



Higher Education Quality Council
Turkey



**THEQC
INSTITUTIONAL
SELF-EVALUATION
REPORT WRITING
GUIDE (VERSION 1.4)**



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THEQC INSTITUTIONAL SELF-EVALUATION REPORT WRITING GUIDE (VERSION 1.4)

Complementary to the Institutional External Evaluation Criteria

The Higher Education Quality Council of Turkey



CONTENTS

General Information / 5

Introduction / 5

Aim / 5

Scope / 5

Submission and Distribution of the Report / 6

Evaluation of the Report / 6

Privacy / 6

Annex-1 / 8

INSTITUTIONAL SELF-EVALUATION REPORT / 8

1. Information on the Institution / 9

1.1. Contact Information / 9

1.2. Institutional History / 9

1.3. Mission, Vision, Values and Objectives / 9

1.4. Units Providing Educational Services / 9

1.5. Units Conducting Research Activities / 9

1.6. Organizational Structure of Higher Education Institution / 9

2. Quality Assurance System / 10

2.1. Quality Policy / 10

2.2. Duties, Responsibilities and Activities of Higher Education Quality Commissions / 12

2.3. Stakeholder Participation / 13

3. Learning and Teaching / 13

3.1. Design and Approval of Programs / 14

3.2. Continuous Monitoring and Updating of Programs / 15

3.3. Student-Centered Learning, Teaching and Evaluation / 16

3.4. Student Admission, Progression, Recognition and Certification / 17

3.5. Teaching Staff / 18



- 3.6. Learning Resources, Accessibility and Supports / 18
- 4. Research, Development and Social Contribution / 19
 - 4.1. Institution's Research Strategy and Objectives / 19
 - 4.2. Institution's Research Resources / 20
 - 4.3. Institution's Research Staff / 21
 - 4.4. Monitoring and Improving Institution's Research Performance / 22
- 5. Administrative System / 22
 - 5.1. Structure of Management and Administrative Units / 22
 - 5.2. Resource Management / 23
 - 5.3. Information Management System / 24
 - 5.4. Quality of Outsourced Services / 25
 - 5.5. Efficiency and Accountability of Management, Public Information / 25
- 6. Conclusion / 26



General Information

Introduction

The Institutional Self-Evaluation Report is annually submitted by the institution with the aim of following annual self-evaluation processes of the institution and presenting a point of reference for the external evaluation process conducted at least once every five years. This guide sets forth the rules to be applied in writing a self-evaluation report in addition to a list of remarks and recommendations on the subject and a self-evaluation report template (Annex-1).

Aim

The aim of the report is to help the institution recognize its strengths and areas for further development while contributing to the institution's improvement steps. The drafting process of the report provides the institution with an opportunity to benefit from the Institutional External Evaluation Program as far as possible. The report must be employed for establishing contact and cooperation among stakeholders, within self-evaluation activities, and for the dissemination and internalization of quality assurance culture. To enhance the contribution of the drafting process to the institution, inclusiveness and participation must be ensured in the activities, a process management approach must be adopted rather than bureaucratic data management, and transparency must be ensured in quality commission works as well as continuous education activities.

Scope

The self-evaluation report is required to be written in compliance with the template presented in the guide and include all the requested information, documents and evidence for the institution's qualitative and quantitative evaluation by the Higher Education Quality Council (THEQC). The criteria presented in the Institutional External Evaluation Criteria document also constitute the basis of the institution's internal quality assurance.

Since the institution's external evaluation will be conducted in a way to encompass the four main aspects stated below, the self-evaluation report of the institution is expected to answer the following questions:

- ◇ What does the institution intend to achieve?

(Mission and objectives of the institution)

- ◇ What is the institution's roadmap to achieve its mission and objectives?

(The governance/organizational processes and activities of the institution)

- ◇ How does the institution make sure that it has achieved its mission and objectives?

(Quality assurance processes, internal evaluation processes)

- ◇ How does the institution plan to improve its processes in future?

(Continuous improvement activities for the institution to protect its competitive advantage within the ever-changing higher education agenda)

Submission and Distribution of the Report

Self-evaluation reports are required to be uploaded on the THEQC's web-based system. The higher education institution's quality commission chair or a person delegated by the commission chair will be authorized to log in to the web-based system to upload the report.

Evaluation of the Report

After the evaluation team performs a pre-review in consideration of (at least one and not more than five) self-evaluation report(s), the team pays a site visit to the relevant institution. An institutional feedback report is prepared and shared with the institution based on the evaluation process that is grounded on the results of the self-evaluation report review and the site visit within the framework of the principles stated in the Institutional External Evaluation Guideline.

When new data or documents are added within the period between the drafting process of the self-evaluation report and the preparation of the institutional feedback report, the data or documents in question are sent electronically to the Secretariat of the THEQC. The Secretariat conveys the documents to relevant team leaders and team members.

The institution might be asked to revise the self-evaluation report on short notice if the report is found to have lacking points in format and/or content as a result of the preliminary examination. The edited self-evaluation report is required to be sent to the Secretariat of the THEQC again.

After the formation of evaluation teams, team members can have access to the annual self-evaluation reports of the institutions they are assigned to evaluate on the online evaluation system designed by the THEQC.

Privacy

The information presented in self-evaluation reports is only for the use of the THEQC and evaluation teams. It should not be shared with third parties without the permission of relevant institution, with the exception of its use in trainings and/or publications of the THEQC by keeping the name of the institution confidential.

Additional Remarks:

- ◇ This guide aims to provide an insight into the scope of the evaluations in each section of self-evaluation reports and guide the institution by presenting its strengths and areas for further development.
- ◇ Self-evaluation reports are expected to have four main sections (**Quality Assurance System, Learning and Teaching, Research, Development and Social Contribution, and Administrative System**) and be prepared on the basis of the criteria listed under these titles.
- ◇ While explicating the institution's level of meeting the criteria, the points stated below the relevant criteria might be used in writing the self-evaluation report. Besides, the expected evidence regarding the levels of meeting the criteria is explained under the titles of "*Institutional Documents*" and "*Evidence for Improvement*".
- ◇ Instead of giving short answers such as "*this aspect/system is present/not present in our institution*", a methodology that will thoroughly illustrate how the relevant process is managed and operates in the institution must be adopted in the writing of the report in consideration of the aspects stated



in the guide. It must also be noted that any additional specific situation and/or data peculiar to the institution other than the ones stated in the guide can be included in the report.

- ◇ After providing general information on the institution and its quality assurance system, learning and teaching, research and administrative system in the first annual report, these aspects are not required to be stated again in following reports. It would be sufficient to provide statements on the changing and improving aspects and the areas that could not be improved. If the institution is included in the external evaluation program, the report must comprise the improvement activities carried out in line with the feedback of the Institutional Feedback Report, the tangible improvement outcomes in this scope, the points that could not be improved, and the underlying reasons impeding improvement.



Annex-1

INSTITUTIONAL SELF-EVALUATION REPORT

[Name of the Institution]

[Address]

[Date]



INSTITUTIONAL SELF-EVALUATION REPORT

1. Information on the Institution

This section must include information on relevant institution's history, mission, vision, values, objectives, organizational structure and areas for further development and must be organized in a way to encompass following aspects.

1.1. Contact Information

The contact information (name, address, telephone, e-mail etc.) of the higher education institution's quality commission chair (rector or relevant vice-rector), whom the evaluation team will contact during the report review and/or site visit process, must be provided.

1.2. Institutional History

Brief information on the institution's history and current situation (total number of students, number of academic and administrative staff, infrastructural conditions etc.) must be provided.

1.3. Mission, Vision, Values and Objectives

The institution's mission, vision, values and objectives must be summarized in this section to answer the question "What does the institution intend to achieve?".

1.4. Units Providing Educational Services

This section must include summary information on the units providing educational services within the institution (faculties, institutes, schools, conservatories, vocational schools etc.) and the programs under the umbrella of the units (double majors, minors, joint degrees, program types, languages of instruction etc.); additional information and data must be presented as evidence.

1.5. Units Conducting Research Activities

This section must include summary information on the inputs, processes and outputs required for the efficacy and productivity of all the units providing support and services as part of R&D activities in the institution (research centers, laboratories, project coordination units, technology transfer offices, intellectual property board, technoparks, pre-incubation and incubation units etc.); additional information and data must be presented as evidence.

1.6. Organizational Structure of Higher Education Institution

This section must include summary information on the institution's organizational structure and the organization of its administrative units, department offices, coordination offices, advisory boards, stakeholder relations management etc.; additional information and data must be presented as evidence.

2. Quality Assurance System

In this section, the institution is expected to explain its quality assurance policies as part of its strategic management as well as the methods of determining, practicing, monitoring and improving its strategies to implement these policies.

In line with this purpose, the institution must present information on:

- ◇ The institution's quality assurance processes, internal evaluation processes and action plans to answer the question *"What is the institution's roadmap to achieve its mission, vision and objectives?"*.
- ◇ The assessment and monitoring system as part of the institution's quality assurance and internal evaluation processes to answer the question *"How does the institution make sure that it has achieved its mission and objectives?"*.
- ◇ Improvements made by the institution to protect its competitive advantage within the rapidly changing higher education agenda, the ways of structuring and managing the completed or ongoing works (or projects) in the institution as part of internal and external evaluation of the institution [program accreditation, laboratory accreditation, system standards management (ISO 9001, ISO 14001, OHSAS 18001, ISO50001 etc.), award processes (EFQM etc.)] to answer the question *"How does the institution plan to improve its processes in future?"*.
- ◇ How the institution has improved its processes according to external evaluation results, how the effects of the improvement activities reflect on operation and working methods of the institution—in other words; how the PDCA cycle is completed—to answer the question *"What is the institution's roadmap to achieve its mission and objectives?"*.

2.1. Quality Policy

The institution is required to have a defined process to determine, monitor and improve its mission, vision, strategic objectives and performance indicators.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ The relation of the institution's strategies, priorities and preferences to its mission, vision and objectives,
- ◇ The approaches focusing on mission differentiation in the institution (if any),
- ◇ The balances between the units in the allocation of institutional resources,
- ◇ The method employed by the leaders in the institution to enable unity of purpose among employees,
- ◇ The definition and announcement of the institution's quality policy in a way to encompass all the processes,
- ◇ The institution's method of announcing its quality policy to all stakeholders and disseminating it inside and outside the institution,
- ◇ The practices displaying that the quality policy is adopted in the institution,
- ◇ The statement of the institution's preferences in its quality policy that encompasses compliance with standards, fitness for purpose or both,



- ◇ The integration between the quality management and strategy management of the institution and the continuity of this integration,
- ◇ Defined performance indicators the institution is required to monitor in line with its strategic plan and the methods of monitoring these indicators,
- ◇ Key performance indicators within the performance indicators monitored by the institution and the methods of monitoring these indicators,
- ◇ The institution's internationalization strategy (if any),
- ◇ The institution's targets and performance indicators defined to achieve its internationalization strategy, the method of monitoring these indicators and the works conducted as a result of monitoring activities,
- ◇ The institution's experiences in completed or ongoing institutional external evaluations, program or laboratory accreditations and system standards, and the outcomes of these experiences.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The institution's current strategic plan, objectives, performance indicators and follow-up methods,
- ◇ The institution's key performance indicators (learning and teaching, research-development, social contribution, internationalization and administrative system),
- ◇ The methods and periods of monitoring key performance indicators, the units in charge of this task,
- ◇ Quality Policy Document that comprises information on the institution's learning and teaching, research and administration processes,
- ◇ Quality handbook,
- ◇ The documents demonstrating stakeholder participation in the institution's strategic planning activities,
- ◇ Internationalization policy.

Evidence for Improvement

- ◇ The changes in the institution's mission and vision over the years,
- ◇ The level of implementing the strategic plan,
- ◇ The practices and examples on the internalization and dissemination of quality policy and culture within the institution,
- ◇ Examples of practices aiming to protect institutional memory, sense of belonging and culture,
- ◇ Practices demonstrating the contribution of the institution's external evaluation and accreditation experiences to improvement mechanisms,
- ◇ Practices demonstrating that quality management is integrated with strategic management,

- ◇ International protocols and their results.

2.2. Duties, Responsibilities and Activities of Higher Education Quality Commissions

The authorities, duties and responsibilities of the institution's quality commission must be clearly defined for the establishment and execution of the quality assurance system.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Quality assurance system established by the quality commission to fulfill its duties and responsibilities in the institution,
- ◇ The relation of the quality commission to external stakeholder participation, quality management departments, and if any, other quality-oriented committees or advisory boards within the institution,
- ◇ Enabling the participation/representation of all units within the institution in quality management works,
- ◇ Works conducted by the quality commission for the internalization and dissemination of quality culture in the institution,
- ◇ The method employed by the leaders in the institution to enable unity of purpose among employees in line with the institution's objectives and targets,
- ◇ The completion levels of the PDCA cycle in learning and teaching processes,
- ◇ The completion levels of the PDCA cycle in research and development processes,
- ◇ The completion levels of the PDCA cycle in social contribution processes,
- ◇ The completion levels of the PDCA cycle in administrative/managerial processes.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ Working procedures and principles of the quality commission,
- ◇ Organizational structure and members of the quality commission,
- ◇ Administrative support structure of the quality commission,
- ◇ Details of information exchange platforms of the quality units (websites etc.) and the information systems used in this scope (their list, intended use and scope),
- ◇ Documents demonstrating stakeholder participation in the commission activities.

Evidence for Improvement

- ◇ Examples of methods and practices adopted for the completion of PDCA cycles in all processes,
- ◇ Opinions of internal and external stakeholders on the activities of the quality commission and improvements made in line with these opinions.



2.3. Stakeholder Participation

The participation and contribution of internal stakeholders (academic and administrative staff, students) and external stakeholders (employers, graduates, professional organizations, research sponsors, students' relatives etc.) in the quality assurance system must be ensured.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◆ The form of determining priorities among the institution's stakeholders,
- ◆ The participation of the institution's internal stakeholders in decision-making and improvement processes,
- ◆ The participation of the institution's external stakeholders in decision-making and improvement processes and the related informing mechanisms,
- ◆ Structuring of the alumni tracking system.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◆ A defined list of internal and external stakeholders,
- ◆ Mechanisms serving to convey the complaints/suggestions/satisfaction of stakeholders,
- ◆ Practices displaying the participation of internal and external stakeholders in decision-making mechanisms,
- ◆ Alumni tracking system,
- ◆ The role and participation of advisory boards in quality assurance system.

Evidence for Improvement

- ◆ Practices displaying the participation of internal and external stakeholders in improvement processes,
- ◆ Practices displaying the contribution of alumni tracking system to quality assurance system.

3. Learning and Teaching

The evaluation of the institution's learning and teaching processes is expected in this section. These processes must be approached in consideration of the following aspects: The designation of the institution's continuous improvement focus and objectives and the persons to implement these objectives, the practice of educational activities, the evaluation of the objectives both quantitatively and qualitatively with a follow-up process and the improvements made in line with the needs by checking the obtained results.

3.1. Design and Approval of Programs

The institution must have defined processes for the design and approval of the programs it runs. The programs must be designed in line with the objectives, including the targeted learning outcomes. The competencies offered by the program must be defined and announced to the relevant stakeholders in a way to encompass the related competencies stated in the Turkish Higher Education Qualifications Framework.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Design method of study programs in the institution,
- ◇ Stakeholder participation in program design,
- ◇ Activities conducted to equip students with research skills in every level of education,
- ◇ Preparation and public announcement of the objectives, outcomes and course info packages of the study programs in the institution,
- ◇ Ensuring the compliance of program competencies with the Turkish Higher Education Qualifications Framework.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The institution's education policy and strategic objectives,
- ◇ The relation of program objectives and learning outcomes to Turkish Higher Education Qualifications Framework,
- ◇ Websites announcing programs and course info packages,
- ◇ Association of program outcomes and learning outcomes,
- ◇ Defined processes employed in program design, approval and update (regulation, directive, process definition, guidelines etc.),
- ◇ Defined student workload credits in all academic degree levels,
- ◇ Definition of student workload credit for professional practices, exchange programs, internships and projects,
- ◇ Program outcomes (including generic, core competencies that are not field-specific) and curricular/ extracurricular activities employed to reach targeted outcomes,
- ◇ Stakeholder participation in program design,
- ◇ Crediting non-routine practices such as applied trainings and mobility programs.

Evidence for Improvement

- ◇ Practices/evidence demonstrating that the institution implements its education policy and strategic objectives,



- ◇ Programs developed on the basis of stakeholder participation and opinions,
- ◇ Enhancements made in programs on the basis of stakeholder participation and opinions.

3.2. Continuous Monitoring and Updating of Programs

The institution must monitor its stakeholders, and revise and update its programs on a regular basis to ensure that the programs ultimately reach their educational objectives and answer the needs of the students and society.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Methods used to review and update programs,
- ◇ Stakeholder participation in program update activities,
- ◇ The institution's mechanisms guaranteeing the achievement of program's educational objectives and learning outcomes,
- ◇ Enhancement practices undertaken in cases when program's educational objectives and learning outcomes are not met,
- ◇ Mechanisms that support the programs seeking to be accredited.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ Annual self-evaluation reports of educational processes (evaluation of course and program learning outcomes in terms of educational objectives and targets)
- ◇ Annual self-evaluation reports of programs (evaluation in terms of program outcomes)
- ◇ Mechanisms monitoring the achievement of program and course learning outcomes (information management system)
- ◇ Examples of the mechanisms the institution has established to update its programs in line with its mission, vision and targets (annual follow-up calendar, putting achievement levels of program outcomes on the agenda of the senate, monitoring success levels of programs)
- ◇ List and examples of the mechanisms used to receive feedback from stakeholders regarding programs and courses (documents, surveys, forms etc.)

Evidence for Improvement

- ◇ Improvements made on the basis of annual self-evaluations of programs,
- ◇ Practices informing all stakeholders on improvements and changes,
- ◇ Evidence demonstrating the social contribution of the institution's program monitoring and updating works (employment data etc.),
- ◇ Evidence demonstrating whether the program has met its educational objectives in a way to encompass opinions of graduates and business world,

- ◇ Defined processes and practices for the encouragement of accreditation activities,
- ◇ Evaluation and enhancement works conducted in English preparatory schools/programs (if any).

3.3 .Student-Centered Learning, Teaching and Evaluation

The institution must design and run its programs in a way to encourage active student participation in learning processes. Assessment and evaluation of the student performance must also reflect this approach.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Policies implemented by the institution with regard to student-centered education,
- ◇ Application level of student-centered education policy in academic units,
- ◇ Institutional activities to improve competencies of academic staff on student-centered education,
- ◇ Determination method of student workload based credit values in course info packages,
- ◇ Credit transfer method applied in international mobility programs,
- ◇ Presence of elective courses that familiarize students with other disciplines and mechanisms encouraging students to enroll these courses,
- ◇ Effective student advisory system applied in the institution,
- ◇ Defined processes employed in the assessment and evaluation of students and announcement of these processes to students,
- ◇ Reflecting 21st century competencies on program outcomes.

The evidence required for the relevant criteria is listed below:

Institutional documents

- ◇ Incorporation of student-centered education in the institution's proclaimed education policy
- ◇ Defined processes employed in the assessment and evaluation of student success (regulation, directive, process definition, guidelines etc.)
- ◇ Regulations which explicitly comprise the presence of valid reasons that cause the student's absence from classes or exams
- ◇ Regulations on graduation requirements
- ◇ Defined processes employed in student advisory system (regulation, directive, process definition, guidelines etc.)
- ◇ Defined processes employed in applied trainings (internships, professional practices etc.) and mobility programs (regulation, directive, process definition, guidelines etc.)
- ◇ Organization of teaching and learning centers
- ◇ Mechanisms to receive student opinions and complaints



Evidence for Improvement

- ◇ Examples of practices conducted in teaching and learning centers,
- ◇ Student-centered education practices,
- ◇ Workload surveys including student feedback,
- ◇ Competencies of academic staff regarding student-centered education (learning-teaching and assessment-evaluation methods),
- ◇ Practices about the student-centered teaching and learning approach within the training of trainers program,
- ◇ Evidence demonstrating that student workload credits are used in professional practices, exchange programs, internships and projects,

3.4. Student Admission, Progression, Recognition and Certification

The institution must set out a list of explicit criteria for student admissions, and consistently and permanently employ the predefined and published rules relating to the recognition and certification of degrees, diplomas and other qualifications.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Explicit and consistent criteria applied by the institution in the admission of students other than those enrolling through central placement,
- ◇ Defined processes applied in the institution for the recognition of prior formal learnings,
- ◇ Defined processes applied in the institution for the recognition of prior non-formal and informal learnings (directive, senate decisions etc.).

The evidence required for the relevant criteria is listed below:

Institutional documents

- ◇ Criteria applied in student admissions through lateral transfer, Foreign Student Examination (YÖS), double major programs and minor programs other than student groups enrolling through central placement,
- ◇ Defined processes for the recognition of prior formal, non-formal and informal learnings (regulation, directive, process definition, guidelines etc.).

Evidence for Improvement

- ◇ Defined processes and existing practices to follow the student's academic and professional progress.

3.5. Teaching Staff

The institution must be fair and transparent in all the processes pertaining to the recruitment, appointment, promotion and teaching assignments of the teaching staff.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Maintaining professional development of teaching staff and improving their teaching skills,
- ◇ Ensuring the alignment of teaching staff's competencies with contents of the courses they are assigned to teach in the institution,
- ◇ Design and application of the training of trainers program in the institution in line with the institution's objectives and quality assurance system.

The evidence required for the relevant criteria is listed below:

Institutional Documents:

- ◇ Defined processes in use to monitor the teaching performance of teaching staff, (appointment-promotion criteria, regulation, directive, process definition, guidelines etc.)
- ◇ Defined rules in the procedures of selecting and inviting instructors assigned to teach as adjunct in the institution.

Evidence for Improvement

- ◇ Practices aiming to appreciate, recognize or reward the performance of teaching staff,
- ◇ Evidence on the training of trainers practices (scope, method, participation info etc.).

3.6. Learning Resources, Accessibility and Supports

The institution must have the necessary financial resources to maintain its educational activities and must guarantee that the learning opportunities are sufficient and accessible to all students.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Variety of learning resources for student use (facilities and infrastructure) and their management system,
- ◇ Variety of social, cultural and sportive activities that address student improvement,
- ◇ Psychological counseling and guidance services offered to students in the institution and their management system,
- ◇ Services provided with existing regulations for students with special needs (refugees, disabled students, international students etc.) in the institution,
- ◇ Decision mechanisms for the percentage distribution of annual budget in terms of learning resources and supports offered to students.

The evidence required for the relevant criteria is listed below:



Institutional Documents

- ◇ Institutional information (the evidence presented in the first section of the guide's annex can be used),
- ◇ System of forming, approving, monitoring and evaluating student societies,
- ◇ Distribution of student service expenses in the budget,
- ◇ Student feedback means (surveys etc.) regarding the services offered to students.

Evidence for Improvement

- ◇ Practices related to the students with special needs (their representation, accessible university practices etc.),
- ◇ Evaluation of student societies' annual activities,
- ◇ The list of annual sportive, cultural and social activities addressing students (information on activity types, themes, number of participants etc.),
- ◇ Results of student feedback means (surveys etc.) regarding the services offered to students.

4. Research, Development and Social Contribution

An evaluation of the institution's research processes is expected in this section. The research processes must be approached in consideration of the following aspects: The definition of the institution's continuous improvement focus and objectives and the persons to implement these objectives, the practice of research activities, the evaluation of the objectives both quantitatively and qualitatively with a follow-up process and the improvements made in line with the needs by checking the obtained results.

4.1. Institution's Research Strategy and Objectives

The institution must encourage the research and development activities that are in line with the academic priorities defined in the framework of its strategic plan, able to create values and turn them into social benefits.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ The institution's research strategy and objectives and research policy adopted in line with these components,
- ◇ The fields of integration between the research-development processes and education processes in the institution and the policies adopted in this respect,
- ◇ The fields of integration between the research-development processes and social contribution processes in the institution and the policies adopted in this respect,
- ◇ The local/regional/national development goals and the effects of these goals on the institution's research-development strategies,
- ◇ Encouragement of the conducted research's contribution to socio-economic and socio-cultural structure and the evaluation of results.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The institution's research-development policy and strategic objectives,
- ◇ The university's priority areas,
- ◇ The management of research-development processes and their position in organizational structure,
- ◇ Performance indicators on social contribution (local/regional/national/international),
- ◇ Systems to promote and support research-development.

Evidence for Improvement

- ◇ Practices/evidence demonstrating that the institution implements its research-development policy and strategic objectives,
- ◇ Evidence demonstrating that the research policy is implemented in undergraduate and graduate education activities,
- ◇ Data demonstrating the results of improvement works in social contribution processes (e.g. demographic data, labor market),
- ◇ Evidence demonstrating active participation of students in research activities.

4.2. Institution's Research Resources

The institution must provide the required physical infrastructure and financial resources for research and development activities and have policies and strategies guaranteeing their effective use (Research policies of the institution must encourage cooperation between internal and external stakeholders and using non-institutional funds.).

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ The institution's methods of planning, procuring and using required resources to maintain its activities in line with the strategy and objectives in the field of research-development,
- ◇ Stakeholder participation in the institution's research-development activities,
- ◇ Mechanisms to monitor the results of the institution's research-development activities,
- ◇ Strategies adopted for the transfer of extra-university funds employed in research activities to the institution,
- ◇ The contribution rate of the supports procured from external resources (project support, donations, sponsorships etc.) to the institution's strategic objectives.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ Information on research-development infrastructure (laboratories, R&D centers etc.),



- ◇ Research-development budget (revenues, external resources, allocation according to priorities, allocation per unit),
- ◇ Fields of institutional competence in research-development (specialties, project fields, patent fields etc.),
- ◇ Cooperation with stakeholders in research-development (expositions, career days, projects etc.).

Evidence for Improvement

- ◇ The changes in external fund transfers to the institution within the past three years,
- ◇ Activities conducted to encourage researchers to use extra-institutional funds,
- ◇ The improvements made by the institution in physical infrastructure and financial resources for research and development activities.

4.3. Institution's Research Staff

The institution must be fair and transparent in all the processes pertaining to the recruitment, appointment and promotion of researchers.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Defined processes for research competence expected from research staff in the institution,
- ◇ Improvement of the research staff's competence,
- ◇ Follow-up and evaluation of the research staff's competence,
- ◇ Fair and transparent approaches within the processes of appointment or promotion of research staff in line with the institution's research-development goals.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The relation between the institution's R&D goals and the criteria on the promotion or appointment of faculty members,
- ◇ Defined current processes for the follow-up of the academic staff's research-development performance (regulation, directive, process definition, guideline etc.).

Evidence for Improvement

- ◇ Practices aiming to appreciate, recognize or reward research-development performance of academic staff,
- ◇ Training activities aiming to improve research-development competencies of academic staff (program, method, participation info etc.).

4.4. Monitoring and Improving Institution's Research Performance

The institution must periodically assess and evaluate its research and development activities on the basis of relevant data and release the results. The obtained results must be employed for the periodic review and improvement of the institution's research and development performance.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Assessment and evaluation of the institution's effectiveness level/performance on research and development activities,
- ◇ Methods employed by the institution to review and improve the activities to achieve its research goals,
- ◇ Announcement of the evaluation results of research activities to stakeholders and public,
- ◇ Assessment of the institution's contribution to regional, national and global economy.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The system used by the institution to check whether the institution has accomplished its research-development goals,
- ◇ Annual self-evaluation report on research-development processes of the institution and its units,
- ◇ Annual self-evaluation report on research-development activities of research centers and laboratories,
- ◇ A list and examples of the mechanisms employed to receive feedback from relevant stakeholders concerning research-development activities and projects (documents, surveys, forms etc.).

Evidence for Improvement

- ◇ Improvements made on the basis of annual self-evaluations of the institution's and its units' research-development processes,
- ◇ Evidence on the improvement of research performance (infrastructure, the use of human and financial resources, university-industry cooperation and such practices),
- ◇ Evidence used by the institution to monitor research-development performance (Indicators such as ranking systems-QS, Times Higher Education, URAP, Entrepreneurial and Innovative Universities Index).

5. Administrative System

The institution is expected to explain and evaluate its governance/organizational processes and activities.

5.1. Structure of Management and Administrative Units

The institution must have an administrative structure that guarantees achieving the institution's strategic goals both qualitatively and quantitatively. The administrative board must be able to function as a constructive leadership team while the administrative staff should have the required competencies.



Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Organization of administrative and managerial units of the institution's learning and teaching, research-development and social contribution processes,
- ◇ Management of the preparation, follow-up and evaluation of internal control action plan,
- ◇ Distribution of authority between the board of trustees and the administrative committee (senate) in foundation higher education institutions; safeguarding the balances between exercise of power and decision-making on academic and administrative subjects.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The institution's policy and strategic objectives in managerial and administrative areas,
- ◇ Managerial and administrative organization chart,
- ◇ Follow-up and management of internal control action plan,
- ◇ The relations and working principles between the board of trustees and the senate in foundation universities,
- ◇ Evidence demonstrating the competence of administrative staff in employment procedures,
- ◇ Methods employed by the institution to assess, monitor and improve its administrators' leadership traits and competencies,
- ◇ Guidebook on process management (definitions and flows of processes).

Evidence for Improvement

- ◇ Practices/evidence demonstrating that the institution implements its policy and strategic objectives regarding managerial and administrative areas.

5.2. Resource Management

The institution must have a management system guaranteeing that the human resources, financial resources and all the estates and assets are used efficiently and productively (a proclaimed management system document).

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Management and efficiency of human resources,
- ◇ Competence of the recruited/appointed staff in the institution (in relation to the field they are assigned to),
- ◇ Alignment between the duties of the recruited/appointed staff in the institution and their educational background and merit,
- ◇ Management and efficiency of financial resources,

- ◇ Management and efficiency of estates and assets.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ Human resources policy and objectives,
- ◇ Management of financial resources,
- ◇ Evidence demonstrating the competence of administrative staff during employment procedures,
- ◇ Defined processes in the management of estates and assets (activities such as inventories e.g., directives),
- ◇ The system and defined processes employed in the performance review of administrative staff.

Evidence for Improvement

- ◇ Practices as part of human resources policy and objectives,
- ◇ Improvements made as a result of the performance review of administrative staff,
- ◇ In-service training practices aiming to improve the competencies of administrative staff and ensure their orientation to the duties expected from them (scope, method, participation info etc.).

5.3. Information Management System

The institution must periodically collect and analyze the required data and information to guarantee the effective management of the administrative and operational activities and employ them to enhance its processes.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Information management mechanisms employed by the institution to collect, analyze and report data on all its activities and processes,
- ◇ Support of the information management system in the collection and announcement of values of key performance indicators that are required to be followed by the institution,
- ◇ The integration of the information management system and quality management processes,
- ◇ Analysis of the data obtained from the processes supported by the information management system and its announcement to stakeholders,
- ◇ Enabling the security, confidentiality and reliability of the collected data,
- ◇ Practices aiming to preserve institutional memory and guarantee its sustainability.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The institution's policy on information management,



- ◇ The information system used by the institution; its functions and supported processes,
- ◇ Defined processes and practices in obtaining, recording, updating and sharing the institutional information (performance indicators, regulations, directives, evaluation reports etc.).

Evidence for Improvement

- ◇ Practices demonstrating that the security and reliability of the collected data are ensured,
- ◇ Practices to preserve institutional memory and guarantee its sustainability,
- ◇ Periodic analysis reports on managerial and operational activities,
- ◇ Examples on the use of information management system analysis results in improvement works.

5.4. Quality of Outsourced Services

The institution must guarantee the relevance, quality and continuity of the outsourced services.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ Criteria on the procurement process of outsourced administrative and/or support services,
- ◇ Practices to enable the conformity and quality of the outsourced services and guarantee their continuity.

The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ A list of the outsourced services and their suppliers,
- ◇ Defined processes to review the performance of suppliers.

Evidence for Improvement

- ◇ Evidence demonstrating the satisfaction level of internal stakeholders with regard to outsourced services,
- ◇ Application examples of improvement.

5.5. Efficiency and Accountability of Management, Public Information

The institution must publish information on all its activities, including its study programs and research and development activities, in a transparent, accurate, updated and easily accessible way. The institution must have a set of approaches that can enable assessing and evaluating the productivity of the administrative and managerial staff and ensure their accountability.

Following aspects can be used in writing a self-evaluation report on relevant criteria.

- ◇ The means and platforms used in the public announcement of actual data on all activities of the institution, including its learning, teaching and research-development activities, as a requirement of the institution's accountability to public,
- ◇ The institution's policy and implementations on accountability and transparency.



The evidence required for the relevant criteria is listed below:

Institutional Documents

- ◇ The information announced to public by the institution and the information announcement channels (university bulletins, websites etc.).

Evidence for Improvement

- ◇ Periodic evaluation meetings organized by administrators (rectors, deans, institute heads, vocational school heads etc.), printed publications etc.,
- ◇ Evidence demonstrating the reflection of stakeholder opinions on administrative functions.

6. Conclusion

The strengths and areas for further development in the institution are required to be summarized under the titles of Quality Assurance System, Learning and Teaching, Research, Development and Social Contribution and Administrative System. If the institution has gone through an external evaluation process before and an institutional feedback report has already been presented to the institution, the measures taken to resolve the areas for further development stated in the report, the improvements achieved as a result of the activities conducted and the descriptions of the points that could not be further improved must be provided along with a detailed evaluation of the institution's current situation.



Higher Education Quality Council
Turkey