



Co-funded by the Erasmus+ Programme of the European Union

# GUIDELINE FOR INTERNAL QUALITY ASSESSMENT

## Quality Assurance in Cambodian Higher Education

2020

QUALITY ASSURANCE OFFICE

SICA PROJECT NUMBER: 586436-EPP-1-2017-1-KH-EPPKA2-CBHE-JP



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Initiated under SICA Project



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agora|



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## List of Abbreviations

ACC	Accreditation Committee of Cambodia
AUN	ASEAN University Network
ADB	ASEAN Development Bank
CNQF	Cambodian National Qualification Framework
CSUK	Chea Sim University of Kamchaymear
CV	Curriculum Vitae/Resume
Dept.	Department
DGHE	Department General of Higher Education
ELOs	Expected Learning Outcomes
EQA	External Quality Assurance
EU	European Union
HEIs	Higher Education Institutions
IA	Internal Assessment
IQ	Internal Quality
IQA	Internal Quality Assurance
MCU	Mean Chey University
PDCA	Plan, Do, Check and Act. Deming Cycle
PLOs	Programme Learning Outcomes
QA	Quality Assurance
QAO	Quality Assurance Office
QAS	Quality Assurance System
RULE	Royal University of Law and Economics
RUPP	Royal University of Phnom Penh
SAR	Self-Assessment Report
SICA	Strengthening Quality Assurance In Cambodian Higher Education
SRU	Svay Rieng University
SWOT	Strength Weakness Opportunity and Threat
UBB	University of Battambang
UHST	University of Heng Sarin Thbongkhmum

## Foreword

This guideline for internal quality assessment is initiated under the SICA Project with a Project team coordinated by RUPP and ACC, university-partners in its efforts to assure the good practices of academic programs. This document was completed after several meetings, trainings and consultative workshops with the members of six universities in Cambodia and four university-partners in European countries. Much appreciation goes to the RUPP, ACC and all trainers for leading this guideline, and the European grant providers for the Erasmus+ Project in the improvement of Internal Quality Assurance (IQA) in Cambodian Higher Education.

The guideline aims to provide a common frame of reference and accountability to the internal quality assessment process and stakeholders. They are formulated based on the Cambodian National Standards and adapted from the Quality Management of Educational Programmes employed by the Royal University of Phnom Penh (RUPP) and Royal University of Law and Economics (RULE), which was supported by AUN and ADB.

We agree that higher education institutions (HEIs), like other industries, are required to provide the customers with good services and high quality product. To meet these expectations, HEIs have to fulfil certain standards and the needs of education stakeholders in which the Ministry of Education, Youth and Sport has set a milestone mission of Education 2030 to produce high-quality human resources as a crucial element for developing Cambodia towards high-middle income country. Hereby, we believe that this guideline will serve the purpose of standardizing and quality management implemented by the six university-partners and will contribute to the Cambodian Higher Education Institutions thriving the quality culture.

## Executive Summary

The Guideline for Internal Quality (IQ) Assessment is designed to serve the needs of Quality Assurance practices amongst the six universities in Cambodia including Royal University of Phnom Penh (RUPP), Chea Sim University of Kamchaymear (CSUK), Svay Rieng University (SRU), Mean Chey University (MCU), University of Battambang (UBB), University of Heng Sarin Thbongkhmum (UHST). This product resulted in consultating and cooperating with Accreditation Committee of Cambodia (ACC), under the SICA project and interactive involvements of EU-partner universities namely Agora Institute for Knowledge Management, Uppsala University, Lucian Blaga University of Sibiu, Mykolas Romeris University.

This Guideline aims to promote quality management and provides a remedy of good practices for quality assessment, processes and procedures of conducting self-assessment at the programme level, the roles and responsibilities of individual assessment committees and an assessment tool for verifying and certifying the quality assurance activities implemented in these Cambodian universities.

The guideline consists of five sections. After the introductory section on self-knowledge of quality improvement, there follow sections on internal quality (IQ) assessment structure, roles and responsibilities of individual assessors, internal quality assessment preparation process, standards and indicators for quality assurance; and guideline for writing self-assessment report (SAR).

The main purposes of the Guideline are:

- To produce IQA standards for IQ assessment for the six universities in Cambodia;
- To guide the six universities to conduct their self-assessments in a cyclical review within every five years through the Internal Quality Assurance (IQA) system;

- To provide a consultative platform for IQA practices in Cambodia Higher Education Institutions;
- To use common reference points for internal quality assurance;
- To emphasize on IQA subsidiarity with reviews being undertaken nationally where possible;
- To develop the programme standards and guideline for the consistent practices of quality assessment across the six universities;
- To provide assessment procedures for the academic recognition of good practices;
- To enhance the credibility of academic performance and quality assurance practices;
- To increase the mutual trust among the higher education institutions;
- To assist each partner-university with self-preparation for both programme and institutional assessments,
- To contribute to the mobility processes and mutual recognition amongst the partner universities.

## **1. Introduction**

Institutional self-knowledge is the starting point for effective quality assurance and continuous quality improvement. It is important that the university has the means of collecting and analyzing information about their academic activities. Without this, the university will not know what is working well and what needs attention, or the results of innovative practices. Hereinafter, the Internal Quality (IQ) Assessment provides the university with good inputs about its internal quality management through SWOT analysis and the evaluation and assessment systems. A self-assessment or a SWOT analysis is a powerful instrument to learn more about the quality of the core activities and of the institution as a whole. It will answer the basic questions if we are doing the right things in the right way and if we are able to achieve our goals. Often the self-assessment is connected with an external assessment or accreditation, because the accreditation body or external assessors ask for a self-assessment report (SAR) as one of the inputs.

Even when there is no connection with an external assessment, it will be fruitful for the university to conduct a self-assessment at regular base at least every 5-year periodical to learn about the strengths and weaknesses. This self-assessment should lead to a quality plan and the internal assessment of the academic activities has to be conducted before the external assessors or accreditation bodies assess the programmes at an institution. With self-Assessment reports from the institutions, they are solid and reliable evidences of the quality assurance implementation, which are impartial and significant inputs for external quality assessors to make decisions.

### **1.2 Scope**

The “Guideline for Internal Quality Assessment” is prepared as part of Project on Strengthening Capacity of Quality Assurance System towards improving quality management at the six universities in Cambodia initiated

under SICA Project and co-funded by the Erasmus+ Programme of the European Union. The Scope of this guideline is to:

- assist six universities in the implementation of basic QA management system at programme level;
- enhance and strengthen the basic mechanism of QA assessment at the university, faculty and department levels;
- establish a documentation system for existing QA management system at programme level based on the adaptation of AUN-QA model and referencing to ACC standards;
- provide a common reference for QA management system planning, implementation, monitoring and improvement; and
- provide a common source for QA management system training, communication, standardization and review.

It is worth recognizing that the scope of this guidance is adapted from the quality management of educational programmes introduced at RUPP and RULE, and the worksheet templates of the 3<sup>rd</sup> version of the AUN-QA model at programme level.

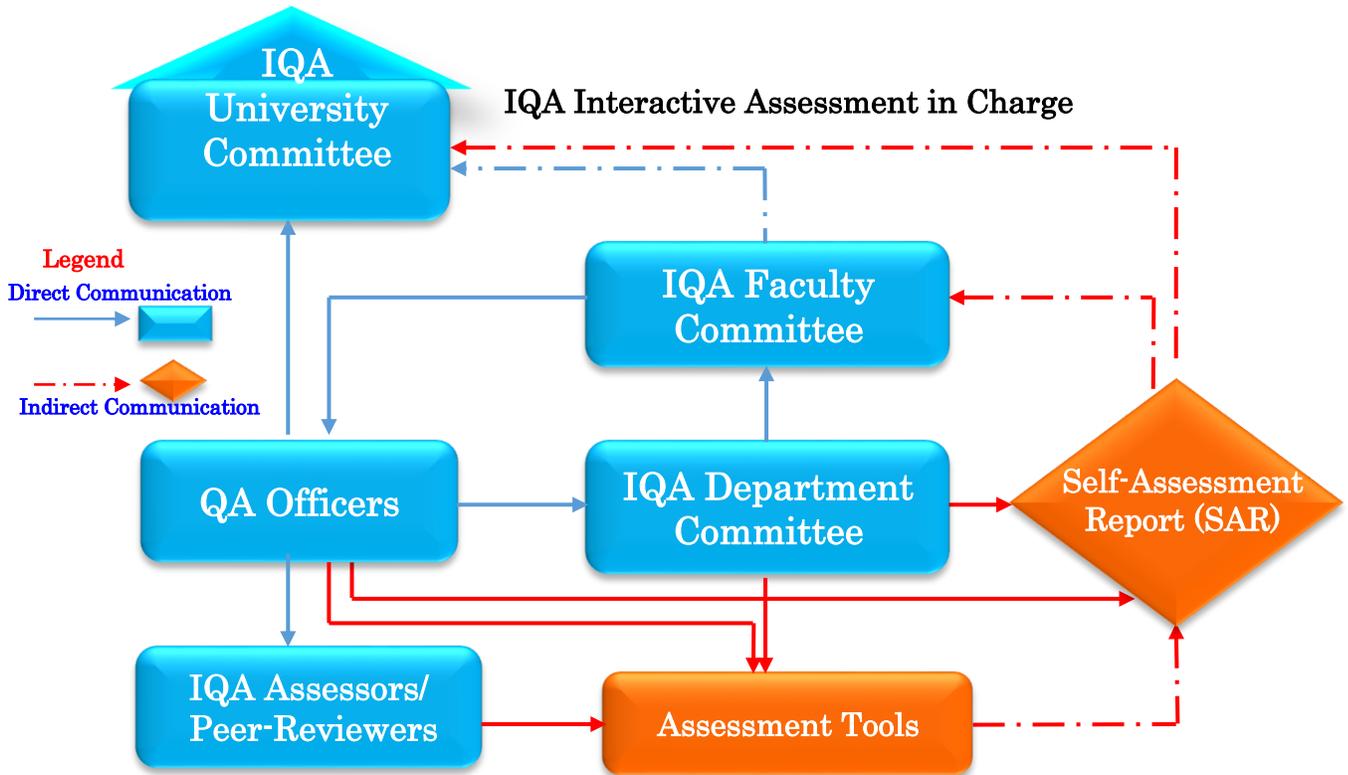
## **2. Structure in charge of Internal Quality (IQ) Assessment**

The QAO or IQA committee at university level will manage the process of Peer-Reviewers for IQ assessment and quality assurance at all levels. The peer-reviewers or internal assessors will need to be well trained for this purpose. The process of selection of Peer-Reviewers or Internal Assessors should be systematic and will need a certain criteria and quality in all procedures to be followed in terms of external and/or international compatibility.

The specification and criteria may be used as tool to achieve the excellence in selection of Internal Assessors on which the authenticity and quality of the process of peer-review will largely depend. The process of selection of Internal Assessors has to be transparent and should involve applicants who have been

working in the university except having additional requested from QAO for the external and knowledgeable candidates for this purpose.

The selected Peer-Reviewers or Internal Assessor have to strictly carry out the Code of Conduct stated in this Guideline (**Appendix E**). According to the real context, it is necessary for all six universities setup the recruitment policy for peer-reviewers or internal assessors to ensure the assessors are knowledgeable about the quality management and the continuous improvement of quality assurance, or research in any related areas of quality enhancement. The internal quality assessment at programme level should flow interactively in accordance with the diagram in figure 1 below.



**Figure 1:** Committees in Charge of the IQ Assessment

QAO should ensure that internal assessors are provided with all relevant documentations, assessment tools, records and guidance. The internal quality assessment process ensures that assessment within the university is valid and

consistent. In order to demonstrate quality assurance of the internal assessment process, QAO is required to:

- coordinate the processes and procedures of internal assessment;
- select appropriate assessment tools for self-assessment report,
- formulate the university assessment teams with appropriate functions assigned;
- train the internal assessment teams how to use the assessment tools;
- advise and support the assessment processes;
- monitor and verify the assessment processes;
- develop the assessment schedule and itinerary;
- prepare assessor's roles and responsibilities;
- ensure the accurate records of assessment and make sure that IQA stakeholders are kept using appropriate documents;
- analyze and interpret the findings of assessments;
- manage the external quality assurance requirements; and
- insist in preparing QA improvement plans.

The process of programme assessment is executed and undertaken by the four IQA Assessment Committees formed at department, faculty, and the university levels under the coordination of QAO. At the developmental arrangements for the transitional period, the IQA Department Committee is responsible for writing self-assessment report (SAR) to prove the quality assurance practices at the ground academic excellence and to work with a satisfactory system of internal quality assurance. After producing SARs, the departments have to submit their SARs to the respective IQA Faculty Committee for approval and recognition before handing them to QAO for further processes and procedures.

The IQA Faculty Committee has authority to approve or reject the SARs if they were invalid or poor quality before the Committee processes them to QAO

for evaluating and/or assessing procedures.

After receiving the approved SARs, QAO will assign the IQA assessors to assess them and verify the objective evidences related to the requirements of each indicator of standards. QAO has to analyze and interpret the findings of assessments done by Internal Assessors or Peer-Reviewers and reports to IQA University committee for final decisions and/or certification.

QA Officers who work in QAO are the key persons to initiate or monitor the whole process of IQ assessment. They play crucial roles as the technical moderators or mentors rather than being internal assessors.

The internal assessment process and standard carried out by IQA system are strongly linked to external quality assessment and being complementary and integrated with each other. The IQA is essential for EQA while the EQA motivates the IQA system for future developments and improvements.

## **2.1 Roles and Responsibilities of Internal Assessors**

The precise functions and responsibilities of the peer-reviewers or internal assessors are the key issues for producing the reliable results of quality assurance system; therefore, the peer-reviewers or internal assessors should comprehend all assessment tools and stages including pre-assessment, during assessment and post-assessment. The significant approaches to the IQ assessment are that the peer-reviewers or internal assessors have to conduct the data collection, data analysis and interpretation with the clear and reliable reports. With the whole assessment process, the individual internal assessors with high responsibilities have to work collaboratively with the team leader of internal assessors and other stakeholders. In general, an Internal Assessor is responsible for:

- working as a team assigned by QAO;
- having good understanding of the standards before proceeding to the next steps,
- reading and studying the given SAR and related documents a week prior

to the assessment period to find out the clarification points and being ready to visit the programme/department;

- recording the key points before and during the assessment and preparing assessment plan and checklist;
- collecting data and evidence related to the academic practices through documentation, process, research, and information to form the basis of rating and report writing;
- making observations on curriculum, process and quality improvements;
- writing an assessment report on the standards that they are responsible for and provide them to the team leader on the completion of the assessment at the department;
- retaining and safeguarding documents pertaining to the assessment;
- bearing in mind a misconduct policy and Code of Conduct of an assessor (**Appendix E**).

## **2.2 Roles of Team Leader of IQ Assessment**

The team leader is a key person assigned based on his / her experience and performance on the evaluation of higher education. In each quality assessment programme, one assessor from the assessment teams will be appointed as the Team Leader to oversee and lead the entire actual quality assessment. S/he should be more knowledgeable about the quality assessments and quality management. In addition to the leadership role, the Team Leader will provide a coordination to the assessment teams, setup preliminary meetings/discussions, assign roles and assessment areas/criteria and moderate the final assessment results before submitting them to the QAO. A Team Leader is responsible for:

- providing guidance to team members in finding and obtaining the necessary information for evaluating, gathering information from various sources, and clarifying any work related to the quality

assessment process;

- assigning sub-group (s) and each sub-group may consist of two or three assessors. Each subgroup may be responsible for and rating two or three standards assigned by a Team Leader. Each subgroup member must score independently on the standard that he/she is responsible for and then calculate the holistic score for each standard;
- leading on the evaluation process and participating in any sub-group;
- collecting evaluation reports from the sub-group to summarize and presenting the preliminary results of the assessments to QAO and IQA University Committee;
- assigning tasks (Pre-Assessment, While-Assessment, and Post-Assessment) for individual members to communicate and clarify assessment requirements;
- planning & carrying out assigned responsibilities effectively and efficiently throughout the assessment and being present at site-visit;
- accumulating the results submitted by sub-groups. The overall verdict of the assessment should be computed based on the arithmetic average of the 7 standards with only two decimal digits;
- finalizing the assessment results and submitting them to the QAO no later than two weeks after site-visit; and
- bearing in mind a misconduct policy and Code of Conduct of an assessor (**Appendix E**).

### **2.3 Roles of Technical Assistant of IQ Assessment**

The Technical Assistant is a person assigned to support the Team Leader. In each quality assessment programme, the Technical Assistant will be appointed and selected from the pool of the university stakeholders to communicate and facilitate the process of internal assessment with the respective departments and/or faculties. S/he demands competence and skill in interpersonal skills to act

as a middle person, able to use computer, design PowerPoints and write reports either in Khmer or English genre. A Technical Assistant is responsible for:

- contacting the right person in the assessing programme or department;
- reading, monitoring and responding to the manager's email or phone calls;
- taking action points, writing minutes, and preparing presentations;
- sourcing and ordering stationery and office equipment;
- verifying and facilitating the assessment process such as checking validity and objectivity of evidence;
- arranging schedules of the interviews and meetings as requested;
- entering and compiling the data collection;
- consolidating and writing the overall assessment report; and
- bearing in mind a misconduct policy and Code of Conduct of an assessor (Appendix E).

### **3. Internal Quality Assessment Preparation Process**

Conducting a quality assessment requires good preparation. It is important that the department considers its resources and prepares its people before proceeding with the assessment. In general, the implementation of the IQ Assessment takes times between 6 to 12 months. The preparation includes desktop assessment, formulation of internal team for writing self-assessment report (SAR), logistics and other administrative arrangements, etc.

Before processing for the quality assessment, it is important that the IQA initiator communicates the intent to all stakeholders concerned. This is to ensure that those involved understand the reasons and objectives behind the assessment and at the same time to get commitment and approval for the assessment process. Every person involved in preparation of self-assessment should have sufficient time to understand the standards and the requirements of each indicator.

The internal quality assessment is mainly focused on the quality of the

curriculum and expected learning outcomes (ELOs) of academic programs and/or courses, teaching and learning activities, assessment mechanisms, research activities, service activities, capacity building of academic staff, administrative services, staff and/or student performance assessment, resources and facilities, student services, and the best practices at the department or programme level.

The preparation stage should be employed PDCA approaches:



**Figure 2:** PDCA Approaches for Self-Assessment Preparation adapted from AUN-QA

At the P(lan) stage, the department has to establish a timeline and form the SAR Team to write SAR, and understand IQA Assessment tools and processes. At D(o) stage, conduct self-assessment, collect data, and write SAR. At C(heck) stage, verify findings for presentation. At A(ct) stage, finalize SAR and submit to QAO at least one month and a half before the actual assessment starts. Wait for the feedback whether the SAR is complete or not. If there were no objection, the internal assessment process will follow the flow chart in **Appendix D**.

## 4. Program Standard and Indicator

The Evaluation and Assessment System is a mean for the practitioners and stakeholders of quality assurance to understand the processes involved in assessment for the success of quality assurance at programme level.

To assess the good practice of academic performance in each institution, each academic program done at university is to fulfil the requirements of the seven standards with forty indicators and supported by approximately one hundred and eighty-five objective evidences. The standards to gauge the academic performance at programme level are related to (1) Programme Learning Outcomes, (2) Program Content, Structure and Specification, (3) Teaching and Learning Approach, (4) Student Assessment ,and Service (5) Facilities and Infrastructure, (6) Output, and (7) Internal Quality Improvement.

### 4.1 Standard for Internal Quality Assessment at Programme Level

1	Programme Learning Outcomes	Objective Evidence
1.1	The programme learning outcomes (PLOs) have been clearly formulated and aligned with the vision and mission of the institution	<ul style="list-style-type: none"><li>- University Strategic Plan</li><li>- Institution's vision and mission statements</li><li>- PLOs alignment with vision and mission matrix of the institution</li><li>- Curriculum and Course Syllabi</li><li>- Curriculum Committee</li><li>- PLOs are measurable</li></ul>
1.2	The programme learning outcomes cover both subject specific and generic (i.e. transferable) learning outcomes	<ul style="list-style-type: none"><li>- Subject specific and generic learning outcomes</li><li>- Programme and course specifications</li><li>- Learning outcomes of academic programme</li><li>- Course brochure and prospectus or bulletin</li><li>- University and faculty websites</li></ul>

1.3	The programme learning outcomes clearly reflect the requirements of the stakeholders	<ul style="list-style-type: none"> <li>- Alignment of programme learning outcomes with the domains in the CNQF</li> <li>- Skills matrix</li> <li>- Curriculum review minutes and documents</li> <li>- Stakeholders' input (market research or tracer study)</li> <li>- Accreditation and benchmarking reports</li> </ul>
<b>2</b>	<b>Programme Content, Structure and Specification</b>	<b>Objective Evidence</b>
2.1	The information in the programme specification is comprehensive and up-to-date	<ul style="list-style-type: none"> <li>- Reports of programme evaluation</li> <li>- Detail information of programme specifications</li> <li>- Expected learning outcomes of the programme</li> <li>- Programme structures and requirement</li> </ul>
2.2	The information in the course specification is comprehensive and up-to-date	<ul style="list-style-type: none"> <li>- Reports of courses evaluation</li> <li>- ELOs of course specification</li> <li>- Detail components of course syllabi</li> <li>- Course brochure or bulletin</li> <li>- Teaching and learning methods to achieve ELOs</li> </ul>
2.3	The programme and course specifications are communicated and made available to the stakeholders	<ul style="list-style-type: none"> <li>- Programme brochure and prospectus or bulletin</li> <li>- A set of course specifications</li> <li>- Course brochure and prospectus or bulletin</li> <li>- University and/or faculty websites</li> </ul>
2.4	The curriculum is designed based on constructive	<ul style="list-style-type: none"> <li>- Stakeholders' input and feedback</li> <li>- Constructive alignment of curriculum to ELOs</li> </ul>

	alignment with the expected learning outcomes (ELOs)	<ul style="list-style-type: none"> <li>- ELO matrix</li> <li>- Principles, procedures and methods of student assessments focusing on learning outcomes of students;</li> <li>- Alignment of teaching, learning and assessment to achieve ELOs</li> </ul>
2.5	The contribution made by each course to achieve the expected learning outcomes is clear	<ul style="list-style-type: none"> <li>- Curriculum mapping</li> <li>- Brochure, prospectus or bulletin</li> <li>- Skills matrix</li> <li>- Curriculum review minutes and documents</li> </ul>
2.6	The curriculum is logically structured, sequenced, integrated and up-to-date	<ul style="list-style-type: none"> <li>- Programme and course specifications</li> <li>- Reports of programme and/or courses review</li> <li>- Courses are classified as basic, intermediate and specialized courses</li> <li>- References, websites, other teaching and learning materials</li> </ul>
<b>3</b>	<b>Teaching and Learning Approach</b>	<b>Objective Evidence</b>
3.1	The educational philosophy is well articulated and communicated to all stakeholders	<ul style="list-style-type: none"> <li>- Educational philosophy</li> <li>- Programme and course specifications</li> <li>- Student satisfaction survey</li> <li>- Teaching and learning paradigm</li> </ul>
3.2	Teaching and learning activities are constructively aligned to the achievement of the expected learning outcomes	<ul style="list-style-type: none"> <li>- Instructional methods to achieve ELOs in course syllabi</li> <li>- List of subjects taught by faculty members</li> <li>- Assessment methods and criteria of teaching/learning effectiveness</li> <li>- List of faculty members with qualification and CVs</li> </ul>
3.3	Teaching and learning activities enhance life-long learning	<ul style="list-style-type: none"> <li>- Evidence of active learning such as project, practical training,</li> </ul>

		<p>assignment, industrial attachment, etc. in course outlines</p> <ul style="list-style-type: none"> <li>- Community involvement</li> <li>- Memorandum of Understanding (MOU)</li> <li>- Student feedback</li> <li>- Online learning portal</li> </ul>
3.4	The percentage of full-time faculty members is sufficiently large to insure effective instruction and guidance of students	<ul style="list-style-type: none"> <li>- List of faculty members</li> <li>- Staff qualifications</li> <li>- Lists of subjects taught by academic staff</li> <li>- Policies pertaining to faculty- student ratios</li> <li>- List of Students name</li> <li>- Employment contract for including part-time staff</li> </ul>
<b>4</b>	<b>Student Assessment and Service</b>	<b>Objective Evidence</b>
4.1	The student assessment is constructively aligned to the achievement of the expected learning outcomes	<ul style="list-style-type: none"> <li>- Assessment methods and criteria of assessing effectiveness</li> <li>- Constructive alignment of assessments and instructional methods</li> <li>- Programme and course specifications</li> <li>- Types of student assessment</li> <li>- Learning outcomes of academic programme</li> </ul>
4.2	The student assessments including timelines, methods, regulations, weight distribution, rubrics and grading are explicit and communicated to students	<ul style="list-style-type: none"> <li>- Variable samples of assessments such as project work, thesis, final examination, etc.</li> <li>- Assessment requirements stated in course syllabi</li> <li>- Principles, procedures and methods of student assessment focusing on learning outcomes of students</li> </ul>
4.3	Methods including assessment rubrics and marking schemes	<ul style="list-style-type: none"> <li>- Assessment rubrics</li> <li>- Grading Scheme or criteria</li> </ul>

	are used to ensure validity, reliability and fairness of student assessment	<ul style="list-style-type: none"> <li>- Moderation process</li> <li>- Assessment regulations</li> <li>- Credit policy or credit transfer system</li> </ul>
4.4	Feedback of student assessment is timely and helps to improve learning	<ul style="list-style-type: none"> <li>- Types of student assessment</li> <li>- Reports of analytical assessment results</li> <li>- Student workload</li> <li>- Student performance reports</li> <li>- Mechanisms to report and feedback on student progress</li> </ul>
4.5	Policies and procedures for addressing student grievances exist and students have ready access to the appeal procedure	<ul style="list-style-type: none"> <li>- Appeal procedure or grievance policy and resolutions</li> <li>- Academic regulations and procedures</li> <li>- Records of student complaints or grievances</li> </ul>
4.6	The student intake policy and admission criteria are defined, communicated, published, and up-to-date	<ul style="list-style-type: none"> <li>- Student selection process and criteria</li> <li>- Trend of student intakes or statistics</li> <li>- Documents related to policies on student admission</li> <li>- Policy on scholarship awards</li> <li>- A summary table of enrollment and student statistics</li> </ul>
4.7	The methods and criteria for the selection of students are determined and evaluated	<ul style="list-style-type: none"> <li>- Student selection information are available for the public</li> <li>- Periodic review of the effectiveness of selection procedures</li> <li>- Catalogues and other information related to student intake are available in either hard or soft copies</li> <li>- Orientation programme for new intake</li> <li>- Reports of the admission mechanism</li> </ul>
4.8	Students are assisted in career planning and development, and	<ul style="list-style-type: none"> <li>- Provision of student support service at university, faculty or department level</li> </ul>

	job placement and follow-up activities	<ul style="list-style-type: none"> <li>- Policy on assisting students in career planning and academic advice</li> <li>- Career advising policy and office with specific persons responsible</li> <li>- Memorandum of Understanding with the public sector or private sector and other organizations</li> <li>- Participation in academic and non-academic activities, extracurricular activities, competition, etc.</li> <li>- Reports or annual report on the implementation and activities of career advising office or tracer studies</li> </ul>
4.9	Counselling services, health services and health education programs consistent with the needs of the students are provided	<ul style="list-style-type: none"> <li>- Coaching, mentoring and counselling schemes</li> <li>- Data on counseling services rendered to students, health services and health education programs</li> <li>- Health clinic/center/facilities for emergency cases</li> <li>- Availability of first aid measures</li> <li>- Outcomes of academic advisory committee</li> <li>- Number of full time and part-time teaching staff</li> </ul>
<b>5</b>	<b>Facilities and Infrastructure</b>	<b>Objective Evidence</b>
5.1	The teaching and learning facilities and equipment (lecture halls, classrooms, project rooms, etc.) are adequate and updated to support education and research	<ul style="list-style-type: none"> <li>- Lecture halls, classrooms, project rooms, Faculty spaces, facilities and equipment etc. for supporting the teaching and learning activities</li> <li>- Maintenance, new facilities and upgrading plans</li> <li>- Health and environmental policy</li> <li>- Emergency plan or Safety signs</li> <li>- Budgets for facilities and infrastructure</li> </ul>

		<ul style="list-style-type: none"> <li>- List of facilities, equipment, computer hardware and software, etc.</li> </ul>
5.2	The library and its resources are adequate and updated to support education and research	<ul style="list-style-type: none"> <li>- Updated list of books or catalogue of learning resources in the library or faculty or department</li> <li>- Library environment</li> <li>- Policy of library service</li> <li>- Orientation program for students and faculty to use library</li> <li>- List of electronic resources available in the library or faculty or department</li> </ul>
5.3	The laboratories and equipment are adequate and updated to support education and research	<ul style="list-style-type: none"> <li>- Inventory of laboratory equipment</li> <li>- Policies on laboratory use</li> <li>- Development Plan for Laboratories</li> <li>- Report on the development plan for Laboratories</li> <li>- Utilization rates, downtime/uptime, operating hours</li> </ul>
5.4	The IT facilities including e-learning infrastructure are adequate and updated to support education and research	<ul style="list-style-type: none"> <li>- List of the IT facilities including e-learning resources or infrastructure</li> <li>- Number of computers and students ratio</li> <li>- Internet access, computer hardware and software for facilitating research activities</li> <li>- Budgets for facilities and infrastructure improvement</li> </ul>
5.5	The standards for environment, health and safety; and access for people with special needs are defined and implemented	<ul style="list-style-type: none"> <li>- Campus Map</li> <li>- Health, safety security regulations and guidelines</li> <li>- Existence of fireproof storage and back-up procedures</li> <li>- Accessible process or spaces for needed persons</li> </ul>

6	Output	Objective Evidence
6.1	The pass rates and dropout rates are established, monitored and benchmarked for improvement	<ul style="list-style-type: none"> <li>- Retention policy</li> <li>- Data on drop-outs and completion rates of graduates of the last five cohorts</li> <li>- Monitoring strategies to track the drop-outs and strategies to improve retention</li> <li>- Information on the pass rates and dropout rates of the last five cohorts</li> </ul>
6.2	The average time to graduate is established, monitored and benchmarked for improvement	<ul style="list-style-type: none"> <li>- Data of graduates of the last five cohort</li> <li>- Policy and requirements of graduation</li> <li>- Measuring and monitoring the output through the achievement of the expected learning outcomes</li> </ul>
6.3	Employability of graduates is established, monitored and benchmarked for improvement	<ul style="list-style-type: none"> <li>- Graduates, alumni and employers surveys</li> <li>- Tracer Studies</li> <li>- Employment statistics</li> <li>- Employers feedback</li> <li>- Improvement plans</li> </ul>
6.4	The types and quantity of research activities by students are established, monitored and benchmarked for improvement	<ul style="list-style-type: none"> <li>- Number of research reports or publications done by students</li> <li>- Feedback from stakeholders for continuous quality improvement</li> <li>- Citation on the research publications</li> </ul>
6.5	The satisfaction levels of stakeholders are established, monitored and benchmarked for improvement	<ul style="list-style-type: none"> <li>- Process and indicators for measuring stakeholders' satisfaction</li> <li>- Stakeholders' satisfaction trends</li> <li>- Student feedback</li> <li>- Award and recognition schemes</li> </ul>

7	Internal Quality Improvement	Objective Evidence
7.1	Quality Assurance System (QAS) exists within the institution with clearly defined guidelines and procedures	<ul style="list-style-type: none"> <li>- Policy on quality assurance system</li> <li>- IQA management structure and person involvement</li> <li>- Guidelines and operational procedures for internal quality management</li> <li>- Roles and responsibilities of person in charge of IQA system</li> </ul>
7.2	Stakeholders' needs and feedback serve as input to curriculum design and development	<ul style="list-style-type: none"> <li>- Curriculum design, review and approval process and minutes</li> <li>- Reports from surveys, focus group, dialogue, tracer study, etc.</li> <li>- Inputs and feedback from stakeholders including academic staff, alumni, industry, government, and professional organizations</li> <li>- Reports of programme and course evaluation</li> </ul>
7.3	The curriculum design and development process is established and subjected to evaluation and enhancement	<ul style="list-style-type: none"> <li>- Reports of Curriculum Committee activities</li> <li>- Reports on curriculum design and development process</li> <li>- QA of assessment and evaluation</li> <li>- Date of curriculum reviews or related documents</li> </ul>
7.4	The teaching and learning processes and student assessment are continuously reviewed and evaluated to ensure their relevance and alignment	<ul style="list-style-type: none"> <li>- IQA monitoring system to measure the effectiveness of teaching and learning</li> <li>- Sample of student feedback related to teaching and learning approaches</li> <li>- Matrix of instructional and assessment methods</li> <li>- Sample of questionnaire for course evaluation</li> <li>- IQA manual for institution</li> </ul>

7.5	Research output is used to enhance teaching and learning	<ul style="list-style-type: none"> <li>- Action researches or reports related to the improvement of teaching and learning approaches</li> <li>- Reports of capacity building on teaching and learning</li> <li>- Budget for research on teaching and learning</li> </ul>
7.6	Quality of support services and facilities (at the library, laboratory, IT facility and student services) is subjected to evaluation and enhancement	<ul style="list-style-type: none"> <li>- Use of stakeholder feedback for improvement</li> <li>- Local and international benchmarking</li> <li>- Budget for quality management</li> <li>- Monitoring and assessing platform for IQA assessment</li> </ul>
7.7	Quality assurance is a systematic and cooperative process across all levels with involvement of staff, students, and other stakeholders	<ul style="list-style-type: none"> <li>- Guideline for internal quality assessment</li> <li>- Quality Assurance development plans</li> <li>- Feedback mechanism from stakeholders for continuous quality improvement</li> <li>- IQA assessment tool</li> <li>- Methods or processes of IQA dissemination</li> </ul>
7.8	Quality assurance system is promulgated and supported by the top management of institutions to ensure effective implementation and sustainability	<ul style="list-style-type: none"> <li>- Decision-making mechanism for internal quality assurance</li> <li>- Minutes/reports/records of statements made by top management related to IQA</li> <li>- Leverage budgets for IQA activities and quality improvement</li> <li>- Short and long QA improvement plans</li> </ul>

## 4.2 Assessment of Objective Evidence

Objective Evidence presented for assessment must be judged as:

Valid	Is it relevant to qualification or indicator's requirements? Does it contribute to the requirements of the qualification?
Authentic	Are the support documents proved the academic practices of the programs or department? This is particularly important to consider if the objective evidences are made-up to satisfy the assessment process or just fulfil the gaps of indicators.
Current	Does it demonstrate that the programme can meet the requirements of the qualification or good practices of academic performance at the time of assessment? This is particularly important when looking at evidence from prior achievement.
Reliable	Would another assessor make the same decisions when judging this evidence?
Sufficient	Does it meet all the indicator requirements of the standard/qualification?

## 4.3 Objective Evidence

Objective Evidence should be collected on all matters related to the key concepts of each indicator. The template of data collection of evidence (**Appendix C**) can be used to achieve this objective. Evidence should be collected through:

- interviewing the target groups of the department stakeholders
- examining and check related documents/records (action plan, curriculum, syllabi, physical and electronic)
- observing curriculum and/ or extra-curriculum activities and facilities
- visiting the location of the assessed programmes and/or departments

- utilizing statistical methods such as sampling to increase efficiency during assessment. However, the sample should be a fair sample or representation of the area under examination.

Site-visit can be planned before or between the interviews. This normally includes visit to lecture halls, tutorial rooms, laboratories, workshops or practical rooms, libraries and computer labs. Special attention should be paid to the environment in the facilities, condition of the equipment and tools, cleanliness and maintenance of the facilities. The Site-Visit also provides the assessors an opportunity to clarify the findings or SAR with the support staff (**Appendix B**).

#### 4.4 Rating Scale

The evaluation and assessment tool is absolutely crucial criteria for the peer-reviewers or internal assessors to make decisions on the academic performance. Thereof, the rating scales are also inevitable for the peer-reviewers and internal assessors to evaluate the requirements of each indicator since it would reveal the real and accurate data which is transformed into the information for making decisions. Hereby, in this rubric guidance for internal quality assessment, a 5-rating scale has been chosen as a scoring tool for evaluating and assessing for each standard and indicator. The 5-score rating scale is used for internal quality assessment at program level. The 5-score rating scale is precisely explained in the table below.

Score	Achievement	Explanation
5	Achieved with excellence 90% - 100%	The QA practice to fulfil the standard is considered to fully achieve all requirements with evidences support that shows excellent results.
4	Achieved with best practice 70% - 89%	The QA practice to fulfil the standard is considered to achieve the most requirements with evidences support that shows very good results and is effectively implemented

<b>3</b>	Achieved above average and adequate <b>50% - 69%</b>	The QA practice to fulfil the standard is considered adequate as expected, but minor improvement is needed to achieve the most requirements of each indicator.
<b>2</b>	Partially achieved <b>30% - 49%</b>	The QA practice to fulfil the standard is considered inadequate and achieves only planning stage or shows very poor results. The quality improvement is required and necessary.
<b>1</b>	Fail <b>1% - 29%</b>	The QA practice to fulfil the standard is not implemented. The academic program does not respond to any criteria in the guideline. There are no documents, evidences or results available. Immediate improvement must be made.

**NB:** In assigning rating to standard and indicators, only holistic number should be used. The overall verdict of the assessment should be computed based on the arithmetic average of the 7-standard with only two decimal digits.

#### 4.5 Score Interpretation

The overall accumulation scored for academic performance at the programme level falls into one of the following score-ranges, which shall be interpreted and conferred the following awards as specified below.

<b>Score</b>	<b>Explanation</b>	<b>Award</b>
<b>4.60 – 5.00</b>	Excellent Academic Practice	<b>Gold</b>
<b>3.90 – 4.59</b>	Best Academic Practice	<b>Silver</b>
<b>3.60 – 3.89</b>	Better than Adequate	<b>Bronze</b>
<b>3.30 – 3.59</b>	Adequate	<b>Pass</b>
<b>3.00 – 3.29</b>	Inadequate (Minor improvement)	Revision Needed
<b>1.00 – 2.29</b>	Very Poor Performance	Immediate Improvement needed

## 5. Format for Self-Assessment Report (SAR)

To write a self-assessment report, it would take about 6 to 12 months to prepare. However, the duration depends on the stages of development, availability of data and information, and the maturity of the academic programme or department. At the start of the process, it is important that the departmental stakeholders and other involved committees have a common comprehension and understanding of the guideline of internal quality assessment and standards. The capacity building should be set up to ensure the effectiveness of assessment process. The product of self-assessment report should be written in an objective, quantitative and qualitative, factual and complete manner and follow the indicators of each standard.

The SAR should be written either in Khmer or English that is easy for internal or external assessors to comprehend. It is also important to provide a glossary of abbreviations and terminologies used in the report.

The SAR should be submitted or made available in both hardcopy and softcopy to the QAO at least 1½ – 2 months before the site assessment;

Hardcopies of the SAR must be made available to all internal assessors or peer-reviewers at the site assessment together with the supporting documents and evidences clearly labelled and displayed in the discussion room for the assessors; and

The SAR should not be more than 50 A4 pages and printed in a consistent typeface with *Khmer OS Siemreap* or *Times New Roman* font in size 12. Clearly indicate the title of heading with *Khmer OS Moul Light* or *Time New Roman in Bold*.

The contents of the SAR should consist of:

### **Part 1: Introduction**

- Executive summary of the SAR
- Organization of the self-assessment – how the self-assessment was carried out and who were involved?

- Brief description of the programme or department outline the history of quality assurance, mission, vision, objectives and quality policy of the university followed by a brief description of the faculty an department.
- Assessment Methodology

## **Part 2: Assessment Results**

This section contains the write-up on how the programme or department addresses the requirements of the indicators of each standard. Follow the standards included in the Guideline of Internal Quality Assessment.

- a. Programme Learning Outcomes
- b. Programme Content, Structure and Specification
- c. Teaching and Learning approach
- d. Student Assessment and Service
- e. Facility and Infrastructure
- f. Output
- g. Internal Quality Improvement

## **Part 3: Strengths and Areas for Improvement Analysis**

- Summary of strengths - summarize the points that the department considers to be its strengths and mark the points that the institution is proud of.
- Summary of areas for improvement - indicate which points the department considers to be weak and in needs of improvement.
- Complete self-assessment checklist as in **Appendix A**
- Conclusion and recommendations to close the gaps identified in the self-assessment and the improvement plan to implement them.

## **Part 4: Appendices**

- Glossary and supporting documents and evidence

## APPENDICES

### Appendix A: Score Record for IQ Assessment at Programme Level

<b>1</b>	<b>Programme Learning Outcomes</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1.1	The programme learning outcomes have been clearly formulated and aligned with the vision and mission of the university					
1.2	The programme learning outcomes cover both subject specific and generic (i.e. transferable) learning outcomes					
1.3	The programme learning outcomes clearly reflect the requirements of the stakeholders					
	<b>Overall opinion</b>					
<b>2</b>	<b>Programme Content, Structure and Specification</b>					
2.1	The information in the programme specification is comprehensive and up-to-date					
2.2	The information in the course specification is comprehensive and up-to-date					
2.3	The programme and course specifications are communicated and made available to the stakeholders					
2.4	The curriculum is designed based on constructive alignment with the expected learning outcomes					
2.5	The contribution made by each course to achieve the expected learning outcomes is clear					
2.6	The curriculum is logically structured, sequenced, integrated and up-to-date					
	<b>Overall opinion</b>					
<b>3</b>	<b>Teaching and Learning Approach</b>					
3.1	The educational philosophy is well articulated and communicated to all stakeholders					
3.2	Teaching and learning activities are constructively aligned to the achievement of the expected learning outcomes					
3.3	Teaching and learning activities enhance life-long learning					
3.4	The percentage of full-time faculty members is sufficiently large to insure effective instruction and guidance of students					
	<b>Overall opinion</b>					
<b>4</b>	<b>Student Assessment and Service</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
4.1	The student assessment is constructively aligned to the achievement of the expected learning outcomes					

4.2	The student assessments including timelines, methods, regulations, weight distribution, rubrics and grading are explicit and communicated to students					
4.3	Methods including assessment rubrics and marking schemes are used to ensure validity, reliability and fairness of student assessment					
4.4	Feedback of student assessment is timely and helps to improve learning					
4.5	Students have ready access to appeal procedure					
4.6	The student intake policy and admission criteria are defined, communicated, published, and up-to-date					
4.7	The methods and criteria for the selection of students are determined and evaluated					
4.8	Assessment of student learning is conducted through various means and based upon clearly stated and explicit criteria.					
4.9	Counselling services, health services and health education programs consistent with the needs of the students are provided.					
	<b>Overall opinion</b>					
<b>5</b>	<b>Facilities and Infrastructure</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
5.1	The teaching and learning facilities and equipment (lecture halls, classrooms, project rooms, etc.) are adequate and updated to support education and research					
5.2	The library and its resources are adequate and updated to support education and research					
5.3	The laboratories and equipment are adequate and updated to support education and research					
5.4	The IT facilities including e-learning infrastructure are adequate and updated to support education and research					
5.5	The standards for environment, health and safety; and access for people with special needs are defined and implemented					
<b>6</b>	<b>Output</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
6.1	The pass rates and dropout rates are established, monitored and benchmarked for improvement					

6.2	The average time to graduate is established, monitored and benchmarked for improvement					
6.3	Employability of graduates is established, monitored and benchmarked for improvement					
6.4	The types and quantity of research activities by students are established, monitored and benchmarked for improvement					
6.5	The satisfaction levels of stakeholders are established, monitored and benchmarked for improvement					
	<b>Overall opinion</b>					
<b>7</b>	<b>Internal Quality Improvement</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
7.1	Quality Assurance System (QAS) exists within the institution with clearly defined guidelines and procedures					
7.2	Stakeholders' needs and feedback serve as input to curriculum design and development					
7.3	The curriculum design and development process is established and subjected to evaluation and enhancement					
7.4	The teaching and learning processes and student assessment are continuously reviewed and evaluated to ensure their relevance and alignment					
7.5	Research output is used to enhance teaching and learning					
7.6	Quality of support services and facilities (at the library, laboratory, IT facility and student services) is subjected to evaluation and enhancement					
7.7	Quality assurance is a systematic and cooperative process across all levels with involvement of staff, students, and other stakeholders					
7.8	Quality assurance system is promulgated and supported by the top management of institutions to ensure effective implementation and sustainability					
	<b>Overall opinion</b>					
<b>Overall verdict</b>						

**NB:** In rating to overall opinion of indicators, only holistic number should be used. Consider the trend of indicators based on the evidences support. The overall verdict of the assessment should be computed based on the arithmetic average of the 7-standard with only two decimal digits.

## Appendix B: Worksheet for IQ Assessment at Programme Level

(Name of University) \_\_\_\_\_

<b>Faculty:</b> .....		
<b>Department:</b> .....		
Person in charge the Programme .....	Email: .....	Telephone: .....
<b>Name of Programme Assessed:</b> .....	<b>Date of Assessment</b> .....	
<b>Name of Assessors</b> ( 1 ).....	( 2 ).....	
( 3 ).....	( 4 ).....	
( 5 ).....	( 6 ).....	
<b>Standard</b>		<b>Score (1-5)</b>
1. Programme Learning Outcomes		
2. Programme Content, Structure and Specification		
3. Teaching and Learning approach		
4. Student Assessment and Service		
5. Facility and Infrastructure		
6. Output		
7. Internal Quality Improvement		
<b>Overall Verdict</b>		

Based on the assessment results, the Bachelor of xxxxxx Programme fulfilled the IQA requirements.

Standard	Indicator	Strength	% Evidence	Areas for improvement	Score
1.Programme Learning Outcomes	1.1 The programme learning outcomes have been clearly formulated and aligned with the vision and mission of the university				
1. Programme Learning Outcomes	1.2 The programme learning outcomes cover both subject specific and generic (i.e. transferable) learning outcomes				
1. Programme Learning Outcomes	1.3 The programme learning outcomes clearly reflect the requirements of the stakeholders				
2.Programme Content, Structure and Specification	2.1 The information in the programme specification is comprehensive and up-to-date				
2.Programme Content, Structure and	2.2 The information in the course specification is				

<b>Standard</b>	<b>Indicator</b>	<b>Strength</b>	<b>% Evidence</b>	<b>Areas for improvement</b>	<b>Score</b>
Specification	comprehensive and up-to-date				
2.Programme Content, Structure and Specification	2.3 The programme and course specifications are communicated and made available to the stakeholders				
2.Programme Content, Structure and Specification	2.4 The curriculum is designed based on constructive alignment with the expected learning outcomes				
2.Programme Content, Structure and Specification	2.5 The contribution made by each course to achieve the expected learning outcomes is clear				
2.Programme Content, Structure and Specification	2.6 The curriculum is logically structured, sequenced, integrated and up-to-date				
3.Teaching and Learning Approach	3.1 The educational philosophy is well articulated and				

Standard	Indicator	Strength	% Evidence	Areas for improvement	Score
	communicated to all stakeholders				
3. Teaching and Learning Approach	3.2 Teaching and learning activities are constructively aligned to the achievement of the expected learning outcomes				
3. Teaching and Learning Approach	3.3 Teaching and learning activities enhance life-long learning				
3. Teaching and Learning Approach	3.4 The percentage of full-time faculty members is sufficiently large to insure effective instruction and guidance of students				
4. Student Assessment and Service	4.1 The student assessment is constructively aligned to the achievement of the expected learning outcomes				

<b>Standard</b>	<b>Indicator</b>	<b>Strength</b>	<b>% Evidence</b>	<b>Areas for improvement</b>	<b>Score</b>
4.Student Assessment and Service	4.2 The student assessments including timelines, methods, regulations, weight distribution, rubrics and grading are explicit and communicated to students				
4.Student Assessment and Service	4.3 Methods including assessment rubrics and marking schemes are used to ensure validity, reliability and fairness of student assessment				
4.Student Assessment and Service	4.4 Feedback of student assessment is timely and helps to improve learning				
4.Student Assessment and Service	4.5 Students have ready access to appeal procedure				
4.Student Assessment and Service	4.6 The student intake policy and admission criteria are defined,				

Standard	Indicator	Strength	% Evidence	Areas for improvement	Score
	communicated, published, and up-to-date				
4.Student Assessment and Service	4.7 The methods and criteria for the selection of students are determined and evaluated				
4.Student Assessment and Service	4.8 Students are assisted in career planning and development, and job placement and follow-up activities				
4.Student Assessment and Service	4.9 Counselling services, health services and health education programs consistent with the needs of the students are provided				
5. Facilities and Infrastructure	5.1 The teaching and learning facilities and equipment (lecture halls, classrooms, project rooms, etc.) are adequate and				

Standard	Indicator	Strength	% Evidence	Areas for improvement	Score
	updated to support education and research				
5. Facilities and Infrastructure	5.2 The library and its resources are adequate and updated to support education and research				
5. Facilities and Infrastructure	5.3 The laboratories and equipment are adequate and updated to support education and research				
5. Facilities and Infrastructure	5.4 The IT facilities including e-learning infrastructure are adequate and updated to support education and research				
5. Facilities and Infrastructure	5.5 The standards for environment, health and safety; and access for people with special needs are defined and implemented				
6. Output	6.1 The pass rates and dropout rates are				

Standard	Indicator	Strength	% Evidence	Areas for improvement	Score
	established, monitored and benchmarked for improvement				
6. Output	6.2 The average time to graduate is established, monitored and benchmarked for improvement				
6. Output	6.3 Employability of graduates is established, monitored and benchmarked for improvement				
6. Output	6.4 The types and quantity of research activities by students are established, monitored and benchmarked for improvement				
6. Output	6.5 The satisfaction levels of stakeholders are established, monitored and				

Standard	Indicator	Strength	% Evidence	Areas for improvement	Score
	benchmarked for improvement				
7. Internal Quality Improvement	7.1 Quality Assurance System (QAS) exists within the institution with clearly defined guidelines and procedures				
7. Internal Quality Improvement	7.2 Stakeholders' needs and feedback serve as input to curriculum design and development				
7. Internal Quality Improvement	7.3 The curriculum design and development process is established and subjected to evaluation and enhancement				
7. Internal Quality Improvement	7.4 The teaching and learning processes and student assessment are continuously reviewed and evaluated to ensure their relevance and alignment				

<b>Standard</b>	<b>Indicator</b>	<b>Strength</b>	<b>% Evidence</b>	<b>Areas for improvement</b>	<b>Score</b>
7. Internal Quality Improvement	7.5 Research output is used to enhance teaching and learning				
7. Internal Quality Improvement	7.6 Quality of support services and facilities (at the library, laboratory, IT facility and student services) is subjected to evaluation and enhancement				
7. Internal Quality Improvement	7.7 Quality assurance is a systematic and cooperative process across all levels with involvement of staff, students, and other stakeholders				
7. Internal Quality Improvement	7.8 Quality assurance system is promulgated and supported by the top management of institutions to ensure effective implementation and sustainability				
<b>Overall Verdict</b>					

## Appendix C: Template of Data Collection for IQ Assessment at Programme Level

(Name of University) \_\_\_\_\_

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
<b>Standard 1: Programme Learning Outcomes</b>					
1.1 The programme learning outcomes have been clearly formulated and aligned with the vision and mission of the university					
1.2 The programme learning outcomes cover both subject specific and generic (i.e. transferable) learning outcomes					
1.3 The programme learning outcomes clearly reflect the requirements of the stakeholders					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
<b>Standard 2: Programme Content, Structure and Specification</b>					
2.1 The information in the programme specification is comprehensive and up-to-date					
2.2 The information in the course specification is comprehensive and up-to-date					
2.3 The programme and course specifications are communicated and made available to the stakeholders					
2.4 The curriculum is designed based on constructive alignment with the expected learning outcomes					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
2.5 The contribution made by each course to achieve the expected learning outcomes is clear					
2.6 The curriculum is logically structured, sequenced, integrated and up-to-date					
<b>Standard 3: Teaching and Learning approach</b>					
3.1 The educational philosophy is well articulated and communicated to all stakeholders					
Teaching and learning activities are constructively aligned to the achievement of the expected learning outcomes					
Teaching and learning activities					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
enhance life-long learning					
3.4 The percentage of full-time faculty members is sufficiently large to insure effective instruction and guidance of students					
<b>Standard 4: Student Assessment and Service</b>					
4.1 The student assessment is constructively aligned to the achievement of the expected learning outcomes					
4.2 The student assessments including timelines, methods, regulations, weight distribution, rubrics and grading are explicit and communicated to students					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
4.3 Methods including assessment rubrics and marking schemes are used to ensure validity, reliability and fairness of student assessment					
4.4 Feedback of student assessment is timely and helps to improve learning					
4.5 Students have ready access to appeal procedure					
4.6 The student intake policy and admission criteria are defined, communicated, published, and up-to-date					
4.7 The methods and criteria for the selection of students					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
are determined and evaluated					
4.8 Students are assisted in career planning and development, and job placement and follow-up activities					
4.9 Counselling services, health services and health education programs consistent with the needs of the students are provided					
<b>Standard 5: Facility and Infrastructure</b>					
5.1 The teaching and learning facilities and equipment (lecture halls, classrooms, project rooms, etc.) are adequate and updated to support education and research					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
5.2 The library and its resources are adequate and updated to support education and research					
5.3 The laboratories and equipment are adequate and updated to support education and research					
5.4 The IT facilities including e-learning infrastructure are adequate and updated to support education and research					
5.5 The standards for environment, health and safety; and access for people with special needs are defined and implemented					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
<b>Standard 6: Output</b>					
6.1 The pass rates and dropout rates are established, monitored and benchmarked for improvement					
6.2 The average time to graduate is established, monitored and benchmarked for improvement					
6.3 Employability of graduates is established, monitored and benchmarked for improvement					
6.4 The types and quantity of research activities by students are established, monitored and					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
benchmarked for improvement					
6.5 The satisfaction levels of stakeholders are established, monitored and benchmarked for improvement					
<b>Standard 7: Internal Quality Improvement</b>					
7.1 Quality Assurance System (QAS) exists within the institution with clearly defined guidelines and procedures					
7.2 Stakeholders' needs and feedback serve as input to curriculum design and development					
7.3 The curriculum design and development process is established and					

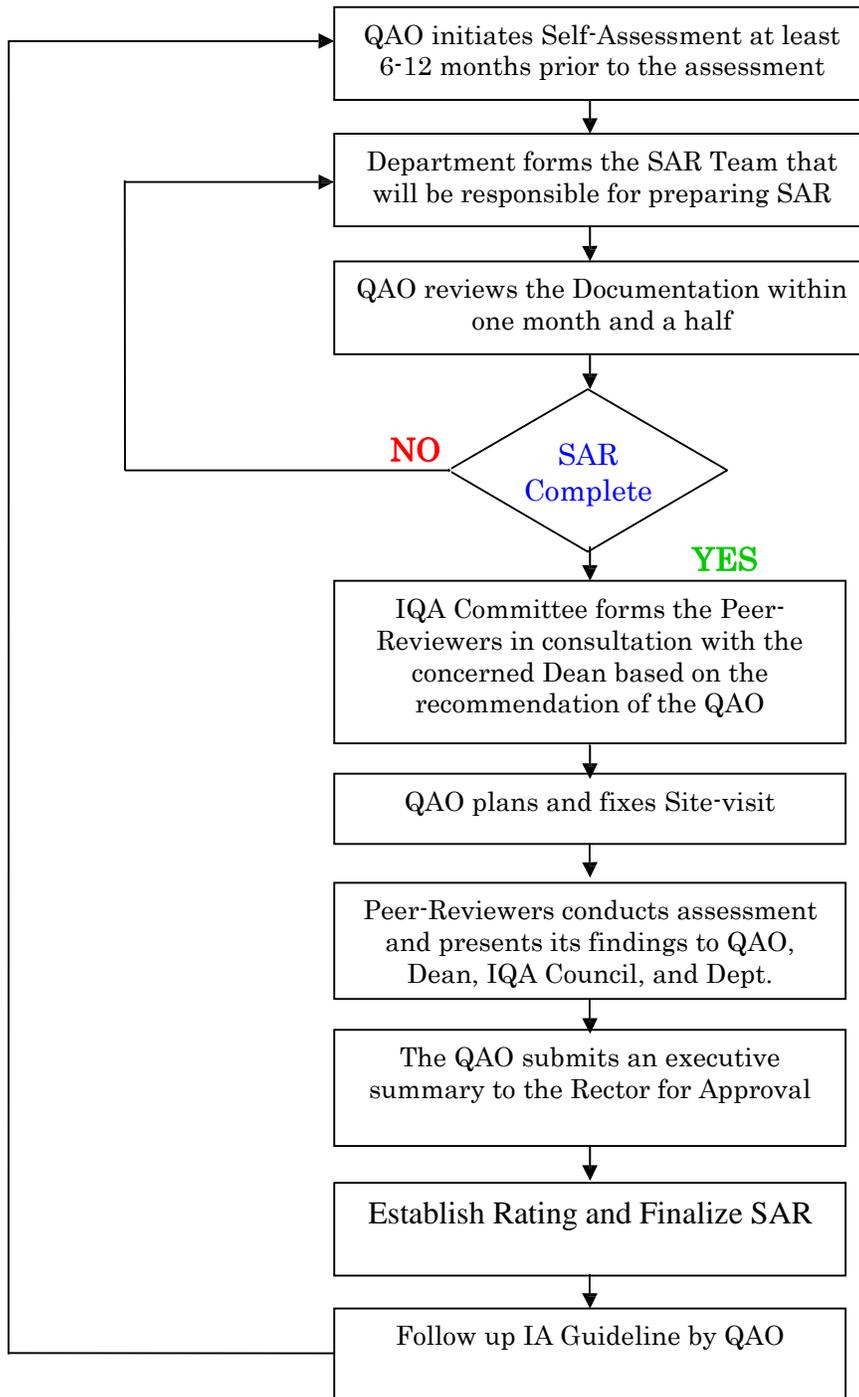
Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
subjected to evaluation and enhancement					
7.4 The teaching and learning processes and student assessment are continuously reviewed and evaluated to ensure their relevance and alignment					
7.5 Research output is used to enhance teaching and learning					
7.6 Quality of support services and facilities (at the library, laboratory, IT facility and student services) is subjected to evaluation and enhancement					

Indicator	Information Required	Where/Who involved	Method for collecting information	Percentage of Evidence Received	Analytical Procedures
7.7 Quality assurance is a systematic and cooperative process across all levels with involvement of staff, students, and other stakeholders					
7.8 Quality assurance system is promulgated and supported by the top management of institutions to ensure effective implementation and sustainability					

**Name and Signature of Assessors:**

- ( 1 )..... Signature.....
- ( 2 )..... Signature.....
- ( 3 )..... Signature.....
- ( 4 )..... Signature.....

## Appendix D: Self-Assessment Procedure at Program Level



## **Appendix E: Code of Conduct for IQ Assessment**

### **Confidentiality and discretion**

1. Safeguard all information made available to you, especially communication containing details of a personal nature, which must be kept in strictest confidence.
2. Exercise maximum discretion with regard to all matters relating to the review, in particular in disclosing to anyone external to the panel any confidential information acquired during the review process.
3. Do not disclose any information concerning the evaluation procedure without the written approval from the QAO of the university or IQA Committee.

### **Conflict of interest**

1. Act with strict impartiality and objectivity.
2. Identify and declare any real or apparent conflict between your personal interests, whether direct or indirect, and those of the university stakeholders.
3. In the case of an actual conflict notify QAO in writing and do not participate further in any processes related to the review in question.
4. Inform QAO/IQA Committee immediately of any changes in or additions to the interests already disclosed which occur during the term of your review assignment.
5. In case of doubt as to whether a conflict exists, refer the matter to QAO for guidance.

### **Integrity**

1. Be honest and act with propriety and accountability when conducting any review.
2. Do not offer or accept any unauthorized reward. If you are experiencing or witnessing such an offer, report the incident to the QAO/IQA Committee immediately.
3. All IQA assessors or Peer-Reviewers must refrain from any form of review misconduct.
4. Report to the QAO a breach of this Code in writing, when you know or suspect that a review panel member has engaged in misconduct.

## Reference

ACC (Accreditation Committee of Cambodia) (2015). 'Standards'. In: *National Standards for Institutional Accreditation*

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