Institute Higher Education Teaching and Learning Plan 2015 - 2018.

## 7. Representation, Information and Information Management

An Information Management Strategy is an integral part of the Health Education and Training Institute Higher Education Academic Quality Assurance Framework. This strategy articulates an operational approach to data assets and information management.

The Information Management Strategy is designed to establish a consistent, whole of organisation, approach to information management. The strategy aims to ensure that our valuable information and data assets are managed appropriately. The following Information Management Principles will guide information management through projects and operational activities:

<b>Principle</b>	<b>Explanation</b>
Information is an asset	Information is an asset that has value to Health Education and Training Institute Higher Education and is managed accordingly.
Information is shared	Information is by default open and shared across Health Education and Training Institute Higher Education business and health care community and derived from the relevant single authoritative source.
Information is accessible	Information is accessible for people to perform their duties.
Information is Managed	Information has a custodian accountable for its quality and records are managed as required.
Data and information is commonly described	Data and information is defined consistently throughout Health Education and Training Institute Higher Education, and the definitions are understandable and available to all information users.
Data and information is secure	Data and information which needs to be secured and protected from unauthorised access, use and / or disclosure is secured.

The benefits of appropriately managing data and information at Health Education and Training Institute Higher Education include:

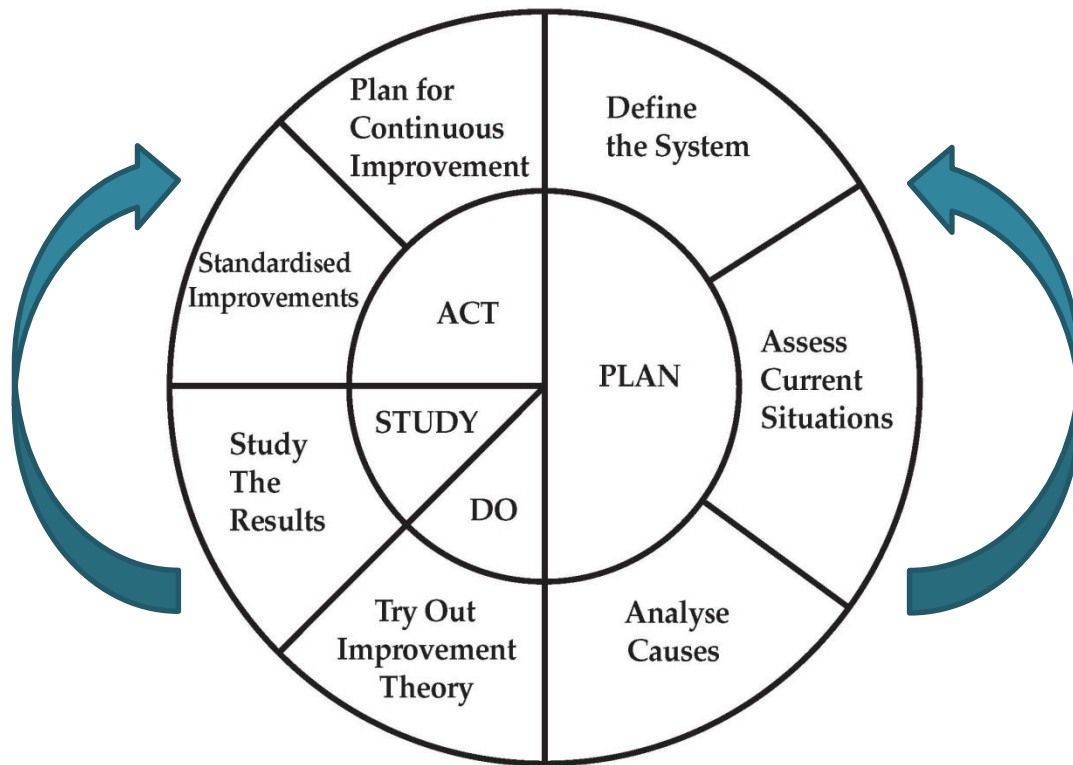
<b>Increased impact of Health Education and Training Institute Higher Education research and scholarship</b>	Appropriately managing the outputs from Health Education and Training Institute Higher Education research and teaching scholarship to improve the impact of Health Education and Training Institute Higher Education programs on mental health service delivery.
<b>Improved discovery and access</b>	Providing students and teaching staff with easy and transparent access to accurate and timely data and information. Data and information that is easily discoverable can be shared and utilised for a variety of purposes.
<b>Improved integration and accuracy</b>	Collecting data once, ensuring its integrity and quality.
<b>Improved decision-making</b>	Understanding the business of the Health Education and Training Institute Higher Education and providing better information to support analysis, decision-making, and risk identification.
<b>Improved compliance and decreased costs</b>	Through more efficient processes and systems, achieving record-keeping and regulatory compliance and reducing costs.

## 8. A tool for achieving academic quality assurance

An approach that will be utilised within Health Education and Training Institute Higher Education is the Plan-Do-Study-Act (PDSA) cycle of improvement. PDSA cycles form part of the academic quality assurance process, and provide a model for developing, testing and implementing changes leading to improvements. The PDSA model is based in scientific method and moderates the impulse to take immediate action with the wisdom of careful analysis. The PDSA model features three key questions and a process for testing ideas for change:

1. What are we trying to accomplish? The aims statement.
2. How will we know if the change is an improvement?
3. What changes can we make that will result in improvement?

The diagram below reflects the approach being utilised by Health Education and Training Institute Higher Education for reviewing any aspect of the Higher Education Plan, the Higher Education Teaching and Learning Plan, and operational plans for delivery of all higher education courses and programs. A detailed outline of the PDSA model is in Attachment 1. The PDSA model can be deployed using a variety of specific tools.



**Related Documents:**

Health Education and Training Institute Higher Education Plan 2015 - 2017

Health Education and Training Institute Higher Education Teaching and Learning Plan 2015 - 2018

Health Education and Training Institute Leadership Capability Framework

Records Management Policy and Protocol at the NSW Institute of Psychiatry

Procedure for Protected Records at NSWIOP

**Source Documents:**

Australian Survey of Student Engagement (AUSSE) 2013

AUSSE Research Briefing, Vol 12, September 2011 – Australasian Survey of Student Engagement

Australian Council for Educational Research – AUSSE Enhancement Guide

[www.acer.edu.au/ausse](http://www.acer.edu.au/ausse)

Chalmers, D., “A review of Australian and international quality systems and indicators of learning and teaching”. Carrick Institute for Learning and Teaching in Higher Education, Australia, 2010

Griffith University “Information Management Framework” 2014

Griffith University “Framework for Quality Assurance” 2014

Institutional Management in Higher Education, “Fostering Quality Teaching in Higher Education: Policies and Practices”. By Fabrice Henard and Deborah Roseveare, September 2012

Macquarie University “Academic Honesty Policy” 2013

Macquarie University, Teaching Standards Framework, 2012 <http://teachingframework.edu.au/>

Tertiary Education Quality and Standards Agency, “TEQSA Guidance Note: Academic Quality Assurance” July 2014

Tertiary Education Quality and Standards Agency, “A risk and standards based approach to quality assurance in Australia’s diverse higher education sector” February 2015

University of Sydney “Academic Dishonesty and Plagiarism Policy” 2012

University of Tasmania “Teaching principles and strategies” 2014

## Attachment 1

### Plan, Do, Study, Act (PDSA)

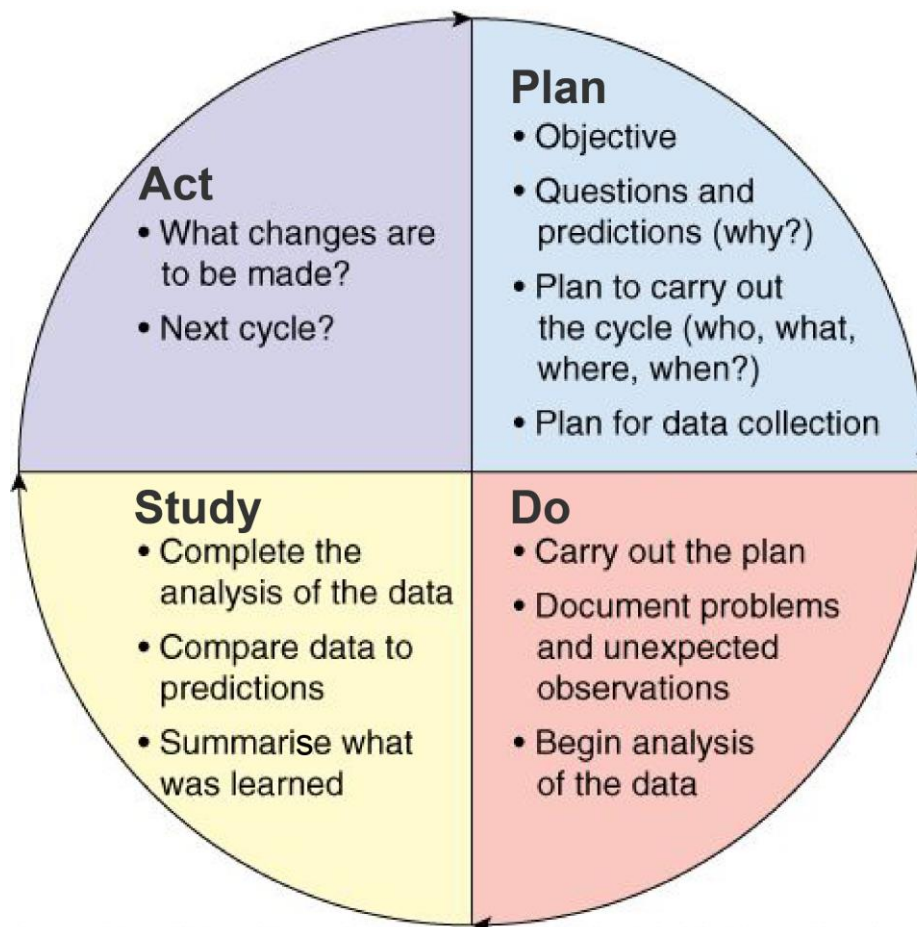
The PDSA Model can be used to test an idea by temporarily trialling a change and assessing its impact. The four stages of the PDSA cycle:

**Plan** – the change to be tested or implemented

**Do** – carry out the test or change

**Study** – data before and after the change and reflect on what was learned

**Act** – plan the next change cycle or full implementation





### **How we test:**

- Plan multiple cycles to test ideas. These may be adopted from the Health Education and Training Institute Higher Education Teaching and Learning Plan performance objectives / goals, so there is already evidence that the change works.
- Test on a small scale to begin. For example, start with one student learning experience at a time, and increase the numbers as the ideas are refined.
- Test the proposed change with people who believe in the improvement; not trying to convert people into accepting the change at this stage.
- Only implement the idea when confident that all possible ways of achieving the change have been considered.

### **A model for improvement: how to use it (also see: Health Education and Training Institute Higher Education Academic Quality Assurance Framework, and the Health Education and Training Institute Higher Education Teaching and Learning Plan 2015 – 2018)**

The model features three key questions and a process for testing change ideas.

The three questions:

1. What are we trying to accomplish? The aims statement.
2. How will we know if the change is an improvement?
3. What changes can we make that will result in improvement?

### **What are we trying to accomplish?**

Academic staff need to set clear and focused continuous improvement goals. These goals require educational leadership and should focus on problems that are causing concern to students and / or teaching staff.

#### **The aims statement should:**

1. Be consistent with the Tertiary Education Quality and Standards Agency (TEQSA) Threshold Standards and relevant to the programs / courses being reviewed for improvement;
2. Be bold in its aspirations;
3. Have clear, measurable targets.

### **How do we know if the change is an improvement?**

Outcomes such as student retention rates in particular programs are measured. Where a change has been made this should impact the measures and demonstrate over time whether the change has led to sustainable improvement. The measures in this model are tools for learning and demonstrating improvement, not for judgement.

Cycles of improvement will occur at different levels and new actions may be planned as a result of previous cycles. Alternatively, new skills may be learned, barriers to change overcome and new areas targeted for improvement. Regular measurement of both process and outcomes helps to identify current performance and any areas of concern. When reviewing progress:

- check that goals have been achieved;
- decide if the goals have been realistic;
- determine if the energy invested has led to the desired degree of change - is the return-on-investment worth the effort?
- are there any further strategies or measures needed to bring about the desired changes and / or improve cost effectiveness?

The Health Education and Training Institute Higher Education Quality Assurance Policy articulates Health Education and Training Institute Higher Education's commitment to quality teaching and learning outcomes for students. The policy involves several dimensions, including the effective design of curriculum and course content, a variety of learning contexts (including guided independent study, project-based learning, collaborative learning, experimentation, etc.) soliciting and using feedback, and effective assessment of learning outcomes. Adaptive learning environments and student support services are also included.

Enhancing quality teaching is a multi-level endeavour. Support for quality teaching takes place at three inter-dependent levels:

- **At the institution-wide level:** including projects such as policy design, and support to internal quality assurance systems;
- **Course level:** comprising actions to measure and enhance the design, content and delivery of the courses within Health Education and Training Institute Higher Education;
- **Individual level:** including initiatives that help teachers achieve their mission, encouraging them to innovate and to support improvements to student learning and adopt a learner-oriented focus

These three levels are essential and inter-dependent. However, supporting quality teaching at the course level is critical for ensuring improvement in quality teaching.

Support for quality teaching can be manifested through a wide range of activities that are likely to improve the quality of the teaching process, of the course content, as well as the learning conditions of students. These might include initiatives such as:

- professional development activities;
- teaching innovation funds;
- teaching recruitment criteria;
- support to innovative pedagogy;
- communities of teaching and learning practice;
- organisation of management of teaching and learning;
- support to foster student achievement (e.g. counselling, career coaching, mentoring);
- students' evaluation (i.e. program ratings, evaluating learning experiences);
- self-evaluation of experimentations, peer reviewing, benchmarking of practices.

The PDSA Model will enable these and other quality assurance initiatives to be implemented and monitored over time.