SUPSI

Quality Assurance Framework (QAF)[1]

Quality Assurance System (QAS) SUPSI

[1] To facilitate the reading of this document, the male gender is used to designate persons and functions regardless of gender.

In the case of conflicting meanings between language versions, the Italian version prevails.

1 Objectives of the QAF

The QAF defines the structure and organisation of the Quality Assurance System (QAS), in accordance with the Quality Policy and Strategy (QPS).

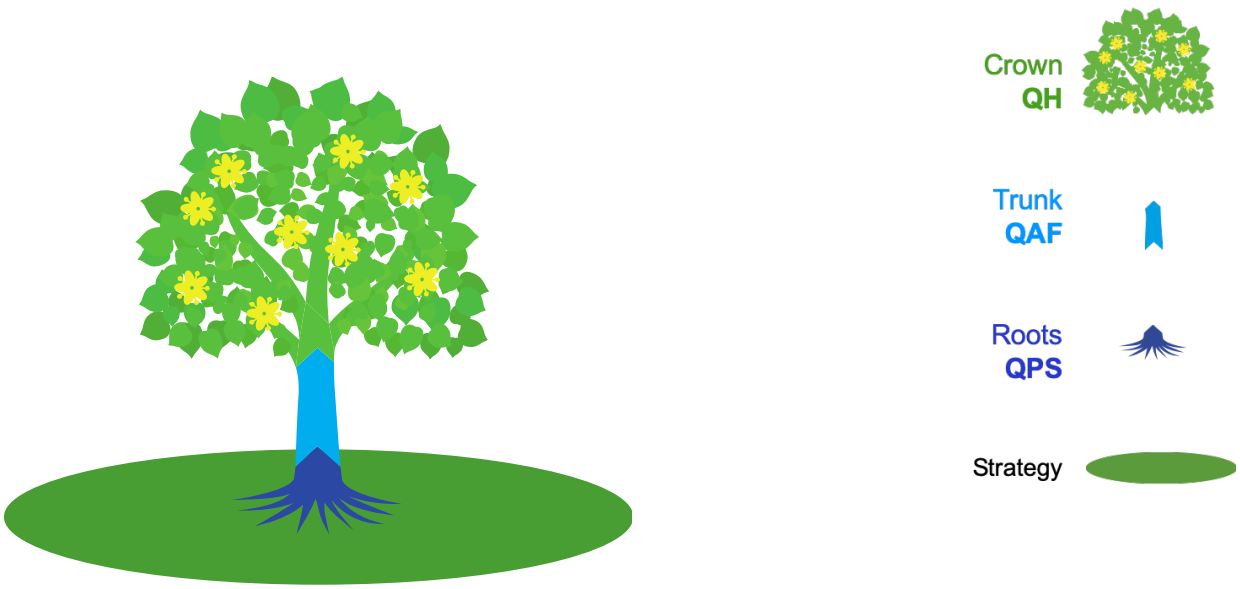
Structure describes the underlying criteria provided by the QAS to foster continuous improvement of key processes with reference to the approach of the SUPSI Quality Handbook (SUPSI QH) and its variants for Affiliated Schools (AS) that consider their specificities:

- Accademia Teatro Dimitri Quality Handbook– ATD QH
- Conservatorio della Svizzera italiana, University of Music Quality Handbook – CSI-SUM QH
- Fernfachhochschule Schweiz Quality Handbook – FFHS QH
- SUPSI Landquart Quality Handbook– SUPSI LANDQUART QH.

At the same time, the procedures for participation and preparation of the biennial QAS Reports are described, as well as those for management and publication of relevant QAS documents to ensure adequate information consistent with key federal and cantonal laws.

Organisation describes the *Matrix of competences and responsibilities in quality* (Quality Matrix), with the detail of the responsibilities of all the bodies involved in the QAS management.

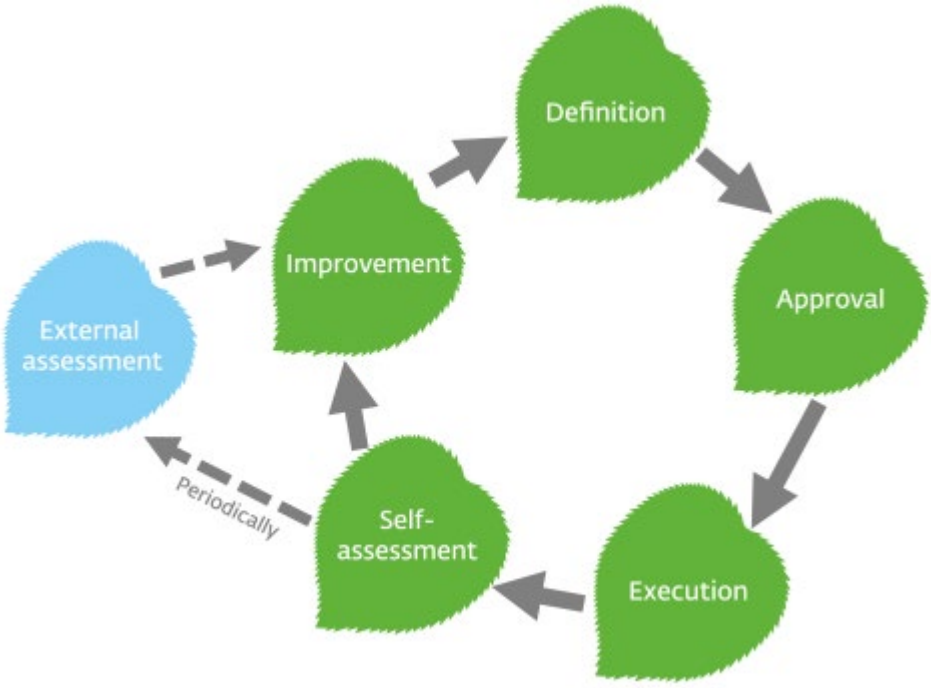
Employees, students, alumni, external peers are regularly involved in different QAS practices in order to contribute to the improvement of our activities.



2 Structure

The QAF is based on known quality-assurance methods, such as:

- the modelling of our organisation through a set of selected key processes defined and integrated within the QH
- the development of the quality for the entire SUPSI through the adoption of a continuous improvement cycle (PDCA or Deming cycle[2]) in four phases for each individual process:
  1) definition and approval (Plan)
  2) execution (Do)
  3) self-assessment (Check I)
  4) improvement (Act)
- the periodic external assessment (Check II) through a critical comparison of quality assurance methods with external peers.



[2] The Deming cycle (or PDCA cycle, an acronym from the English Plan-Do-Check-Act) is a model used for continuous quality, process and product control and improvement. The model, theorized by W. E. Deming, is based on four phases (P-D-C-A) and serves to promote a quality culture aimed at continuous process improvement and optimal use of resources.

2.1 Processes and Quality Handbooks

The QAF consists of 22 key interlinked processes, divided into 4 operating contexts. An AS may include an additional process to the key processes identified if they are considered relevant to its quality. The processes are linked to the quality standards applicable to institutional accreditation and implement the requirements of the Federal Act on the Funding and Coordination of the Higher Education Sector (Higher Education Funding and Coordination, HEdA). The requirements of the Swiss Health Professions Act (SHPA) must be considered for certain programs of study in health care.

Operating context	***Key processes***
1. Strategy	P1 – Strategy
2. Institutional mandates: education, research and service performance	P2 – Evaluation of study programmes
	P3 – Student learning experience
	P4 – Student evaluation of teaching
	P5 – Development of faculty skills in undergraduate didactics
	P6 – Continuous training management system
	P7 – Research projects and provision of services
	P8 – Evaluation of research and service units
	P9 – Intellectual Property
3. Governance and management	P10 – Participation
	P11 – Regulations
	P12 – Monitoring
	P13 – Sustainability and equal opportunity
	P14 – Risk management
	P15 – Internal audit
4. Resources and stakeholders	P16 – Employees
	P17 – Finance and controlling
	P18 – Information technology management
	P19 – Real Estate and Facility Management
	P20 – Student and employee Mobility
	P21 – Student life cycle basic training
	P22 – Organisational communication

The specific reporting of each key process is to be considered as an integral part of the process itself and is outlined in the QHs.

2.2 Quality reports and quality monitoring

To ensure adequate participation and reporting of the necessary evidence on the continuous development of the QAS, **biannual QAS Reports** are established that also allow for the involvement of employees, based on the Quality Matrix, in the evaluation of the status of implementation of the QAS and its processes. The evaluation takes into consideration the development prospects of the Four-Year Strategy, the areas for improvement determined in the Self-Assessment Report (SAR) and any charges or recommendations of the Panel of Experts within the framework of institutional accreditation.

The biennial QAS Report integrates the overall implementation status of the QAS and its processes, including also the specifics of the AS. The four biennial QAS Reports of the AS (ATD, CSI-SUM, FFHS, SUPSI Landquart) supplement the general aspects of QAS with their own assessment of the status of implementation within their AS.

The Self-Assessment Report (SAR) is scheduled every 7 years as part of the institutional accreditation procedure, which involves self-assessment according to the standards defined by HEdA and involves staff, students, alumni and other stakeholders at various levels.

Improvement measures are managed and monitored periodically through the *Sharepoint* applicative that ensures that quality development measures are collected, monitored and made available on an integrated information system.

2.3 Documents and their implementation

We are committed to making relevant QAS information and documents available to ensure adequate information about activities, consistent with key federal and cantonal transparency laws.
QAS documents are posted on the external website, or on the Collaborators Portal (SUPSI's intranet portal to which only employees have access) and the Student Portal. It is possible to consult the QAS documents that are published and obtain information on their content from SUPSI Management.
The use of the documents is subject to intellectual property legislation. SUPSI Management approves guidelines on publication criteria.

QAS reference documents are archived and managed centrally via an appropriate document repository (Docuware®). QAS reference documents pertaining to AS are stored and managed locally, in a centralized way. Their retrievability is ensured in case of a request by the Quality Service (QS).

Reference documents and reports for each process are specified in the QMs and are considered parts of the QAS.

3 Organisation

The tasks and responsibilities in the area of quality are consistent with the general organisation of SUPSI as defined in the SUPSI by-laws and are spread over several levels. The organisation with the tasks and responsibilities are schematically represented in the *Quality Matrix*, whose approval and management are responsibility of the General Director, in collaboration with the members of the SUPSI management.

SUPSI Board and AS Boards							
SUPSI Management							
Quality Coordination Commission	**DACD**	**DEASS**	**DFA**	**DTI**	**ATD**	**CSI-SUM**	**FFHS**
	QC DACD	**QC DEASS**	**QC DFA**	**QC DTI**	**QC ATD**	**QC SUM**	**QC FFHS**
P1 - Strategy PM_1	UPC_{P1}	UPC_{P1}	UPC_{P1}	UPC_{P1}	UPC_{P1}	UPC_{P1}	UPC_{P1}
P2 - Evaluation of study programmes PM_2	UPC_{P2}	UPC_{P2}	UPC_{P2}	UPC_{P2}	UPC_{P2}	UPC_{P2}	UPC_{P2}
… PM_3	…						

The supervision and coordination of the QAS are guaranteed globally by the Quality Coordination Commission (QCC), managed by the General Director, which brings together all the process managers (PMs), QS staff as well as the quality contact persons of the AS. Other members may attend QCC meetings with the consent of the General Director.

At the Department (DEP) / AS level, supervision and coordination are guaranteed by the Quality Commission (QC), managed by the Director of the DEP / AS and formed by the Process coordinators of the specific unit.

The nominative version of the *Quality Matrix* is constantly updated and available for all collaborators.

The priority tasks of the instances involved in the QMS are described below.

3.1 Strategic tasks

The following strategic tasks fall within the remit of the SUPSI Board and the Boards of AS. For the latter, the tasks refer to the area of competence of the AS.

Task	***SUPSI Board****	***AS Board***
Approve the QPS, in line with the SUPSI four-year strategy.	x	–
Approve the QAF, as recommended by the SUPSI management.	x	–
Support the measures proposed by the SUPSI management aimed at the development of a culture of quality.	x	x
Approve, upon the proposal by SUPSI Management, the level of AS harmonization, consistent with affiliation contracts.	x	x
Approve the SAR and the position statement following the AAQ accreditation proposal.	x	x

Approve the improvement measures implemented as a result of the decision of the Swiss Accreditation Council.	x	x
Approve the biennial QAS Report and in particularly the improvement measures under its responsibility.	x	x
Approve the two-yearly report on the QAS with the related action plan.	x	x

**The SUPSI Board may delegate some of its tasks to the Management and Governance Commission.*

3.2 Operational tasks

3.2.1 General Director

The General Director:

- is responsible for the implementation of the QAS in all its aspects,
- presides over the work of the SUPSI management and the QCC,
- is responsible for the management of the *Quality Matrix*, in collaboration with the members of the SUPSI management,
- is accountable for coordinating the quality development for the processes under his responsibility,
- is responsible for implementing the measures to ensure the resolution of any non-conformities highlighted in the management of the QMS,
- is responsible for categorizing the processes with respect to the SUPSI QH in accordance with the affiliation contracts
- is responsible for approving the inclusion or exclusion of a sub-process in the QAS,
- stimulates the development of internal communication on the QAS, which is the responsibility of the specific PR.

In order to carry out these tasks, the General Director is supported by the Quality Service.

3.2.2 SUPSI Management

The SUPSI Management:

- supports the General Director in the implementation of the QAS,
- proposes to the SUPSI Board the level of harmonisation for Affiliated Schools based on the affiliation contracts,
- gives notice of biennial QAS reports for approval by the SUPSI Board,
- approves the contents of the QHs and resolves any differences in their application within the units,
- implements any improvement measures adopted by the SUPSI Board, also in the wake of the Swiss Accreditation Council's decision,
- implements the measures under its responsibility described in the biennial QAS Reports,
- actively supports internal communication on the QAS.

The AS directors approve the contents of the QH of their AS and chair their respective Quality Commissions (QC). The DEP directors chair their respective QC. The Directors of mandate, the Administrative Director and the Head of the General management services are members of the QCC.

3.2.3 Members of SUPSI Management

- The Mandate Directors, the Administrative Director and the Head of Services of the General Directorate are responsible for coordinating quality development for their respective processes. They are members of the CCQ and in the fulfillment of their duties they make use of the process managers (PM) and process coordinators of the specific unit (PC).

- DEP Directors are responsible for coordinating quality development for their Departments. The DEP Directors in fulfilling their duties make use of their quality committees.

- AS Directors are responsible for coordinating quality development for their AS with particular reference to their QH. In carrying out their duties, they make use of their quality committees, which they coordinate with the support of the quality delegates.

3.2.4 Quality Coordination Commission and Quality Commission

The following coordination tasks are the responsibility of the QCC, respectively the QC of DEP/AS. For the latter, the tasks refer to the area of responsibility of their DEP/AS, and the manner in which they are carried out is the responsibility of the respective Director.

They are coordinating bodies, respectively:
- the QCC, at the system level that integrates the process managers (PM), QS staff as well as the quality contact persons of the AS. Other members may attend QCC meetings with the consent of the General Director.
- the QC, at DEP/AS level, which includes all the process coordinators of the respective units (PC).

Task	***QCC***	***QC***
Coordinates and harmonises QAS processes to ensure an overall view.	X	–
Defines the criteria for the management of individual processes and their networks, ensuring its implementation through the PMs.	X	–
Responsible for preparing the two-yearly reports on the QAS, adequately involving those engaged in the respective processes.	X	–
Defines the criteria for the QAS's document management and ensures that it is processed.	X	–
Proposes and keeps updated the methods and instruments adopted by the QAS.	X	x
Coordinates and harmonizes the transversal topics of the QAS, with special reference to participation, sustainability and equal opportunity.	X	-
Monitors the continuous quality improvement actions also taking into consideration the aspects that emerged from the institutional accreditation procedure.	X	x
Coordinates the internal communication of the QAS.	X	x

3.2.5 Process managers (PM)

PMs:
- are responsible for the development and implementation of quality for the processes under their responsibility based on what is defined in the QAS,
- are members of SUPSI Management or Service Managers and make use of the PC in their tasks, in compliance with the affiliation contracts as far as the AS are concerned,
- are members of the QCC and participate in coordination meetings,
- conduct periodic evaluation of their own process,
- ensure a review every 2 years for their own process as part of the biennial QAS Reports and the implementation of improvement measures,
- are responsible for the implementation of measures to ensure the resolution of any non-conformities highlighted in the handling of their processes,

- stimulate the development of communication for their own processes.

3.2.6 Quality Service

The Quality Service ensures the following tasks:

- supports the General Director in the performance of his/her duties,
- ensures the form and harmonisation of the contents of QH and biennial QAS Reports,
- collaborates with management members and PM in the defining and updating processes as well as related improvement aspects,
- is responsible for the management of the QAS documentation, in close collaboration with the PM,
- ensures quality control,
- coordinates the QCC meetings,
- collaborates on internal QAS communication.

The QS is supported by the quality delegates with respect to the work in AS.

3.2.7 Employees, students, and Alumni

Employees, students and Alumni are regularly involved in the different QAS practices. In particular, they actively participate according to the *P10 - Participation* process, in the following areas:

- the relevant colleges, when they are consulted on quality issues,
- the procedures that are described in the individual QAS processes,
- meetings for the preparation of the SAR within the context of institutional accreditation.

Consistent with the provisions of the *Charter of participation,* the *Ethical Code*, the *SUPSI Educational Agreement* and the *Sustainability Chart,* employees and students are aware of their individual responsibility for the effective adoption of the principles and operating procedures of all QAS processes.

3.2.8 External peers

The QAS with its framework is open to comparison with peers from other schools or experts who are regularly involved in the process analysis, as described in the QH.

Alberto Petruzzella
The President of the Board

Franco Gervasoni
The General Director

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