QUALITY ASSURANCE SYSTEM MANAGEMENT PROCEDURE

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1. PURPOSE AND SCOPE

This procedure defines the management methods of the University Quality Assurance System, including the responsibilities of the involved bodies and information flows.

2. REFERENCES

- Law no. 240, 30 December 2010
- Legislative Decree no. 19, 27 January 2012
- Ministerial Decree no. 1154, 14 October 2021
- ANVUR Guidelines for the Quality Assurance System in Universities – Periodic Accreditation of Universities and Study Programs
- ANVUR Periodic Accreditation Model for Universities and Study Programs
- University Statute
- Quality Policy

3. ACRONYMS AND DEFINITIONS

- AI: Initial Accreditation
- AP: Periodic Accreditation
- AQ: Quality Assurance
- AVA: Self-Assessment - Evaluation - Accreditation
- NdV: Evaluation Unit
- PQA: University Quality Committee
- CPDS: Joint Student-Teacher Committees

The **quality of a university** reflects the extent to which institutions achieve their educational, scientific, and third mission objectives. These objectives are particularly realized through the creation of a broad base of advanced knowledge, participation in research progress and innovation, preparation of the student community for active citizenship and their future societal roles, and support for their cultural development in harmony with their individual motivations, expectations, and personal prospects.

The AVA system aims to enhance the quality of teaching, research, third mission activities, and support services for institutional activities by implementing a **Quality Assurance** model. This model consists of internal procedures for planning, management, self-assessment, and continuous improvement of educational and scientific activities, along with external evaluations. These processes are designed to improve the quality of higher education while ensuring universities' accountability to society.

According to Legislative Decree 19/2012, **self-assessment** and internal evaluation are institutional activities that must follow methodologies, criteria, and indicators developed by each university in alignment with those defined by ANVUR.

Periodic Evaluation refers to the assessment of universities' efficiency, economic and financial sustainability, and the results achieved in teaching, research, and third mission/social impact. This evaluation aligns with the standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and considers the objectives set in the Ministry's three-year strategic plan (Ministerial Decree 1154/2021). The results of periodic evaluations are reviewed by ANVUR based on the indicators listed in Annex E of the Decree (institutional and program-level evaluation indicators) and are used for the Periodic Accreditation of universities and study programs. In line with the general guidelines of the three-year strategic plan, universities also adopt their own selected indicators relevant to their specific objectives. As outlined in Ministerial Decree 1154/2021, each focus area of the new model must be accompanied by both system-wide and university-specific quantitative indicators.

Initial Accreditation refers to the authorization to establish and activate university campuses and study programs, following verification of compliance with educational, faculty qualification, research, structural, organizational, and financial sustainability requirements, as specified in Annexes A, B, and D of Ministerial Decree 1154/2021.

Periodic Accreditation of university campuses and study programs refers to the verification, conducted at least every five years for campuses and at least every three years for study

programs, of the continued compliance with initial accreditation requirements, as well as the fulfillment of additional quality, efficiency, and effectiveness criteria. These evaluations are based on Quality Assurance (QA) indicators, as outlined in Annexes C and E of Ministerial Decree 1154/2021, covering the following areas:

A. Strategy, Planning, and Organization

B. Resource Management

C. Quality Assurance

D. Quality of Teaching and Student Services

E. Quality of Research and Third Mission/Social Impact

ANVUR (the Italian National Agency for the Evaluation of Universities and Research Institutes) is responsible for establishing the criteria and methods for verification, as well as defining the indicators for both Initial and Periodic Accreditation. These criteria are aligned with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015) and with the general guidelines of the universities' three-year strategic planning. ANVUR is also tasked with monitoring and verifying these indicators for the purpose of Periodic Accreditation of Universities and Study Programs.

For the Initial Accreditation of Study Programs, ANVUR relies on the Panel of Evaluation Experts (PEV). In contrast, for Periodic Accreditation, the process is carried out by a Commission of Evaluation Experts (CEV). This commission is responsible for issuing an accreditation judgment based on document analysis and an institutional visit.

The visit includes a thorough examination of a sample of Study Programs, PhD programs, and university departments, as well as an assessment of the effectiveness of the QA system implemented by the institution's key stakeholders.

Figure 1 – The AVA System

Figure 2 - The structure of the AVA 3 model

Source: Periodic Accreditation Model of University Campuses and Study Programs, ANVUR

4. RESPONSABILITÀ

The main **stakeholders** in the Quality Assurance process are:

- Rector
- General Director
- Board of Directors (CdA)
- Academic Senate (SA)
- Evaluation Unit (NdV)
- University Quality Committee (PQA)
- Department Directors (DIRD)
- Department Council (CdD)
- President of the Study Program Council (PCCS)
- Study Program (CdS)
- Joint Faculty-Student Committee (CPDS)
- PhD Program (PhD)
- Departmental QA Structures
- Quality Assurance Office
- Educational Offer Office

- Performance Office
- IT and Telecommunications Service

The responsibility for the university's quality lies with the Governing System, which includes the Rector, Delegates, Board of Directors, Academic Senate, and General Director.

These bodies are responsible for defining quality policies, drafting internal regulations and university planning documents, designing and managing the monitoring system for planning and results, reviewing both the Governing System and the Quality Assurance System, and managing resources.

Governing System Documents
- □ University Statute and Regulations
- □ University Planning Documents (e.g., Strategic Plan; Integrated Plan of Activities and Organization – PIAO, etc.)
- □ Documents for the Design and Management of the Monitoring System for Planning and Results
- □ Review Documents for the Governing System and the Quality Assurance System
- □ University Documents Related to Faculty (recruitment and qualification), Financial Resource Management, Facilities and Equipment/Technology, Information, and Knowledge Management

The **University Quality Committee (PQA)** oversees the proper functioning of the Quality Assurance System and carries out coordination, support, and implementation of Quality Assurance policies for education, research, and third mission activities. It is responsible for organizing and monitoring procedures, promoting continuous improvement, and assisting university structures in managing quality processes. Additionally, it organizes information and training activities for stakeholders involved in the process and conducts monitoring activities related to education and research organization.

In summary, the PQA:

- supports university structures in developing Quality Assurance processes and related procedures, proposing common tools for QA;
- conducts supervision and monitoring activities regarding the implementation of QA procedures;
- promotes a culture of quality within a unified Quality Assurance process covering education, research, and third mission/social impact aspects;

- organizes and coordinates monitoring activities and data collection for the preliminary evaluations of the Evaluation Unit (NdV);
- ensures the information flow between the Evaluation Unit (NdV) and the Joint Faculty-Student Committees (CPDS).

PQA Documents
☐ Annual Report on the Status of the Quality Assurance (QA) System and Related Activities
☐ Guidelines, Procedures, and Operational Instructions (e.g., for Quality Assurance, Self-Assessment of Study Programs, PhD Programs, and Departments, Strategic Planning for Departments, Completion of the Quality Section in the SUA-CdS and SUA-RD/TM Forms, Proposals for New Study Programs, Completion of the Annual Monitoring Report, Activities of the Joint Faculty-Student Committees, Management and Analysis of Student Community Opinion Survey Responses, Completion of the Course Description Form, Stakeholder Consultation by Study Programs, Cyclical Review Report, Student Orientation for Incoming, Ongoing, and Graduating Students, etc.)
☐ Self-Assessment of Compliance with Institutional Requirements in Preparation for the Periodic Accreditation Visit.

The **Evaluation Unit (NdV)** is responsible for assessing the quality and effectiveness of the educational offerings, research activities, and third mission/social impact, as well as ensuring the proper use of public resources. Additionally, the NdV evaluates the efficiency and effectiveness of the Administration and its services. While the University Quality Committee (PQA) carries out monitoring and verification actions for Quality Assurance processes, the NdV assesses the overall methodology and evaluates the university's Quality Assurance system as a whole.

In general, the Evaluation Unit (NdV) is responsible for:
- systematically assessing the effectiveness of the Quality Assurance (QA) System, identifying any issues, also taking into account the results of monitoring activities on the effectiveness of the QA System provided by the University Quality Committee (PQA);
- evaluating the overall status of the QA System, including through hearings, and examining how the university and QA bodies monitor the performance of Study Programs, PhD Programs, and Departments. These evaluations are then forwarded to the PQA and the Governing System for the review of both the Governance System and the QA System;
- supporting the university in reviewing the Governance System and the QA System;
- monitoring the recommendations and conditions set by ANVUR during the periodic accreditation visit;

- conducting in-depth analyses of the university's strategic and operational planning and evaluating the adopted system in relation to the institution's missions, institutional activities, and management processes.

NdV Documents
- □ Annual Report
- □ Report on Student Opinions
- □ Evaluation Documents on the Educational Offer, with particular reference to the proposal for the establishment of new Study Programs
- □ Annual Financial Reports
- □ Monitoring of the Performance Cycle Management
- □ Report to ANVUR on the Resolution of Any Recommendations and Conditions issued by the Agency during the Periodic Accreditation Visit
- □ Report on Study Programs, Doctoral Programs, and Departments Facing Significant Challenges, based on the internal evaluation activities of the last five years

The **Joint Student-Teacher Committees** (CPDS) are established in accordance with Article 2, paragraph 2 of Law 240/2010. The structure of the CPDS must ensure adequate representation of Study Programs, with particular attention to representatives of the student community. The CPDS operate at the Department level, ensuring the broadest possible representation of students from different Study Programs. If there are no student representatives for every Study Program, the CPDS may organize into subcommittees. The committee should actively gather student concerns from various programs through hearings, collective activities, or by appointing a student representative to liaise with the CPDS.

According to Article 13 of Legislative Decree 19/2012, the CPDS drafts an annual report containing proposals for the Evaluation Unit (NdV) to enhance the quality and effectiveness of educational structures. This includes evaluating learning outcomes, career prospects, personal and professional development, and the needs of the economic and production system. These proposals are based on monitoring relevant indicators (Article 12, paragraph 4) and may include student surveys or interviews. Additionally, before conducting evaluations, the committee engages in information campaigns to ensure that the student community is informed and aware of the university's quality assurance system.

The CPDS report is compiled using data from the Study Program Quality Reports (SUA-CdS), the Cyclical Review Reports (RCC), student opinion surveys, and other institutional sources.

The CPDS report, which is based on an independent analysis, must be submitted by December 31 each year to the Evaluation Unit (NdV), the University Quality Committee (PQA), and the Study Programs (CdS). These bodies are responsible for reviewing the report and implementing improvement measures (in collaboration with the CPDS or other student representatives). Key aspects of this process must be highlighted in both the NdV reports and the Cyclical Review Reports [1].

Study Programs (CdS) are at the core of the university's educational mission and are designed by defining one or more graduate profiles. Study Programs must ensure:
-   orientation and tutoring activities to support students in making informed academic and career choices
-   a broad, transdisciplinary, and multidisciplinary educational offer, incorporating flexible teaching methodologies and learning paths to foster student autonomy.
-   adequate faculty, tutors, and specialized staff, both in terms of quantity and qualification, to meet educational needs
-   faculty participation in training initiatives, professional development, and scientific, methodological, and pedagogical updates, ensuring continuous quality improvement and innovation
-   ongoing updates to the educational program to reflect the latest advancements in the field, supporting further academic progression and maintaining a strong connection with both research and the job market.

The Study Program (CdS) is responsible for preparing the Annual Monitoring Report (Scheda di Monitoraggio Annuale) and the Cyclical Review Report[2].

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[1] For further details on the activities of the CPDS and the related Annual Report, please refer to the dedicated operational instructions

[2] For further details on the Quality Assurance system of Study Programs, please refer to the dedicated procedure

CdS Documents

□ Initial Study Program Design Document and first draft of the SUA-CdS

□ SUA-CdS (updated annually)

□ Analysis Report on Student Opinion Survey Results

□ Self-Assessment Document for Periodic Accreditation (if selected for the institutional visit)

□ Annual Monitoring Report (updated annually)

□ Cyclical Review Report, to be completed at least every five years or in any of the following cases:

- upon request from the Evaluation Unit (NdV);
- in the presence of significant critical issues;
- in the event of substantial changes to the program structure;
- during Periodic Accreditation (if the report is older than two years or does not reflect the current status of the Study Program)

Doctoral Programs have been integrated into the Quality Assurance (QA) system with the AVA 3 Model.

Ministerial Decree D.M. 226/2021 redefined the accreditation procedures for Doctoral Programs and their hosting institutions. The accreditation system is structured around the initial authorization to activate PhD programs and the accreditation of the locations where these programs take place, as well as the periodic verification of the continued fulfillment of the required criteria for these purposes.

The requirements for Periodic Accreditation of Doctoral Programs, as defined by ANVUR, align with ESG guidelines and fulfill the provisions of Article 4, Paragraph 1, Letter g of D.M. 226/2021.

Doctoral Programs must offer training activities that align with their objectives and expected learning outcomes, distinct from the teaching methods of undergraduate and master's programs. Special emphasis must be placed on interdisciplinarity, multidisciplinarity, and transdisciplinarity. The PhD program must pursue objectives of mobility and internationalization and provide for the planning and organization of training and research activities to support the growth of doctoral candidates. It should also allocate financial and structural resources and, if necessary, involve external tutors of national or international standing, with the aim of fostering the autonomy of doctoral students in conducting their research activities. The PhD program must also have a system for monitoring the processes

and results related to research, teaching, and third mission activities, as well as for gathering feedback from doctoral candidates, including through the collection and analysis of their opinions[3].

The PhD Program's Quality Assurance (QA) structure, with the support of the departmental QA, is responsible for drafting the documents and submitting them to the PQA for compliance verification and, subsequently, for approval by the PhD Program Board and the Department Council. Specifically, the PhD Programs are responsible for preparing/updating the following documents:

PhD Programms Documents
- [ ] Initial Design Document of the Doctoral Research Program
- [ ] Planning and Organization Document for Training and Research Activities
- [ ] Self-Assessment Document for Periodic Accreditation (if selected for institutional visit)
- [ ] Analysis Document of the Results from Doctoral Students' Opinion Surveys
- [ ] Analysis Document of the Results Related to ANVUR Indicators
- [ ] Review Document

The **Departments**, equipped with their own regulations approved by the Department Council, develop the three-year research activity plan and plan the activities to be carried out accordingly. They propose the academic curriculum and any modifications to the Study Programs, as well as the establishment of Ph.D. programs. They have organizational and administrative autonomy and define the use of allocated financial resources, while ensuring consistency with the general criteria outlined in the University documents.

The Department, in implementing its policies and strategies for training, research, innovation, and social development, may establish collaboration agreements—whose results it constantly monitors—with economic, social, and cultural stakeholders, both public and private, within its local, national, and international reference context.

In order to implement, monitor, and review its activities, the Department must establish a Governance System and an organizational structure capable of achieving its strategy for the quality of teaching, research, and the third mission/social impact. This includes defining a work plan for the technical-administrative staff, outlining responsibilities and objectives aligned

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[3] For further details on the QA system of PhD programs, please refer to the dedicated procedure.

with strategic planning, and periodically assessing its effectiveness. This Governance System must be consistent with the guidelines and recommendations developed by the PQA[4].

> **Departments Documents**
> - □ SUA-RD/TM form or another three-year strategic planning document of the Department, with annual updates;
> - □ Self-assessment document for Periodic Accreditation (if selected for the institutional visit);
> - □ Analysis document of the results related to the annual monitoring of research and third mission/social impact, ASN, recruitment, and ANVUR indicators.

In each Department, a **Departmental Quality Assurance Structure** (Departmental Quality Presidium) is established. Coordinated by the Department's representative in the University Quality Committee, it oversees the proper functioning of study programs and doctoral courses, as well as the quality of teaching, research, and the department's third mission.

The structures of the **Central Administration** (Quality Assurance Office, Educational Offer Office, Performance Office, Research Service, Technology Transfer and Relations with Institutions, IT and Telecommunications Service) provide support for the drafting of documents and their uploading into databases.

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[4] For further details on the QA system of Departments, please refer to the dedicated procedure

5. INFORMATION AND DOCUMENTARY FLOWS

The following figure represents the structure of the University Quality Assurance System, indicating the main information and document flows, with particular attention to those to and from the University Governing Bodies, the Evaluation Unit, the Joint Teacher-Student Committees, the Departments, the Study Programs, and the PhD Programs.
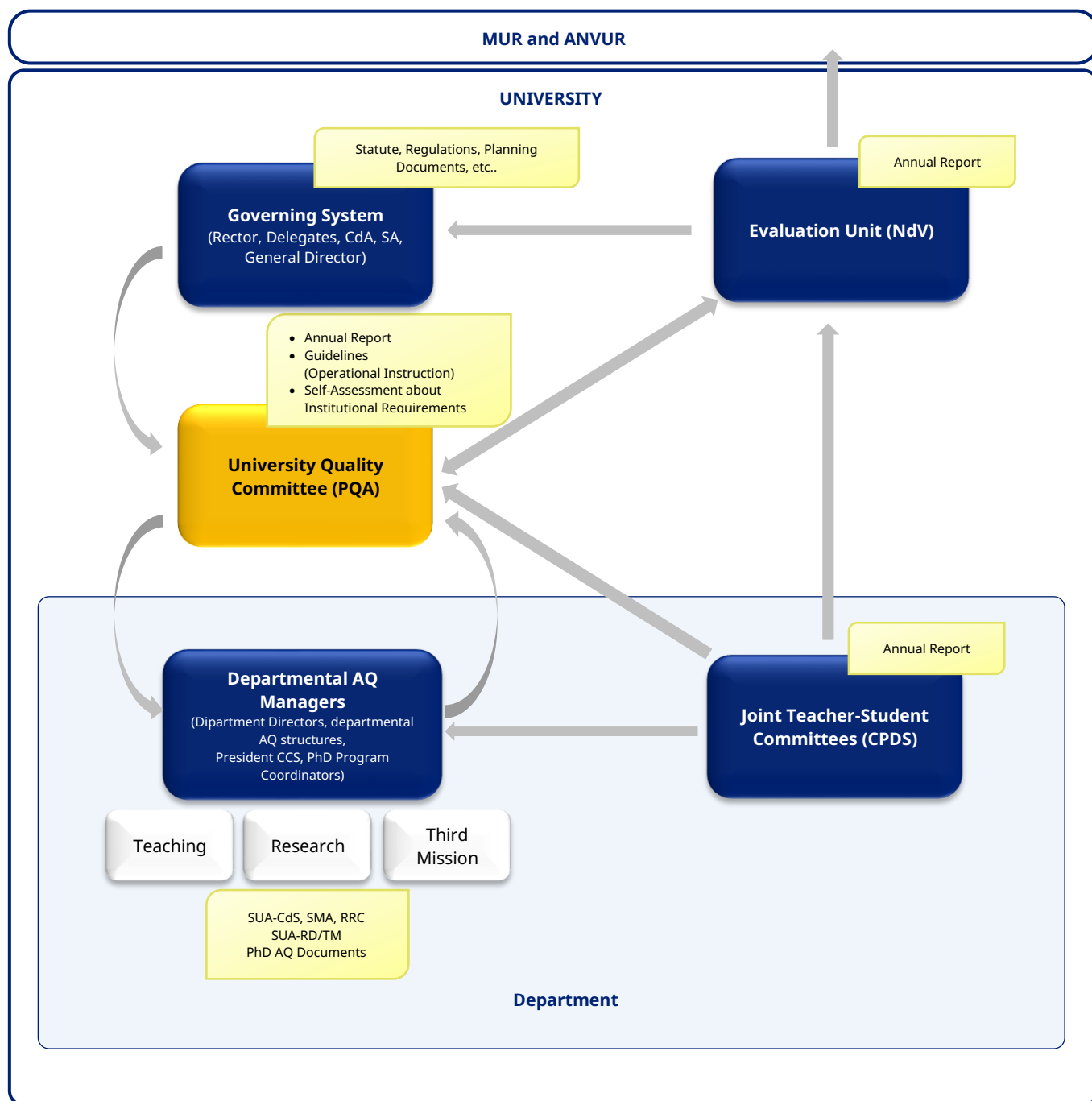

Figure 3 - Structure of the University Quality Assurance System

The following table illustrates the documents of the University Integrated Quality Assurance System, indicating the responsible entities/bodies, the recipients, and the respective preparation/approval timelines.

For the information and document flows related to the Quality Assurance systems for Teaching, Research, and the Third Mission, please refer to the dedicated procedures/instructions.

Table 1 - Documents of the University Integrated Quality Assurance System

Document or Activity	Responsible Entity	Destination	Deadline
Three-Year Planning	CdA upon proposal of the Rector and after SA opinion	All internal and external stakeholders	June 30 (or within the deadline set by ministerial decree)
Strategic Plan	CdA	All internal and external stakeholders	-
General Guidelines	Rector, after consulting the General Director	All internal and external stakeholders	June 30
Proposal for an Operational Plan and Related Budget Proposal	Directors of Spending Centers	General Director	October 1
Presentation of the University's Annual and Three-Year Budget Forecast	Rector	CdA	December 10 (internal deadline)
University's Annual and Three-Year Budget Forecast	CdA	MUR e MEF	December 31
Indicators and Expected Budget Results Plan (Annex to the Budget)	CdA	MUR e MEF	December 31
Annual Update of the Performance Measurement and Evaluation System	Evaluation Unit (binding opinion) CdA (resolution)	ANVUR	Before drafting the PIAO
Integrated Activity and Organization Plan	CdA	All internal and external stakeholders	January 31
Annual PQA Report	PQA	NdV, Rector, General Director, SA, CdA	April 30 (internal deadline)

Report on Results Achieved in Terms of Corruption Prevention	Corruption Prevention and Transparency Officer	ANAC, CdA	January 31
Performance Report	CdA	All internal and external stakeholders	June 30
Report on the Overall Functioning of the Evaluation, Transparency, and Internal Control System	Evaluation Unit (OIV)	ANVUR	During the Performance Evaluation phase
Annual Report of Internal Evaluation Units	Evaluation Unit (OIV)	PQA, Rector, General Director, SA, CdA, ANVUR, MUR	According to ANVUR guidelines; April 30 for the section on student opinion surveys (pursuant to Article 1, paragraphs 2 and 3, Law 370/1999)
Validation Document for the Performance Report	Evaluation Unit (OIV)	ANVUR	June 30

The University has an Integrated Governance and Quality Assurance System, suitable for carrying out institutional activities in alignment with its vision, policies, strategies, and established objectives. It is also adequate for their implementation, considering the available competencies and resources, as well as the University's size and specific characteristics.

The University's Integrated Quality Assurance System is structured and designed according to the logic of the Deming Cycle (Plan-Do-Check-Act), aimed at the constant monitoring and continuous improvement of the University's processes and services.

The University's General Guidelines define the priority management objectives for the three-year period in order to initiate the process of drafting the budget forecast and financial plans, in accordance with Article 6 of the Regulations for Administration, Finance, and Accounting (RAFC). The Strategic Plan translates the strategic objectives outlined in the Rector's Guidelines into operational objectives, in alignment with the goals set by the University Program for the three-year planning period as per Law No. 43 of March 2005. These objectives are previously shared with Department Directors and adopted by the Governing Bodies.

The University, through its Governing Bodies, is required to formalize a comprehensive and unified vision of the quality of teaching, research, third mission/social impact, and other institutional and managerial activities. This must take into account the reference context, stakeholders, available competencies and resources, development potential, and the impact on the social, cultural, and economic context (phase "**PLAN**").

The University consequently translates its vision into policies, strategies, and strategic and operational objectives, which are outlined in strategic and operational planning and budget documents accessible to internal and external stakeholders. These objectives, shared with all staff, are quantified using appropriate indicators and targets that are achievable, verifiable, and measurable, taking into account the University's specific characteristics, ministerial guidelines, as well as the results achieved in previous planning cycles and the processes of internal and external monitoring and evaluation.

In particular, the Governing Bodies are tasked with defining objectives aimed at increasing the so-called "Public Value." Every strategic and operational objective of the University (and consequently every organizational and individual objective) must therefore be directed toward improving the services provided to users and stakeholders, thereby establishing a strong link between performance and the creation of public value.

The University's structures (Central Administration, Departments, and Integrated University Center), based on the strategic and operational objectives set by the Governing Bodies in the planning documents and the resources allocated for each of them, are required to carry out activities and provide services within their competence (phase "**DO**").

In particular, the Departments are responsible for carrying out activities related to teaching, research, and the third mission, while the Central Administration is required to ensure the proper execution of instrumental services in support of these activities.

The University is also responsible for implementing an appropriate monitoring system for policies, strategies, processes, and achieved results, using tools and indicators, including those provided by the Ministry and ANVUR (phase "**CHECK**"). The University is responsible for defining, with the support of the Quality Assurance Board and the Evaluation Unit, the architecture of this system for monitoring and reviewing processes and activities. This phase involves the participation of various entities responsible for self-assessment and internal evaluation processes (Review Groups, Joint Faculty-Student Committees, the General Director and the Evaluation Unit for monitoring and evaluating performance objectives, the University Quality Committee, and departmental Quality Assurance structures for monitoring the quality of teaching, research, and third mission activities).

The operation of the Governance and Quality Assurance System is periodically updated with methods and timelines that enhance its effectiveness in supporting strategic planning. This update is carried out through the **Review of the Governance and Quality Assurance System**, which consists of a set of activities performed by the Governance System with the support of

the Quality Assurance Office and the Evaluation Unit, each within their respective areas of expertise, to determine the suitability, adequacy, and effectiveness of the Governance and Quality Assurance System in implementing the university's policies and strategies and achieving the established objectives.

The monitoring results are systematically and thoroughly analyzed to support the review and improvement of the University's Governance and Quality Assurance System (phase "**ACT**"), in order to propose corrective and improvement actions through guidelines and suggestions formulated, each within their own competencies, by the PQA, the NdV, the CPDS, the Review Groups, etc. The Evaluation Unit is responsible for assessing, through the drafting of an annual report, the functioning, suitability, adequacy, and effectiveness of the entire University's Quality Assurance System in implementing the University's policies and strategies and in achieving the established objectives.

The University considers quality as a broad semantic container that also encompasses the dimensions of legality, anti-corruption, transparency, and performance, forming an "**Integrated Quality Assurance System**" aimed at generating, ensuring, and maintaining over time a virtuous cycle of quality, respect, and reliability, while upholding the fundamental value of legality.