

Process Review Policy and Procedure



1 Purpose

To provide information on process reviews.

2 Scope

All University Employees and Students.

3 Policy Statement

Reviews of major processes at the University (hereafter referred to as processes) will be conducted on a regular and systematic basis as part of the University's commitment to maintaining and enhancing the quality of all its activities.

4 Principles

1. The basic methodology for process reviews will involve a review by a panel of one University process manager not of the process being reviewed, and one University client of the process being reviewed, augmented by at least two external experts.
2. A reference group consisting of relevant University process managers and process clients will be established to develop the necessary review documentation.
3. The review process will include some or all of the following elements:
 - a. circulation of a discussion paper addressing details of the process and an analysis of its current level of effectiveness,
 - b. a survey of stakeholders and users,
 - c. submissions from stakeholders and users,
 - d. a survey of the application of the process at similar institutions, and
 - e. determination of best practice for the process within and without the sector.
4. The review process will be conducted in the spirit of modern quality management approaches:
 - a. involving a no blame environment,

- b. reviewing the process as a whole rather than individuals,
- c. being supportive of staff involved in managing the process,
- d. performed in the interest of continuous improvement,
- e. identifying solutions, and
- f. geared towards a celebration of achievements.

The review process must also be information-driven, basing its decisions and conclusions on sound data and well-developed information.

5. The review process must involve:

- a. a clear characterisation of the process elements,
- b. a clear articulation of the aims of the process,
- c. a review of associated policies and practices,
- d. an objective assessment of the success of the process in meeting these aims involving wide consultation with all stakeholder groups and analysis involving qualitative and quantitative data, and
- e. recommendations as to how the process might be improved, with an action plan for implementing these recommendations.

6. The review process must be forward-looking and strategic, using an analysis of past performance as a basis for refining the setting of objectives, reviewing strategies and ensuring continuous improvement, plus enhancing efficiencies.

7. The action plan will be written to ensure that the responsibility for implementing individual recommendations are clearly identified so as to facilitate a review of performance of the action plan, which will be required to be submitted to the Planning, Quality and Review Committee two years after the initial review. This process will be coordinated by the Pro-Vice-Chancellor (Planning and Quality).

8. The review process must not impose an undue burden on members of staff and not impede the normal operations of the organisational sections concerned. In particular, the review should draw on existing documentation and available data as much as possible.

9. The review process will not generally take more than 24 weeks from the date of the initiating meeting between the Process Owner and Pro-Vice-Chancellor (Planning and Quality); recommendations for review panel members must be received by the Pro-Vice-Chancellor (Planning and Quality) within four (4) weeks of the initiating meeting.

5 Procedures

5.1 Timing of Reviews

1. All identified core University processes should be reviewed every five years. The Pro-Vice-Chancellor (Planning and Quality) will recommend a schedule for the reviews for approval by the Vice-Chancellor, normally on the recommendation of the Vice-Chancellor's Executive (VCE). Amendments to this schedule will also be approved by the Vice-Chancellor, normally on the recommendation of the Vice-Chancellor's Executive (VCE).
2. The Vice-Chancellor may at any time initiate a review outside of the normal schedule.

5.2 Composition and Appointment of Review Panels and Reference Groups

1. A review panel shall normally exist of two external members who are expert in the process under review, one University process manager not of the process being reviewed, and one University client of the process being reviewed. On the advice of the manager of the relevant process, consideration may be given to expanding the membership where this is deemed necessary to ensure a suitable range of skills and experience on the panel. The Vice-Chancellor will approve the membership of the panel.
2. Each panel will normally include:
 - a. a Chair external to the University,
 - b. one or more external persons with expertise in the process under review,
 - c. one or more senior members of staff of the University who are clients of the process under review, and
 - d. a range of skills and experience that will position the panel to address any specialist or distinctive aspects of the process under review.

Administrative support will be provided by the Quality and Review Officer.

3. At least one member of the panel must be female and at least one male, unless no suitably qualified person of that gender is available.
4. All members of the panel must be independent of the process management under review.
5. Nominations for review panel membership will be invited in confidence from the staff and stakeholders of the process to be reviewed. A pro-forma will be made available to ensure that suitable information is collected to support the nomination. This process will

be managed by the Pro-Vice-Chancellor (Planning and Quality) who will then develop a short-list of candidates for consideration by the Vice-Chancellor's Executive (VCE). Review panels will be appointed by the Vice-Chancellor on the basis of advice from the Vice-Chancellor's Executive (VCE).

6. The University shall pay the Chair an honorarium of \$1,500 and other external members of the panel \$500 each. The University shall also meet all travel, accommodation and relevant incidental expenses incurred by external panel members. Other costs of the review shall be met by the organizational section under review.
7. A process Reference Group will consist of at least one process manager and at least two process clients drawn from major client sections with membership selected to ensure sound knowledge of the full scope of the process concerned. The Vice-Chancellor will approve the membership of the Reference Group upon the recommendation of the Pro-Vice-Chancellor (Planning and Quality) who will have consulted with relevant senior managers.

5.3 Terms of Reference of Reviews of University Processes

1. The review shall consider the past and present performance of the efficiency of the process.
2. The review shall be conducted in the context of the strategic plan of the University, identifying where the process fits within the University overall, how the process supports the institution's mission and goals, and how effectively the process operates as an institutional driver.
3. Considerations will include national and international trends, recognised best practice and relevant benchmarking or competitive comparisons with the process in similar institutions and beyond the sector where appropriate.
4. The review will consider the effectiveness of the process as an operational tool across all relevant sections of the University.
5. The review will consider the outcomes of previous reviews, how recommendations have been implemented and improvement of performance indicators.
6. The review process shall consider whether there are adequate quality assurance mechanisms in place.
7. The review shall consider whether the University is delivering sufficient resources to ensure that the process concerned is able to function effectively and successfully meet the expectations that the University places on it.
8. The review shall consider the consistency of the process with University policies and procedures.

9. The review will consider confidential submissions and reports submitted to the review through an open consultations process conducted specifically for this purpose coordinated by the Pro-Vice-Chancellor (Planning and Quality).
10. The Vice-Chancellor, after consultation with the Vice-Chancellor's Executive (VCE), may approve additional or amended terms of reference for any review at the time of the appointment of the review panel; or raise specific questions, agreed to by the relevant Head of Division, which the review panel would be asked to address.

5.4 Review Documentation for Processes

1. Each process review will be supported by a number of documents:
 - a. an analysis of the process
 - b. progress against the action plan from the last review
 - c. proposals for process enhancement (refer to 5.4.3 below)
 - d. a schedule of activities for the review
 - e. the most recent review of the process, and
 - f. an information package containing a copy of the University Strategic Plan, Operational Resource Management Plan, Organisational Charts, University Handbook and other relevant information on the structure, function and position of the University as a whole.

The development of documents a) to c) is the responsibility of the Reference Group. The development or provision of documents d) to f) is the responsibility of the Pro-Vice-Chancellor (Planning and Quality).

2. All documents should be kept concise and to the point. Use should be made of existing documentation, information and data as much as possible.
3. The aim in preparing these documents should be to provide an accurate, frank and honest appraisal of the process. The focus should be on the role and function of the process and its benefits to the University, a critical self-appraisal of performance to date, and a clear statement of plans to enhance this performance in the future.
4. All staff who have a stake in the process should be consulted and given the opportunity to provide input into documentation.
5. At least six weeks prior to the panel's arrival, the review documentation will be submitted for review by the Planning, Quality and Review Committee. The Reference Group will be invited to participate in this discussion. Consideration will be given to whether there are any strategic issues, problem areas or parameters which should be drawn to the

attention of the review panel, and if any additional material should be provided in the documentation. The implementation of agreed actions from this meeting will be the responsibility of the Chair of the Reference Group.

6. At least two weeks prior to the date of the panel's arrival, copies of the review documentation and the proposed Schedule of Activities shall be forwarded to each member of the panel. The documentation shall be accompanied by an invitation to the panel members to request additional information or to modify the proposed Schedule of Activities; for example, including meetings with persons not currently scheduled to meet with the panel. The invitation should inform the panel that it may, at its discretion, handle some aspects of the review on a sub-committee basis.

7. The analysis will provide:

- a. a clear characterisation of the process elements
- b. a clear articulation of the aims of the process
- c. an identification and review of associated policies and practices
- d. an objective assessment of the success of the process in meeting these aims, involving wide consultation with all stakeholder groups
- e. analysis involving qualitative and quantitative data, and
- f. recommendations as to how the process might be improved.

8. Progress Report against Action Plan from Last Review See 5.6.3.

9. Plan for the Future

Where the analysis of the process has identified the need for change or suggested improvements, an Action Plan should be provided that identifies strategies for improvement, an implementation timetable, the identification of responsibilities and resources and a clear identification of desired outcomes.

10. Schedule of Review Activities

The development of the Schedule of Review Activities will be the responsibility of the Pro-Vice-Chancellor (Planning and Quality) in consultation with the Chair of the Reference Group. Activities should include, but not be limited to the following.

- a. At the panel's first session, a meeting with the Vice-Chancellor, Pro-Vice-Chancellor (Planning & Quality) and the Chair of the Reference Group to explain the context of the review and any strategic issues, problem areas or parameters which warrant special attention.
- b. Meetings with staff and students (see 5.4.11).

- c. Input from internal and external stakeholders.
- d. At the panel's final session, a meeting with the Vice-Chancellor, Pro-Vice-Chancellor (Planning and Quality) and the Chair of the Reference Group to discuss the draft recommendations and the thrust of the report.

For the benefit of the members of the review panel the Schedule of Activities should identify clearly the role of each person.

11. Previous Reviews

Review panels will be provided with the latest review report of the process concerned as well as any subsequent commentaries formally made to that report (see 5.6.1 and 5.6.2), the action plan developed in response to the last review (see 5.6.3) and a progress report against this action plan (see 5.6.5). Review panels will also have access upon demand to any earlier reviews of the organisational section concerned.

12. Submissions

Internal and external stakeholders of the process concerned - including staff and students - will be given an opportunity to make written submissions to the review; and wherever possible and practical representatives from these groups will be invited to meet the panel. (Strategies to be developed to advise stakeholders and clients of the upcoming review and to invite submissions.)

5.5 The Review Process

1. The responsibilities for the development of the review documentation are outlined in section 5.1. Assistance will be provided by the Quality and Review Officer and staff from the Planning and Quality Office and Learning and Teaching Support Unit (LTSU) as appropriate.
2. The members of the review panel will be expected to be available for three days for extensive interviews, discussions and deliberation.
3. The Chair of the review panel will be responsible for coordinating the preparation of a report on the conduct of the review, its finding and its conclusions.
4. The Chair will be asked to stay an additional day in order to complete the report. This shall include the panel's overall assessment of the process under review, a list of recommendations and the thrust of its argumentation. The draft report shall be focussed around the recommendations, which shall be numbered consecutively. These recommendations should encompass all the actions that the review panel believes should be considered. The draft report will also consider the merits of any recommendations or action plans provided as part of the original review documentation.

5. The report shall include an executive summary that includes a list of the numbered recommendations. The report should be written on the basis that it will become a public document; though in rare cases the review panel may attach a confidential appendix or mention additional matters in their final meeting with the Vice-Chancellor.
6. Draft reports shall be submitted to the Pro-Vice-Chancellor (Planning and Quality) in electronic form. Within two weeks of the receipt of the draft report, the Pro-Vice-Chancellor (Planning and Quality), Chair of Reference Group and senior staff from the organisational sections that are process providers and clients shall meet to review and discuss the draft report. The draft report will be marked as 'CONFIDENTIAL' at this stage. Any errors in fact, areas requiring clarification, reconsideration or gaps which are agreed to at this meeting will be noted by the Pro-Vice-Chancellor (Planning and Quality) who will subsequently advise the Chair of the review. After consideration with the other panel members, the Chair will submit the final report within one (1) week of the conclusion of the review meetings.

5.6 Review Outcomes

1. The Pro-Vice-Chancellor (Planning and Quality) will coordinate a process which seeks comments from the review panel's final report from staff and other major stakeholders in the process concerned. A report of this consultation process will be developed.
2. The Pro-Vice-Chancellor (Planning and Quality) will place the discussion of the review report and its associated consultations report on the agenda of the Planning, Quality and Review Committee where the discussion will be minuted. Consideration may also be given to the Vice-Chancellor's Executive (VCE) reviewing specific review reports.
3. Within four (4) weeks of the final report being received, the administrative head of the organizational section that manages the process, in consultation with the Pro-Vice-Chancellor (Planning and Quality) and the relevant Head of Division or Chair of the Reference Group and taking account of the input provided through 5.6.1 and 5.6.2, will determine what action is to be taken on each recommendation of the panel and submit to the Planning, Quality and Review Committee an action plan for implementing the outcomes of the review.
4. After approval by the Vice-Chancellor, following advice from the Pro-Vice-Chancellor (Planning and Quality) as Chair of the Planning, Quality and Review Committee, this action plan will be made available on the USQIndex and incorporated into the organisational section's strategic plan as soon as practicable. Within 4 weeks of this occurring, the Process Owner will resolve with the Manager, Planning and Quality, the publication of the Action Plan, in a suitable format, on the University web site.
5. As part of the preparation for the next review cycle, the administrative head of the organizational section that manages the process will coordinate the development of a progress report against the action plan described in 5.6.3. Where the management of the process is undertaken by more than one administrative head, development of a progress report will be coordinated by the Quality and Review Officer.

6 References

Nil.

7 Schedules

This policy must be read in conjunction with its subordinate schedules as provided in the table below.

8 Policy Information

Accountable Officer	Deputy Vice-Chancellor (Enterprise Services)
Responsible Officer	Deputy Vice-Chancellor (Enterprise Services)
Policy Type	Executive Policy
Policy Suite	
Subordinate Schedules	
Approved Date	8/5/2017
Effective Date	8/5/2017
Review Date	
Relevant Legislation	
Related Policies	Student Expectations and Responsibilities Policy
Related Procedures	
Related forms, publications and websites	
Definitions	Terms defined in the Definitions Dictionary
	Definitions that relate to this policy only
Keywords	Process Review
Record No	13/454PL

