Annex to Regulation No. 1/2022

of the President of the Polish Accreditation Committee

of 24 May 2022

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| Obraz zawierający tekst, znak  Opis wygenerowany automatycznie |  |
| QUALITY MANAGEMENT SYSTEMPOLISH ACCREDITATION COMMITTEE |
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**Definitions:**

* **quality policy –** part of the strategy of the organisation which refers to the operation, development and improvement of the quality system. It contains formal declarations relating to the intentions, requirements, continuous improvement and assignment of resources necessary for the development of the system, identification and fulfilment of needs and expectations and the objectives of quality. The quality policy is a public document. It constitutes the basis for defining objectives and tasks in the implementation of processes and provides a framework for the continuation and improvement of the objectives of the organisation and its activities;
* **process –** a set of activities aimed at the achievement of a particular result;
* **procedure –** a mode of process implementation, containing a description of scheduled activities to be carried out in order to achieve a particular result;
* **record –** a document presenting achieved outcomes or evidence of research conducted;
* **process map –** graphic representation of a group of processes and their interrelations;
* **communication channel –** methods of communicating with the external environment;
* **PDCA cycle – Deming cycle** (Plan-Do-Check-Act) is a diagram illustrating the basic rule of continuous improvement. The Deming cycle is implemented in four stages relating to planning, implementation, monitoring and continuous improvement.

The identification of key processes enabling the Polish Accreditation Committee to implement tasks entrusted to it in connection with the requirements formulated in the Act of 27 July 2005 Law on Higher Education secondary legislation and in the “European Standards and Guidelines for Quality Assurance in the European Higher Education Area” form the basis for the development of the internal quality management system.

The model of the quality management system in the Polish Accreditation Committee operates within the PDCA cycle related to the planning, implementation, supervision and continuing improvement of the processes identified.

* **Plan** – the establishment of a policy, identification of purposes, processes, responsibility, procedures and tools necessary for the implementation of PKA’s tasks in accordance with the requirements laid down in the national legislation and with the expectations of stakeholders and the policy of the organisation.
* **Do** – the implementation and application of policies, supervisory measures, processes and procedures, methods of objective achievement and appropriate tools.
* **Check** – the monitoring and measuring of processes and their outcomes in relation to the policy, objectives and the requirements they are supposed to meet.
* **Act** – means undertaking actions aimed at the continuing improvement of the quality management system.

**I. GENERAL CONDITIONS**

**§ 1**

**Scope of the system**

1. The scope of the quality management system covers the remit of the Polish Accreditation Committee set out in the Act of 20 July 2018 Law on Higher Education and Science.
2. The application of the system refers to the bodies of the Polish Accreditation Committee, Chairs and members of sections operating within areas of study, the appeals section and all experts of the Committee, as well as - to the extent necessary - employees of the Polish Accreditation Committee Bureau.
3. The organisation and operational arrangements of the Polish Accreditation Committee and the detailed competence of its bodies shall be determined in the Statutes of the Polish Accreditation Committee. The organisation and operational arrangements of the PKA Bureau shall be determined in the Organisational Regulations issued by the PKA President.

**§ 2**

**Objectives of the system**

1. The ultimate goal of the quality management system is to raise the effectiveness of activities undertaken in relation to the implementation of the mission statement, strategy and the quality policy of the Polish Accreditation Committee, their continuous improvement, as well as to ensure that the statutory tasks are implemented in a way guaranteeing the repetitiveness of quality characteristics.
2. The specific goals of the system consist in:
	* ensuring professionalism and objectivity in the scope of projects implemented,
	* providing resources guaranteeing high standards in projects under implementation,
	* continuous improvement and development of the quality management system,
	* improvement of communication channels and of cooperation with PKA stakeholders,
	* shaping pro-quality attitudes.
3. The efficient implementation of objectives is possible thanks to the implementation and maintenance of process – based approach to quality management within the Polish Accreditation Committee and owing to the following activities:
	* correct planning and supervision of tasks under implementation,
	* improving qualifications and gaining new competences by persons working on behalf of PKA,
	* ensuring a correct information flow inside and outside PKA,
	* making all persons working on behalf of PKA aware of the quality policy and its objectives,
	* proper identification and registration of quality problems resulting from tasks being implemented and from the functioning of the system,
	* shaping PKA’s quality culture by enforcing the compliance of activities undertaken by members, experts and employees of the Bureau with procedural requirements and developing a feeling of joint responsibility for quality as well as facilitating the initiation of quality changes,
	* organising audits and system reviews and undertaking preventive and corrective actions.

**§ 3**

**Responsibility**

1. The President of the Polish Accreditation Committee shall supervise the internal quality management system. Additionally, the President:
	* shall coordinate work on the development of the quality policy,
	* shall make decisions relating to the implementation, maintenance and improvement of the quality management system, including the determination of procedures,
	* shall provide organisational conditions indispensable for the functioning and improvement of the quality management system,
	* shall approve internal and external communication mechanisms,
	* shall promote quality awareness and the process attitude to the management of quality.
2. The President shall appoint a Quality Management System Plenipotentiary, whose responsibilities include:
* presentation of periodical reports on the functioning of the system to the President which take account of information relating to the needs resulting from the development and improvement of the system,
* supervision and monitoring of activities aimed at improvement while preserving system integrity during the introduction of changes,
* undertaking activities aimed at the dissemination of knowledge of the requirements and functioning of the system among persons working on behalf of PKA,
* participation in activities aimed at the performance of cyclical external reviews of the Polish Accreditation Committee by external bodies.
1. The Chairs of individual sections of study areas personally supervise processes in their sections and shall be responsible for:
	* monitoring of the correctness of processes implemented in the sections on an ongoing basis,
	* raising awareness of the requirements of the quality management system among section members and experts cooperating with the sections,
	* initiation of corrective and preventive actions,
	* presentation of periodical information on the implementation of processes in their section to the Quality Management System Plenipotentiary, including annual reports and information on needs resulting from development and improvement.
2. The responsibility of members and experts of the Polish Accreditation Committee has been laid down in the Statutes and in the Code of Ethics, and elaborated on in the procedures adopted.

**II. PLANNING**

**§ 1**

**Policy**

1. Planning in the scope of quality management in the Polish Accreditation Committee is an uninterrupted process, implemented especially by way of:
* identification of the mission statement, strategy and the quality policy,
* identification of quality objectives,
* determination of resources,
* identification of processes and their interrelations,
* determination of responsibilities and procedures, including those relating to quality improvement,
* development of a task implementation schedule.
1. The mission statement, strategy and the quality policy shall be adopted at plenary sessions of the Polish Accreditation Committee and communicated to PKA’s internal and external stakeholders.
2. The quality policy and quality objectives are connected with PKA’s mission statement and strategy and constitute the basis for the implementation of the quality management tasks of the Polish Accreditation Committee.

**§ 2**

**Processes**

1. All processes indispensable in the quality management system have been specified in the Process Model that constitutes Annex 1.
2. Objectives, procedures and the scope of responsibility at particular stages of process implementation have been determined for each specified process.
3. The implementation of the processes shall be monitored and supervised in accordance with the requirements laid down in the national legislation and in the internal regulations of the Polish Accreditation Committee.

**§ 3**

**Resources**

1. Indispensable human, financial and intangible resources shall be provided for the purpose of the functioning, improvement and development of the quality management system of the Polish Accreditation Committee.
2. Resource management shall be implemented by the President of the Polish Accreditation Committee in accordance with the national legislation and the internal regulations of the Committee, including the necessity to preserve transparent criteria and procedures.
3. The needs and plans of the Polish Accreditation Committee formulated in relation to its resources shall be communicated to internal and external stakeholders.
4. The Polish Accreditation Committee shall apply mechanisms precluding conflict of interests and shall enforce their application in the work of its members and experts.

**§ 4**

**Procedures**

1. Procedures applied in the work of the Polish Accreditation Committee shall indicate the way of the implementation of a process or a part thereof, responsibility of persons undertaking activities at its various stages, and the rules of activity documenting.
2. The procedures shall be made accessible to the internal and external stakeholders of the Polish Accreditation Committee on its webpages.

**§ 5**

**Schedules**

1. In relation to the tasks of the Polish Accreditation Committee long-term and short term schedules shall be drawn up in accordance with the procedures and/or responsibilities.
2. The work schedules of the Polish Accreditation Committee shall be adopted in a resolution of PKA’s Presidium.
3. The indispensable scope of task planning of the Polish Accreditation Committee has been included in the procedures of implementation of designated processes.

**III. IMPLEMENTATION**

**§ 1**

The implementation of processes subject to the quality management system shall be supervised by authorised persons in accordance with the adopted procedures.

**IV. VERIFICATION**

**§ 1**

**Monitoring and measurement**

1. The Polish Accreditation Committee shall monitor and measure the effectiveness of all processes in relation to the policy implemented, objectives and the requirements set for the processes relating to quantity and quality (among other things in the national legislation and internal regulations).
2. The following shall be applied in the measurements:
3. external feedback mechanism:
* surveys addressed to higher education institutions,
* cyclical external reviews of PKA’s activity, carried out by national and international institutions,
1. internal feedback mechanism:
* opinions formulated by members and experts of the Polish Accreditation Committee on the subject of development needs, trainings and others,
* the results of the current and cyclical assessment of members and experts of the Polish Accreditation Committee,
* reviews of the management system,
* cyclical self-evaluation of PKA’s activity.
1. The detailed principles of monitoring and measurement of process effectiveness have been defined in the procedure of performing a review of the quality management system.

**§ 2**

**Analysis**

1. Analysis of monitoring and measurement results shall serve the purpose of the determination of the effectiveness of the system applied and its improvement.
2. Analysis of results shall be performed by persons or sections authorised by the President of the Polish Accreditation Committee who also determines the frequency of surveys.
3. The Quality Management System Plenipotentiary shall be responsible for ongoing analysis of stakeholders’ requests and remarks and for forwarding them in the form of papers accompanied by proposals of corrective actions to the PKA President.
4. The results of the analyses performed shall be forwarded to the President of the Polish Accreditation Committee and published, and the resulting conclusions shall form the basis for possible improvement measures.

**V. IMPROVEMENT**

**§ 1**

**Reviews**

1. The system shall be subjected to annual reviews performed by the Quality Management System Plenipotentiary which shall be aimed at the verification and updating of the quality policy and at the implementation of changes to the system, while respecting the principle of its integrity.
2. The quality policy, quality objectives as well as the results of internal and external reviews shall be used in determining the scope of the process of improvement.
3. The Quality Management System Plenipotentiary shall be responsible for the continuous improvement of the quality management system. The Management of the Polish Accreditation Committee and its Bureau shall also participate in the continuing improvement process by making proposals and initiating improving actions.

**VI. FINAL PROVISIONS**

**§ 1**

**Collecting information and its accessibility**

1. The general rule of the information policy in the scope of the quality management system shall consist in providing public access to data relating to:
	* quality policy and objectives,
	* identified processes, procedures governing the proceedings of PKA, its members and experts, and to the extent resulting from the remit – PKA Bureau employees,
	* monitoring, measuring, analysing and improving PKA’s activity,
	* aims and stages of objective implementation.
2. The publicly accessible tools for collecting information from stakeholders comprise at least a mechanism for open contact which allows for passing anonymous information to PKA, that is not involving the necessity of personal contact with the management of the Polish Accreditation Committee, logging in on the webpage or giving identification data.
3. In addition, the Committee shall develop the existing forms of closed electronic communication, that is questionnaires addressed to specific groups of recipients and e-voting.

**§ 2**

**Public access**

Access to the information panel of the system is ensured directly and with the help of a clear link from the main webpage of the Polish Accreditation Committee ([www.pka.edu.pl](http://www.pka.edu.pl)).

**Attachment No. 1. Process Model.**

**Maintenance and development of the quality management system**



**Attachment No. 2. A list of processes with assigned procedures and responsibilities.**

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| Process name | Objective | Procedures | Responsibility |
| I. Quality assessment | 1. Timely process implementation.
2. Substantive correctness of solutions.
3. Maintenance of agreed quality and quantity requirements.
 | **I.1.** Programme evaluation | Chairs and secretaries of sections, chairs of evaluation panels, employee responsible for running the website and for the survey, DPO, Coordinator for the programme evaluations, PKA Secretary, PKA Presidium, PKA President. |
| **I.2.** Programme evaluation requested by a HEI | Chairs and secretaries of sections, chairs of evaluation panels, employee responsible for running the website and for the survey, DPO, Coordinator for the programme evaluations, PKA Secretary, PKA Presidium, PKA President. |
| **I.3.** Programme evaluation requested by the Minister | Chairs and secretaries of sections, chairs of evaluation panels, employee responsible for running the website and for the survey, DPO, Coordinator for the programme evaluations, PKA Secretary, PKA Presidium, PKA President. |
| **I.4.** ***(deleted)*** |  |
| **I.5.** E-voting | Chairs and secretaries of sections, PKA President and the employee responsible for e-voting.  |
| II. Giving opinions | 1. Timely process implementation.
2. Substantive correctness of solutions.
3. Maintenance of agreed quality and quantity requirements.
 | **II.** **1.** Giving opinions on applications | Chairs and secretaries of sections,Coordinator for the opinion giving procedures, PKA Presidium, PKA President. |
| **II.** **2.** Considering applications for re-consideration of a matter  | Chair and secretary of the appeals section, Coordinator for the opinion giving procedures, PKA Presidium, PKA President. |
| **II.3. *(deleted)*** |  |
| **II.4.** Procedure for giving opinions on applications addressed to the Committee by the minister competent for higher education in matters other than those listed in Article 258.1 of the Act of 20 July 2018 on Higher Education and Science | Chairs and secretaries of sections,Coordinator for the opinion giving procedures, PKA Presidium, PKA President. |
| **II.5.** E-voting | Chairs and secretaries of sections, PKA President and the employee responsible for e-voting. |
| III. Resource management | 1. Qualification improvement.
2. Ensuring correct document circulation.
3. Providing appropriate infrastructure, tools and equipment.
 | **III.** **1.** Effecting Foreign Travel | PKA Bureau Director, Chief Accountant, employee responsible for international cooperation, person outgoing.  |
| **III.2.** Circulation of public procurement documents | PKA Bureau Director, Chief Accountant, employee responsible for public procurement. |
| **III.3.** Circulation of contracts and business travel forms | Secretariat of the Bureau, secretaries of sections, PKA Accounts, PKA Bureau Director. |
| **III.4.** Considering complaints and motions | Section for complaints and motions, employee appointed by PKA Bureau Director. |
| **III.** **5.** Rules and criteria for appointing secretaries of PKA evaluation panels | Secretary of PKA, PKA Bureau Director, PKA President. |
| IV. Maintenance and development of the quality management system | 1. System improvement.
2. Monitoring, measurement, analysis.
 | **IV.1.** Quality management system review | PKA President, chairs of sections and appeals section, Quality Management System Plenipotentiary. |
| V. Information policy | Effectively informing of internal and external stakeholders | **V.1.** Circulation and publishing of information | PKA President, appointed PKA Bureau employee. |
| **V.2.** Developing the Committee's internal rules | PKA President, PKA Bureau Director. |
| **V.3.1.** Standard of conduct in communication with the media | Coordinator of the Department of Analysis, Research, Training / Communication and Stakeholders' Relations, Communication Specialist, Secretariat of the Bureau. |
| **V.4.** Confirmation of receipt of correspondence by the clerk – instruction | Bureau staff. |
| VI. Procedures and instructions for remote meetings | 1. Raising qualifications.
2. Ensuring proper circulation of documents.
3. Providing adequate infrastructure, tools and equipment.
4. Effective handling of remote meetings.
 | **VI.1.** Online voting support - wza24 | Secretaries of sections / appeals section. |
| **VI.2.** ZOOM, remote meetings until switching to MS Teams | Secretaries of sections/ appeals section. |
| **VI.3.** Internal, including the organization of meetings in MS Teams | Secretaries of sections/ appeals section. |
| **VI.3.1.** Instruction No.1 - creating accounts in the pka.edu.pl domain |  |
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| **VI.3.3.** Instruction No.3 - creating a group and channels for programme evaluations | Secretaries of sections/ appeals section. |
| **VI.3.4.** Instruction No.4 - creating groups for the opinion process | Secretaries of sections/ appeals section. |
| **VI.3.5.** Instruction No.5 – creating and conducting meetings in the MS Teams application | Secretaries of sections/ appeals section / evaluation panels. |