QUALITY ASSURANCE COUNCIL QUALITY AUDIT
OF SUB-DEGREE OPERATIONS OF HKBU 2018

PROGRESS REPORT ON ACTION PLAN

for submission to
University Grants Committee

in

April 2020

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Executive Summary

The University Grants Committee Quality Assurance Council (UGC-QAC) conducted its first quality audit of the University's sub-degree (SD) operations in four Sub-degree Providing Units[1] (SDPUs) in January 2018. The *Report of a Quality Audit of Sub-degree Operations of Hong Kong Baptist University* (hereinafter referred to as the '*Audit Report*') was released in October 2018 and the University submitted its *Action Plan* in January 2019.

Based on the *Action Plan* in follow-up to the two Affirmations (As) and six Recommendations (Rs) of the *Audit Report*, this *Progress Report* presents the evidences of the improvement actions taken by the University and the related developments and impact made in the respective areas in the past 18 months. The key achievements and good practices of quality enhancement are summarized below:

A1 - Introduction of Standard Template for SD Annual Reporting

To achieve consistency in SD quality assurance (QA) and robust reporting across all SDPUs to the Senate via its committees, the proforma for Annual Report of SDPUs was reviewed and enhanced to include measurable indicators of programme quality. A set of submission guidelines was implemented in reporting year 2018/19 to achieve consistency in SDPUs' data reporting and analysis. The proforma will be further adjusted to align with the Key Performance Indicators (KPIs) to be used by SDPUs.

A2 - Implementation of Outcomes-based Teaching and Learning (OBTL) in DCPE Programmes

Since the 2017/18 intake, the OBTL approach has been fully implemented in all five DCPE programmes. The Sub-degree Programme Team, led by the Director of DCPE, reviewed the programme curriculum and assessment for a smooth implementation. The University's Centre for Holistic Teaching and Learning (CHTL) provides support to staff development in OBTL. Plans have been formulated to improve the delivery of the programmes in OBTL.

R1 - Review of Academic Governance

A formalized management structure was implemented in academic year (AY) 2018/19 for the QA and academic oversight of SD programmes. The programme quality and performance of all SD programmes have since been monitored systematically by two sub-committees of the University's Quality Assurance Committee (QAC), namely the Quality Assurance Sub-committee on Sub-degree Programmes (QASC) (QF[2] Level 4) and QASC (QF Levels 1-3). The Sub-degree Programmes Steering Committee (SDPSC) was established to oversee the strategic development and resource deployment of SDPUs and their programmes. The Membership Composition (MC) and Terms of Reference (ToR) of these committees will be reviewed every year in order to maintain fit-for-purpose monitoring of the University's SD operations.

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[1] SDPUs at HKBU include the Academy of Film (AF), School of Continuing Education (SCE), College of International Education (CIE) of SCE, and Division of Continuing and Professional Education (DCPE) of the School of Chinese Medicine.

[2] The Hong Kong Qualifications Framework (HKQF)

R2 - Review of Policy for the Assessment of Student Learning with regard to Appeal of Grades and Academic Dishonesty

To raise the awareness of staff and students on grade appeal procedures and the handling of academic dishonesty in SD programmes, the University rolled out a set of standardized procedures/practices in AY2019/20. SDPUs also followed the enhanced process for dissemination of the updated information to faculty and students. The effectiveness of the standardized procedures/practices will be reviewed in June 2020 after the first year of implementation.

R3 - Development of More Comprehensive Operational Guidance for Departmental Academic Advisors (DAAs)

In AY2017/18, a standardized DAA report template with an additional set of review guidelines for the DAA's reference was adopted. Student achievement and grade moderation were also included in the Scheme for review of the assessment systems and benchmarking. With effect from AY2019/20, the DAA Scheme was synchronized with the Academic Consultation Panel (ACP) visit cycle, making it a mid-term evaluation of the Department's response to ACP recommendations between two ACP visits, and to provide advice on the Department's preparation for the next ACP. Benchmarking is a strong emphasis in the enhanced DAA Scheme for quality enhancements, with pertinent reference made against the standards of overseas institutions leading in the field.

R4 - Review of Policy Regarding Support Services for Part-time Students

Based on the education needs of SD students identified in the needs analysis survey, the University will implement a set of policies and standardized practices on the provision of support services for part-time SD students in AY2020/21.

R5 - Review of Exit and Graduate Surveys for SD students

Two sets of uniform graduate exit survey questionnaires have been developed for full-time and part-time SD graduates respectively. To be implemented in summer 2020, each questionnaire contains a set of common institutional questions plus SDPU-specific questions. The data collected from the survey questionnaires will enable the comparison and review of SD programme performance.

R6 - Clarification on KPIs to be Used by SDPUs

A definitive set of KPIs for SDPUs was finalized by the SDPSC. With the first set of KPI data to be collected in AY2019/20, the SDPSC and SDPUs will review the effectiveness of the KPIs in informing programme planning and delivery, academic standard and strategic development.

As standard QA practices, the University will continue to closely monitor the progress of all actions in the action plan and regularly review the relevant practices for quality enhancement.

Chapter 1   Implementation Progress of the Action Plan in response to Affirmations

<u>AFFIRMATIONS</u>

A1 – Introduction of Standard Template for SD Annual Reporting

In this context, the Panel **<u>affirms</u>** the introduction of the standard template for annual reporting as a means of developing a more consistent approach to the quality assurance of SD programmes. *(par. 2.5)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To achieve a consistent approach to the QA of SD programmes through standardized and robust reporting across all SDPUs to the Senate via its committees.	• Reviewed and revised the annual report proforma monitoring of programme quality and strategic development of SD programmes by: - Adding the reporting of useful indicators of programme quality: "academic dishonesty and grade appeal" and "budget performance and changes of facilities". - Coordinating SDPUs on the definition and presentation of data to achieve consistency of the data/evidences reported.	• The annual reporting on academic dishonesty and grade appeals took effect from reporting year 2017/18. • Three sections, "Executive Summary", "Highlights of Budget Performance" and "Details of Changes to Major Campus Facilities" were added to the proforma from reporting year 2018/19 to facilitate quality monitoring and data analysis for strategic development of SD programmes. • A set of submission guidelines was implemented in reporting year 2018/19 to achieve consistency in data reporting and analysis.	• The annual report proforma will be revised by the end of AY2019/20 based on the confirmed set of KPIs to be used by SDPUs (R6 refers).

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
		• A consistent and standardized approach of data reporting and presentation was adopted to facilitate the data analysis of SD programme quality.	

A2 – Implementation of OBTL in DCPE programmes

The Panel therefore **affirms** DCPE's move, under the supervision of QASC, to implement OBTL for all new and existing programmes. *(par. 3.16)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To fully implement OBTL for all DCPE's new and existing programmes. • To establish a review mechanism for monitoring the implementation of OBTL in DCPE programmes.	• The Sub-degree Programme Team, led by the Director of DCPE, reviewed the programme curriculum for enhancement of OBTL effectiveness. • Established a Sub-degree Programme Examination Committee to consider matters related to the implementation of Criterion Referencing Assessment (CRA). • Scrutinized the assessment items and assessment rubrics of all courses prior to course commencement. • Collected student feedback on OBTL approach. • Conducted workshops with CHTL to promote staff development in OBTL.	• The OBTL approach has been fully implemented in all five DCPE programmes from AY2017/18 intake. • The assessment rubrics for all courses of the five DCPE programmes have been developed and implemented in AY2018/19. • Students' responses towards the OBTL approach, collected via course evaluation questionnaire, were positive. The average Teaching Evaluation (TE) score for the question on whether "The instructor explained the course objectives and course outline clearly in first lesson" was 4.3 (out of 5) in AY2018/19. • Staff development opportunities for OBTL, e-Learning and related pedagogical matters were offered to both full-time and part-time staff. Positive student feedback on assessments was	• Assessment rubrics will be reviewed annually for continuous improvement. • Workshops (OBTL, e-Learning, etc.) will continue to be offered by CHTL to DCPE teachers in AY2019/20 regularly to keep them abreast of the latest pedagogical and OBTL developments. Participants' feedback will be collected to evaluate the usefulness and inform improvement of the workshops. • Student feedback on OBTL approach will continue to be collected and reviewed every semester (via course evaluation questionnaire and related surveys) to complete the quality cycle for enhancement of student learning experience.

Approach	Deployment	Results	Improvement
(Purpose/objectives)	*(Strategies/actions taken to achieve the objectives and intended outcomes)*	*(Outcomes and evidences)*	*(Plans for ongoing improvement)*
		received at the staff-student consultation meeting in AY2018/19. Students reported that a wider variety of assessment methods were adopted for the Advanced Diploma of Pharmacy in Chinese Medicine Programme, which stimulated their interest and motivation in learning. • In Semester 2 of AY2019/20 when face-to-face classes were suspended due to the COVID-19 outbreak, DCPE teachers received training and assistance to offer synchronous online classes to continue teaching and learning for their students, and to design specific online activities to achieve the original intended learning outcomes. All DCPE workshop participants conducted real-time online classes after training.	

Chapter 2 Implementation Progress of the Action Plan in response to Recommendations

<u>RECOMMENDATIONS</u>

R1 – Review of Academic Governance

While the Panel recognises that these initiatives are developing, it nevertheless **<u>recommends</u>** that the University reviews its academic governance, to ensure that committee terms of reference and responsibilities are distinctive and fit for purpose, and there are clear lines of reporting for the quality assurance and the academic oversight of SD provision. *(par. 1.7)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*

• To structure clear lines of reporting for the QA and academic oversight of the University's SD provision.
 	
• To define fit-for-purpose and distinctive roles and responsibility of committees within the new management structure.
	• Established the formalized management structure for SD programmes with effect from AY2018/19:
	
	  - SDPSC (see **<u>Annex 1</u>** for ToR and MC) monitors the academic standards of the University's SD provision, and advises on strategic development and resource deployment of SDPUs.
	
	  - The two QASCs, formed under the QAC, monitor the quality of SD programmes at QF Levels 1-3 and QF Level 4 respectively (see **<u>Annexes 2-3</u>** for ToR and MC).
		• A set of KPIs for SDPUs was finalized by the SDPSC. The KPIs were in close alignment with the University's *Institutional Strategic Plan (ISP) 2018-2028* (R6 refers).
		
		• Under the formalized management structure, SD programmes at all QF Levels (from 1-4) are monitored by the two QASCs on programme quality and performance under the supervision of the QAC; and by the SDPSC on strategic development and resource deployment.
		
		• The enhanced annual reporting with measurable indicators of programme quality provided
			• The annual report proforma for SDPUs' reporting will be revised to incorporate the relevant KPIs in the annual evaluation process.
			
			• The standardized policy, guidelines and procedures will be continuously reviewed. The next review will take place in AY2020/21.
			
			• The MC and ToR of the SDPSC, QAC and QASCs will be reviewed every academic year.

Approach (Purpose/objectives)	Deployment (Strategies/actions taken to achieve the objectives and intended outcomes)	Results (Outcomes and evidences)	Improvement (Plans for ongoing improvement)
	• Established an Administrative Support Unit (ASU) under SCE to coordinate the central administration services across SDPUs.	useful trend data for SDPSC, QAC and QASCs to plan and assess the strategic development and performance of SDPUs (A1 refers).	

R2 – Review of Policy for the Assessment of Student Learning with regard to Appeal of Grades and Academic Dishonesty

The Panel thus **recommends** that the University reviews its assessment policy with regard to appeal of grades and academic honesty, to ensure consistent and effective implementation, information provision to students, and reporting and monitoring systems, across the SDPUs. *(par. 6.7)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To formulate standardized procedures/practices across SDPUs for handling grade appeals and academic dishonesty, and to provide pertinent information to staff and students of SDPUs.	• Reviewed the existing procedures/practices of individual SDPUs concerning grade appeals and academic dishonesty from August to December 2018. • Conducted focus group meetings in January 2019 to collect views and suggestions for standardization of procedures/practices for handling grade appeals and academic dishonesty. • Devised the standardized procedures/practices for handling grade appeals and academic dishonesty across SDPUs. These were approved by the Senate in June 2019 for adoption starting from AY2019/20.	• Implementation of the standardized procedures/ practices for handling grade appeals and academic dishonesty across SDPUs in AY2019/20. • Dissemination of these standardized procedures/ practices, in the form of a refined *Assessment Policy*, to staff and students of SDPUs.	• Review of the new procedures/ practices after one year of implementation, in June 2020.

R3 – Development of More Comprehensive Operational Guidance for DAAs

The Panel therefore **recommends** that the University develops more comprehensive operational guidance for DAAs to ensure that they are assisted in providing academic advice on assessment systems, including moderation and external marking, at the SDPUs. *(par. 6.8)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To strengthen the DAA Scheme as part and parcel of the University's QA mechanism. • To better align the aims and operations of the DAA and ACP schemes to facilitate Departments' progress in acting on the ACP Recommendations.	• Developed operational guidelines for DAAs and reviewed the operational support provided to DAAs in May 2018. • Reviewed the DAA Scheme, including the objectives, scope and schedule of review at the QAC meetings in AY2018/19.	• Enrichment of the scope of review with new aspects on student achievements and grade moderation in AY2018/19. Accordingly, Departments were required to provide samples of students' final year work to the DAAs for scrutiny. • The implementation of the standardized report template and review guidelines further promoted consistency and completeness in the review of the Department and facilitated the DAA's provision of advice on the assessment systems. • Despite the fact that the new review aspects were only introduced towards the end of the First Cycle of DAA in 2018, it was evident in the DAA reports that some DAAs had conducted thorough reviews of student works and grade moderation as	• The enhanced DAA Scheme is expected to collect useful benchmarking input from the DAAs to inform quality enhancements at SDPUs. The University will further review the support provided to DAAs for achieving such purpose in the Second Cycle. • Ongoing reviews of the DAA Scheme and its implementation will be conducted. The next round of review by QAC will be conducted around AY2023/24.

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
		they examined the assessment systems. • With effect from AY2019/20, the ACP and DAA review cycles were synchronized with the latter being a mid-term evaluation between two ACP visits in a six-year cycle. SDPUs, either as a unit under a particular Faculty/Department or as a standalone unit, would continue to benefit from the Scheme and adopt this University-wide practice with effect from the Second DAA Cycle. • Under the enhanced DAA Scheme, benchmarking is a strong emphasis and conducted against standards of overseas institutions leading in the field to inform quality enhancements in teaching and learning.	

R4 – Review of Policy Regarding Support Services for Part-time Students

In the light of these findings, the Panel **recommends** that the University reviews the policy regarding support services for part-time students, in particular, their access to e-Learning platform and library resources, to ensure that the support available to them is comparable to their full-time counterparts. *(par. 7.10)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To provide fit-for-purpose support services for part-time SD students according to their needs.	• Reviewed the existing support services provided for full-time and part-time SD students. • Investigated the needs of SD students by conducting a survey in AY2018/19.	• Completion of a survey which informed the education needs of part-time SD students with regard to support services, in particular, their access to e-Learning platform, on-campus secured Wi-Fi network, printing service, on-campus computer facilities and library resources. • Formulation of a set of policies and standardized practices for provision of support services to SD students in AY2019/20 based on the survey results. • Implementation of the set of policies and standardized practices in AY2020/21.	• Upon implementation of the set of policies and standardized practices in AY2020/21, student feedback will be collected via satisfaction surveys and staff-student consultative meetings by the end of AY2020/21. • Student feedback will be analyzed in AY2021/22 for ongoing review of the support services offered to full-time and part-time SD students based on education needs.

R5 – Review of Exit and Graduate Surveys for SD Students

The Panel therefore **<u>recommends</u>** that the University reviews its exit and graduate surveys for SD students to ensure a greater consistency of approach. In this regard, the University might wish to disseminate to the SDPUs the good practice of AF's policy of using the OSA survey, customised by the addition of optional questions to reflect the particular characteristics of specialist SD programmes. *(par. 8.7)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To achieve consistency in the approach to graduate exit surveys across all SD programmes.	• Reviewed among SDPUs the existing graduate exit survey questionnaires adopted for SD programmes in AY2018/19. • Standardized the questionnaires for graduates of full-time and part-time SD programmes in AY2019/20.	• Developed two sets of uniform graduate exit survey questionnaires in AY2019/20 for full-time and part-time SD programmes respectively. • Each set of the standardized questionnaires contains a number of common institutional questions plus the SDPU-specific questions. • The two sets of graduate exit survey questionnaires will be implemented in summer 2020. • The first set of data collected from the new graduate exit surveys will be reported in AY2020/21.	• The data collected from the standardized graduate exit surveys will enable systematic comparison and review of SD programme performance and strategic development according to the KPIs for SDPUs (R6 refers).

R6 – Clarification on KPIs to be Used by SDPUs

The Panel **recommends** that the University clarifies which KPIs should be used by SDPUs, enables relevant data to be collected centrally, and ensures that appropriate committees review, comment upon and compare detailed trend data from individual SD programmes and units. *(par. 8.12)*

Approach *(Purpose/objectives)*	Deployment *(Strategies/actions taken to achieve the objectives and intended outcomes)*	Results *(Outcomes and evidences)*	Improvement *(Plans for ongoing improvement)*
• To establish a set of KPIs for SDPUs to guide data collection, evaluation and improvement.	• The newly established SDPSC (i) developed a set of KPIs for SDPUs; (ii) aligned the operation and management of all SD programmes; and (iii) monitored trends through collection and analysis of trend data. • The ASU established under SCE, which serves as the secretariat to the SDPSC and provides central support services to SDPUs, coordinated the data collection and analysis for identification of a set of KPIs for SD programmes.	• A set of KPIs, including (i) seven official KPIs identified by SDPSC with reference to the University's *ISP 2018-2028*; and (ii) two discretionary KPIs for gauging SDPUs' performance as appropriate, was finalized in early 2020. • Data/information required for measuring the set of KPIs, such as information on teaching and learning activities, participation rates and students' background data, will be collected centrally. Each SDPU will be able to compile its first set of KPI data in AY2019/20.	• With the first set of KPI data collected, the SDPSC and SDPUs will review their effectiveness in informing programme planning and delivery, academic standard and strategic development. The set of KPIs will be reviewed regularly.

Conclusion

The University has made steady progress in implementing its *Action Plan* in response to the As and Rs in the *Audit Report* in the following areas: alignment of policies and practices across SDPUs, strengthening academic oversight of the SD programmes, standardization of tools for collecting quality data, as well as establishment of a set of KPIs for SDPUs. These actions will lead to better sustainability and quality of the University's SD programmes.

The University's follow-up to the As and Rs is ongoing. While some follow-up actions are to be completed after the submission of this *Progress Report*, the University is committed to monitoring closely the progress of all undertaken actions and beyond, and conducting regular reviews of the relevant practices. Feedback from the UGC-QAC on this *Progress Report* will be most welcome and much appreciated.

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Hong Kong Baptist University
April 2020

List of Abbreviations

A1 (2)	Affirmation 1 (2)
ACP	Academic Consultation Panel
AF	Academy of Film
ASU	Administrative Support Unit
AY	Academic Year
CHTL	Centre for Holistic Teaching and Learning
CIE	College of International Education
COVID-19	Coronavirus Disease 2019
CRA	Criterion Referencing Assessment
DAAs	Departmental Academic Advisors
DCPE	Division of Continuing and Professional Education
HKBU	Hong Kong Baptist University
ISP	Institutional Strategic Plan
KPIs	Key Performance Indicators
MC	Membership Composition
OBTL	Outcomes-based Teaching and Learning
OSA	Office of Student Affairs
QA	Quality Assurance
QAC	Quality Assurance Committee
QASCs	Quality Assurance Sub-committee on Sub-degree Programmes (QF Level 4) and Quality Assurance Sub-committee on Sub-degree Programmes (QF Levels 1-3)
QF	The Hong Kong Qualifications Framework (HKQF)
R1 (2, 3, 4, 5, 6)	Recommendation 1 (2, 3, 4, 5, 6)
SCE	School of Continuing Education
SD	Sub-degree
SDPSC	Sub-degree Programmes Steering Committee
SDPUs	Sub-degree Providing Units
TE	Teaching Evaluation
ToR	Terms of Reference
UGC-QAC	University Grants Committee Quality Assurance Council

List of Annexes

SUB-DEGREE PROGRAMMES STEERING COMMITTEE

Terms of Reference

(a) To oversee the planning, operations and long term development of all Self-Financed Sub-Degree (SFSD) programmes;

(b) To set policies for

    (i) enhancing compliance of the vision and mission of individual Sub-degree Providing Units (SDPUs) with those of the University;

    (ii) aligning the operation and management of all SFSD programmes;

(c) To provide leadership in making continuous improvements through the collection and analysis of trend data, including quality data from the Quality Assurance Committee and compliance with university policies, and to make timely adjustments (introduction of new programmes and/or expansion/contraction/termination of existing programmes) in response to internal/external changes and society needs;

(d) To conduct strategic reviews from time to time for enhancing efficiency and optimum use of resources;

(e) To implement any policies and action on SFSD programmes as advised by the Senate or Senior Executive Committee; and

(f) To submit an annual report to the Senate via the Academic Development Committee at the end of the academic year.

SUB-DEGREE PROGRAMMES STEERING COMMITTEE

Membership Composition

Chairperson

Provost

Members

Vice-President (Teaching and Learning)

Academic Registrar

Dean of School of Continuing Education

Director of College of International Education

1 Head of Academic Division, School of Continuing Education

Director of Academy of Film

Director of the Division of Continuing and Professional Education, School of Chinese Medicine

Director of Centre for Holistic Teaching and Learning

2 senior academics from Faculties not associated with Sub-degree Providing Units

1 student representative

Secretary

Staff from the Administrative Support Unit managed by the School of Continuing Education

QUALITY ASSURANCE SUB-COMMITTEE ON SUB-DEGREE PROGRAMMES (QF LEVELS 1-3)

Terms of Reference

(a) To coordinate the Quality Assurance (QA) processes (accreditation of new programmes, revision to existing progrmmes, annual reports of Sub-degree Providing Units (SDPUs), etc.) of Self-Financed Sub-Degree (SFSD) programmes at QF Levels 1 to 3, and to insure compliance with the policies, guidelines and protocols stipulated by the Quality Assurance Committee (QAC);

(b) To make submissions to the QAC on:

    (i) New programme accreditation

    (ii) Revision to existing programmes for validation/re-validation of programmes on the Qualifications Register (QR)

    (iii) Annual reports for programmes at QF Levels 1 to 3

    (iv) Determining the level and standard of programmes for placement on the Qualifications Framework (QF)

    (v) Any other matters as requested from time to time by the Senate/QAC; and

(c) To monitor the progress of follow-up actions of SDPUs pursuant to recommendations of academic consultants and/or external advisors.

QUALITY ASSURANCE SUB-COMMITTEE ON SUB-DEGREE PROGRAMMES (QF LEVELS 1-3)

Membership Composition

Chairperson

A senior academic

Members

Chairperson of Quality Assurance Committee *ex officio*

1 member* representing the School of Continuing Education

1 member* representing the College of International Education

1 member* representing the Academy of Film

1 member* representing the Division of Continuing and Professional Education, School of Chinese Medicine

* Experienced academic/teaching staff who also serve as the Programme Director/Department Head

1 member representing the Centre for Holistic Teaching and Learning

2 members of Quality Assurance Committee (elected by Quality Assurance Committee or appointed by the Chairperson)

1 student representative

Secretary

Staff from the Academic Registry/Administrative Support Unit, School of Continuing Education

QUALITY ASSURANCE SUB-COMMITTEE ON SUB-DEGREE PROGRAMMES (QF LEVEL 4)

Terms of Reference

(a)   To make recommendations to the Senate via the Quality Assurance Committee (QAC) on:

  (i)   the review and development of guidelines for the quality assurance of sub-degree programmes at Qualifications Framework (QF) Level 4;

  (ii)   the documentation submitted for new QF Level 4 programme accreditation or programme revisions to the existing QF Level 4 sub-degree programmes;

  (iii)   the policies for admission of QF Level 4 sub-degree students as well as changes in the admission requirements.

(b)   To coordinate with the Sub-degree Providing Units (SDPUs) on assuring the level and standard of QF Level 4 sub-degree programmes for placement on the Qualifications Register (QR) with a view to ensuring consistency within the University and to examine and endorse the submission of SDPUs on programme revisions for validation/re-validation of QF Level 4 programmes on the QR.

(c)   To monitor the progress of the follow-up actions relevant to QF Level 4 programmes undertaken by SDPUs in response to the recommendations of the authorised external Quality Assurance (QA) body, including the preparation of the institutional submissions required.

(d)   To deliberate on the submissions of Annual Reports of QF Level 4 programmes from SDPUs and to provide a summary report of its business and resolutions (in particular, its recommendations on the major development and strategic plans of SDPUs) to the QAC (and the Senate) on a regular basis and consult the latter regarding issues with policy implications.

QUALITY ASSURANCE SUB-COMMITTEE ON SUB-DEGREE PROGRAMMES (QF LEVEL 4)

Membership Composition

Chairperson

A senior academic

Members

Chairperson of Quality Assurance Committee *ex officio*

Academic Registrar

5 members (experienced academic/teaching staff who also serve as the Programme Director/Department Head) representing the Sub-degree Providing Units (SDPUs)

2 members of Quality Assurance Committee (elected by Quality Assurance Committee or appointed by the Chairperson)

Up to 2 academic/academic-related staff (elected by Quality Assurance Committee or appointed by the Chairperson)

2 student representatives (normally one Full-time student and one Part-time student preferably from separate SDPUs)

Secretary

Secretary of Quality Assurance Committee