**Kütahya Dumlupınar University
Quality Coordination Office**

QUALITY HANDBOOK

KÜTAHYA 2025

Kütahya Dumlupınar University
Quality Coordination Office

KÜTAHYA DUMLUPINAR ÜNİVERSİTESİ
KALİTE KOORDİNATÖRLÜĞÜ

KÜTAHYA DUMLUPINAR UNIVERSITY QUALITY HANDBOOK

Kütahya 2025

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Rector's Message

Kütahya Dumlupınar University has adopted a quality-focused management approach in higher education, making it a fundamental principle to conduct its education and training, research and development, and community service activities in line with national and international standards. The Quality Handbook, prepared within this scope, has been created to define the structure, operation, and processes of our university's quality assurance system.

The Quality Handbook outlines our institutional policies, quality objectives, stakeholder participation, monitoring and evaluation mechanisms, and continuous improvement processes within a systematic and comprehensive framework. The manual was prepared based on the national quality framework defined by the Higher Education Quality Council (YÖKAK) and structured in line with our university's strategic plan and institutional goals.

Kütahya Dumlupınar University has adopted the PDCA(PUKO) cycle (Plan – Do – Check – Act) as its fundamental process management model in order to ensure the sustainability of its quality assurance system. In line with this approach, all academic and administrative activities are carried out in accordance with pre-planned objectives; implementation processes are regularly monitored; the collected data are analyzed to conduct performance evaluations; and necessary improvement measures are taken to achieve systematic development. The PDCA cycle contributes to extending the university's quality approach beyond specific units to institutional integrity, and supports a management culture that is accountable, transparent, and based on continuous improvement.

This handbook, prepared to ensure the sustainability of institutional quality assurance and enhance institutional performance, aims to ensure that all academic and administrative units of our university operate within a common quality framework. The establishment and internalization of a quality culture throughout the university is considered one of the cornerstones of our institutional development.

The transformation of a quality culture into an institutional reflex and the internalization of the information and practices presented in this handbook by all our stakeholders constitute one of our primary institutional objectives. In this regard, I am fully confident that the Kütahya Dumlupınar University Quality Handbook, prepared in line with this objective, will serve as a guiding resource for all our stakeholders and contribute to our university's quality-focused institutional transformation.

Prof. Dr. Süleyman KIZILTOPRAK

Rector of Kütahya Dumlupınar University

Contents

1. INTRODUCTION

Higher education institutions are dynamic structures where scientific knowledge is produced, disseminated, and transferred to society. In this context, quality is the foundation not only of academic excellence but also of administrative processes, service delivery, and institutional development. This Quality Handbook has been prepared to define Kütahya Dumlupınar University's quality assurance system, standardize processes, guide all stakeholders, and support continuous improvement. The Quality Handbook has been prepared in accordance with the Higher Education Quality Assurance Regulation and YÖKAK evaluation criteria.

The Quality Handbook is based on the continuous improvement of education and training, research and development, social contribution, and administrative services carried out in line with our university's mission, vision, and strategic goals. It also encourages the establishment of a quality culture based on the participation of internal and external stakeholders, transparency, and accountability. As a university committed to continuous improvement, it defines the maintenance of the quality assurance system in collaboration with internal and external stakeholders as its fundamental strategy. This handbook serves as a guide for all academic and administrative units of our university and includes policies, processes, responsibilities, and monitoring and evaluation mechanisms within the scope of the quality management system. Each unit of Kütahya Dumlupınar University is expected to structure its own processes in accordance with the general principles outlined in this book.

2. INSTITUTIONAL FRAMEWORK

2.1. Vision

Kütahya Dumlupınar University aims to educate entrepreneurial, highly qualified graduates with strong professional knowledge and skills. In line with this vision, our Coordination Office has adopted the vision of contributing to the goal of becoming a university that supports institutional development by establishing a quality culture in all units based on continuous improvement, with a participatory and transparent approach, and by creating a sustainable quality management system.

2.2. Mission

Kütahya Dumlupınar University embraces the mission of being an education-focused university that educates individuals with professional competencies in various fields with a commitment to scientific research and service to society. In this regard, our Coordination Office has adopted the mission of monitoring, evaluating, and continuously improving the activities of our university in the areas of education, research, and social contribution; in accordance with the principles of strategic management, leadership, and governance, and in line with the principles of quality assurance.

2.3. Core Values

• **Human and Ethics Orientation:** It respects human rights, complies with ethical principles, and ensures fair practices in all processes.

· **Management and Participation:** It prioritizes stakeholder participation in decision-making and implementation processes and adheres to the principles of accountable and transparent governance.

· **Process and Development Orientation:** It emphasizes that activities are carried out in line with the principles of continuous development, learning, and innovation; and these processes are regularly monitored and improved.

· **Stakeholder Orientation:** It is sensitive to the needs and expectations of internal and external stakeholders; it is based on effective communication, cooperation, and feedback processes.

2.4. Quality Policy

Kütahya Dumlupınar University adopts a quality assurance approach in all its processes in the areas of education, research, and social contribution. It applies the principles of data-driven decision-making, stakeholder satisfaction enhancement, and continuous improvement with a participatory, transparent, and ethical understanding. By integrating a culture of quality into its institutional structure, it implements a sustainable quality management system that is compliant with national and international standards.

2.4.1. Governance Policy

Kütahya Dumlupınar University, based on its responsibility to serve society, supports its educational mission with scientific research and effectively implements it through transparent, participatory, and accountable governance that respond to the needs and expectations of stakeholders, encourage an entrepreneurial spirit, strengthen internationalization strategies in all areas of activity, and support the development of individuals with up-to-date professional competencies.

Within this scope, Kütahya Dumlupınar University adopts the following objectives and principles as its governance policy:

- Acting in accordance with the principles of transparency by adopting clear and traceable methods in decision-making and implementation processes,
- Taking responsibility and being accountable to other institutions and organizations in the governance of processes,
- Adhering to legal and ethical principles in governance processes,
- Strengthening the participation of internal and external stakeholders to enable them to play an active role in governance processes,
- Adopting a governance approach that is fair, impartial, and equidistant towards all stakeholders,
- Using resources effectively and sustainably in line with strategic objectives,
- Disseminating corporate quality and learning culture,
- Ensuring digitization in education, training, and research and development processes by introducing new generation technologies to the university,
- Creating a common database among all units through the integrated use of information management systems,
- Ensuring transparency and accountability in all processes,
- Ensuring data reliability and accessibility,
- Ensuring the transparent and sustainable use of financial resources within the framework of social responsibility and corporate ethics principles,
- Enhancing the institution's global visibility and reputation to develop international research and development (R&D) and education activities,
- Periodically monitoring and improving governance processes within the framework of quality management.
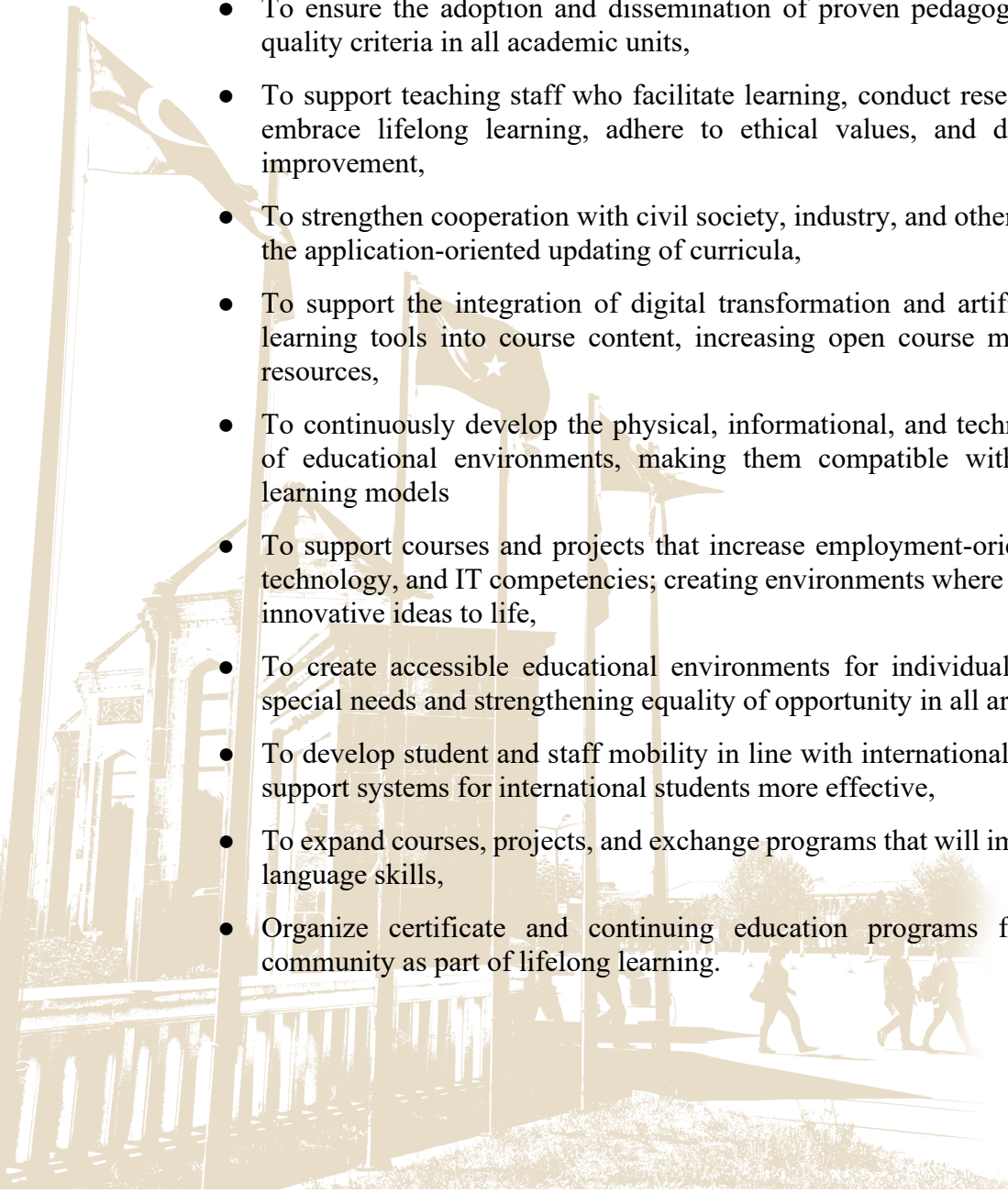
With this policy, Kütahya Dumlupınar University commits to ensuring effective governance by acting in line with the "A university that adds value" approach.

2.4.2. Education and Teaching Policy

Adopting the vision of "training graduates who are preferred in their field, entrepreneurial, and possess professional knowledge and skills," Kütahya Dumlupınar University plans, implements, and evaluates its education and teaching activities in line with **national and international standards, digital transformation, sustainable development, and student-centered learning** principles.

Within this policy, Kütahya Dumlupınar University adopts the following objectives and principles as part of its education and training policy.

- To increase satisfaction levels in education and training activities by regularly evaluating student and faculty feedback,

- To strengthen the institutional education culture and create an innovative and inclusive learning ecosystem,

- To ensure the adoption and dissemination of proven pedagogical methods based on quality criteria in all academic units,

- To support teaching staff who facilitate learning, conduct research, share knowledge, embrace lifelong learning, adhere to ethical values, and demonstrate continuous improvement,

- To strengthen cooperation with civil society, industry, and other stakeholders to ensure the application-oriented updating of curricula,

- To support the integration of digital transformation and artificial intelligence-based learning tools into course content, increasing open course materials and e-learning resources,

- To continuously develop the physical, informational, and technological infrastructure of educational environments, making them compatible with hybrid and distance learning models

- To support courses and projects that increase employment-oriented entrepreneurship, technology, and IT competencies; creating environments where students can bring their innovative ideas to life,

- To create accessible educational environments for individuals with disabilities and special needs and strengthening equality of opportunity in all areas,

- To develop student and staff mobility in line with internationalization goals and make support systems for international students more effective,

- To expand courses, projects, and exchange programs that will improve students' foreign language skills,

- Organize certificate and continuing education programs for graduates and the community as part of lifelong learning.
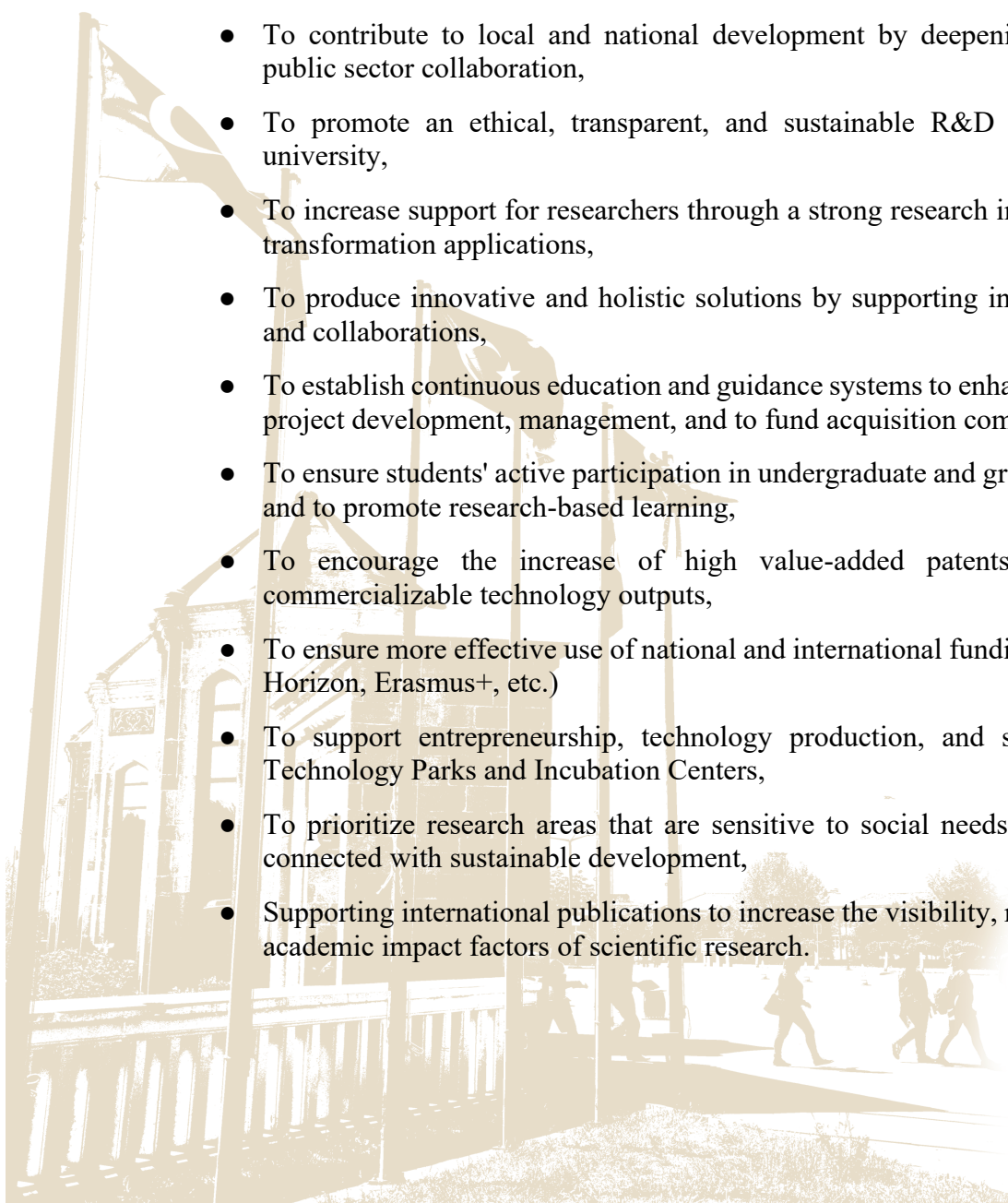
With this policy, Kütahya Dumlupınar University commits to regularly reviewing and updating its approach in line with the "A university that adds value" philosophy, considering changing global conditions, technological developments, social needs, and stakeholder opinions.

2.4.3. Research and Development Policy

Kütahya Dumlupınar University aims to play a leading role in the process of producing, disseminating, and transforming scientific knowledge into social benefits. Our Research and Development (R&D) activities encompass **a competitive, ethically grounded, innovative, and sustainable scientific production approach at both national and international levels**. This policy document aims to provide researchers with a guiding framework by defining our university's R&D vision, strategic objectives, and implementation principles. Strengthening our university's scientific infrastructure, encouraging interdisciplinary collaborations, and contributing to regional and national development are among our top priorities.

Within this scope, Kütahya Dumlupınar University adopts the following objectives and principles as its research and development policy.

- To produce scientific outcomes with high impact value at the national and international levels (publications, patents, projects, technology transfer),

- To contribute to local and national development by deepening university-industry-public sector collaboration,

- To promote an ethical, transparent, and sustainable R&D culture throughout the university,

- To increase support for researchers through a strong research infrastructure and digital transformation applications,

- To produce innovative and holistic solutions by supporting interdisciplinary research and collaborations,

- To establish continuous education and guidance systems to enhance the academic staff's project development, management, and to fund acquisition competencies,

- To ensure students' active participation in undergraduate and graduate research projects and to promote research-based learning,

- To encourage the increase of high value-added patents, utility models, and commercializable technology outputs,

- To ensure more effective use of national and international funding sources (TÜBİTAK, Horizon, Erasmus+, etc.)

- To support entrepreneurship, technology production, and startup culture through Technology Parks and Incubation Centers,

- To prioritize research areas that are sensitive to social needs, solution-oriented, and connected with sustainable development,

- Supporting international publications to increase the visibility, number of citations, and academic impact factors of scientific research.

With this policy, Kütahya Dumlupınar University commits to resolutely implementing research and development activities that promote scientific production, support innovative thinking, and lead regional and national development, acting in line with the "A university that adds value" approach.

2.4.4. Social Contribution Policy

Kütahya Dumlupınar University aims to play a leading role in transforming knowledge, culture, art, and sports into social benefits and strengthening the public interest. Our social contribution activities encompass an inclusive, ethically grounded, accessible, innovative, and sustainable approach at both national and international levels. This policy document aims to provide a guiding framework for our academic and administrative units and stakeholders by defining our university's social contribution vision, strategic objectives, and implementation principles. To strengthen our university's social impact capacity, encourage interdisciplinary and multi-stakeholder collaborations, and contribute to regional and national development and quality of life, we have established the following principles:

Within this scope, Kütahya Dumlupınar University adopts the following objectives and principles as its social contribution policy:

- To regularly analyze social needs and develop and implement programs targeting priority areas (education, health, social services, environment, disaster and risk reduction, culture-arts, sports, etc.),

- To expand evidence-based and impact-focused social contribution activities that are integrated with education and training and Research and Development(R&D) processes, are evidence-based, and impact-oriented,

- To strengthen students' social responsibility, entrepreneurship, problem identification, and problem-solving skills by supporting community-based learning and volunteerism activities,

- To deepen cooperation with internal and external stakeholders (local governments, public institutions, NGOs, industry, professional chambers, communities) and carry out joint projects,

- To provide coordinated, rapid, and qualified social support during pre-disaster, during-disaster, and post-disaster processes; strengthen psychosocial support and resilience efforts at the institutional level,

- To produce and disseminate publicly accessible training, certification programs, and guidance materials within the scope of lifelong learning,

- To promote practices that are compatible with sustainable development goals and have a high level of environmental and social responsibility,

- To ensure that scientific knowledge is shared with society in a transparent, understandable, and secure manner by adopting the principles of digitalization and open access,

- To regularly report output and outcome indicators (number of participants, access, satisfaction, behavior/capacity change, sustainability, etc.) for impact measurement,

- To incorporate community service initiatives into institutional memory, sharing them, and promoting them across the university,

- To strictly adhere to ethical principles, data security, and personal data protection in social contribution activities,

- To increase the number and quality of social impact-focused projects by utilizing national and international funding sources,

- To strengthen the social contribution ecosystem by establishing sustainable relationships with alumni and student communities.

With this policy, Kütahya Dumlupınar University commits to persistently implementing social contribution activities with a transparent and accountable approach that prioritizes social benefit, acting in line with the "A university that adds value" philosophy.

2.4.5. Environmental Policy

Kütahya Dumlupınar University fundamentally embraces an approach that ensures the protection of the environment, the efficient and sustainable use of natural resources, the safeguarding of human and other living beings' health, and the elevation of living standards to the highest level. Accordingly, the university defines its core approach, principles, and commitments to environmental sustainability and develops a systematic framework of objectives, programs, monitoring, and continuous improvement to minimize the adverse impacts of its activities on the natural environment.

Within this scope, Kütahya Dumlupınar University adopts the following objectives and principles as its environmental policy:

- To ensure compliance with national and international environmental regulations in the university's activities,

- To prioritize the effective, efficient, and responsible use of energy, water, and natural resources,

- To ensure waste is reduced, segregated, recycled, and properly disposed of where it is generated,

- To aim to protect and increase green areas and support ecological structures,

- To minimize the university's carbon footprint through transportation, energy use, and consumption habits,

- To raise awareness among internal and external stakeholders on environmental issues and encourage a sustainable lifestyle,

- To regularly monitor, measure, and improve the university's environmental performance,

- To obtain contributions from internal and external stakeholders in environmental policies and practices and encourage cooperation.

With this policy, Kütahya Dumlupınar University commits to ensuring environmental sustainability and effectively implementing these policies by acting in line with the "A university that adds value" approach.
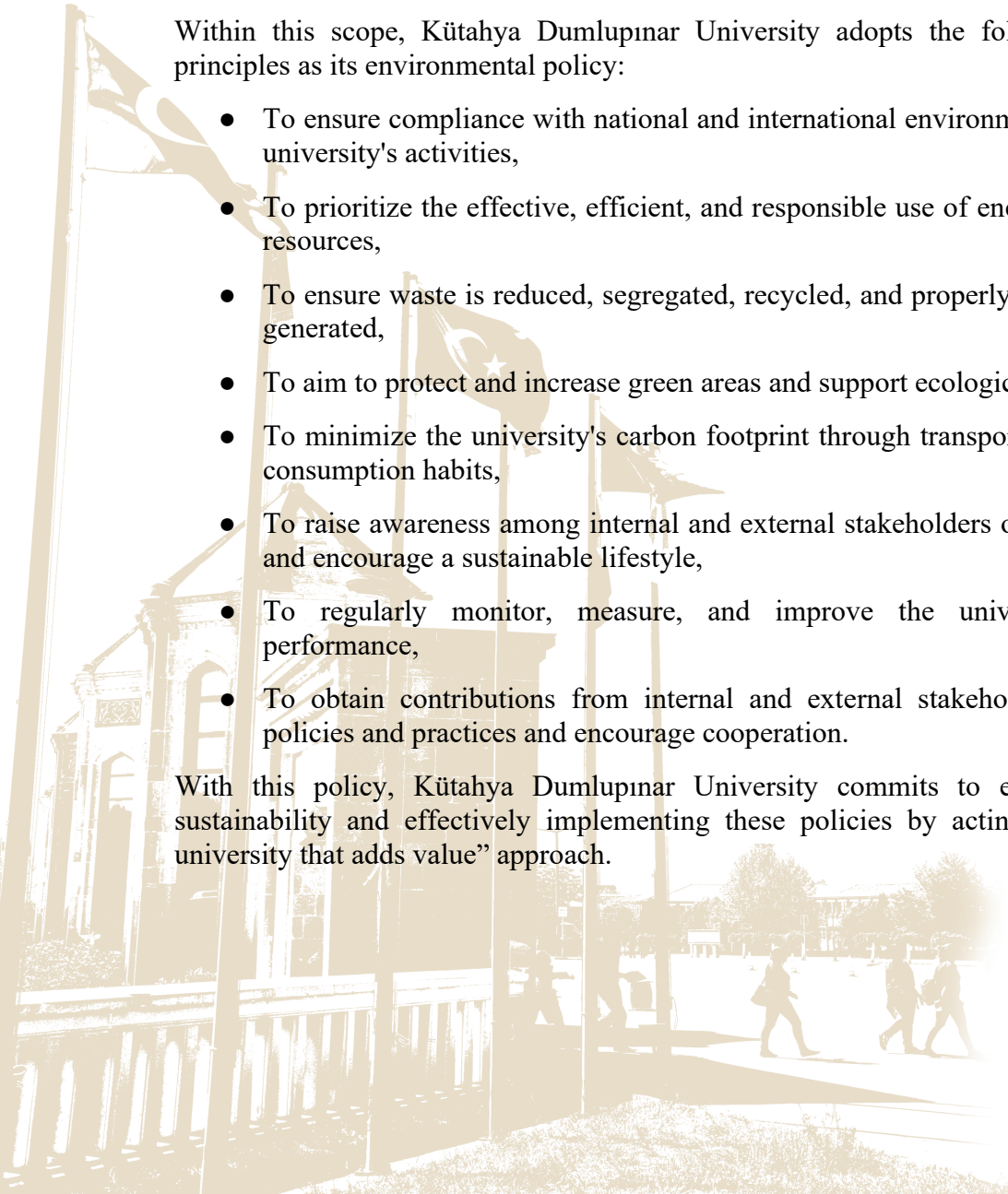
2.5. Strategic Objectives and Specific Targets

The Quality Coordination Office of Kütahya Dumlupınar University aims to disseminate the quality assurance system across all units and ensure its sustainable operation. The objectives and targets defined in this regard are consistent with our university's quality policy, strategic plan, and THEQC(YÖKAK) principles.

Objective 1 – Embedding a culture of quality into the institutional structure

Specific Goals:

- To support quality processes in academic and administrative units,

- To ensure the regular and effective functioning of unit quality commissions,

- To provide information and guidance on the quality assurance system.

Objective 2 – Developing a culture of continuous improvement

Specific Goals:

- To ensure the evaluation of survey, feedback, and monitoring data,

- To guide units in their internal evaluation and improvement efforts,

- To contribute to the dissemination of improvement suggestions and best practices across the institution.

Objective 3 – Monitoring and reporting on quality processes

Specific Goals:

- To coordinate internal evaluation and THEQC (YÖKAK) processes,

- To monitor quality indicators annually,

- To maintain transparent and open communication processes with stakeholders.

Objective 4 – Increasing participation and awareness

Specific Goals:

- To encourage the participation of students, staff, and external stakeholders in quality processes,

- To organize informative events and training programs,

- To produce and share informative content related to quality.

3. QUALITY MANAGEMENT SYSTEM

Our university's quality management system is implemented with a participatory, transparent, and data-driven approach. Quality processes are designed based on the plan-do-check-act (PDCA) cycle. This system is structured with the goal of continuous improvement in line with quality assurance principles.

The Quality Management System is based on stakeholder participation and founded on the principles of transparency, accountability, and continuous improvement. To this end, regular feedback is obtained from internal and external stakeholders, performance indicators are monitored, and periodic internal evaluation processes are carried out. The quality management

system works in an integrated manner with the institution's strategic plan, internal and external stakeholder feedback, performance indicators, and THEQC (YÖKAK) evaluation criteria. The system is monitored and developed through internal evaluation studies conducted annually and external evaluation processes when necessary.

The core processes of the quality assurance system at our university—education and training, research and development, social contribution, and administrative services—are carried out by the relevant academic and administrative units. The planning, implementation, control, and corrective action phases of these processes are the responsibility of the units. To enhance the effectiveness of the Quality Management System, Quality Committees are established in each academic and administrative unit to support continuous improvement through process management, self/internal evaluation reports, and action plans.

The Quality Coordination Office coordinates, monitors, evaluates, and reports on these processes to ensure they are conducted in accordance with quality assurance standards. Additionally, the Quality Coordination Office plays a key role in planning and following up on processes such as internal evaluation, unite internal evaluation report (UIER), peer evaluation, and improvement activities.

Quality assurance processes aim to ensure that the university's activities in the areas of education, research, and social contribution are carried out in accordance with specific standards and are continuously improved. The basic processes implemented in this context are as follows:

Internal Evaluation (UIER): Unite Internal Evaluation Reports are prepared once a year by each unit based on the THEQC guide and evaluated across the institution. As part of unite internal evaluation report (UIER) process, units analyze their strengths and areas for improvement, determine their planned improvement activities, and report the results. Unite Internal Evaluation Report contributes to the unit's adoption of a self-evaluation approach.

Peer Evaluation: Peer evaluation ensures a multi-perspective approach to the internal evaluation process through mutual evaluation between units. It is conducted based on the THEQC (YÖKAK) Institutional Internal Evaluation Report (IIER) guide. It was launched as a pilot project in June 2025, based on the 2024 Unit Internal Evaluation Reports (UIER). After the pilot application was completed, the reports were checked, and review and improvement activities were carried out. As a result, the application was disseminated to all units as of August 2025. Paired units will contribute to the improvement of processes by evaluating each other's internal evaluation reports. This application aims to spread the culture of internal feedback and strengthen the learning organization approach.

Institutional Self-Evaluation: A comprehensive assessment conducted across the institution, analyzing its strengths and areas for improvement. It is prepared in accordance with the THEQC(YÖKAK) Institutional Internal Evaluation Report (IIER) Guide published by YÖKAK and forms the basis for the Institutional External Assessment process. Institutional Internal Evaluation contributes to institutionalizing the university's self-assessment culture.

Institutional External Evaluation: It is an evaluation and monitoring process conducted by THEQC(YÖKAK) based on the Institutional Internal Evaluation report.

Institutional Accreditation Program (IAP):

Under the IAP, which is run by THEQC(YÖKAK), the university's quality assurance system is evaluated holistically. The IAP focuses on improving quality management, teaching and learning processes, research activities, and social contribution in a sustainable way at the

institutional level. At our university, IAP coordination is carried out in collaboration with the Quality Coordination Office and the Rectorate. These processes are organized under the coordination of the Quality Commission and the leadership of the Quality Coordination Office. The results obtained form the basis for improvement activities and support the institutionalization of a culture of the quality.

At our university, the relevant academic units are responsible for program accreditation processes. The Quality Coordination Office can provide guidance and support in these processes. The Quality Coordination Office, together with the Rectorate, is responsible for coordinating the institutional accreditation processes carried out within the scope of the Institutional Accreditation Program (IAP).

5. THE QUALITY COMMISSION AND THE QUALITY COORDINATION OFFICE STRUCTURE

The Quality Commission was established in accordance with the Higher Education Quality Assurance Regulation published in the Official Journal dated July 23, 2015, and numbered 29423. The Commission is responsible for the implementation and development of the quality assurance system.

The Quality Coordination Office carries out work related to the implementation of the decisions taken by the commission, manages quality sub-working groups, and supports reporting, training, and documentation processes.

The Office consists of a coordinator, assistant coordinators, administrative staff, and experts. Each assistant coordinator is responsible for a specific thematic area of quality (e.g., Education and Training, Research, Social Contribution, etc.) and coordinates the relevant processes.

6. PRIORITY AREAS

Our university's quality initiatives are carried out in priority areas determined in line with the strategic plan. These areas form the focal points in monitoring and developing quality processes.

- Education and Teaching: Creating a student-centered and accessible learning environment.

- Research and Development: Increasing scientific production, project support, and collaborations.

- Social Contribution: Presenting the university's knowledge base in a way that benefits society.

- Governance and Quality Management: Developing a quality system with a data-driven, transparent, and participatory management approach.

Furthermore, in line with the 2023 vision, institutional development is targeted in the following thematic areas:

- Ceramics, Art, and Culture

- Biotechnology, Wind and Solar Energy, Energy Storage

- Water, Soil, and Environment

- Underground Resources, Boron, and Mining

7. STAKEHOLDER PARTICIPATION

- In order to increase the effectiveness of the quality assurance system, the participation of internal and external stakeholders in quality processes is encouraged. Students, academic/administrative staff, alumni, and external stakeholders are involved in the process through various mechanisms.

- **Surveys:** Student, alumni, and staff satisfaction surveys are conducted.

- **Interviews and Feedback:** Feedback is obtained through meetings conducted by the quality commission, internal evaluation, and management.

- **Representation:** Student and staff representatives can serve on quality commissions.

The feedback obtained is analyzed and incorporated into improvement plans. Participation contributes to the institutionalization of quality culture.

8. QUALITY INDICATORS AND MONITORING

Quality indicators are used to monitor the university's performance in the areas of education, research, social contribution, and governance. These indicators are tracked at regular intervals and reflected in internal evaluation reports.

- Success, attendance, and graduation rates related to education and training activities

- Number of scientific publications, citation rate, projects

- Social contribution activities, participation levels

- Stakeholder satisfaction survey results

Data collection and analysis processes are carried out by the Quality Coordination Office. Findings are evaluated in annual monitoring reports and Management evaluation meetings.

Within the scope of the quality management system at our university, evaluation meetings conducted by the administration are held within the framework of Quality Commission meetings. At these meetings, internal evaluation reports prepared by the Quality Coordination Office, quality indicators, stakeholder survey results, and the implementation status of previous decisions are discussed. The decisions taken at the meeting are shared with the units and the results are followed up.

In institutional quality assurance processes, quality indicators and monitoring activities are directly linked to the evaluation schedule determined by the Turkish Higher Education Quality Council (YÖKAK). Institutions monitor and document their performance through quality indicators by updating their internal evaluation reports and strategic plans in line with the specified schedule. These indicators demonstrate progress in areas such as education and training, research and development, social contribution, and management systems with concrete data, while also forming the basis for the audits and monitoring activities carried out by THEQC during external evaluation processes. Thus, the quality monitoring cycle and the evaluation calendar progress in a synchronized manner, contributing to a continuous improvement approach.

9. CONTINUOUS IMPROVEMENT PROCESS

The quality assurance system of Kütahya Dumlupınar University is structured with a continuous improvement approach. Improvement processes are determined based on internal evaluation

results, decisions made at management evaluation meetings, stakeholder feedback, and performance indicators. Improvement recommendations are developed and implemented based on the data obtained.

The Quality Coordination Office organizes institutional events under the title "Colleague Sharing" to support the improvement process and encourage experience sharing among units. Sharing best practices encourages institutional learning among units. The Quality Coordination Office monitors and evaluates this process and takes a guiding role when necessary.

In the Spring 2024–2025 term, two events (April and May 2025) were organized for two departments that had successfully completed accreditation to share their experiences with academic units university-wide. These initiatives help disseminate best practices and reinforce a culture of quality.

To institutionalize continuous improvement, a peer-review pilot was launched in June 2025 and subsequently scaled up to full implementation. This fosters feedback and learning among units and strengthens the internal evaluation process.

Quality processes at our university are carried out based on the plan-do-check-act (PDCA) cycle.

For each process:

- In the planning phase, the schedule, responsible parties, and objectives are determined.
- In the implementation phase, activities are carried out.
- In the monitoring phase, review, analysis, and reporting are performed.
- In the corrective action phase, action plans are prepared, shared with stakeholders, and carried over to the new phase.

At our university, quality assurance processes are not limited to planning and implementation; they are supported by monitoring, evaluation, and improvement activities. In this context:

Evidence Submission: Activities related to each stage of the quality processes are supported by documents such as meeting minutes, survey results, reports, action plans, and performance monitoring charts. These documents serve as evidence for the transparency of quality assurance.

Stakeholder Participation: The opinions of students, employees, alumni, and external stakeholders are included in all steps of the planning, monitoring, and improvement processes. Stakeholder feedback is taken as a basis in decision-making processes.

Process Ownership: A responsible person is designated for each main process. The process owner is responsible for planning, executing, reporting, and following up on necessary improvements. The Quality Coordination Office ensures the coordination and monitoring of these processes.

Completion of the PDCA Cycle: The implementation status of decisions made at the end of each cycle is monitored and reported, documenting the completion of the cycle. This systematizes continuous improvement.

a) Main Processes Where the PDCA Cycle is Applied

The PDCA Cycle (Plan-Do-Check-Act) is a method that forms the basis of the continuous improvement approach and is effectively applied in many main processes. Particularly in areas such as quality management, service delivery, and education and training, the PDCA

Cycle enables processes to be planned, implemented, evaluated for performance, and continuously improved by taking necessary corrective actions. This cycle helps increase organizational efficiency, reduce error rates, and enhance internal and external stakeholder satisfaction. The owner of each process is clearly defined; the Quality Coordination Office is responsible for monitoring, reporting, and providing support for these processes when needed.

Process	Responsible Unit	The Role of Quality Coordination Office
Education and Training	Faculties/Colleges/Departments	Monitoring, reporting
Research and Development	Deanship of Scientific Research/Academic Units/Centers/Offices	Monitoring, reporting
Social Contribution	Academic Units/Centers/Offices	Monitoring, reporting
Administrative Services	Administrative Units	Monitoring, reporting
Quality Evaluation	Quality Coordination Office	Providing guidance and support

How is the PDCA Cycle Applied?

The following tables illustrate, by way of example, how to apply the PDCA cycle step by step for each main process:

1.Education and Training Processes

Stage - Description

Plan - The curriculum is updated, lesson plans are prepared, and student feedback is evaluated.
Do - Lessons, practices, exams, and activities are conducted.
Check - Survey results, performance indicators, and feedback are analyzed and shared with relevant stakeholders.
Act - Improvement plans are developed; course content and applications are revised.

2. Research and Development Processes

Stage – Description

Plan - Research strategy, objectives, and support programs are determined.
Do - Project execution, scientific publications, and industry collaborations are carried out.
Check - Publication count, project success rate, and performance indicators are tracked.
Act - Research infrastructure is strengthened, and improvement action plans are prepared.

3. Social Contribution Processes

Stage – Description
Plan - Community needs are analyzed; collaboration projects are designed.
Do - Social responsibility projects, training programs, seminars are organized.
Check - Participant feedback and impact analysis are conducted.
Act - New event plans are developed to increase access, and deficiencies are addressed.

4. Administrative Services

Stage – Description
Plan - Annual administrative activity plans are prepared.
Do - Administrative procedures and service processes are carried out.
Check - Satisfaction surveys and process performance are monitored.
Act - Corrective and preventive actions are taken to improve service quality.

5. Quality Monitoring, Evaluation, and Improvement Processes

Stage - Description
Plan - Quality indicators and reporting schedule are determined
Do - Internal evaluation reports are prepared, surveys are conducted.
Check -Results are reviewed through Individual Internal Evaluation Report (IIER), peer evaluation, and management review meetings.
Act – Improvement plans are prepared and implemented.

b) Process Maps and Flow Charts

Core quality processes operating within the institution:

- Internal Evaluation Process
- Quality Commission Decision Process
- Peer Evaluation Process
- Annual Monitoring Process
- Feedback and Improvement Process

Diagrams related to these processes are being prepared, and all steps from the beginning of the process to its completion, responsible parties, decision points, and outputs are defined in the relevant charts. Flowcharts are used to illustrate how the PDCA cycle is implemented at the institutional level. Flow charts are prepared by the Quality Coordination Office, implemented with the approval of the Quality Commission, and updated annually.

The Internal Evaluation Process conducted at our university consists of the following stages: sharing the UIER template, units preparing their UIER, preliminary review by the Quality Coordination Office, peer evaluation, final approval, and feedback. (Peer evaluation is planned to be included in the 2025 UIER process implementation.) All stages of this process,

responsible parties, decision points, and outputs are visualized in a one-page flowchart. The flowchart clearly shows how the PDCA cycle operates, ensuring the transparency of the quality assurance system.

Quality Commission Decision Process Flow Chart

In order to clarify the basic quality processes carried out at our university, the following processes are defined step by step with flow charts. These charts specify all steps, responsible parties, decision points, and outputs from the beginning to the end of the process. Thus, the aim is to concretize the PDCA cycle at the institutional level. The flowcharts will be prepared by the Quality Coordination Office and will come into effect upon approval by the Quality Commission. They can be updated in accordance with the PDCA framework. Below is a summary of the process flow drafts:

1. Internal Evaluation Process

Each academic and administrative unit evaluates its work within the year to determine what it has done well and what it needs to improve. This evaluation process is carried out by considering the unit's goals, activities, feedback received, and improvement steps planned in previous years. At the end of the process, the unit compiles the evaluation results into a report. These reports are submitted to the quality commission to contribute to the university's overall quality processes. In this way, each unit contributes to the overall development of the university while monitoring its own development. The internal evaluation process is shown below.

Stage - Description

Initiation - The Quality Coordination Office shares the Individual Internal Evaluation Report template.

Preparation- Units collect data and prepare a draft UIER report.

Control - After approval by the unit manager, it is submitted to the Quality Coordination Office.

Pre-evaluation - The Quality Coordination Office checks for deficiencies and provides feedback if necessary.

Peer Evaluation- The matched units review the UIER and fill.

Final Approval- The Quality Coordination Office evaluates the feedback and approves the report.

Result - The approved UIER is sent to the unit, and an improvement plan is expected to be prepared, with guidance provided where needed.

Guidelines Used in Process Management

[UIER(Unite Internal Evaluation Report) Preparation Guide 2025 (2024 KIDR Template)](#)

[UIER(Unite Internal Evaluation Report)Preparation Guide for Administrative Units](#)

[Bologna Information Package Preparation File](#)

2. Quality Commission Decision Process

The Quality Commission makes decisions regarding quality initiatives at the university through regular meetings. During these meetings, reports, data, and suggestions from departments are evaluated. The Commission considers both concrete data and stakeholder opinions when making decisions. Decisions are recorded in meeting minutes and shared with relevant departments. The Commission also monitors the implementation of these decisions. This ensures that decisions are made in a transparent, fair manner that allows everyone to contribute. The Quality Commission decision-making process is outlined below.

Stage - Description

Initiation - The Quality Coordination Office prepares the agenda and issues the meeting call.

Preparation- The agenda and relevant documents are delivered to the commission members.

Meeting - The commission discusses the agenda items and makes decisions by unanimous or majority vote.

Recording- The decisions are documented in the meeting minutes.

Notification - The decisions are formally communicated to the relevant units.

Monitoring – The Quality Coordination Office follows up on the implementation of the decisions.

Closure – The results are reviewed at the next commission meeting.

Forms Used in Process Management

[Quality Commission Meeting Workflow](#)

3. Peer Evaluation Process

The peer evaluation process is carried out to ensure that the units within our university's quality assurance system evaluate each other and that an external evaluation is conducted within the institution regarding internal evaluation reports, to promote a culture of learning, and to provide constructive feedback for improvement. Unit Peer Evaluation is conducted annually after the completion of the Unit Internal Evaluation Report preparation process to monitor the annual peer evaluation processes of our units. After completion of the Individual Internal Evaluation Report (IIER) process, the Quality Coordination Office pairs peer units and shares these reports with peer units. Units prepare the Unit Peer Evaluation Report and send it to the Quality Coordination Office, where these reports are reviewed. Upon completion of the reporting process, reports received from peer units are shared with the units. The peer evaluation process is shown below.

Stage - Description

Initiation - Peer matching is performed by the Quality Coordination Office.

Preparation- Unit Internal Evaluation Report (UIER)reports are shared with matched units.

Evaluation- The peer unit analyzes the report corresponding unit's.

Feedback- The peer evaluation form is completed and sent to the Quality Coordination Office.

Analysis– The Quality Coordination Office compiles and reports on the feedback.

Final Sharing - The Quality Coordination Office evaluates the feedback and communicates the results to the relevant units.
Monitoring – The Quality Coordination Office follows up on the implementation of the decisions.
Improvement - Units prepare action plans, and the Quality Coordination Office monitors them.

Documents Used in Process Management

[Guidelines for Preparing Unit Peer Evaluation Reports](#)

[Guidelines for Preparing Unit Peer Evaluation Control Reports](#)

4. Annual Monitoring Process

At our university, the performance of academic and administrative units is evaluated through a regular annual monitoring process. This process considers the extent to which units have achieved their goals, the work carried out, the feedback received, and various data. The information obtained is reviewed by the relevant units and the quality commission, and any shortcomings or areas that need improvement for improvement are identified. The results are documented in annual reports, and improvement steps are planned for the following period. In this way, our university regularly evaluates itself to improve service quality and ensure continuous development. The annual monitoring process is shown below.

Stage - Description

Initiation- The Quality Coordination Office shares the required data and work schedule with the units.
Data Collection- The units collect quality indicators and performance data.
Analysis - The Quality Coordination Office analyzes the data and enters it into the THEQC system.
Reporting - The report on the data monitored and the work carried out during the year is submitted to the Quality Commission.
Decision - The Commission evaluates university data, improvements made, and improvement recommendations to be made.
Sharing - The results are shared at management evaluation meetings in the units, and feedback is received.
Closure – The action plans are created in the units regarding monitoring results and improvement needs.

Documents Used in Process Management

[Internal Stakeholder Satisfaction Analysis](#)

[External Stakeholder Satisfaction Analysis](#)

[Survey Samples](#)

[The THEQC First Stage Performance Indicators](#)

[The THEQC Second Stage Performance Indicators](#)

5. Feedback and Improvement Process

In order to ensure the sustainability of quality assurance and establish a culture of continuous improvement at our university, regular feedback is collected from all stakeholders (students, academic and administrative staff, alumni, and external stakeholders). The collected feedback is analyzed by the relevant academic and administrative units and used as a basis for evaluating current practices and planning necessary improvement activities. The process is coordinated by the Quality Commission, and the actions identified are monitored and the results are reported regularly. In this way, our university aims to increase stakeholder satisfaction and continuously improve service quality. The feedback and improvement process is shown below.

Stage - Description

Initiation- Feedback is collected from stakeholders (students, staff, alumni, external stakeholders).

Analysis - The Quality Coordination Office analyzes the data.

Reporting - Findings are reported, and improvement needs are identified.

Planning – The units plan the recommended improvement activities.

Doing - The improvement activities are put into practice.

Controlling - The Quality Coordination Office reviews the effectiveness of the practices.

Closure - Results are transferred to the next quality cycle and archived.

Documents Used in Process Management

[DPU Leadership, Governance, and Quality PDCA Cycle](#)

[DPU Education and Teaching Processes PDCA Cycle](#)

[DPU Research and Development PDCA Cycle](#)

[DPU Social Contribution PDCA Cycle](#)

[DPU Bologna Information Package PDCA Cycle](#)

c) Forms and Templates

Process	Required Document/Template
Internal	Unit Internal Evaluation Report (UIER) template (current)
Peer Evaluation	Peer evaluation form
Colleague Sharing	Documents used in the activity, additional reports
Surveys	Survey examples + survey analysis report examples.
Monitoring	Quality indicators table
Improvement	Action plan template + results monitoring table

d) Quality Management System Implementation Schedule

Quality assurance activities carried out within the institution are shared with the units through official correspondence and the implementation schedule.

Activities carried out and ongoing as of March 2025:

Activity	Responsible Unit(s)/Person(s)	Month	Description
Institutional Internal Evaluation Report (IIER) presentations	The Quality Coordination Office	March	IIER data are collected and reported.
Collegial exchange activities	The Quality Coordination Office	April–May	Good practice examples are shared.
UIER training meetings and feedback	The Quality Coordination Office	May-June	Training and feedback are provided to the units.
Peer evaluation process (pilot and full)	The paired the units	June-September	Peer evaluation is conducted based on UIER.
Fall-term UIER and PDCA cycle training	The Quality Coordination Office	August-September	Training is provided to all units at the start of the new term.
Sharing peer evaluation results	The Quality Coordination Office	September	Final feedback is shared; units prepare improvement plans.
Planning, implementation, and dissemination of stakeholder satisfaction surveys	The Quality Coordination Office	September-December	Survey planning, implementation, and reporting processes are carried out in an integrated manner

10. APPENDICES

Appendix 1 – The Role of Quality Coordination Role and Job Descriptions

ROLES

Quality Coordinator

Assistant Quality Coordinator

Quality Coordination Secretary/Administrative Officer

Quality Coordination Statistician

Quality Coordination Officer

Job Descriptions

1. Quality Coordinator Job Description

2. Assistant Quality Job Description

3. Quality Coordination Secretary/Administrative Officer Job Description

4. Quality Coordination Statistician Job Description

5. Quality Coordination Officer Job Description

Job Distribution Table

Appendix 2 – Quality Commission Structure and Sub-Working Groups

Organizational Chart

Kütahya Dumlupınar University Quality Commission

Kütahya Dumlupınar University Advisory Board

Leadership, Governance, and Quality Sub-Working Group

Education and Teaching Sub-Working Group

Research and Development Sub-Working Group

Social Contribution Sub-Working Group

Appendix 3 – Documents and Templates Used in Quality Processes

Quality Assurance Criteria and Assessment Guide for Distance Education 2020

Guide for Preparing Institutional Internal Evaluation Report (IIER)

Guide for Preparing Unit Internal Evaluation Report (UIER) for Academic Units

Guide for Preparing Unit Internal Evaluation Report (UIER) for Administrative Units

Guide for Preparing Unit Peer Evaluation Reports

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Appendix 4 – Quality Reports

https://kalite.dpu.edu.tr/tr/index/sayfa/17028/kurumici-degerlendirme-raporlari

Kütahya Dumlupınar University 2015-2021 Performance Indicator Report

Kütahya DPÜ Monitoring and Evaluation Report-2018-2021 YÖK

Kütahya DPÜ 2019-2021 Monitoring and Evaluation Criteria Report

2018 Institutional Feedback Report

2020 Distance/Blended Education Quality Assurance Status Report

2020 Kütahya DPÜ Distance Education Quality Assurance Report

Appendix 5 – List of Relevant Legislation and Legal Bases

Higher Education Law No. 2547

Higher Education Quality Assurance and Higher Education Quality Council Regulation

Procedures and Principles of the Higher Education Quality Council

Higher Education Quality Council Institutional External Evaluation Directive

Guidelines on the Authorization of External Evaluation and Accreditation Organizations Operating in the Field of Higher Education

Kütahya Dumlupınar University Quality Assurance Guidelines

Kütahya Dumlupınar University Advisory Board Guidelines

Appendix 6 – Examples of Best Practices

• April 2025: I. Quality Peer Sharing-Coaching Department

• May 2025: II. Quality Collegial Sharing-Chemistry Department