



# MUT

## Workshop

14 February 2022

### *Overview of the Institutional Audit Process*

Council on Higher Education



# Initiation of the Audit

## WHEN

- When the CHE has determined that an audit of a particular institution will take place and has then, in consultation with the institution, determined the approach to the focus area(s) in which the audit will be conducted; or
- When a decision is taken to conduct a special audit of an institution; or
- When a decision is taken to conduct a themed audit of all or some institutions.

## HOW

- CHE writes an initiation letter to the institution
- First meeting to agree on the nature, scope and timelines of the audit
- Appointment of institutional liaison to work closely with the CHE audit officer
- Letter of agreement signed by the CHE CEO and head of the institution
- Appointment of a steering group



# The Institution's Steering Committee

Size, composition and ToRs to be determined by the institution

## Responsibilities:

- Develop a project plan
- Establish and co-ordinate working groups
- **Prepare for and draft the institutional profile, the SER and the compile the PoE.**
- Present the institutional profile, the SER and PoE to the institutional governance structures for consultation and final approval

# Audits with a Review Methodology

**Self  
reflection**

**Peer  
validation**

**Evidence-based**

**Draft Audit Report:**  
Factual corrections  
Representation on outcomes

**Final Audit Outcomes (will be placed on the CHE website):**  
16 Standards: not functional, needs substantial improvement, functional, mature  
Recommendations & Commendations

**Improvement Plans**



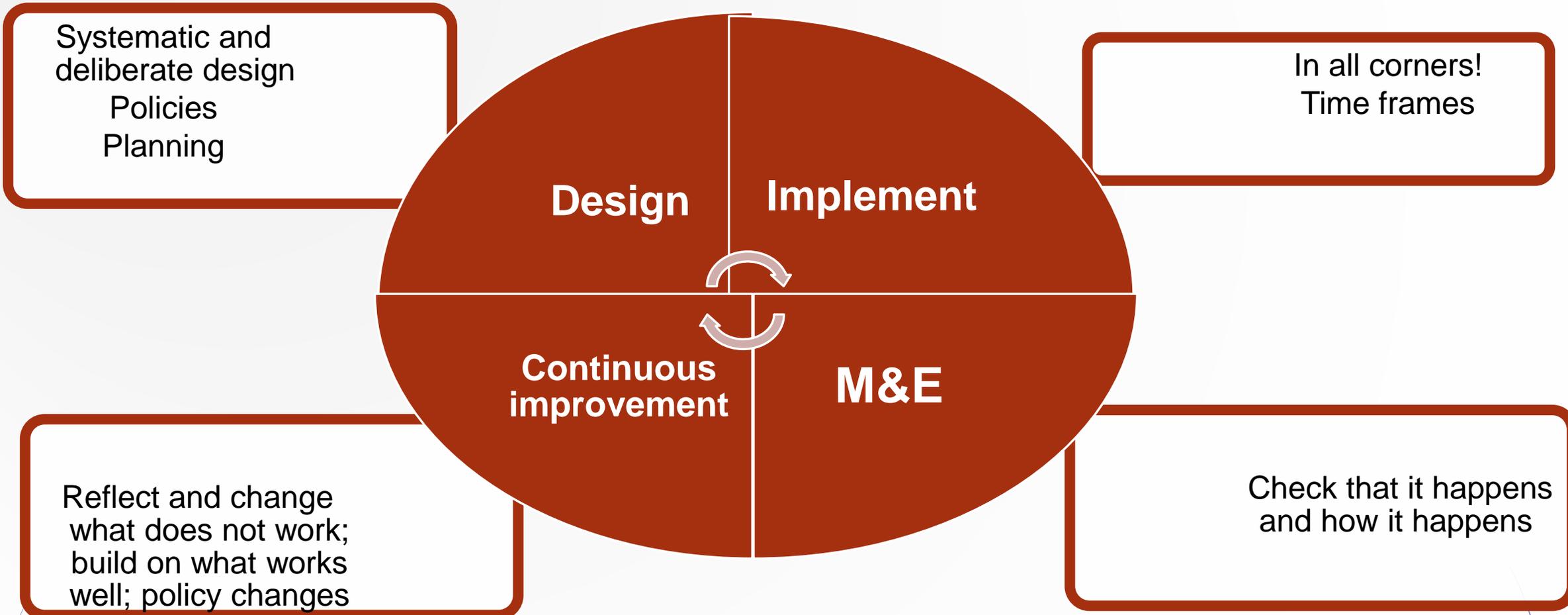


# The SER

- Foundation of a review methodology to support self-reflection and peer evaluation
- The SER as *reflexive praxis*
- The self-reflection **related to the Standards** to demonstrate how quality is managed
- Description: design, implementation, and M&E, and measuring impact, closing the quality loop
- **Reflective statements:** Description is not enough, there has to be a self-evaluation of the effectiveness, efficiency, coherence, and impact on quality
- Information can only be regarded as *evidence* if it is used to substantiate statements or judgements, inclusive of self-evaluation



# The quality circle in IQM





# Institutional Audit Outcomes: For all HEIs

- ▶ After the institutional audit panel presents its draft audit report to the Institutional Audits Committee as a sub-committee of the HEQC
- ▶ The draft audit report is based on the 16 Standards and consists of commendations and SMART recommendations (specific, measurable, attainable, realistic and time-bound)
- ▶ For each one of the 16 Standards the panel makes a judgement (***not functional, needs substantial improvement, functional, mature***)
- ▶ The IAC approves the draft audit report for release to the institution
- ▶ The institution may respond with factual corrections and presentations on the outcomes
- ▶ The IAC considers the final audit report and recommends it to the HEQC
- ▶ The HEQC approves the final audit report after which an executive summary is placed on the CHE website
- ▶ **The institution needs to submit an improvement plan to the HEQC based on the recommendations with timeframes, and subsequent regular reporting**



# The Audit Panel

Institutional Audits are a peer-driven quality assurance process of the CHE

Audit panels composed of nominated peers

Panel members may be nominated from outside the higher education sector

Panels to be between 2 to 7 members (some exceptions may apply for larger and more complex institutions)

May include international peers

**Panels' collective expertise to be relevant to each institution and its profile**

Panels led by a chairperson

Institutions may object to panel a member on the grounds of conflict of interest

HEQC has final decision on objections





# The Audit Panel: Induction

- Audit panels to be inducted on the *Framework and Manual for Institutional Audits 2021*
- Confidentiality and sensitivity
- Roles and responsibilities
- Analysing the SER, PoE and IP (context matters; how to understand ***differentiation***)
- Triangulation of evidence (SER, PoE, site visit and interviews)
- Professional rigour and objectivity
- Report writing (***evidence-linked*** narrative, evaluations, commendations and recommendations)
- Continuous panel meetings to, inter alia:
  - Develop lines of enquiry
  - Identify and request additional evidence, where necessary
  - To identify categories of institutional constituencies to be interviewed and draft the site visit programme, in consultation with the institution.



# The Audit Site Visit

- To validate claims made in the SER and test the reliability of the PoE
- Site visits are between 1 to 5 days
- Schedule prepared by the panel, in consultation with institution, through the audit officer and liaison person
- Nature of the site visit (virtual or in person) to be determined by COVID-19 regulations and other contextual factors at the time
- Site visits include:
  - Interviews with different stakeholders/constituencies
  - Visit to facilities and campuses/sites of delivery
  - Panel oral feedback of preliminary findings (non-binding) to senior management
- For Universities, the cost will be carried by the CHE
- For PHEIs, the cost will be borne by institutions on a cost-recovery basis



# Improvement Plans

- The recommendations in the audit report form the basis of the activities in the Improvement Plan
- SMART recommendations (specific, measurable, attainable, realistic, time-bound) become institutional activities
- Infusing improvement plans in the institution; not stand-alone projects; projects need to be adequately resourced
- Essential recommendations are non-negotiable
- Advisory recommendations may be considered or adjusted
- Institutions must motivate why any recommendations are not implemented as an activity
- Feedback will be given on the Improvement Plans



# Progress reports

- Institutional progress reports to the HEQC will be **regular**, but institution-specific
- Reporting timeline will be based on the institutional improvement plan and its due dates
- Reporting will be tracked
- Feedback will be given on the progress reports



# Final close-out report

- After all the activities in the Improvement Plan are completed, the institution submits its final report to the HEQC
- Once the final report is received, a close-out report is prepared by the Directorate on the process as a whole for the particular institution
- Once the HEQC approves the final institutional report and the close-out report, the audit is concluded
- **The institutional audit forms the baseline for the implementation for the QAF in 2024**