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Segment	Preparation of the Report
Торіс	5.3 Report Scope and Style

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1. Introduction



The scope and structure of an accreditation, evaluation or audit report (hereafter, `review' report unless otherwise specified) depends on factors such as the purpose of the review and the implicit or explicit conceptual framework used in the EQA process.

The overall structure of the report is, however, mostly the same for all reports. This topic describes the different components of a report and discusses, using examples from actual reports, how the content for each component is organised. An extended excerpt from a fictitious report is also included to demonstrate how text should reflect the conceptual framework of the review process in this case, a set of accreditation standards.

Objectives: Report Scope and Style

Upon completion of this topic, you should be able to

- discuss the relationship between the purpose of review and the scope of the report
- describe the different components of a review report and how it may be structured

2. Scope of Reports

Some agencies have adopted review report templates to guide report writers. The advantage of having a standard template is that it ensures essential information is covered and there is consistency in all reports produced by the agency over a period of time. This is particularly useful for agencies undergoing change and employing new staff or for situations where the panel chair/members write the report without assistance from an agency staff member. A number of examples of approaches to reports by different agencies follows.

The first example is of an accreditation report. The accreditation outcomes from the US-based Accrediting Commission of Career Schools and Colleges of Technology (ACCSCT) are recognised by the US federal government for federal funding purposes. The ACCSCT is the gatekeeper of federal money and conducts institutional accreditation to determine whether the institutions concerned are eligible for access to federal Student Financial Aid. It also needs to ensure institutions' compliance with

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government requirements in order to facilitate student protection. Therefore, the ACCSCT adopts accreditation standards aligned with the compliance requirements of federal (and state) government as well as its own agency requirements. Consequently, the agency's reports have to state the ACCSCT's decision as to whether individual institutions are in compliance.

The report prepared by the review team is known as the Team Summary Report. It is primarily compiled by the Team Leader but with the help of the Commission staff member assigned to the accreditation exercise as the Coordinator. The Team Summary Report must address the issues below and have a fact-finding focus:

- Assessment of entire institutional operations;
- Assessment of focused areas (i.e. issues related to complaints, noncompliance or issues requested to be looked into by the US Department of Education);
- Assessment of continued items of concern.

The ACCSCT report presents lists of issues identified and citation of any corresponding standards that are found not in compliance. The report is normally 10 – 15 pages long covering background information and the Team's findings and observations. Background information comprises the following:

- The purpose and date of the on-site evaluation;
- Institutional information (name, name of Director, ownership, branch, etc.);
- Student population (enrolment, degree, distance education);
- Program information (award and student outcomes, i.e. graduation and employment rates);
- Cohort attrition rate (most recent three year period);
- Accreditation/substantive change history (as appropriate);
- Student survey results.

For the purpose of the Team Summary Report, the Team Leader completes the Team Leader Evaluation Form and drafts observations, which are incorporated by the Coordinator into the report. Other team members also complete evaluation forms. The accreditation Coordinator is responsible for compiling the background information.

The structure of the reports compiled by ACCSCT is given below:

(i)

Report Basic Structure and the Essential Elements - ACCSCT

Report Basic Structure and the Essential Elements - ACCSCT

The structure of the report must be logical, concise and comprehensible. The report should contain all information necessary to justify its conclusions. The message to the institution must be full and unambiguous, yet retaining some subtlety for civility and style. Meanwhile, the report must not be overdone as to become so technical or loaded that only insiders will be able to understand.

The structure of the report normally comprises the following components:

- 1. Cover Page
- 2. Table of Contents
- 3. Executive Summary
- 4. Main Body (Evidence, Judgement by review criteria and standards)
- 5. The Quality Assurance Agency's Decision / Overall Comments

Part I –Cover Page

The cover page typically includes the following:

- Type of report—e.g., Accreditation, Audit or Evaluation Report
- Name of the institution reviewed
- Title of review—e.g., Evaluation of Universities of Technology for the Cycle 2006 – 07
- Month & year of the conduct or site visit of the exercise or of issuance of the report—e.g., November 2007
- Summary of the review decision if applicable, i.e. approval or non-approval

Part II – Executive Summary

The Executive Summary is essential for the institution to know at a glance what the quality assurance agency found in relation to the institution/program being reviewed and how it has arrived at the decisions and recommendations. Concise as it should be, the Executive Summary must be sufficient for its purpose (i.e. readable on its own). For this, the writer should take care not to venture into detailed discussions by area. Rather, the summary should be in the form of a 'shopping list', highlighting the legal or agency basis for the review exercise, the outcome of the exercise which may include conditions /recommendations / commendations / confidence / affirmations as the case requires.

Part III – Main Body (Evidence, Judgement by review criteria and standards)

The main body of the report in most systems details the evidence presented by the institution under review, the observations made and the judgements made by the Panel, having regards to the review criteria and standards as stipulated by the quality assurance agency in respective audit / accreditation / evaluation manuals. This forms the foundation for the decision of the quality assurance agency. As such, key areas of concerns / commendations identified upon reading the self-evaluative document submitted by the institution for the purpose of the review and those discussed during the site visit should be the focal point of the report. (AACST)

A second example comes from the Irish Universities Quality Board which conducts reviews through the Institutional Review of Irish Universities (IRIU). The agency publishes two reports: a full report and a summary of the report directed at readers outside the sector.

Structure of Review Reports – IRIU

The review report will be structured as follows:

Section 1: Introduction and Context

- Summary information on the university's size, mission, strategic aims and directions
- A short statement of contextual factors at the time of the review including key recent developments within the university
- A short statement on the university's approach to quality assurance and enhancement

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Section 2: Methodology used to Prepare the Self-Assessment Report

- A summary of the IRIU process
- A commentary on the ISAR and the way the university has engaged with the IRIU process
- Key features of the conduct of the ISAR development process and the development team including information on the breakdown of membership of a ISAR team, and the methods employed by the university for securing widespread ownership of the ISAR by staff and students.

Section 3: Quality Assurance/Accountability

The review team's findings and recommendations on the university's procedures for ensuring effectiveness in:

- Addressing the outcomes of the last external review
- Its core activities (teaching, learning, research and services)
- Its responses to the findings and recommendations of internal quality reviews
- Its strategic approach to self-evaluation, including the use made of external reference points
- How the learning outcomes are achieved for programmes that have been placed in the National Framework of Qualifications (including, for example, internal review and external examiner processes)
- The quality of the educational programmes leading to awards made by the university on behalf of linked and recognised colleges (where appropriate)
- The management of information to inform the operation and evaluation of its quality monitoring and review activities
- Managing public information about quality, including the linkage with internal and external review activities

Section 4: Quality Enhancement

The review team's findings and recommendations on the university's procedures for ensuring effectiveness in:

- Supporting existing or proposed practices and/or remedying any shortcomings the university has identified via quality assurance processes
- Developing, encouraging and rewarding staff that support the student learning experience
- The strategic enhancement theme that the university has identified for discussion during the review visit (optional).

Section 5: Compliance with Section 35 of the Universities Act, 1997 and Consistency with the Part 1 ESG

The review team's findings and recommendations on the university's procedures for ensuring effectiveness in:

- Fulfilling the statutory requirements
- Its internal practices against the Part 1 standards and guidelines of the ESG
- [causes of concern If the review team has identified what it considers to be significant causes of concern in the university's compliance with its statutory requirements or its consistency with the Part 1 ESG, it should state the nature and extent of its concerns here]

Section 6: Conclusion

The review team will provide concluding findings and recommendations on the university's procedures and practices for ensuring effectiveness in relation to:

• Fulfilment of the statutory requirements which includes the: o Regular

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evaluation of each department/faculty and any service provided by the university by persons competent to make national and international comparisons on the quality of teaching and research and the provision of other services at university level o Assessment by those, including students, availing of the teaching, research and other services provided by the university o Publication of findings arising out of the application of those procedures o Implementation of any findings arising out of the evaluation, having regard to the resources available to the university

- Consistency with the Part 1 Standards of the ESG
- Operating in line with national, European and international best practice
- Good practice in the management of quality assurance and enhancement
- Further developments required in relation to the management of quality assurance and enhancement

Source: IRIU Handbook, 2009<u>http://www.iuqb.ie/info/iriu.aspx</u>.

3. Style of Reports

To ensure the review report is useful for the institution the main points and findings, as identified by the panel, should be stated as clearly as possible. It would be difficult for an institution to follow-up on a report which is unclear or where the conclusions are open for interpretation. Furthermore, in the case of accreditation reports that require fulfilment of specific conditions for compliance with the requirements, it is essential that there is clarity. In jurisdictions where the full report is made public, it is important, however, to consider how the presentation of sensitive issues, in particular issues pertaining to staff and resources, are presented. Documents expressing negative views on aspects of the institution's work will be subject to close and critical examination. Nonetheless, it is equally important that all statements are made in a clear, concise and unambiguous language.

As the focus of audit reports is about quality assurance, and in most cases quality improvement, it is relevant for the agency to consider the balance between recommendations for improvement and commendations for practices that should be maintained. Furthermore, the agency should have a policy on the type and style of the recommendations and commendations. It is necessary to agree on the balance between prescriptive recommendations for improvement on the one end of the spectrum to recommendations that are very broadly phrased to the point where it may not be clear to the institution what action the panel expects it to take. To illustrate the point, here is an example of a recommendation for action that may be too loosely defined for establishing at a later stage if there is compliance in substance to the recommendation:

The institution is required to conduct a mid-term self review of the program after two years and submit a detailed report by 30 September 2007. The review should also report on the implementation of the new major in the program andthe quality assurance measures in place to ensure quality delivery.

In this example, the question remains as to the level of details required by the QA agency and the scope of the mid-term self review. Without over-guiding the institution, or being intrusive and telling the HEI how it should act, the recommendation for action could be revised to indicate, for example, that the self review should reflect operation of the internal quality assurance principles, criteria and processes as reported to the external quality agency during the review exercise.

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The agency will find it convenient to develop a house style for all reports drafted by the agency. As mentioned above, this will ensure a consistency of approach over a considerable period of time. The agency should consider the preparation of a style book similar to those published by major newspapers to aid staff or reviewers in drafting reports.

It is sometimes said that full publication of reports can lead to overcautious drafting and a tendency to underplay problems. The corollary of this is that full publication encourages greater care in the preparation of reports. The agency generally, and the visiting panel in particular, should report significant findings whether the report is published or not. In fairness to the institution, and being aware that decisions may be appealed, great care should be taken in drafting the reports. The surest discipline for the person drafting the report is awareness that they might read the document on the front page of the morning newspaper.

Whether or not a report is published, care is taken to ensure the report does not reveal the identity of interviewees or be written in such a way that the identity of an individual can be deduced. For instance, in a program validation where there is only one teaching staff member, comment about the teaching staff's quality of delivery could be seen as comment on an individual. A stylistic strategy may be required to turn the focus of the report onto the 'staffing mechanism to ensure quality delivery' and away from an individual's teaching competency.

The presentation of the report should aim at striking a balance between reference to evidence, the panel's observations, analysis, and hence judgments against the stipulated criteria and standards to lead to a logical conclusion at the end of the report.

An example that demonstrates the use of evidence along with a team's observations and judgments is given below. It was compiled by the audit team from the QAA (UK) in relation to the Canterbury Christ Church University College Institutional Audit Report, May 2005.

Example of Use of Evidence and Observation in Forming a Judgment - QAA

4. Periodic review of programs occurs normally ter five years of operation. The periodic review rocess of a program includes the production of	Evidence presented by the institution

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A second example of a well-structured argument with appropriate reference to supporting evidence follows:

Example of a Well-structured Argument

Example of a Well-structured Argument	
" <u>Overall Institutional and Discipline</u> <u>Management</u> An operator seeking accreditation status must have appropriate, effective and sufficient management arrangements at both the institutional and the discipline level so as to manage existing operations and to respond to development and changes.	Accreditation standard
The Panels noted that the institution with a full-time student body capped at xxx at first degree and sub-degree levels and full-time academic staff of around xxx is a small organisation. Inevitably, the academic staff members of a small organisation are highly likely to shoulder responsibilities beyond and above their academic duties, and be involved in academic and management decisions across various institutional and management levels. This is observed to be the case in the institution. The overlapping duties / roles of the full-time academic staff across institutional and management levels may make it more challenging for the institution to ensure checks and balances in decision-making and monitoring.	Panel's observations
The staff members that the Panels met were open, frank, curious and receptive to comments made by the Panels. Ownership was demonstrated at senior and middle management levels as well as among front- line staff. Dynamic leadership can be observed from the governing body, to senior	Panel's further observations, analysis, judgement corresponding to standards

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management and middle management at Deans' level. Good rapport among Schools and within, between leaders and front-line teaching staff was also observed during the visit. At the School level, individual voices could be heard, reflecting devolving and pluralistic management style.		
The Panels found the business of the Schools to be well managed in a consultative and co- operative mode, as evidenced from meeting minutes. The Panels conclude from the observed corporate culture and human dynamics that there is institutional maturity of the institution as a learning organisation, and this may counter-balance the potential weaknesses of a small organisation with staff members playing multi-roles in institutional management."	Logical conclusion	

An example of the table of contents extracted from the The Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAAVQ) report template follows to indicate possible headings in the main body report:

Table of Contents – Template from HKCAAVQ

Table of Contents – Template from HKCAAVQ

Table of Contents – Template from HKCAAVQ

Table of Contents

- 1. Background
- 2. Panel's observation and comments
 - 2.1 Organisational Management
 - 2.2 Financial and Physical Resources
 - 2.3 Staffing and Staff Development
 - 2.4 Quality Assurance (including Program Development and Management) 2.5 Conclusion
- 3. 3. HKCAAVQ's Determination

The table of content of a QAA audit report – Canterbury Christ Church University College Institutional Audit Report, May 2005 – is as follows.

Table of Contents – Example from a QAA Report

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Main report	4
Section 1: Introduction: Canterbury Christ Church University College	4
The institution and its mission	4
Collaborative provision	5
Background information	6
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Developments since the previous academic quality audit	7
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4. Discussion

Discussion: Report Scope and Style

Using two publicly available review reports that you have located (eg on an QA agency websites) and analyse the reports in terms of:

- The purpose and scope of the report how do they differ in terms of the presentation of the texts?
- How well, or otherwise, are the statements in the report supported by evidence do the conclusions flow from the arguments in the text?

5. Summary

This topic covered the following main points:

- The scope and style of a review report is influenced by the purpose of the review which in turn, influences the nature and level of information to be included in the report.
- To ensure that all essential information is covered and in a consistent manner, most agencies adopt the use of templates or similar frameworks created for this purpose.
- The structure of the report normally comprises at least the following components:
 - Cover page
 - Table of contents
 - Executive summary
 - Main body
 - The agency's decision/overall comments
- The content of the report should strike a balance between reference to evidence, the panel's observations, analysis, and hence judgments against the stipulated criteria and standards to lead to a logical conclusion at the end of the report.