Quality Audit in the European Higher Education Area

A comparison of approaches

AQ Austria

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Inhalt

Foreword

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In recent years, various European countries have implemented *quality audits*[1] as an approach to external quality assurance in higher education. The reasons for this included an attempt to strengthen the autonomy of higher education institutions and to find a more enhancement-focused approach to external quality assurance.

Several European quality assurance agencies gathered in 2008 in Vienna to exchange their experience of *audits*. As a result of this meeting, the Quality Audit Network (QAN) was established as an informal group of agencies. Since then, the agencies have held annual meetings to discuss objectives, methodologies and the implementation of *audits*, to report on new developments and to debate specific issues related to the procedure. A publication was issued in 2009, consisting of nine monographs, a synthesis report and contributions from a conference on trends in quality assurance and quality management in higher education systems, and providing an insight into various countries' systems and developments[2].

In the meantime, the usage and connotation of the term *audit* have undergone a change, as have the foci and methodological approaches of this specific type of external quality assurance procedure. The members of the QAN decided to launch a project and prepare a further publication to give an overview of the current *state of the art* and of the future challenges expected concerning specific aspects of external quality assurance.

The aim of the project is to document, compare and analyse existing approaches to *auditing* in a number of European countries. The publication will illustrate various approaches and reflect on their merits, as well as outline the implementation of *audits* in different national systems. The transparency resulting from the publication will support open discussion among agencies

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1   When discussing *audits*, the editors refer to all external quality assurance procedures whose object is an institution's internal quality management system.
2   AQA – Austrian Agency for Quality Assurance, Alexander Kohler (2009): Trends of Quality Assurance and Quality Management in Higher Education Systems. Facultas AG, Vienna.

and facilitate the questioning of the various approaches and the further development of the *audit* models. Consequently, the paper covers the following topics:

- Terminology, purpose and aim of the *audit*
- National legislation
- Scope of the *audit*
- *Audit* procedure
- External assessment and effects
- Current and future challenges and developments

This publication is in two parts. Part I focuses on the common aspects and apparent deviations from the aforementioned topics in the contributions from twelve different agencies. The references to single countries or quality assurance agencies in Part I relate to statements and information from the twelve monographs in Part II. These twelve contributions come from the National Agency for Quality Assessment and Accreditation of Spain (ANECA), the Agency for Quality Assurance and Accreditation Austria (AQ Austria), the Catalan University Quality Assurance Agency (AQU Catalunya), the Romanian Agency for Quality Assurance in Higher Education (ARACIS), the Danish Accreditation Institution, the Finnish Higher Education Evaluation Council (FINHEEC), the German Accreditation Council (GAC), the Norwegian Agency for Quality Assurance in Education (NOKUT), the Accreditation Organisation of the Netherlands and Flanders (NVAO), the Swiss Center of Accreditation and Quality Assurance in Higher Education (OAQ), the Quality Assurance Agency for Higher Education (England, Wales and Northern Ireland) (QAA) and the Quality Assurance Agency for Higher Education Scotland (QAA Scotland).

The publication is targeted both at quality assurance agencies and at higher education institutions, as well as other interested stakeholders. The publication aims to increase knowledge about the external quality assurance procedures of different agencies across borders and therefore improve trust in their quality, and thus contribute to the development of the European Higher Education Area.

Part I: Synopsis

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I.0 Introduction

This publication is devoted to six topics related to external quality assurance, and primarily to the *audit*. The term *audit* is used only in a minority of countries and by a minority of quality assurance agencies, and in English-speaking countries it has even taken on negative connotations. For this reason it will be italicised throughout Part I of the publication. With the original sense of the word "audire" – 'to listen' – in mind, its use seems justified.

The texts in this volume are organised around six topics. Guiding questions were used to outline the single chapters.

The first topic is related to questions regarding terminology, purpose and aim. It is devoted to an agency's definition of an *audit* and the general understanding of an *audit* in the respective country.
- What function does the *audit* have, and what are its central aims?
- Is there an official definition for the *audit* in the country?
- How is it distinguished from other quality assurance procedures (e.g. accreditation)?

The second topic deals with national legislation. It examines the legal requirements for the development and implementation of internal quality management at higher education institutions in the context of an institution's autonomy, the relevance of the *audit* in the governance of higher education in a country and its relationship with other external quality assurance procedures, as well as the 'history' of the *audit*, such as its function in the national higher education system, reasons for its introduction, recent changes etc.
- To what extent are higher education institutions in the country obliged to set up an internal quality system? Are there any legal requirements for its organisation and coverage? Is there an organisation or agency in place to support the institutions in the set up and/or development of their internal quality management?
- Which external quality assurance procedures other than the *audit* are in place? Which of these are voluntary, and which are stipulated by law? How is the *audit* linked to other procedures?
- What consequences can the result of an *audit* have for an institution?
- How does the agency make sure it does not violate the institution's autonomy when conducting external quality assurance procedures?

- When were external quality assurance procedures introduced and for what reasons?
- Is the agency obliged to undergo regular external review?

The third topic is the scope, subject and standards of the *audit*. It covers issues related to the Bologna Process in the *audit* model (learning outcomes, the European Credit Transfer and Accumulation System (ECTS), recognition, national qualification frameworks, mobility, third cycle programmes, joint degrees, the social dimension, the global dimension, etc.), the way the *audit* refers to the European Standards and Guidelines for Quality Assurance in Higher Education Part I (ESG I), the definition of *audit* standards and the measurement of the effectiveness of an institution's internal quality management.

- Are there pre-defined standards, and how are they defined? How does the *audit* refer to European developments and principles (e.g. ESG or the Bologna principles)? Do the standards reflect a minimum level of acceptable performance from an institution and/or a certain national threshold or international benchmarks?
- What is the thematic scope of the *audit*? Is the scope of the *audit* defined by law? Can an institution choose part of an *audit*'s scope itself or does the agency adapt the scope of the *audit* to the specific profile of an institution?
- How does the agency determine the degree of compliance with the standards?
- How does the agency measure not only the organisation but also the effectiveness of an institution's quality management system?

The fourth topic in the publication tackles the *audit* procedure, in order to learn about the typical stages in an *audit*, and the set-up and preparation of an *audit* panel.

- Which supportive measures can the agency offer an institution ahead of the *audit* and during the procedure?
- How many site visits does the agency conduct together with the panel? How are these organised?
- What kind of follow-up activities does the agency have in place? Which of these are mandatory (stipulated by law), which are requested by the institution, and which are offered by the agency?

- Who participates in the panel and how are panel members selected? Does the agency bring together panels for training and further assignments or organise them separately for each individual procedure?

The fifth topic looks at the question of external assessment and the effects and impact of an *audit,* the impact of the *audit* on higher education institutions and evaluating an agency's *audit*, its reasons and results.

- Does the agency evaluate the impact the *audit* has on an institution and if so, how is it done? Does the agency carry out systematic evaluations of its *auditing* on different levels (organisation, students, academia, higher education policy, etc.) and in different ways (summaries of main findings, publication of summary reports, etc.) and if so, how is the information used?
- Do institutions appreciate an agency's 'care' for them after the official end of the *audit*?

The sixth and final topic addresses current and future challenges and developments. Developments in higher education and in quality assurance are interdependent. But developments and challenges on a national level do not always coincide with those on a European level. Whilst the Bucharest Communiqué for the Bologna Process calls for cross-border activities in the European Higher Education Area (EHEA), national legislation still exists which states this is optional – the issue of internationalisation is one of the challenges agencies face.

- What, in the agency's view, are the main challenges of the *audit*?
- What tasks might await the agency in the future?
- What developments does the agency anticipate for external quality assurance in the country and in the EHEA?

I.1 Terminology, purpose and aim of the *audit*

In general, an *audit* is understood to be the evaluation of a project, a system, a process, a product, an institution or organisation etc. in any context, including industry, public administration, health care etc., and therefore not necessarily related to higher education. *Audits* are frequently associated with examinations to verify the compliance of the accounting methods used in financial statements.

In the European discourse on quality assurance in higher education, however, an *audit* "is a process for checking that procedures are in place to assure quality, integrity or standards of provision and outcomes"[1].

The authors of the European Association for Quality Assurance in Higher Education (ENQA) Occasional Paper 14 give an even more precise definition: "An audit is an evaluation of the strengths and weaknesses of the quality mechanisms established by an institution itself to continuously monitor and improve the activities and services of either a subject, a programme, the whole institution or a theme".[2]

The term *audit* is actually only employed in a few countries (Finland, Switzerland and Austria), whereas other agencies and/or countries use a variety of terms. In the United Kingdom the term "audit" has even become maligned and is no longer used by quality assurance agencies. Within the network, the agencies participating in the QAN have agreed to use *audit* as a common working term. However, this does not exclude discussion about the appropriateness of the term as a common denominator.

At least three common characteristics of *audit* procedures can be identified in the different national contexts within the QAN:

a. focus on institutional quality assurance

The procedures have an explicit focus on measures and/or processes set by higher education institutions with the purpose of assuring and developing quality in teaching and learning, and (in some cases) in research and development. *Audits* are to be distinguished from institutional reviews, which go beyond internal quality assurance and refer more to criteria related to the things offered by institutions, such as study programmes, research, infrastructure and resources.

The scope of *audits* in the various countries is described in Chapter I.3.

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1   See: http://www.qualityresearchinternational.com/glossary/, 22.01.2014
2   Nathalie Costes, Fiona Corzier, Peter Cullen et. al. (2008): Quality Procedures in the European Higher Education Area and Beyond – Second ENQA Survey. ENQA, Helsinki.

b. enhancement orientation

Audits claim to support quality enhancement in higher education institutions. Unlike accreditation, they do not primarily verify the achievement of (minimum) standards with regard to the formal recognition of a (new) study programme or institution, but instead demonstrate the capacity of an (existing) institution to assure (and develop) its own quality.

Although the enhancement function of external and independent quality assurance procedures may be seen to conflict with the function of accountability, *audit* models claim to combine the two.

c. evidence through samples

Audits demand evidence of the existence of internal quality assurance, which is generally provided through samples, such as 'audit targets', 'selected themes', 'fields of performance', or 'exemplary study programmes'. These samples are intended to demonstrate the performance of internal quality assurance and are reviewed in more detail.

The country and agency reports in Part II of this publication show the variety of terms that are actually used for *audits*: Spain applies an 'institutional evaluation of quality' as a part of its external quality assurance, with the assessment of study programmes at its core. The evaluation is expected to provide "guidance to institutions in designing their own internal quality assurance system and to implement an evaluation system that leads to the recognition of their own design".

The German model was developed as part of the national accreditation system. If a higher education institution has an internal quality assurance system in place, it may opt for a single 'system accreditation' instead of requiring accreditation for all its programmes. The "structure and the processes relevant for teaching and learning" are subject to system accreditation, and must achieve the qualification objectives and ensure the high quality of study programmes in a manner that complies with the criteria set by the Accreditation Council, the ESG and the federal states' structural guidelines.

Finnish *audits* assess "if the quality system is fit for purpose and complies with agreed criteria". The audit "focuses on procedures to maintain and develop the quality of its operations".

Norway applies an "evaluation of the institution's quality assurance system for education".

The supportive aspect of the *audit* is very explicit in the Swiss and Scottish models. The Swiss *audit* "describes the current state of the quality measures" and should be "part of a process of reflection to assist the higher education institution". Similarly, QAA Scotland applies "enhancement-led institutional reviews" as one element of its "quality enhancement framework".

The Austrian model aims to integrate the two functions of "proving that the higher education institution has implemented a quality management system in line with legal rules" and "supporting the higher education institution in the further development of this system".

A slightly atypical concept is used in Romania, where the "institutional evaluation of quality" consists of a "multi-criteria examination of educational quality".

Due to occasional confusion with financial *auditing* and investigative approaches, the Quality Assurance Agency for Higher Education in England, Wales and Northern Ireland (QAA) decided to replace the term '*audit*'. QAA's reviews focus on the procedures that the higher education institution uses to set and to maintain its threshold academic standards, and to develop the quality of its learning opportunities.

I.2 National legislation

Following the principle of subsidiarity in Europe, the organisation of education systems is the formal responsibility of national states. Quality assurance schemes in higher education must therefore be understood in their national contexts. The Bologna Process, however, has led to convergence in higher education policies.

An increase in the institutional autonomy of higher education institutions is a common feature of higher education in Europe. Autonomy may be provided in different ways, such as academic self-governance or control over resources. The ESG encourage an increase in autonomy by stating that "the primary responsibility for quality assurance in higher education lies with each institution itself and this provides the basis for real accountability of the academic system within the national quality framework". The ESG provide guidelines for internal quality assurance inside higher education institutions (Part I) and state that external quality assurance "should take

into account the effectiveness of the internal quality assurance processes" (Part 2)[3].

In most European countries, higher education institutions are required by law to develop internal quality assurance policies and mechanisms. *Audits* focus specifically on this obligation, whilst accreditation and other procedures also generally refer to this requirement.

In several countries *audits* were developed within a tradition of external accreditation. The (positive) result of an *audit* may give higher education institutions more autonomy in their provision of study programmes: in Norway and Germany, the higher education institution receives 'self-accrediting rights' once it has undergone an *audit*. These rights may, however, differ between different categories of higher education institution and also from country to country.

Similarly, following the recent reform in Denmark, higher education institutions may receive the right to establish new programmes and to modify existing programmes themselves, depending on the results of the *audit*. In Catalonia/Spain higher education institutions are allowed to modify their study programmes if the changes are not substantial and if they are subject to internal quality assurance.

In other systems *audits* have a different role, as they form part of the state governance of higher education institutions. In the UK system, subscribing to QAA and participating in its review (or *audit*) procedures is a condition for higher education providers receiving public funds. It is also a precondition for receiving degree-awarding powers.

The Swiss *audit* is a prerequisite for receiving federal subsidies, and the higher education institution may even lose some of its federal funding if it fails an *audit*. However, in practice, "the State Secretariat would decree a second audit within twelve months". Austrian public universities are required to undergo an *audit* as part of their performance agreement with the state, which provides the basis for their federal funding. Universities of applied sciences may even lose their 'licence' when they repeatedly fail an *audit*.

In all the countries/agencies, *audits* were often developed in cooperation with higher education institutions. They were introduced into national systems progressively, whilst retaining the aim to support higher education

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3   ENQA, EUA, EURASHE and ESU (3, 2009): Standards and Guidelines for Quality
     Assurance in the European Higher Education Area. ENQA, Helsinki.

institutions in their autonomy and to minimise the burden of external quality assurance. In this spirit, the Spanish system envisages *audits* as an add-on to existing recognition schemes. Scotland offers a variety of measures that support the concept of 'enhancement-led *audits*'. In Finland, *audits*, which were once voluntary, were made obligatory for higher education institutions. Their task is to provide a qualitative dimension that complements the qualitative assessment by the Ministry of Education and Culture.

I.3 Scope of the *audit*

Irrespective of the concept behind it, an *audit* makes use of certain parameters to measure the level of compliance with or adherence to predefined standards or requirements, in order to demonstrate the capacity of an institution to assure and develop its own quality (see chapter I.1). As well as observing national legislation when defining these standards or requirements, agencies often refer to the ESG. One can therefore observe a certain degree of convergence in the standards and criteria used in *audits* within the European Higher Education Area.

However, differences occur with regard to the themes covered by *audits*: although the organisation of the institutional quality management system and its effectiveness is the overarching topic, this may be subdivided into different performance areas such as study processes (learning) and teaching, research, societal interests etc.

The scope of an *audit*'s target or performance areas depends predominantly on the legal mandate of the agency. Whereas for example in Austria, Denmark, Finland and Switzerland the quality assurance system for research is an integral part of the *audit*, this is not true for the procedure in other countries. In the Netherlands, quality assurance in research is the individual responsibility of the institution. In Norway, as well as Spain, England and other countries, there are separate agencies responsible for this task. However, given that the provision of degree programmes at a higher education level perhaps presumes the existence of active research at the same institution, the conclusion could be drawn that internal quality assurance systems at higher education institutions always consider research in one way or another, as those systems tend to be expected to encompass the higher education institution as a whole.

It has been hypothesised that the absence of research in the *audit* in most countries is the result of three interconnected factors: the focus on teaching and learning in the Bologna Process; the historical development of external quality assurance procedures in different countries (programme accreditation); and the ESG, which in their current version are not intended to cover research.

The ESG are not mentioned explicitly in all *audit* models, but agencies refer to them in their daily operations and in the development of their external quality assurance procedures.

It is therefore no surprise that all agencies' procedures address higher education institutions' strategy and governance, and the use of institutions' quality assurance systems for their basic duties (mostly with the exception of research). With the assumption that a quality assurance system can only be useful if it is effective, the assessment of institutions' capacity to benefit from their own quality management processes is another topic in the *audits* carried out by the different agencies. The institutions need to prove that the implementation of their quality assurance system guarantees the quality of their basic duties.

The notion of *quality culture* has become widespread in both higher education institutions and in quality assurance agencies. It is linked to the kind of communication that exists at the institutions, to the implicitness of quality issues, and to the involvement of different stakeholders. Several approaches address the issues of *quality culture*. The concept, however, is difficult to define, and this may be one of the challenges in introducing it to *audits*. There is also the risk that *quality culture* could eventually be regarded as a fashionable catchword, liable to fall into disuse.

Stakeholder participation has become an area assessed in the *audit* in many countries, where the institution is not only expected to involve students, labour market needs or 'society' in its strategic planning and operational activities, but also is expected to demonstrate how this involvement is actually being utilised.

In Romania, public information on study programmes and standards for awarding diplomas are important areas of assessment, and in Denmark institutions must ensure that the content and objectives of their study programmes reflect the needs of society and the labour market. In other countries these topics are considered to be covered by other kinds of external quality assurance procedures, such as the accreditation of study programmes or

institutions. This statement is also true for other topics in various *audit* models throughout Europe, making it difficult to define the boundaries between one procedure and another (see also chapter I.6 on *challenges*).

I.4 *Audit* procedure

Audits, like other external quality assurance procedures, are typically conducted in the following stages: preparatory phase – self-report – peer review/ site visit – peer report – decision/publication of the report – follow-up.

The relevance and the organisation of the different stages vary from one system to another. Also, there are sometimes major differences between *audit* and state accreditation/recognition procedures, due to their different natures, as mentioned in the previous chapters.

Preparatory phase
A preparatory phase is common to all *audit* schemes, although some are more extensive than others. This means that higher education institutions and agencies seek some kind of exchange before the higher education institution submits its self-report. This exchange must not affect the independence of the agency and its decisions and also must not be understood as consulting on the topics to be evaluated.

All agencies inform the whole higher education sector or single higher education institutions about their *audit* model, its requirements and implementation. Conferences and seminars are organised for this purpose, especially in the case of pre-defined *audit* cycles. These events may include the presentation of procedural guidelines, and also the presentation of practical case studies by higher education institutions that have undergone an *audit*. General information is always provided through the agencies' websites. Handbooks and guidelines are made available as soon as the method is agreed or at the latest when a higher education institution actually becomes involved in the process.

An agency may present the specific aspects of the realisation of the audit directly to a higher education institution. Some agencies give advice concerning the presentation of the quality assurance system (but not its development and implementation). Others perform a formal pre-check of

the system before the higher education institution actually enters the *audit* procedure.

Self-report

The formats of self-reports vary depending on the systems, as is clear in the variety of terms used, such as 'self-documentation', 'self-report', 'self-assessment', 'reflective analysis', '*audit* material', 'authentic material' etc. These illustrate that some agencies expect a higher degree of self-analysis or specify the requirements for a self-report (probably by providing a list of questions or even a checklist), whereas others invite higher education institutions to provide evidence about their system using available documentation. In Scotland, for example, institutions are asked to evaluate their activities and to provide evidence by giving examples of the documents showing the processes in use.

Agencies generally advise higher education institutions to leave enough time to prepare the self-report and to involve different interested parties (including students). Experience shows that institutions can benefit strongly from this process, and the learning effect is even stronger if deficiencies in the internal quality assurance system can be openly addressed and are not merely sanctioned as such.

Before submitting their report, higher education institutions may ask agencies for feedback regarding the clarity of the information provided. Although this can be an awkward step, it helps improve the quality of the entire process.

Depending on the specific *audit* model, higher education institutions may be asked to provide further evidence of their quality assurance system during the procedure.

Expert panel

As with any peer review, the quality of an *audit* largely depends on the quality of the peers who do the assessment. This involves thoroughly selecting and preparing experts who understand the concept and the spirit of *audits*. Empathy and a willingness to act on an equal footing with the higher education institution are essential conditions for taking part in an *audit*. Panels are mostly made up of between three and six peers, depending on the scope of the *audit*. Panels always include peers from other higher education institutions, although their profiles may be different: some agencies demand

leadership experience, such as (former) rectors, whilst others use "quality professionals". Likewise, there are always student representatives on expert panels.

In some cases, panels include peers from the labour market. There is an increasing trend towards the involvement of peers from abroad, which provides the benefit of receiving an outside perspective, but leads to the challenge of acquainting these experts with the national framework. This is especially true for smaller countries with a limited number of higher education institutions. In any case, the disciplinary background of the experts turns out to be of subordinate importance.

The nomination of peers is mostly done on the basis of a pool of experts. To be accepted into a pool, peers need to follow guidance that varies in intensity, including written guidelines, information events or even training seminars. Often, at least one panel member has already participated in a prior *audit*.

Working with high profile peers requires good resources management, since *audits* are very demanding in terms of time.

Site visits

The organisation of two site visits is a feature common to almost all *audit* models. The first visit is generally of a more informative character with a focus on the overall system of quality assurance, while the second site visit serves to provide clear evidence about the quality assurance system and its operation in practice.

Agencies organise site visits differently. The first visit may be done either by the entire panel or by one of its members (usually the chair). During the first visit, which usually lasts one day, meetings take place with the higher education institution's management and students, as a minimum. At the end of the visit, the higher education institution can be asked for further documentation to be provided in advance of the second site visit.

In cases where the procedure involves a second site visit, this usually takes a minimum of two days and involves further interviews with groups from the institution. Depending on the findings of the first visit, the panel looks for evidence of effective internal quality assurance system in specific areas. The agency has the important role of ensuring that the principles of its *audit* are respected, that peers are well prepared on the basis of the self-report, and that an agenda is drawn up that allows the necessary insight into and

understanding of the higher education institution's quality assurance system to be achieved.

Report, decision and follow-up
Like other external quality assurance procedures, the panel prepares its report in line with the agency's requirements. In practice, agency staff take on different responsibilities in this process: whereas some agencies actively participate in the drafting of the report, other agencies leave this to the responsibility of the panel. In either case, audit reports need to find the right balance between judgement about the system and advice for its enhancement. This becomes even more relevant if full reports are published by the agencies.

The type of decisions taken by the agency depends on the purpose of the audit, as described in chapter I.1. However, in most cases the procedure does not simply end with the publication of a decision and the report; agencies usually offer concluding seminars or follow-up visits to the higher education institution. These can be used to analyse the panel's report and its conclusions further, and to draw up action plans.

I.5   Impact/effects of the *audit*

External quality assurance makes higher education institutions accountable for their performance. Within the ENQA, and probably also within the agencies, the 'impact issue' is currently high on the agenda. The question is whether the *audit* has longer-term effects on the individual higher education institution, on the quality of its services, on national and/or international higher education policy, on the work of the agencies etc., and if so, what these effects are.

Approaches to learning about the impact and effects of an *audit*
One way of finding out the effects of an *audit* on an institution, on its quality assurance system and probably also on its study programmes is a *re-audit* after a certain period of time, and also other follow-up activities, where these take place. This implies, of course, that (a) the *audit* is not a one-off exercise, but something that is repeated periodically, (b) the re-*audit* asks for changes within the institution as a result of the previous procedure, and that (c) the scope of the re-*audit* is at least similar to the original *audit*.

One common activity used by agencies to learn about the impact of their procedures is the use of *feedback questionnaires,* provided at least to the *audited* institution and the panel members. The questionnaires go beyond technical issues, as they usually include inquiries about the expected effect the *audit* will have and the identification of areas for improvement. However, they alone are not necessarily considered to be reliable sources, as they involve too many variables, for example the time the questionnaire is given to the institution (which is usually after the certification decision) or the respondents' position and involvement in quality assurance.

In some countries, regular *system-wide analyses* are conducted. The German Accreditation Council conducted an initial meta-evaluation when system accreditation was implemented, whilst the Spanish agencies periodically conduct similar meta-evaluations in cooperation with universities, as well as cross-evaluations amongst themselves to check the homogeneity of results. This is due to the specific situation in the country, with a number of quality assurance agencies operating simultaneously. This is also true in Scotland, where significant focus is placed on the impact of different activities.

A couple of agencies organise *discussions* with various stakeholders from higher education institutions to debate the outcomes of the *audit* and the consequences these might or should have on the individual institution, on the national higher education system or even on legal provisions.

In addition to the systematic approaches, individual communication between an agency and an institution is a valuable source of feedback.

The impact and effects of an *audit* – lessons learnt (so far)

The reports from the various agencies reveal that the procedure has an effect on three levels: the higher education institution itself, the quality assurance agency, and the higher education system of a country (with some legal implications).

Quality assurance agencies intend *audits* to have an impact; otherwise there would be no need for them. This rather vague expectation can, however, have a broad meaning: if an *audit* is expected to have an impact on the higher education institution's quality management system, it can be implicitly assumed that at the same time it will have an effect on the quality of all processes at the institution – learning and teaching, research and related services. This would be evidence for the fact that the quality assurance system at the

institution is not an exercise carried out for its own sake, but instead correlates fully with the institution's operations. Another aspect could be the effect on an institution's management and strategies. Examples given by several countries prove that one of the consequences of the first *audit* round was the setting up of quality assurance units at higher education institutions. In addition, advanced interpretation and identification of elements that contribute to the analysis of quality in higher education were observed.

If instead of considering individual higher education institutions we look at the national higher education system as a whole, an *audit* might also influence education policy by taking its outcomes into account. For example, if the reviewers find evidence for the same or similar deficiencies in several institutions, this might provide evidence for the existence of a system-related matter, which might arise from (legally stipulated) requirements with which institutions must comply. Analysing these outcomes might result in a change to the country's education policy or framework. In Finland, for example, impact analyses led to quality-related benchmarking projects, to the launch of new thematic evaluations, and to a change in the themes covered during the following *audit*.

Furthermore, discussion is required on the effect of the *audit* on the quality assurance agency itself. As 'learning organisations', agencies use feedback about the outcome of the *audit* for the further development of their procedure, be it the process itself or its scope and themes. One common outcome of impact analyses (irrespective of how it is carried out) is that agencies use the results to develop the *audit* methodology and the scope of the procedure. There were cases when the standards and/or criteria used in the *audit* required a more detailed definition or explanation to be applied. An agency may decide that in the next *audit* the focus needs to shift towards a certain topic that has proven to be either underrepresented or not fully developed. It was revealed that in a number of cases of the first *audit*s in a country's higher education system, institutions had only made first steps to set up internal quality management, but had not yet developed a coherent system. This meant that evidence regarding the effects of the internal quality management could not always be scrutinised. Here the agency can adjust its model accordingly, as well as developing its procedure for the next *audit*.

When doing so, agencies usually invite various stakeholders to contribute to their development process and involve a wide selection of representatives from higher education institutions. In addition to the management,

all people affected by an *audit* and its outcomes (students, teachers, administration, etc.) will have the opportunity to contribute.

In Switzerland, for instance, the follow-up after the 2013-2014 quality *audits* will form part of the discussion when preparing the planned institutional accreditations that will replace the quality *audits* with the entry into force of the new Federal Law on Funding and Coordination of the Higher Education Sector.

There is a very big question that underpins all these considerations: how do we know that changes and improvements are actually *audit*-driven and not the outcome of other processes independent of the *audit*? To take this thought to the extreme: Why shouldn't particularly good weather during the spring term contribute to better teaching and learning performance? Why couldn't well-functioning support services be due to the fortunate personal situation of employees? Why shouldn't the legal situation in higher education stimulate an improvement in an institution's strategic planning? These matters are widely discussed within the QAN, the ENQA, individual agencies, higher education institutions, etc., and they are certainly true for all kinds of external quality assurance procedures. Despite numerous discussions and substantial field work, no answer has yet been discovered. Regardless of the acknowledged responsibility of quality assurance agencies to discuss the issues of the effect of their work seriously, it should be mentioned that most quality assurance agencies were not set up as research institutions, and are thus neither competent nor staffed for proper research on this topic.

I.6 Current and future challenges and developments

As quality assurance must be seen within the context of national and international higher education developments and reforms, such as the Bologna Process, finding the balance between continuity and progress might be seen as one of the major challenges agencies have to face. It is therefore not surprising that on more than one occasion agencies emphasised the limits of national legislation, especially with regard to the EHEA.

For this reason, this publication will also discuss the future development and challenges facing the *audit* in the various countries. While the individual country reports reveal several specific issues closely linked to national legislation, the following four aspects were addressed by several agencies:

Moving towards more enhancement-led procedures

Looking at the recent developments in quality assurance procedures in the EHEA, one can observe a shift in many countries towards more enhancement-led procedures. In addition, the focus of quality assurance procedures is shifting from assessing the performance of the higher education institution to evaluating the internal quality management. This shift promotes the concept that procedures should not only assess the state of internal quality assurance but also support its enhancement. On the other hand, the country reports show that there is also movement in the opposite direction, from *audits* towards accreditation, for example in Switzerland.

However, several agencies set themselves the challenge of embracing both enhancement-led procedures and accountability, e.g. certification of the internal quality management system, as is the case in Austria. At first glance one could assume that *audits* that aim for certification and enhancement are pursuing two conflicting goals. On closer investigation, however, it becomes evident that the two aims are not that contradictory: confirming that an internal quality management system complies with a set of given standards does not exclude feedback on the system's future development, and vice versa. Besides, the development of higher education institutions is not only research-driven, but also tied to society. A quality management system will therefore also consider societal needs and adapt to the changed conditions of the higher education sector as a whole. The development towards more enhancement-led procedures might also reflect changes in societal requirements, where higher education institutions are understood as being autonomous institutions. 'Controlling' them thus becomes less important, and enhancement-led procedures are understood to be more in line with the aims of the higher education institutions.

Interaction of different procedures covering internal quality management, study programmes and other performance areas

When comparing the single country/agency reports it is clear that the question of how to improve the interaction between different external quality assurance procedures is closely linked to the previous topic of enhancement-led procedures: how can different procedures and approaches benefit one another and not multiply the workload of the higher education institutions and agencies? It is also important to avoid interference in the sense of one procedure anticipating or even counteracting the results of another. It therefore seems

important to think about ways of linking different procedures and avoiding overlap and double evaluation.

Based on the countries' reports, it is clear that many agencies both carry out procedures evaluating the internal quality assurance system as a whole and look at the study programme level. There is a discussion in some countries, e.g. Finland and Spain, on how to organise the *audit* that also provides information about degree programme quality. This appears to be the wish of the higher education institutions themselves, as they are interested in feedback not only regarding their internal quality assurance system but also their study programmes. System accreditation in Germany is one example where, thanks to this approach, both the internal quality management system and the study programmes are covered by one procedure.

Questions of consistency and equality

Another issue that was addressed by several agencies was the question of how to ensure consistency and equality in the external quality assurance procedures. To treat institutions equally and to conduct consistent procedures is, of course, a basic requirement for external quality assurance. This leads to the question of how to deal with the diversity of higher education institutions, not only in terms of size and profile but also in terms of the stage of development of their internal quality management system. For *audits* focusing on the implementation of internal quality management and the 'quality culture' of the higher education institution, it seems particularly necessary to take into account the unique nature of all the institutions. Finding a balance between system-wide indicators and the specific characteristics of the institution would seem to be crucial, and leads to the issue of how an agency can treat all higher education institutions equally and still consider the individuality of the single institution. Here it is questionable whether equality is achievable, as all procedures should focus on the advancement and development of the internal quality assurance of the higher education institution, and therefore respect its individual profile and approach.

One example of a method with this in mind has been introduced by QAA recently: their *risk-based approach* takes into account the characteristics of each higher education institution when assessing its quality management system. This of course might mean that not all higher education institutions are treated in the same way, as the procedures and the timeframe in which the procedures take place are linked to the current development of the quality

management system of the particular higher education institution. But it can be argued that equality and consistency can only be achieved when the profile and current development of the internal quality management system are at the heart of a procedure. Equality could therefore mean focusing on the development of an individual higher education institution with respect to its own quality assurance system.

Internationalisation

When asked for their challenges or future perspectives, almost all agencies brought up the matter of internationalisation. In general, agencies are keen for more international exchange and cooperation, and, to summarise, three areas are worthy of mention within the network: working with international peers on procedures, intensifying institutional exchange and the opportunity for some agencies to work outside their national context.

With regard to the first issue of working with international peers, some agencies have a long tradition of doing so, whereas others have only started recently. However, training international peers for the *audit* procedure seems to be a common challenge. Peers not only need be informed about the procedure but also need good insight into the respective higher education system. In terms of the responsibility of agencies, this implies providing a comprehensive overview of the higher education system and continuous communication with the peers before and after the site visits. Another aspect of working with international peers is the language barrier, as working with international peers often means either that the higher education institution must provide their documentation in a foreign language, or that the agency needs to use peers that are fluent in their national language. In the country reports this was addressed by several agencies as a major challenge for the years ahead.

Another topic raised by several agencies was the desire for more international exchange, principally concerning best practice, and to establish international cooperation. The QAN is one such activity, and exchanges of staff and information were also mentioned as possible forms of internationalisation.

An additional aspect of internationalisation identified was that agencies in some countries, such as Finland, Switzerland and Austria, are already active internationally with their *audit* procedures. This cross-border activity of agencies naturally raises several questions. As already discussed with regard to the issue of international peer experts, it might be asked how much knowledge of the national context of the higher education system is needed in order

to carry out *audits* in foreign countries. In addition, one might question the intentions of higher education institutions that choose agencies from abroad: is it done for marketing reasons? Does the institution want to get feedback from someone with a more distant view of its own higher education system? Are international peers or foreign agencies more prestigious? Or are there any other reasons? Whilst answering these questions might offer an opportunity to help agencies progress and quality assurance processes to develop, it cannot be done without reflecting the EHEA and the role played by the European Quality Assurance Register for Higher Education (EQAR).

I.7 Closing remarks

The QAN has proven to be a good opportunity for mutual exchange and learning, a valuable way of sharing best practice and a platform for fostering a common understanding of external quality assurance procedures, focusing on the development of internal quality management systems. All participants within the network contribute to establishing a comprehensive knowledge of the various developments and changes in external quality assurance in Europe. It is a unique opportunity to have an open forum to discuss and share experiences and to learn from each other. This publication allows the network to share its experience and knowledge with a wider public and to provide interested readers with an up-to-date overview of external quality assurance in a number of European countries.

Part II: Agency reports

II.1 National Agency for Quality Assessment and Accreditation of Spain (ANECA)

José Antonio Pérez de La Calle, Esther Balboa

July 2013

1 Terminology, purpose and aim

ANECA's audit programme is related to an *institutional* evaluation of quality.

The purpose of this programme is to improve, through official recognition, the design and the implementation of internal quality assurance systems for studies in university institutions.

This initiative seeks, on the one hand, to provide guidance to institutions in designing their own internal quality assurance systems for university studies and, on the other hand, to implement an evaluation procedure that leads to the recognition of their own design and their own implementation.

The audit programme moves one step closer to the EHEA by providing the necessary support for universities to comply with the standards and guidelines laid down by the ENQA for higher education institutions.

There is no official definition for an audit, but ANECA considers it to be a tool for the design and implementation of an internal quality assurance system in Spain, based on Chapter 1 of the ESG.

This approach differs from other ANECA accreditation programmes, such as *Verifica* or *Acredita*, as the audit refers to the internal quality level within faculties, university colleges and schools, whilst the other two aim to ensure the quality of the design and development of study programmes (degrees, Master's degrees and doctorates).

2 National legislation

Due to the EHEA framework and to certain recent changes in Spanish regulations, Spanish higher education institutions must ensure that the goals related to their different degree programmes are achieved, in a context of continuous improvement. As a result, universities should have formally established policies and internal quality assurance systems, in a document that is publicly available.

With this in mind, ANECA, together with two regional agencies, the Catalan University Quality Assurance Agency (AQU Catalunya) and the Agency for Quality Assurance in the Galician University System (ACSUG), developed the 'Assessment of Internal Quality Assurance Systems in Higher Education' (audit programme). The purpose of this initiative, which is aimed at all university colleges and faculties that offer university-level education, is to provide guidance in designing internal quality assurance systems. The objective of this evaluation programme is to facilitate and strengthen the design and implementation of the universities' internal quality assurance systems.

Under Spanish law, it is mandatory to include an internal quality assurance system in each of the study programme proposals to be assessed by the quality agencies. Within this framework, the audit model has a wider scope than the law (it deals with institutions, rather than programmes), and thus is voluntary for universities.

The audit programme is not regulated by any legislation. ANECA sets the objectives, designs the process, establishes the assessment criteria and benchmarks and selects committee members.

Since the audit programme was launched in November 2007, ANECA and some regional agencies have provided support to universities during the design stage.

As it is a voluntary programme for universities, ANECA is certain that it does not violate the institution´s autonomy when conducting external quality assurance procedures. It is important to point out that ANECA never tells the institutions what they should include in their quality procedures, but instead only gives them general guidance.

Regular external reviews are a very important part of the audit programme. There are three types of review, one for each of the following main stages:

- Internal quality assurance system design
- Implementation
- Periodic follow-up and renewal of certification

Again, the higher education institution's participation in each of these stages is voluntary.

3 Scope

The Spanish audit programme refers to Chapter 1 of the ESG. It covers all the specific issues considered by these criteria, whilst at the same time offering an overview of the institutions' performance. The medium-term goal is to create benchmarking criteria that can be used to compare the objectives of Spanish universities.

The institution cannot choose to design and/or implement a certain part of the scope of the audit programme model. They must consider the model as a whole, although they can adjust it to fit their specific profile.

This year, ANECA, together with ACSUG and the Agency for Quality of the Basque University System (UNIBASQ), is developing a new guide that regulates the methodology for assessing the level of implementation and effectiveness of the institution's quality management system.

The objectives of the guide are as follows:
- To promote the development and implementation of internal quality assurance systems for education in universities and other higher education institutions through the integration of all the activities associated with quality assurance for degree programmes that have already been carried out, and by ensuring that an internal quality assurance system is used for monitoring programmes.
- To implement a programme that leads to the recognition of the design of internal quality assurance systems by evaluating their adequacy and subsequently certifying the systems implemented.

The audit programme has three stages: assisting with the design of the internal quality assurance system, assessing the design and certifying the implementation of the internal quality assurance system.

The last stage of the audit programme will enable the certification process of the implemented internal quality assurance system to be completed. After the evaluation of the design phase, the agency carried out a pilot certification project, and it is currently being offered under a new call for certification.

The aspects included in the audit programme form part of the requirements for the accreditation process, which deals with the legal requirements for the authorisation and official registering of new Bachelor's and Master's degrees. This means that efforts are aligned and universities will find the accreditation processes for new degrees easier to complete.

Examples of the guidelines to help higher education institutions design and implement internal quality assurance systems are given below. The instructions envisage interaction between the different aspects that make up the system and its scope.

General guidelines

1.0. How the higher education institution defines its quality policy and goals.
The higher education institution needs to foster a culture of quality, supported by a quality policy and quality goals that are publicised and publicly available.

The higher education institution must:

1.0.1. Make a written public statement that sets out its quality policy, together with its scope and goals.

1.0.2. State the stakeholders involved in defining the quality policy.

1.0.3. Integrate different elements (bodies, procedures, processes, etc.) to establish a system whereby this quality policy can be implemented.

1.0.4. Establish actions to define, approve, review and improve the quality policy and goals.

1.0.5. Determine the accountability procedure (how, who, when) with the stakeholders regarding compliance with the quality policy and fulfilment of the quality goals.

Specific guidelines

> **1.1. How the higher education institution assures the quality of its programmes.**
>
> The institution must have mechanisms to maintain and update its programmes and develop methodologies to approve, control, evaluate and periodically improve their quality.

At its various organisational levels, the higher education institution must:

1.1.1. Determine the bodies, stakeholders, and procedures involved in the design, control, planning, development and periodic review of degrees, their goals and associated skills.

1.1.2. Have systems in place to gather and analyse information (from both national and international sources) in order to assess the maintenance, updating and renewal of its programmes.

1.1.3. Have mechanisms in place to regulate the decision-making process relating to the degree programmes offered and the design of programmes and their goals.

1.1.4. Ensure that the necessary mechanisms are developed to implement enhancements stemming from the periodic review of degree programmes.

1.1.5. Determine the way (how, who, when) to provide accountability to stakeholders regarding compliance with the quality policy and fulfilment of the quality goals.

1.1.6. Define the criteria for the potential discontinuation of the programme.

1.2. How the higher education institution orientates its programmes towards the students.

The higher education institution must have procedures in place to check that the fundamental purpose of its actions is to encourage students' learning.

The higher education institution must:

1.2.1. Have information systems in place that enable it to know and assess the requirements concerning:
   1. Definition of entry/graduation profiles
   2. Admission and registration
   3. Appeals, complaints and suggestions
   4. Student support and guidance for classroom activities
   5. Teaching and assessment of learning
   6. Placement/work experience and student mobility
   7. Careers guidance
1.2.2. Have mechanisms in place to obtain, assess and check information on the current state of the abovementioned processes.
1.2.3. Establish mechanisms to regulate the guidelines that affect students: regulations (examinations, disciplinary measures, requests for certificates, qualification endorsement, etc.), rules of use (facilities), schedules, timetables and benefits offered by the university.
1.2.4. Define how processes and actions concerning students are controlled, periodically reviewed and enhanced.
1.2.5. Determine the procedures it uses to regulate and guarantee decision-making processes concerning students.
1.2.6. Identify how stakeholders participate in the design and development of processes associated with student learning.
1.2.7. State the procedure (how, who, when) used for the accountability of student learning outcomes.

1.3. How the higher education institution assures and enhances the quality of its academic staff.

The higher education institution/university must have mechanisms in place to ensure that the recruitment, management and training of its academic staff and service and administration staff are carried out with appropriate safeguards, so that they can carry out their corresponding functions adequately.

The higher education institution must:

1.3.1. Have procedures in place to gather and assess information on the requirements of its academic staff (job specifications, required skills, etc.), in accordance with its staff policy.

1.3.2. Have the means to gather and analyse information relating to the abilities and current outcomes of academic staff, with a view to recruitment, training, performance evaluation, promotion and recognition.

1.3.3. Define the approach used to control, periodically review and continuously enhance its policy and the actions associated with academic staff.

1.3.4. Determine its procedures to regulate and guarantee decision-making processes associated with recruitment, evaluation, promotion, training and recognition.

1.3.5. Identify the way in which stakeholders (especially teaching staff and auxiliary teaching staff) participate in defining and developing the staff policy.

1.3.6. State the accountability procedure (how, who, when) concerning the outcomes of its staff policy.

1.4. How the higher education institution manages and improves its physical resources and services

The higher education institution/university must have mechanisms in place whereby it can design, manage and improve its services and physical resources[1] so that student learning can develop and take place in an appropriate way.

The higher education institution must:

1.4.1. Have mechanisms in place to obtain and assess information on the requisites for the design, allocation, maintenance and management of physical resources and services (including aspects associated with safety and the environment).

1.4.2. Have procedures in place that provide information on its systems designed to maintain, manage and adapt physical resources and services.

1.4.3. Define the system used to control, periodically review and continuously improve its policy and actions concerning administration and service staff.

1.4.5. Define how the monitoring, periodic review and enhancement of physical resources and services are carried out.

1.4.6. Determine its procedures to regulate and guarantee the decision-making processes associated with physical resources and services.

1.4.7. Establish procedures to channel the different ways that stakeholders participate in the management of physical resources and the provision of services.

1.4.8. State the accountability procedure (how, who, when) for adapting physical resources and services to students' learning and their level of use.

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1   Facilities (classrooms, study rooms, computer rooms, laboratories, meeting rooms, library seating), equipment, and scientific, technical, medical care and artistic materials.

1.5. How the higher education institution analyses and takes into consideration the outcomes.

The higher education institution/university must have procedures to ensure that outcomes (learning, graduate employment and the satisfaction of the different stakeholders) are measured, analysed and used[2] for decision-making and to enhance the quality of degree programmes.

The higher education institution must:[2]

1.5.1. Have mechanisms in place to obtain information on the needs and expectations of the different stakeholders in relation to the quality of the programmes.

1.5.2. Have systems in place to gather information to provide data on learning outcomes, graduate employment and stakeholder satisfaction.

1.5.3. Define how the control, periodic review and continuous enhancement of outcomes and data reliability are carried out.

1.5.4. Determine the strategies and approach for enhancing the outcomes.

1.5.5. Determine the various procedures to regulate and guarantee outcome-based decision-making processes.

1.5.6. Identify how stakeholders are involved in the measurement, analysis and enhancement of outcomes.

1.5.7. State the accountability procedure (how, who, when) for outcomes (activity reports, outcome reports, etc.).

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2   Outcomes should be divided up according to the different types of student, e.g. full-time, part-time, distance-learning, over 25s, second degrees, those who did not sit exams, etc.

> **1.6. How the higher education institution publishes information on degree programmes.**
>
> The higher education institution must have mechanisms in place to ensure that updated information on degrees and programmes is published periodically.

The higher education institution must:

1.6.1. Have mechanisms in place to obtain information on the running of degrees and programmes.

1.6.2. Determine the established procedure for informing stakeholders (including the different levels of the higher education institution's organisational structure) about:
- The programmes it offers.
- Goals and planning of degrees.
- Student admission and guidance policies.
- Teaching, learning and assessment and evaluation methodologies (including work experience).
- Mobility.
- Appeals, complaints and suggestions.
- Recruitment, evaluation, promotion and recognition of academic staff and administration and service staff.
- Services and the use of physical resources.
- Teaching outcomes (in terms of learning, graduate employment/labour market outcomes and the satisfaction of the various stakeholders).

1.6.3. Define how the monitoring, periodic review and continuous enhancement of public information provided to stakeholders are carried out.

1.6.4. Determine the procedures for regulating and guaranteeing decision-making processes associated with the publishing of information on the programmes and degrees offered by the higher education institution.

4 Audit procedure

The institution can ask the agency for a preliminary meeting (including a visit) to check the level of implementation of the internal quality assurance system. Alternatively, they can request a direct audit process to evaluate their internal quality assurance systems.

The guidelines assembled in the forthcoming ANECA guide will involve a variable number of site visits, depending on how many institutions within the same university are asking for certification.

The stages that ANECA considers as standard are:
- Self-assessment/evaluation report
- Peer review/site visit
- Peer report
- Certification/publication of the report (in progress)
- Follow-up (in progress)

During the implementation phase of the internal quality assurance systems defined by the universities, the agency will assess the implementation of the systems and the recommendations contained in the assessment reports prepared during the design phase of the said systems.

This phase is currently being tested as a pilot project.

In order to prepare for the site visit, ANECA's audit team will plan the places they wish to visit and people they wish to interview, in cooperation with the university.

Follow-up visits will only be mandatory in the audit programme if the university cannot demonstrate a high level of internal quality assurance system implementation. Otherwise, an annual self-assessment report will be sufficient.

To select auditors, ANECA will create a database of experts in auditing internal quality assurance systems with experience in audit processes, all of whom will have to pass specific auditing training given by the agency.

The national and international evaluators will be selected by the agencies following a number of criteria, in order to guarantee a high degree of objectivity and impartiality in the reports they draft.

The auditors will be selected by the agencies that develop the programme, ensuring that there are no conflicts of interest between the evaluators and the universities whose internal quality assurance systems are being evaluated.

5 External assessment / effects and impact

Periodically, ANECA and the other agencies involved in the audit process will carry out meta-evaluation processes, basically consisting of self-evaluation, with the support of the universities. They will also carry out cross-evaluations with other agencies, in order to check that the results are homogeneous.

The information collected during these activities will be made available for external panels of evaluators, and will also be used by the agency to improve its own processes.

ANECA believes that universities appreciate the way that ANECA 'takes care' of them by asking how the methodology could be improved, providing support during the process and asking about the added value of the process they undergo.

It is still too soon to have a clear idea about the impact of the audit programme, but ANECA hopes that a positive result will be visible in three to five years.

6 Current and future challenges and developments

Currently, the main challenge for the Spanish audit programme is the progressive implementation of internal quality assurance systems in Spanish universities. A good level of participation has been achieved in the design phase, but naturally that is not enough. ANECA is now trying to develop a model to certify implementation, considering not only the benefits of any internal quality assurance system, but also those arising from interaction with quality assessment in study programme assessment, in order to avoid repeated evaluation of the same issues.

The first task for the Agency at this moment in time is therefore to finish, publish and promote the new guide related to the certification of the

implementation stage, and then begin the pilot project to evaluate the implementation of the internal quality assurance systems.

Finally, in the future ANECA anticipates that a new context will be created, where universities and agencies all over Europe can easily share their data, and learn from each other´s best practices. The QAN is, of course, a good example of that.

II.2 Agency for Quality Assurance and Accreditation (AQ Austria)

Dietlinde Kastelliz

June 2013

1 Terminology, purpose and aim

Austria has three different types of higher education sectors under the auspices of the Federal Ministry of Science, Research and Economy: public universities, private universities and universities of applied sciences (Fachhochschulen), which are covered by three separate laws.

With regard to external quality assurance, these three sectors are within the scope of a single law, the Act on Quality Assurance in Higher Education (hereinafter: HS-QSG), but with some differences in procedures for the different sectors. The law also defines the working areas of the Austrian Agency for Quality Assurance and Accreditation (AQ Austria):

- institutional accreditation and accreditation of degree programmes at universities of applied sciences
- audit at public universities and at universities of applied sciences
- institutional accreditation and accreditation of degree programmes at private universities
- evaluation of degree programmes and institutional evaluation at all types of higher education institution (e.g. public universities, universities of applied sciences, private universities and university colleges of teacher education), including outside Austria
- studies and system analyses and projects
- consulting in matters related to quality assurance and quality enhancement.

AQ Austria distinguishes auditing from other types of external quality assurance procedure. An audit is understood to be a cyclical peer review, the aim of which is the *assessment of the organisation and the effectiveness/performance of an institution's quality management system.* At the same time, an audit is a supportive measure for the enhancement of quality management in all areas of a higher education institution. AQ Austria believes it is an institution's own responsibility to assure its quality, and that it has the capability to do so. Furthermore, AQ Austria regards its procedures as supplementary to higher education institutions' internal quality assurance.

Both institutional and programme accreditation at universities of applied sciences and at private universities have licensing powers, and are therefore official procedures. Although they are also conducted through peer reviews, their aims are different from an audit as they lead to the public recognition of the institution or study programme. In addition to the aim of the procedure, further differences between audit and accreditation naturally arise from the assessment areas that have to be reviewed.

The official definition of an audit's function is established in HS-QSG §22 (1): 'The certification of the quality management system of an educational institution shall be based on an audit of the assessment areas'. These assessment areas are mentioned in section 3 of this report.

An audit in Austria is understood to be a non-authority, external quality assurance procedure for higher education institutions. This is certainly true for public universities, although a negative outcome in an audit can ultimately have severe consequences for universities of applied sciences – they may lose their 'licence' and thus have to apply again for initial institutional accreditation.

2 National legislation

Public universities are set up by law, and are not required to undergo a 'licensing' procedure in the form of external accreditation for public recognition when introducing a new study programme. In this case, the universities' statutes constitute the regulations for an internal procedure, which includes several steps leading to the approval of a new study offer for degree education.

The most recent completely new public university to be established in Austria dates back to 1994, when Danube University Krems (which is solely a university for continuing education) was founded with the passing of a federal law. In 2004, three public medical universities (in Vienna, Graz and Innsbruck), which had previously been faculties of public universities, were set up as independent institutions based on the University Act 2002.

Newly-established universities of applied sciences undergo initial institutional accreditation and switch to an audit of their internal quality management system after 12 years.

The aforementioned HS-QSG applies to public universities, universities of applied sciences and private universities. University colleges of teacher education are governed by another authority (the Austrian Federal Ministry for Education, the Arts and Culture) and are thus neither under the supervision of AQ Austria nor AQ Austria's responsibility. Nevertheless, they too can make use of the agency's services, for example external evaluation or consulting.

Although one of the aims of the HS-QSG was to bring about the convergence of the higher education sectors in Austria, it has become clear that higher education institutions are not treated equally by the HS-QSG:

Type of institution	Degree programme accreditation	Institutional (re) accreditation	Audit	Reporting to AQ Austria
Public universities			×	
Universities of applied sciences	×	×	×	×
Private universities	×	×		×

However, the sectors share common aspects as well. All types of higher education institution covered by AQ Austria are obliged to implement internal

quality assurance mechanisms. It is the responsibility of the individual institution's management to decide how to do this and what the internal quality assurance system should look like. AQ Austria believes that each institution has to choose and set up a system which best fits its profile and its needs. There is no 'one size fits all' approach, as the diversity and autonomy of institutions need to be taken into consideration. It is assumed that a higher education institution will set up a system which covers not only single performance areas but the organisation as a whole, and includes its core tasks (teaching, learning and research) as well as its other responsibilities (administration, societal impact, etc.).

Until the launch of the HS-QSG in March 2012, audits in Austria were conducted on a voluntary basis for public universities only. They were introduced by the Austrian Agency for Quality Assurance (AQA) in 2007, and from the very beginning were designed as a means of enhancing an institution's quality, not as a monitoring tool.

In 2012, an interim audit model, and in July 2013 a refined audit model for public universities and universities of applied sciences was presented by the newly-established AQ Austria, meeting the requirements set in the HS-QSG. It was derived from the former model, and still placed the emphasis on enhancement, though with an additional formative aspect. The audit is now mandatory not only for public universities, but also for universities of applied sciences. Private universities are not subject to audits, but have to undergo periodic institutional evaluation by AQ Austria. In accordance with the law, however, audits of the required assessment areas (see section 3 – Scope) may be performed either by AQ Austria, or by a quality assurance agency registered by EQAR or "another internationally recognised and independent quality assurance agency". The responsibility for this definition lies with the Austrian Ministry of Science, Research and Economy. In any case, the stipulated assessment areas have to be observed, whereas procedural questions (e.g. the number of site visits, the size of the panel, etc.) follow the individual models of the respective foreign agency.

The audit is related to other external quality assurance procedures conducted by AQ Austria in the sense that the validity of the accreditation status of a university of applied sciences depends on a positive certification from the audit process. A university of applied sciences may lose its licence and would have to re-do its institutional accreditation in the event of a negative outcome from the audit, following a period of two years after the original decision to

remedy the shortcomings. Otherwise, AQ Austria considers an audit to be completely different from an accreditation and does not encourage the two procedures to be linked closely.

The certification decision in an audit procedure can be either negative, or positive, or subject to conditions. An outcome 'subject to conditions' requires the institution to prove that it has removed its deficiencies within two years.

In the event of a positive decision, the institution is trusted to look after its own quality, and according to the HS-QSG its next audit will be due seven years later. For universities of applied sciences, new degree programmes must still be externally accredited by AQ Austria. Public universities do not face any obligatory external quality assurance procedures other than the audit every seven years. The only exception from this is the Danube University Krems (a public university for continuing education) with the legal obligation to externally accredit its doctoral programmes.

One of the reasons for the implementation of the new law (HS-QSG) and the corresponding introduction of a mandatory audit for public universities and universities of applied sciences is the effort in Austrian higher education policy to narrow the gap between these two higher education sectors. Universities of applied sciences were introduced to Austrian higher education in 1994 and have often been regarded as the 'younger brothers' of public universities due to their stronger focus on teaching and learning and their predominantly applied research, as well as to the organisation of the study programmes, which is much more regulated than in public universities. Furthermore, universities of applied sciences have an explicit aim to provide applied academic education and to ensure students' employability. Universities of applied sciences do not enjoy the same organisational autonomy as public universities: as already mentioned, universities of applied sciences are subject to a 'licensing' procedure involving institutional accreditation and programme accreditation for each new degree programme, whereas public universities are set up by law and introduce new degree programmes autonomously with an internal process and final recognition by the university's own senate.

Incidentally, AQ Austria itself is by law required to undergo external evaluation in accordance with international standards on a regular basis.

3 Scope

The scope of the AQ Austria audit model covers certain assessment areas, with more detail provided in the standards.

The assessment areas follow the requirements of § 22 (2) of the HS-QSG:

1. Quality strategy and its integration into the management tools of the higher education institution;
2. Quality assurance structures and procedures in the areas of degree programmes and teaching, research or advancement and appreciation of the arts or applied research and development, organisation and administration and staff;
3. Integration of internationalisation and societal objectives into the quality management system;
4. Information systems and involvement of stakeholder groups;
5. Quality assurance structures and procedures for certificate programmes for further education offered by provider of university of applied sciences degree programmes.

A close analysis of these assessment areas shows that on the one hand they involve different dimensions, and on the other hand include very dissimilar aspects. In addition, the 'core tasks' of higher education institutions like teaching and research are regarded on the same level as more technical issues like information systems and administration.

Within its audit, AQ Austria does not check the compliance of individual degree programmes with the Bologna principles regarding learning outcomes, ECTS, recognition, etc. When assessing these areas, the institution has to prove that its internal quality management system is capable of guaranteeing that the institution meets the official requirements for the delivery of degree programmes. Also, if an institution wishes to deal with one of these topics in more detail it can be included in the audit, as the developmental character of the procedure allows this.

Four standards which specify the aforementioned assessment areas are also used to assess the organisation and effectiveness/performance of an institution's quality management system. They have a holistic perspective, based on the quality cycle 'plan-do-check-act':

Standard 1: The higher education institution has defined objectives and pursues a strategy which is systematically supported by management tools.

The higher education institution shall specify strategies and define objectives as prerequisites to establish and implement an internal quality management system. Measures shall be derived from these strategies, and responsibilities at all levels of the higher education institution shall be defined. The higher education institution is autonomous in designing its internal quality management processes.

Standard 2: The quality management system supports the higher education institution in achieving its objectives.

The quality management system shall comprise measures of internal quality assurance, which support the higher education institution in achieving its objectives, fulfilling its tasks and advancing its internal organisational and controlling processes. The core responsibilities of a higher education institution shall be studying and teaching including further training, research or development and appreciation of the arts as well as cross-cutting tasks in the fields of organisation, administration and support, human resources, resource management, and internationalisation.

Standard 3: The quality management system uses evaluation procedures, monitoring and information systems as integral components.

Strategies, organisation and services of the higher education institution shall be subject to systematic monitoring. The higher education institution shall rely on the results and findings of internal monitoring, of its information and reporting systems and of quality assurance measures when it comes to developing and/or advancing objectives and strategies and making controlling decisions. Furthermore, the results of internal and external evaluation measures shall be integrated into the advancement and/or adaptation of the quality management system.

Standard 4: The quality management system is based on the quality approach of the higher education institution and provides for the systematic involvement of various interest groups.

The higher education institution's quality approach shall be sustained by its members and fostered by an active communication strategy. The composition of the interest groups shall be determined by the profile and objectives

of the higher education institution and shall reflect its societal responsibility. AQ Austria also sees these standards as a reflection of the standards in Part 1 of the ESG, but does not explicitly refer to them.

The crucial point in an audit (as in any external quality assurance procedure) is the proof of the effectiveness of the institution's quality management system or procedures. It is not sufficient to have a quality handbook or a well-designed process framework without putting them into practice. AQ Austria asks the institution for evidence of how its internal quality management system contributes to the achievement of its aims (this implies, of course, that the institution has set aims). This evidence can be provided through documents, but can also be provided orally during the peer review. Representatives of the higher education institution must prove where and how the quality management system supports the daily routine of the institution, how it contributes to solving specific problems, and how every staff member at the institution contributes to active quality management in his or her respective area of responsibility.

4 Audit procedure

AQ Austria performs its audit following the typical stages of a peer review, starting with the hugely important preparation phase. Here, AQ Austria establishes the aims and expectations of the institution for the audit, so as to support institution-wide awareness of the process. To avoid conflicts of interest, AQ Austria does not assist institutions in drafting their own documentation, but is available for questions throughout the process concerning the assessment standards and the methodology behind the procedure.

The selection and preparation of the panel is a crucial element for the success of an audit. The organisation of an audit as a peer review means that panel members must be familiar with the field, must come from comparable contexts to the institution and must be qualified to complete the task set. To acquaint them with the specific nature of an audit and the individual profile of the audited higher education institution, AQ Austria allows for the careful preparation of panel members for each procedure separately.

AQ Austria regards it as fundamentally important for the profile of the review team to invite people with experience in managing higher education institutions: quality culture needs to be implemented from the top down, and the management has to prove its commitment to taking responsibility for its institution's quality. As the audit does not assess individual degree programmes, discipline-specific knowledge is not a priority requirement for peers, especially since institutions with a varied profile could not be covered that way. However, the specific profile of an institution, its size and context etc. is taken into account in the composition of the review team, to guarantee an equal perspective. For an audit at a specialised institution, for example an arts university, AQ Austria employs panel members who are experienced in the respective field. A typical panel has five members. AQ Austria mostly works with peers from outside Austria and prepares them for the specifics of the Austrian higher education system. This is due to the small size of the country and therefore the potential for peers to be biased. If a higher education institution wishes to include Austrian peers in the panel, the agency will select appropriate experts.

AQ Austria conducts two site visits with the panel at the institution. During the first visit the focus is on the organisation of the overall quality management system in the context of the aims and strategies of the higher education institution. The actual implementation of the quality management is the subject of the second site visit.

The panel prepares a report where peers make statements about the institution's internal quality management system and assess it according to the four standards mentioned in the previous section. The higher education institution has the opportunity to comment on the report and deliver a statement. Both the panel report and the institution's statement are taken into consideration by the board of AQ Austria when it decides on the certification of the institution's internal quality management system. Once the certification decision has been made, the certification result, the panel report and the institution's statement are published on the agency's website.

During the audit the panel members get a picture of the institution's internal quality assurance and assess the system as 'met', 'partly met' or 'not met' with the specific requirements of each standard. It is considered 'met' if no deficiencies are detected. 'Partly met' means that quality management basically exists, but there are shortcomings in its implementation. If, however, a major area of the institution (for example research) is not at all covered by the

quality management system, the standards are regarded to be 'not met' and the quality management system consequently may not be certified.

With regard to follow-up procedures, the agency offers optional workshops for the institution a couple of months after the certification decision had been made. In this workshop, members of the institution discuss critical issues and recommendations from the panel report with one panel member, usually the head of the panel. The institution presents the measures it intends to implement in response to the critical issues, and receives immediate feedback.

As an internal follow-up and as part of its internal quality assurance, the agency reflects on the methodology and organisation of the procedure and notes any requirements and ideas for improvement as well as successful aspects. Furthermore, AQ Austria asks the audited institution as well as the peers to give feedback via a feedback form. These are continually fed into the development of the audit and external quality assurance procedures offered by AQ Austria.

5   External assessment / effects and impact

AQ Austria follows a dual approach in its audit of higher education institutions. On the one hand there is the assessment aspect, which has a formal character; on the other hand there is the issue of enhancement, which aims to support the institution in its development. This approach leads to high expectations regarding the audit's impact on the management of the higher education institution, on the higher education institution's internal processes, on the development and delivery of degree programmes, and so on. One reliable way to evaluate and assess the impact of the audit and to find out whether it had any impact is certainly a re-audit, when a comparison of the development of the quality management system can be made. Seven years elapse between an audit and a re-audit, which is longer than most students stay at the institution. This cries out for other ways of analysing the impact of the procedure.

At the moment, AQ Austria uses questionnaires as an immediate means of obtaining feedback from the institution and panel members, both on procedural issues and on the expected effects the audit will have on the institution. A new system of collecting feedback is currently being developed.

It will include differentiated issues for individual respondent groups at the institution at specific times, for example immediately after the finalisation of the audit procedure, one year later, etc. The agency thus intends to find out the real consequences of the audit in the individual assessment areas. Furthermore, as part of the agency's responsibility for system-wide analyses, AQ Austria is setting up a project to conduct analysis at higher education institutions which have undergone an audit in accordance with the HS-QSG.

6 Current and future challenges and developments

Since the law on quality assurance in higher education came into effect in Austria in March 2012, the organisation of an audit every seven years has become mandatory for public universities and universities of applied sciences. Although the character of the procedures and the assessment areas differed from the current audits, universities of applied sciences are familiar with external quality assurance procedures, as evaluations were regularly conducted before.

For public universities, however, the concept of compulsory external quality assurance is new. One of AQ Austria's guiding principles is respect for the autonomy and individuality of higher education institutions. Nevertheless, the feeling of autonomy is a delicate topic for public universities. The University Act 2002 (UG 2002) granted autonomy to public universities, which is shown in their degree of self-governance (before then, they were under the official authority of the Ministry of Science and Research). Responsibility for quality also lies with the institution itself. One of the requirements of the UG 2002 for public universities is the establishment of an internal quality management system in accordance with the institution's needs. It is this system that is now subject to assessment through the audit.

The structure of AQ Austria is closely related to this issue. The agency unites three former Austrian institutions for quality assurance: Fachhochschulrat (the Council for Universities of Applied Sciences, founded in 1994), Akkreditierungsrat (the Council for Private Universities, established in 2000) and the Austrian Agency for Quality Assurance (founded in 2004). Each of these institutions had certain fields of responsibility and roles, which were merged in 2012 as a result of the HS-QSG to become the new organisation AQ Austria. The two councils were state bodies and had powers over the

institutions in their respective sectors. AQ Austria is now a mixed organisation that partly has the function of a public authority, regarding universities of applied sciences and private universities, but not public universities. Nevertheless, this has proven to be an obstacle for the agency, as the public mainly consider it a public authority. Public universities are suspicious of this aspect as they consider it a threat to their autonomy. One of the agency's challenges is therefore to restore trust, especially from public universities.

Audits following the assessment areas mentioned in chapter 3 of this text may be performed by AQ Austria, by a quality assurance agency registered with EQAR, or by another internationally-recognised and independent quality assurance agency. This leads to significant competition for AQ Austria. If a higher education institution decides to conduct its audit with an agency that is not AQ Austria, the Austrian agency it is not involved in the procedure at any stage.

In addition, another challenge of the audit is its status: a negative outcome of an audit, especially following a negative re-audit, will lead to different consequences for public universities and for universities of applied sciences. Whereas a university of applied sciences loses its 'licence' and consequently has to undergo the initial institutional accreditation again, the effect on a public university might be a loss of reputation and probably more pressure on budget negotiations with the Ministry, but not closure. It is debatable which consequence is worse for the individual institutions, but the unequal treatment of the two sectors concerning consequences again raises the questions of authority and of the significance for the institution.

From national experience and from the political commitment expressed in the Bologna Follow-up Group at the Bucharest Ministerial Conference, AQ Austria expects further 'internationalisation' of the audit. This will presumably not be connected with the content of the audit, but rather with opening the 'market' to foreign quality assurance agencies. No doubt this will lead to a better understanding of national higher education systems in the EHEA and hopefully also to institutions having a more appreciative approach. In the long run, this should have a positive impact on students and their mobility during their education, as well as on the recognition of their degrees when they are looking for employment.

II.3 Catalan University Quality Assurance Agency (AQU Catalunya)

Esther Huertas, Esther Adot

1 Terminology, purpose and aim

In Catalonia, the current legal framework on quality assurance for higher education establishes shared roles between the Government of Spain and the Government of Catalonia. This is put into practice through agreements on how to organise and share responsibilities among the various agencies in Spain. In practice, this means that in Catalonia the agency responsible for all programme-based and institutional procedures of external quality assurance is AQU Catalunya.

The term 'audit' is used differently in Spain compared to other European countries. Specifically, the audit programme was designed in order to:

i. promote the development and implementation of internal quality assurance systems in education in universities and other higher education institutions through the integration of all the activities associated with the quality assurance of degree programmes that have already been undertaken and by ensuring that an internal quality assurance system is used for programme monitoring,

ii. implement a programme that leads to the recognition of the design of internal quality assurance systems through the evaluation of their adequacy and the subsequent certification of those that have been implemented.

The audit programme was set in motion in 2007 by AQU Catalunya, in collaboration with ANECA and ACSUG. Catalan universities have become progressively more active in the calls for participation since then and today all Catalan universities are involved in the programme.

Regarding the assumption that the term 'audit' is often related to institutional evaluation, it should be stated that AQU Catalunya has previous experience in this activity, although at present the agency does not carry out any institutional evaluation. Between 1996 and 2006, the agency implemented the Pro-Qu programme, which was fundamentally orientated towards improving the institutions that were evaluated, but also towards strengthening internal quality assurance offices (the Pro-Qu methodology was designed on the basis of contributions from quality assurance staff at higher education institutions). Also worthy of mention is the 2011 mobility plan for internal quality assurance staff, allowing them to observe international practices in other European higher education institutions. AQU Catalunya designed and participated in another activity related to institutional evaluation (from 2008-2010), aiming to help all affiliated institutions in the Catalan higher education system to achieve a level of quality that enabled them to deal successfully with the preparation and delivery of Bachelor's degree and Master's degree programmes.

2 National legislation

The Bologna Process came into legal effect in Spain in 2007 with the passing of Royal Decree 1393/2007 of 29 October concerning the structure of recognised university courses, which was amended by Royal Decree 861/2010 of 2 July and Royal Decree 99/2011 of 28 January, regarding the regulation of recognised doctorate programmes. The amendment deals with a new structure for state-recognised university programmes and awards, the purpose of which is convergence with the principles of the EHEA. This legal framework introduces the following new aspects to the Spanish higher education system:

i. the universities themselves create and propose the programme courses that they offer and teach, without having to comply with a pre-established catalogue set by the authorities, as was the case previously. This involves several different stages in which programmes are subject to external quality assurance. There is an ex-ante evaluation (accreditation stage), authorisation (by the autonomous regional government), annual monitoring, and external assessment of degree modifications and (re)accreditation when the programme can demonstrate its complete implementation and the achievement of the educational objectives and learning outcomes.

ii. When putting together any new programme, the university's academic coordinators must specify what kind of internal quality assurance system they will implement for the purposes of quality assurance throughout the life cycle of the programme. This system is assessed in cyclical processes (carried out by the quality assurance agencies), which allows the running of programme courses to be supervised and for information on their quality to be made available to the public.

AQU Catalunya intends to link together logically the four review processes (ex-ante evaluation [accreditation stage], monitoring, modification and [re] accreditation) that, from a legal perspective, are compulsory for state-recognised courses, in order to establish conceptual coherence and greater efficiency in the management of the evaluation processes. This Evaluation Programme Framework (EPF) therefore establishes the plan of action for AQU Catalunya and Catalan universities.

Ex-ante evaluation (accreditation stage)
At present, before a new programme can be introduced to the Catalan higher education system, a curriculum proposal must be submitted, through the Universities Council, for ex-ante evaluation (accreditation stage) by AQU Catalunya. If the ex-ante evaluation of the curriculum proposal is favourable, it is referred to the autonomous regional authorities, which decide whether to authorise it or not. If authorisation is granted, the programme is entered in the Ministry of Education's Register of Universities, Faculties and Degrees and may then be introduced and taught.

The agency issues the reports from the ex-ante evaluation of proposals for new programme courses approved by the university through review panels. The objective is to ensure that new programmes are formulated in accordance with the requirements of the EHEA and the qualifications framework, and that there is coherence between the content and learning objectives, according to the approach taken in each discipline.

Monitoring
Once the programme is running, current legislation states that compliance with a curriculum that has undergone ex-ante evaluation (accreditation stage) must be monitored by AQU Catalunya.

The monitoring has two objectives. On the one hand, it serves as a useful tool for the management within the university, allowing the courses offered to be evaluated on the basis of data and statistics, together with the drawing up, where applicable, of enhancement proposals and/or corrective measures; on the other hand, together with the site visit it provides a source of evidence for programme (re)accreditation.

Modifications

Proposals for modifying programmes may result from the monitoring process.

Any proposal to modify any of what are considered to be substantial aspects of the programme (the programme teaching method, the number of programme credits, the programme's entry requirements, the curriculum and skill profile or the structure of compulsory courses in the programme) entails the start of a new ex-ante evaluation process (a new accreditation process). Aside from the aforementioned substantial modifications, in all other cases universities can make modifications as a consequence of the monitoring of programme courses as envisaged in their internal quality assurance system, without the need for prior authorisation, but subject to the following conditions: every modification must be documented, the design of the programme course contained in the documentation on the ex-ante evaluation process must be updated and publicised, including the modifications adopted, so as to comply with the commitment to making information public, and an updated version of this information must be constantly available to all stakeholders (students, academic staff and the public).

(Re)accreditation

AQU Catalunya is also responsible for the (re)accreditation of programmes and awards. In order for accreditation to remain valid, programmes must obtain a positive (re)accreditation report following the ex-ante evaluation (accreditation stage) stating that the relevant curriculum is being followed according to the initial plan. This involves a review, with an obligatory site visit to the institution. Within a maximum of six years of a new Bachelor's or doctorate programme being introduced, and within four years for a Master's programme, all recognised programmes shall be subjected to a (re)accreditation process.

The regulation is centred on quality assurance in higher education programmes. However, the Agency will organise annual external reviews in faculties and schools on efficiency and consistency matters. Review panels

will simultaneously review all of the state-recognised programmes that are offered there. The objective is to ensure that all university programmes are reviewed externally at least once within the legally stipulated period.

AQU Catalunya has already approved the planned methodology, and has now begun to work with higher education institutions in order to prepare them for the (re)accreditation site visit.

Finally, although there is no mandatory link between audit and AQU Catalunya's EPF, a positive evaluation of the design of internal quality assurance systems (audits) provides a response to the quality assurance section of the ex-ante evaluation of the programme, and it is also connected to the monitoring of official programmes. Besides, AQU Catalunya is currently planning the certification process for internal quality assurance systems at a faculty/centre level. The certification of internal quality assurance systems might in the future be carried out at the same time as the (re)accreditation site visit.

3 Scope

AQU Catalunya's guidebooks are a mixture of international guidelines, criteria and checklists. They comply with the ESG, and are often agreed with other Spanish agencies. Emphasis is given to whether the assessed programmes are above or below a certain threshold defined by a given standard. This means that issues of excellence are not currently addressed.

With regard to the EPF, all aspects of the ESG are covered in the initial accreditation process (i.e. public information; assessment of students; teaching staff; learning resources and student support; learning outcomes; etc.).

The monitoring process involves analysing public information regarding the implementation of programmes (course guide, application, fees and funding, etc.) and relevant statistics, determining the facts and drawing up enhancement proposals to correct any divergence observed between the a programme's plan and its development; and the adequacy of the internal quality assurance system.

The (re)accreditation process will focus on the following dimensions: programme quality, public information, internal quality assurance system efficiency, adequacy of teaching staff on the programme, efficiency of learning

support systems, quality of programme results and other additional dimensions (evaluation of learning aspects, internationalisation, research-teaching interaction, the sustainability of programmes at the centre and the added value of programmes at centre level). For learning outcomes, (re)accreditation is planned to be based on an analysis of the learning outcomes. This analysis would be based on evidence related to selected compulsory courses and the final-year project and their alignment with Spanish qualification frameworks.

On the other hand, the audit programme is focused on quality assurance in the teaching programme, which includes a set of directives perfectly aligned with the ESG (education quality policy and goals; quality assurance in education programmes; development of education programmes to encourage student learning; quality assurance for academic and service and administrative staff; quality assurance for material resources and services; compiling and analysing results for the improvement of education programmes; and the publication of information and accountability for education programmes).

4 Audit procedure

AQU Catalunya has launched various initiatives to advise and provide all necessary support to higher education institutions, such as specific meetings to solve issues about the methodology and to explain review reports and some workshops. Specifically, in 2009 AQU Catalunya launched the Support Programme. This programme was set up to reinforce the internal quality assurance structures in Catalan universities and as an aid in the preparation of processes involving the self-evaluation, follow-up and (re)accreditation of programmes.

The selection and appointment of members on the evaluation panels will be conducted in line with the internal criteria that apply to the quality assurance agency, ensuring independence, objectivity, a commitment to ethics and confidentiality as well as freedom from conflicts of interest. In line with its commitment to transparency, the Agency will publish the names of the panel members.

Members of review panels are selected from AQU Catalunya's database of reviewers. The Agency publishes a call for experts on its website, allowing people to be added to this database and participate in the Agency's evaluation processes.

All review panels are composed of different reviewer profiles: academics, professionals, methodologists and student reviewers. Overall, the expert panel should have a mix of expertise appropriate to the objectives of the evaluation, as stated by the European Consortium for Accreditation (ECA) (Common principles for the selection of experts, 2005), and gender balance should be taken into consideration when appointing a review panel.

EPF panels are formed of experts from a given field of study. Panels review programmes in the same subject area, regardless of the university they come from. Once the cycle is finished, the same experts will have analysed programmes at different points in the process (ex-ante evaluation – accreditation stage, monitoring, modification and (re)accreditation).

For audits, the members of review panels must have the following profile: academic assessor (a university lecturer and researcher with experience in assessment processes for degrees, institutions or teaching staff and experience in quality assurance systems. It is advisable to have held a position of responsibility in the university's governing bodies), non-academic assessor (a professional with experience in quality assurance systems and knowledge of the university system and assessment expertise), technical staff from the quality agency and a student.

AQU Catalunya uses a blended training model, with a first part based on distance learning and a second part that is classroom-based, where the training revolves around practical cases based on the reports that are to be evaluated. It is important to note that the Agency organises an extra training day for students with the aim of focusing on their tasks.

5 External assessment / effects and impact

Judgements, further requirements and recommendations are included in the reports. Requirements are a particularly fundamental aspect in the preliminary reports. The final evaluation reports will be published on the Agency's website once they have been submitted to the university.

Initial accreditation is required for the right to offer a state-recognised (official) programme. For public higher education institutions, this has an indirect effect on funding, because the budget received depends on the number of programmes recognised.

The impact of the audit programme can be observed through the ex–ante evaluation, monitoring and (re)accreditation. As was explained before, each of these programmes assesses the adequacy of the internal quality assurance system. Moreover, AQU Catalunya is carrying out some impact studies, involving analysis of the internal quality assurance system and ex-ante evaluation.

It should be mentioned that there are no direct consequences on ranking, which is not the responsibility of the Agency.

AQU Catalunya carried out meta-evaluations at the end of each programme, and these are published on the Agency's website. The result of this process will help the methodology and assessment procedure to improve.

6 Current and future challenges and developments

Due to the nature of AQU Catalunya's activities, the challenges it faces have been divided into those concerning audit and those concerning the EPF:

Audit

After five years of designing the internal quality assurance system, universities have to implement all the processes included in their quality assurance manuals. This is one of the most important challenges for the higher education system in Catalonia. In general, the internal quality assurance system includes numerous procedures that cover a wide range of aspects. As a consequence, there could be some difficulties during the implementation of the internal quality assurance system. The monitoring programme has demonstrated that some universities will have to simplify the initial design of various processes.

Professors and other university staff sometimes think that these processes are bureaucratic. This situation makes guaranteeing the correct implementation of the internal quality assurance system more difficult.

Programmes like the audit programme give added value to the higher education system in Catalonia and Spain.

AQU Catalunya is working to examine the link between the (re)accreditation of programmes and internal quality assurance system certification.

EPF

Programme (re)accreditation includes a site visit at centre level. The challenge of the site visit is analysing programmes with different levels of development and stability.

As stated above, learning outcomes will be another key aspect, because the final (re)accreditation is planned to be based on their analysis.

The Spanish quality assurance agencies are currently mainly involved in evaluating subject programmes. They carry out ex-ante evaluations (accreditation stage) and monitoring evaluation. In addition, AQU Catalunya has designed the methodology for the programme (re)accreditation, which will be implemented in a few months.

Based on its international experience and given the maturity of the Catalan higher education system and its inherent expertise, now seems the right moment to introduce self-accrediting centres. This new concept is already included in the (re)accreditation process. This means that all higher education institutions that demonstrate strong quality assurance mechanisms (in the light of the EPF results) would be classified as self-accrediting centres.

II.4 Romanian Agency for Quality Assurance in Higher Education (ARACIS)

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1 Terminology

Institutional evaluation of quality – the multi-criteria examination of education quality, and of the extent to which an education service supplier/providing unit/institution and its programmes fulfil the standards and the reference standards. When quality evaluation is conducted by the organisation, it is deemed an *internal evaluation*. When quality evaluation is conducted by a specialised national or international agency, it is deemed an *external evaluation*;

Evaluation of learning outcomes – the process whereby it is established that an individual acquired certain knowledge, skills and abilities on the basis of expected learning outcomes which are made available to the student at the beginning of a given section/chapter or the beginning of the entire study programme;

Education quality improvement – the evaluation, analysis and continuous corrective activity carried out by the education service supplier/providing unit/institution, based on the selection and adoption of the most appropriate procedures, and also on the selection and implementation of reference standards;

Standard – a description of the requirements set out in terms of rules or outcomes, defining the minimum compulsory level for performing an

educational activity. Any standard is set out in general terms, as a statement, and is implemented as a set of performance indicators. Standards are differentiated by criteria and fields;

Reference standard – a description of the requirements defining an optimal level of performance of an activity, by the education service supplier/providing unit/institution, based on good practice at a national, European or international level. Reference standards are specific to each study programme or institution, are optional and are above the minimum level; the reference standards are subject to improvement as a result of a benchmarking process;

Performance indicator – a value or set of values related to the standards that are used as measuring units to estimate the degree to which an activity carried out by the education service supplier/providing unit/institution was fulfilled, as compared to standards and reference standards respectively. The minimum level of performance indicators corresponds to the requirements of a standard. The maximum level of performance indicators corresponds to the requirements of a reference standard, is optional and differentiates quality on a hierarchical scale, indicating progress;

2 National Legislation

The Romanian legislative framework concerning quality assurance in higher education is as follows: Law of National Education 1/2011, Ordinance No. 75/2005 regarding Quality Assurance in Education adopted by Law No. 87/2006, Methodology for External Evaluation, Standards, Standards of Reference, and List of Performance Indicators of the Romanian Agency for Quality Assurance in Higher Education (Government Decision 1418/2006).

External evaluation at institutional level is part of the quality assurance process and is mainly established by the following provisions:
"Ensuring the quality of higher education and university research is a fundamental obligation of the higher educational institution and a fundamental role of the Ministry of National Education. To achieve this task, the Ministry of National Education cooperates with ARACIS, other agencies

listed in EQAR, as well as with the National Research Council (CNCS), the National Council for the Attestation of University Titles (CNATDCU), the National Council for Ethics and University Management (CEMU) and other bodies with responsibilities in this area in accordance with the legislation in force.

Higher education institutions are obliged to supply to the Ministry of National Education the data requested by it in compliance with the legal provisions. Their refusal to do so, or reporting false data, is in breach of the principle of pubic liability and leads to the penalties provided by the law.

The universities that refuse to make public the data requested by the Ministry of National Education or by any other natural person or legal entity are in breach of the principle of pubic liability and are sanctioned in compliance with the law.

Students are partners with full rights in the quality assurance process".

The assessment of universities is carried out with the purpose of:
a) temporary (provisional) authorisation and accreditation
b) ranking educational programmes and classifying universities

The assessment for temporary authorisation and accreditation is made by ARACIS or by another EQAR registered agency and is made in compliance with the law and international standards in the area.

"Public responsibility obligates any public or private higher education institution:
a) to observe the legislation in force, its own charter and national and European policies in the field of higher education;
b) to apply and observe the regulations in force regarding quality assurance in higher education."

If the aforementioned obligations (Article 124 of the Law of National Education 1/2011) are not observed, the Ministry of National Education notifies the university's senate within 30 days of the day the offence was uncovered. If three months after the said notification the university continues not to observe the obligations pursuant to Article 124, the Ministry of National Education, within a maximum of six months of the initial notification of the university's senate, takes one or more of the following measures:

a) the dismissal of the rector, based on a proposal by the CEMU, upon consultation with the university's senate. Within a maximum of five days of the rector's dismissal, the senate is obliged to appoint a pro-rector who represents the university and becomes the budget manager until the confirmation of a new rector by the Ministry of National Education. Within three months of the rector's dismissal, the university's senate finalises the procedures for the appointment of a new rector, in compliance with the legal provisions in force, and submits the name of the new rector to the Ministry of National Education for confirmation;

b) the reduction or temporary or permanent removal of access to funding from public sources, at the proposal of the CEMU;

c) proposal to the Government of the initiation of a draft law for the reorganisation or dissolution of the higher education institution in question.

The periodicity of the external evaluation:
"Any accredited higher education institution is externally evaluated on a periodic basis, at intervals not exceeding five years."

3 Scope

The purpose of the external institutional evaluation is to identify and certify the way higher education institutions meet the public interest, as well as the measures taken for quality improvement, in the following aspects of academic life:

• In the teaching-learning process, by assuring an acceptable quality level for study programmes, in compliance with the academic reference standards published by the institution itself and which are, as a minimum, at the level of ARACIS' standards, reference standards and performance indicators.

• In exercising the legal right to issue diplomas and qualifications.

The objectives of the external institutional evaluation are the following:

• To contribute, along with other mechanisms, to the promotion and assurance of a high quality teaching-learning process in higher education institutions.

- To ensure the students, employers and public have wider and more rapid access to clear, trustful and explicit information about the way each institution offers study programmes, diplomas and qualifications that fulfil national requirements, according to European academic standards and quality principles.
- To ensure that, when the quality of study programmes is poor, the external evaluation process creates the conditions to initiate actions for their improvement.
- To apply external evaluation mechanisms that guarantee the quality of the teaching-learning process, transparent management and the public liability of higher education institutions.

The external institutional evaluation focuses on the following three main aspects:
- *The efficiency of the internal quality assurance mechanisms and structures* at an institutional level (institutional capacity), from the point of view of the Code of Good Practice, in order to ensure academic quality and graduation standards in higher education and the degree to which the study programmes' content and quality and the standards at which diplomas are issued are periodically revised by each university. This Code was implemented by the Agency after the pilot stage in 2006-2007, taking into account the good practices at European level contained in the documents of the ENQA. At the same time, analysis is carried out as to whether the recommendations given during previous (internal and external) evaluations have been implemented, and what their effect has been. The aim of this assessment is to provide public information on the quality of activities within each higher education institution, as a provider of nationally and internationally recognised higher qualifications.
- *The accuracy, completeness and credibility of information* published by the institutions regarding the quality of their study programmes and diplomas they issue at graduation. In this case, information is provided concerning the level of confidence that can be placed in the information materials published by the institutions on the quality of their activities. This useful information is provided for students and other interested parties.
- *The internal quality assurance mechanisms and procedures,* which are analysed through a *documented examination of the study programmes' quality assurance*, and *the thematic evaluation of certain activities* (for

example, the way the university ensures the quality of professional and career guidance services for students; the internal assurance mechanism for examination quality at a department and faculty level etc.) The external evaluation aims to demonstrate the validity and credibility of the information provided by the universities on the basis of the internal quality assurance process. As a general rule, within the external institutional evaluation, the evaluation of study programmes is expected to cover at least 20% of the programmes of a higher education institution.

Main elements of the external institutional evaluation

In order to achieve its aims, the external institutional evaluation has several main elements:

- Examining the mechanisms and internal procedures for quality assurance and continuous improvement of the quality and results of their application, especially at a study programme level.
- How to use the external references in the Quality Assurance Methodology, including the Code of Good Practice.
- The public information available on the content and quality of study programmes and the standards for which diplomas are issued at graduation.
- The internal information management system and its contribution to the internal monitoring of quality and achievement of standards.
- Producing, using and publishing information on programmes.
- The academic standards proposed by the institution and those achieved by the students when obtaining academic qualifications when graduating from study programmes.
- Students' experience in the learning process.
- Ensuring the quality of teaching staff, including the evaluation criteria and the way in which teaching-learning efficiency is monitored, improved and rewarded by the university's management.
- The way the institution improves the quality level of all educational, research and managerial activities compared to the levels of performance achieved at accreditation.

This list is not restrictive; other elements can be added, in mutual agreement with the institution, in order to achieve the aim of the external evaluation.

For quality management evaluation in a higher education institution a series of external reference sources is used, including the ***National Quali-***

fications Framework for Higher Education (currently in preparation), the ARACIS Methodology for External Evaluation, Standards, Reference Standards and List of Performance Indicators, published by the Agency, and good practices at a European level contained in the documents of the ENQA. The aim is to confirm the institution's conformity and also to emphasise the way it takes into consideration the proposals from the reference sources, reflected in its own practices in different areas of activity and its conviction that it has adopted or shall soon adopt all the necessary measures for quality assurance. The Agency wants to ensure that the necessary changes are actually carried out, so the university complies with the principles and standards of quality assurance and of continuous quality improvement.

4 Audit procedures

The external evaluation team (commission) investigates the institution's quality according to the fields, standards, criteria and performance indicators established by the regulations in force, **at an institutional level**, for those accredited as providers of higher education programmes. Taking into account that, according to these regulations, the education provider is not disconnected from the programmes offered, in order to achieve the established objectives the team of external evaluators is structured to allow dialogue with the education provider considered an **institution**, with as many beneficiaries as possible, as well as with the bodies responsible for the development of a relevant number of **study programmes**.

Taking into consideration this objective context, the external evaluation team can consist of a **minimum of three people, of which one is the *team coordinator*. In well-justified cases, *additional expert evaluators* can be added to the team, according to the number of study programmes or other aspects that are considered necessary to carry out**. Additional technical or specialist experts, *either inside the country or abroad*, are called to offer further opinions on aspects related to the activities concerning compulsory regulatory requirements, discipline or study programmes etc.

The *coordinator* of the team of expert evaluators carrying out the visit is proposed by the *mission director* and may be a representative of the *Institutional Evaluation Commission for Managerial and Financial Activities* or, as the case may be, a representative of one of the *commissions of permanent specialist*

experts evaluating a field or one or several study programmes. The proposal is discussed and approved by the Agency's council, following approval from the Executive Board.

The team size is determined by the Agency in accordance with the scale and complexity of the activity of the institution under evaluation. The **team coordinator** is mainly focused on institutional aspects and plays an important role in ensuring that the team members collect the data required for a complete evaluation. The other evaluators meet the requirements both at an institutional level and concerning the study programmes. The teams include trained students nominated by the nationally recognized students' federations.

If during the visit ambiguities cannot be resolved concerning a study programme, a particular field, financial and managerial activity or the internal quality assurance mechanism, at most two technical or specialist **additional expert evaluators**, **from inside the country or abroad**, different from those who took part in the visit, may be requested to carry out a new visit, as quickly as possible, as specified by the Agency.

The evaluators are selected by the Agency from its own register of evaluators and are trained by the Agency so they are better acquainted with the aims, objectives and procedures of the external evaluation process as well as with their own roles and tasks within the evaluation mission.

The evaluators, people with relevant experience for their positions within the evaluation team, are trained by the Agency on the dynamics of the methodology, standards, criteria and performance indicators.

The reports for evaluating the quality of *study programmes* are drawn up by the Agency's commissions of permanent specialist experts. The *report of the institutional evaluation commission for managerial and financial activities* is drawn up by the commission, with the participation of the expert evaluators, members of the team that carried out the visit, dealing with issues relating to finance, facilities and management.

Calendar for organising and carrying out an external institutional evaluation mission

No.	Activities	Timeframe
1	ARACIS' Quality Assurance Department studies the **application for external evaluation** submitted to the Agency by the university, or another legal document which entails the initiation of external evaluation, and ensures the fulfilment of the contractual conditions for the institutional evaluation and for at least 20% of the study programmes. The application for evaluation shall also contain the list of all the accredited study programmes, in all fields, for all three cycles.	The *director* **of the external evaluation** *mission* is assigned by ARACIS six months before the evaluation visit, based on an application for institutional evaluation or another legal document which entails the initiation of external evaluation, submitted by the institution to the Agency's headquarters. The mission director is assigned no more than one month following receipt of the application for external evaluation.
2.	*Preliminary visit by the evaluation mission director*. The mission director visits the institution in order to meet the institution's representatives and students concerning the future evaluation visit. Within the preliminary visit, the list of accredited programmes submitted for evaluation shall be finalised. The mission director discusses and establishes together with the institution the calendar of the external evaluation process, the evaluation methodology and corresponding guides. The institution is represented by the *contact person*.	The preliminary visit by the evaluation mission director takes place no more than five months before the evaluation visit. The meeting with the contact person is finalised by a document signed by both parties.

No.	Activities	Timeframe
3.	At the proposal of the Quality Assurance Department, on the basis of the document presented by the mission director, the Agency's council approves the list of study programmes that are to be evaluated, as well as the structure of the team of expert evaluators: the team coordinator and the expert evaluators. The data referring to the programmes are communicated to the university in order to prepare the necessary supplementary documentation.	This shall be finalised no more than four months before the evaluation visit.
4.	The Agency receives the self-evaluation report (documentation) at institutional level (in printed and electronic format), the documentation for the study programmes selected by the Agency's council for external evaluation, as well as the appendices in electronic format.	The Agency expects to receive the self-evaluation report as well as the complete documentation no more than two months before the evaluation visit. If the documents are not received in due time or if they are ascertained to be incomplete, the Agency reserves the right to reschedule the visit to a future date, which should not affect the schedule of other evaluations established by the Agency.
5.	The *evaluation team coordinator* meets the contact person and a student representative in order to identify the objectives of the evaluations during the visit, the possible thematic fields for evaluation and the calendar, timetable and location of each stage within the evaluation visit. The additional information that must be prepared by the institution before the external evaluation visit will also be established.	This shall be carried out at ARACIS' headquarters, no more than one month before the evaluation visit. During the visit, the expert commission may ask to evaluate a limited number of other objectives, as well as certain timetable changes.

No.	Activities	Timeframe
6.	The evaluation team visits the insti-tution. ***The mission director*** joins the team for the final day of the visit. The team of evaluators meets teaching staff and students in order to discuss issues concerning evaluation at an institutional and thematic level and evaluation of the study programmes selected by the Agency. The evaluation of the study programmes and/or fields is usually carried out by one or two experts.	The external institutional evaluation visit is carried out over three week days (usually from Wednesday to Friday).
7.	If required, the institution is notified of the need for specialised independent expertise concerning a study programme or field where ambiguities or doubt have appeared in the internal quality assurance mechanism. During the last day of the evaluation visit, the insti-tution can provide additional infor-mation that may help to clear up the situation.	At the beginning of the second day of the visit.
8.	***The mission director*** sends the visited institution a letter con-taining the preliminary results of the institutional evaluation. The letter is written with the agreement of all evaluation team members and countersigned by the *mission coordinator*.	No more than two weeks after the evaluation visit.

No.	Activities	Timeframe
9.	If necessary, within a week the mission director establishes, together with the institution, the date/dates when the additional expert evaluators shall be present for the additional visit for the programme, field or thematic evaluation. This visit will take place no more than two weeks after the institutional evaluation visit.	Additional expert evaluators submit reports to ARACIS' quality assurance department containing the conclusions of the new visit, within a week of the conclusion of the new visit.
10.	The institution responds to the letter containing the preliminary results of the institutional evaluation.	No more than one month after the external institutional evaluation visit.

11.	THE EXTERNAL EVALUATION QUALITY DEPARTMENT discusses and approves the *reports of the study programmes quality evaluation* and the *report of the institutional evaluation commission for financial and managerial activities*. The *department* draws up the REPORT OF THE EXTERNAL EVALUATION QUALITY DEPARTMENT;
	    THE REPORT OF THE EXTERNAL EVALUATION QUALITY DEPARTMENT is presented and discussed at the meeting of the ARACIS COUNCIL, which draws up the AGENCY'S EXTERNAL INSTITUTIONAL EVALUATION REPORT, in the presence of the **mission director**.
	    The Council organises the publication of the *Agency's external institutional evaluation report* on ARACIS' website. It is advisable to publish the response letter from the evaluated institution as an appendix.
		No more than two months after the institutional evaluation visit. The reports of the students' representatives and the one of the international evaluator are integrated in the report of the external evaluation department.

5 External assessments/effects and impact

Periodic evaluation for accredited universities in the following categories: high degree of confidence, confidence, limited confidence, lack of confidence.

Follow-up procedures match the grade obtained. For 'high degree of confidence' and 'confidence' at institutional level: intermediate evaluation after three years; for 'limited confidence' or 'lack of confidence': a new evaluation after one year.

Law 87/2006 on the approval of Government Emergency Ordinance No. 75/2005, Article 34:
(1) If ARACIS finds that quality standards are not met, it will inform the Ministry of National Education.
(2) ARACIS will order a new external assessment, based on the new internal assessment report developed by the education provider.
(3) If the new external assessment report is not favourable either, the Ministry of National Education shall order:
    a) the cessation of all educational activities within the respective training program, starting with its first year;
    b) the provider to develop annual internal education quality assessment reports for the years that are still in progress.
(4) The education provider must undergo another external assessment, after a trial period of a maximum of two years following the last non-favourable report.
(5) If this third external assessment report is still not favourable, the Ministry of National Education shall develop and promote, as the case may be, through an Order, Government Decision or law, a decision that puts a final end to the education programmes and governs the situation concerning the assets of the establishment and of its students.

The grades awarded by ARACIS are used by the universities on their websites and in other materials to attract students. Also, potential students or parents ask about the university's grade before making a choice.

6 Current and future challenges and developments

Improving the quality level of ARACIS' activities remains a major goal, although a great deal has been achieved already.

The specification of quality standards is to be further developed, as the Law formulates the domains and criteria of concern for quality assurance. ARACIS and higher education institutions consider the standards and performance indicators to: (a) represent reference points for institutional quality management; (b) offer a framework for collecting information, maintaining databases and processing information that higher education institutions can use for internal monitoring and external demonstration of quality assurance; (c) provide ARACIS with references in the process of external evaluation, as standards and performance indicators in each higher education institution should be closely related to the National Qualifications Framework for Higher Education (RNCIS).

In the future, a more balanced set of performance indicators is needed, focusing mostly on quality assurance processes (internal management of quality at all levels, study programmes, faculties, institutions) and outputs (learning outcomes, scientific production), with inputs as conditions (staffing, teaching/learning environment).

Setting new quality assurance evaluation principles is a longer-term goal of the agency, to be implemented in accordance with a confidence-building process in Romanian higher education.

This will demand a **shift of focus** in the activity and in its perception in the eyes of all participants and stakeholders: from quality control or monitoring (as external evaluation is still perceived, mostly by the public and even by some authorities and the mass media) to *quality enhancement*.

Therefore, a more balanced relationship shall be developed between *compulsory normative minimal requirements* (useful mostly for accreditation) and an enhanced *fitness-for-purpose* approach (for periodic evaluation) with a focus on a '*benchmarking* approach'. The benchmarking approach involves meeting various thresholds as a result of institutional and inter-institutional comparisons.

Benchmarking will be a dynamic process based on the current performance of Romanian universities, in correlation with European trends and

benchmarks. With benchmarking regarded as a quality enhancement tool, universities and study programmes will be encouraged to gather systematic data and to set internal reference points – intra-institutional or intra-programme comparisons. Universities will be encouraged to reflect on their strengths and weaknesses and to take remedial decisions on the basis of evidence.

Periodic (cyclical) evaluation will, in the long term, mostly be focused on the audit of the internal quality system (process) and quality enhancement. The institutions will therefore be encouraged to assume full responsibility for assuring quality and also to involve stakeholders so as to ensure the validity of their study programmes. It is hoped that the conditions for the direct application of this project will be in place after the completion of a second round of external evaluations of higher education institutions.

The performance indicators will take into account more and more parameters, such as 'learning outcomes', although the agency is aware of the danger of reducing quality assurance to evaluations based simply on output/outcome data. These indicators will be improved and developed further with increased participation from employers. At the same time, the reporting procedure will become more relevant for the general public, allowing greater transparency in the conclusions of external evaluations.

In conclusion, ARACIS' vision for the quality of higher education is to focus on *building better systems to give all stakeholders what they expect in terms of quality of education, to stimulate research and to reduce brain drain.*

II.5 The Danish Accreditation Institution

Lars Pedersen

November 2013

Introduction

In 2013 the Danish Parliament passed a bill on the *Accreditation of higher education institutions.* The bill was based on a political agreement from 2012 between all political parties in parliament and came into force on July 1st 2013. The Danish system of institutional accreditation has therefore not as yet been implemented.

The law changes the system of external quality assurance in Denmark from a system based on programme accreditation to a system based mainly on the accreditation of higher education institutions. It covers all higher education institutions, and the same criteria apply to all of these institutions. This is an expression of the political ambition to create and develop a more coherent system of higher education in Denmark.

From 2007-2013, the external quality assurance system was based on programme accreditation, which was carried out by ACE Denmark (long-term university programmes) and the Danish Evaluation Institute (EVA) (short and medium-term programmes). The programme accreditation system, however, was criticised for being too detailed and too bureaucratic. Furthermore, around 85% of the accredited programmes turned out to be of high quality. These were among the reasons for changing the programme accreditation system.

In 2013, the organisation Danmarks Akkrediteringsinstitution (the Danish Accreditation Institution) became the quality assurance agency responsible for most of the external quality assurance carried out in Denmark. The Danish Accreditation Institution comprises ACE Denmark and parts of the EVA. The Accreditation Council is the decision-making body with regard to

accreditation, and the Accreditation Council will be separated from the Danish Accreditation Institution. This new division will further underline the independent status of the Council's decisions.

It is explicitly mentioned in the law that the Danish Accreditation Institution must maintain its membership of ENQA and the EQAR.

1   Terminology

The new law on the *Accreditation of higher education institutions* uses the term 'institutional accreditation'. External quality assurance is clearly a system of accreditation in the sense that the quality assurance carried out at institutions is evaluated against pre-defined standards, and in the sense that the process results in a decision to award positive accreditation, conditionally positive accreditation or to refuse accreditation. In addition, certain institutional rights are linked to the decisions. Audits are not mentioned in the law.

According to the law, institutional accreditation must focus on the systematic and coherent efforts of higher education institutions to assure and develop the quality and relevance of their study programmes. Furthermore, the law emphasises that accreditation should include an evaluation to determine whether the internal quality assurance systems at the given higher education institution provide quality and relevance at programme level in practice.

All higher education institutions are covered by the law. This includes academies of professional higher education (Erhvervsakademier), university colleges (Professionshøjskoler), maritime education institutions, higher education institutions of fine arts and universities.

2   National legislation

The new law defines the aims and the overall framework of the Danish accreditation system. The main focus of the system is on higher education *institutions*. However, it should be mentioned that in addition to institutional accreditation, the Danish system also includes the pre-qualification of new study programmes, focusing on study programmes where particular problems have been identified as well as thematic evaluations. The EVA is in charge of thematic evaluations as part of the new system.

For an interim period of several years, the Danish accreditation system will also focus on the accreditation of existing study programmes at those institutions which have not yet obtained a positive institutional accreditation – either because they have not applied for institutional accreditation or because their applications have been refused. All 46 higher education institutions in Denmark are expected to have submitted an application within a four year period.

Consequences of institutional accreditation

The law defines a number of rights that can be obtained by institutions with positive institutional accreditation as well as the consequences for those higher education institutions that do not receive institutional accreditation. The overall principles are:

Higher education institutions that have not applied for institutional accreditation:
- All proposals for new programmes must be accredited.
- Existing programmes must be accredited.

Higher education institutions with positive institutional accreditation:
- Have the right to establish new programmes.
- Are not obliged to have existing programmes accredited.

Higher education institutions with conditional positive institutional accreditation:
- Have the right to change existing programmes.
- Are not obliged to have existing programmes accredited.
- All proposals for new programmes must be accredited.

Higher education institutions whose applications for institutional accreditation have been refused:
- Do not have the right to establish new programmes.
- All existing programmes must be accredited.

Regardless of the status of the institution, all new programmes must be pre-qualified by the Ministry of Science, Innovation and Higher Education.

Following the adoption of the bill, a ministerial order on the criteria for institutional accreditation, programme accreditation and pre-qualification was published in 2013. Among other things, the order specifies five criteria for the accreditation of higher education institutions (see section 3 - *The scope of accreditation).*

The institution itself decides when it is ready to change from the system of programme accreditation and apply for institutional accreditation. As mentioned above, it is expected that all higher education institutions will have applied for institutional accreditation within four years.

In order to meet the requirements necessary to obtain positive institutional accreditation, the higher education institution in question must have a well-functioning quality assurance system. The law defines the requirements of the quality assurance system in general terms as *well described, well-argued and well-functioning in practice*.

The quality assurance system at the given higher education institution must comply with the five criteria listed below and is expected to cover all programmes at the higher education institution, irrespective of whether the institution in question is the University of Copenhagen with more than 30,000 students and a large number of programmes or an institution offering very few programmes.

3 The scope of accreditation

The scope of institutional accreditation is defined by the five criteria in the ministerial order:
1. Quality assurance policy and strategy
2. Quality management and organisation
3. The knowledge base of the programmes at the institution
4. The level of the programmes in relation to the qualifications framework
5. The relevance of the programmes in relation to the labour market.

Each of the five criteria is expanded to cover a number of issues.

Criteria 1 and 2 cover the overall framework for quality assurance activities at the institution. Criteria 3, 4 and 5 relate to the way in which the higher education institution assures the knowledge base, the level and relevance of its programmes in relation to the current labour market.

The law explicitly refers to the ESG, and the criteria also refer to a number of standards, which include ESG 1.1., a policy and associated procedures, ESG 1.2., formal mechanisms for the approval, periodic review and monitoring of their programmes and awards, and ESG 1.6., that institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes of study and other activities.

Furthermore, the criteria focus on two specific themes. Firstly, higher education institutions must ensure that their study programmes have a proper knowledge base. For universities, this could mean that relevant research groups must play an active role in programme modules. Secondly, higher education institutions must ensure that the content and objectives of their study programmes reflect the needs of society and the labour market. These themes were also part of the former system of programme accreditation in Denmark, and are therefore very familiar to all higher education institutions.

The Danish Accreditation Institution guidelines were published in 2013 following the ministerial order regarding the criteria. They specify the framework for accreditation, the criteria and the overall accreditation procedure, and emphasise that the responsibility for quality assurance lies with the institution. In order to achieve this goal, higher education institutions must be free to organise their quality assurance activities in a way that fits their organisations and specific circumstances. Differences between higher education institutions are respected and emphasised, and the guidelines are not prescriptive as they do not demand that the criteria be fulfilled in any single, specific way.

The guidelines emphasise a number of expectations for quality assurance at higher education institutions. Among other things, these expectations include the requirement that quality assurance activities should be systematic and coherent. The link between aims and objectives, procedures, evaluation and follow-up activities is emphasised and the guidelines also emphasise structure, which implies the management's responsibility for quality assuring programmes at higher education institutions.

In addition, the guidelines stress the importance of a quality culture. The organisation of the quality assurance system should include systematic dialogues that link institutional strategies with local quality assurance processes and professional values, and there must be a 'local translation' and adaption of the institution's quality assurance policies and strategies based on dialogue.

Finally, the law explicitly states that not only should the institutional quality assurance activities be systematic, they must be evaluated and assessed to determine whether the quality assurance system provides quality and relevance at programme level *in practice*. The guidelines therefore emphasise that the quality assurance system at higher education institutions should be based on methods that have been thoroughly tested internally. Plans and written procedures are therefore not sufficient for the accreditation panel to be able to assess whether the quality assurance system functions well in practice.

Audit trails

Audit trails will be the main method used to assess and evaluate whether the quality assurance system provides quality *in practice*. Based on a dialogue with the higher education institution, the accreditation panel selects one or more audit trails on the basis of a self-evaluation report, key figures and fields of development at the higher education institution. The audit trails will typically be the focus during the second of the two site visits.

Audit trails can focus on specific programmes or groups of programmes or on specific themes in order to assess the efficiency of the quality assurance system at the higher education institution in relation to one or more criteria. If, as part of its quality assurance, the institution prescribes a periodic review of its programmes, audit trails could be used to take a closer look at one or two examples of this and ask how the review process was organised, which external experts and other parties were involved, how relevant key figures were obtained and used, and how the results of the evaluation were used in developing the programme.

It is important that audit trails focus on the efficiency of the quality assurance system at the higher education institution rather than on specific quality problems. An audit trail that focuses on a high drop-out rate in some study programmes could therefore lead to a positive conclusion if there is an awareness of the problem at the higher education institution and initiatives have been put in place to deal with it.

4 Accreditation procedures

Accreditation procedures are specified in the guidelines and comply with the ESG four stage model, featuring self-evaluation, external assessment, a public

report and follow-up. The procedures comprise four phases: the preparatory phase, documentation, reporting, and decision and follow-up:

1. The preparatory phase
• The Danish Accreditation Institution organises a preparatory meeting with the higher education institution.   • The accreditation panel is selected. The panel takes part in a training programme.   • The Danish Accreditation Institution prepares an 'institutional portrait', which includes key figures and an overview of prior accreditations at pro-gramme level.
2. Documentation
• The higher education institution writes a self-evaluation report and sends it to the Danish Accreditation Institution.   • The accreditation panel meets and discusses the written documentation.   • First site visit with focus on the overall quality assurance system.   • Second site visit with focus on audit trails and quality assurance in practice. The second site visit is expected to take place about eight weeks after the first.
3. Public reporting
• The Danish Accreditation Institution sends the draft accreditation report to the higher education institution.   • Following this, the final accreditation report is sent to the Accreditation Council and made public.
4. Decision and follow-up
• The Accreditation Council makes its decision.   • A meeting between the accreditation panel and the higher education institution regarding recommendations may be organised.

Follow-up activities after the decision has been made are described in the law. If the decision is conditionally positive or is a refusal, the council will specify a follow-up plan. The law does not make follow-up activities mandatory.

The accreditation panel

The accreditation panel is explicitly mentioned in the law. The panel should be composed of at least three people with professional expertise who have experience of the higher education sector in general and of international quality assurance at higher education institutions.

According to the preliminary plans, the size of the panel may vary from three to seven people depending on the size and organisation of the higher education institution. If the higher education institution in question includes a number of faculties and/or campuses, the panel should comprise seven people.

The panel is expected to cover a number of relevant competencies in relation to quality assurance. These include knowledge and experience of the higher education sector, experience of management and quality assurance, international experience, experience of evaluation and accreditation, and knowledge of the relevant labour market for graduates. The panel will also include students, and all panel members will take part in training organised by the Danish Accreditation Institution.

5   Challenges

As with all new laws and new systems there will be general challenges related to the implementation of the system.

One of the more specific challenges which must be dealt with is the balance between the overall assessments of the quality assurance system at the institution on the one hand and, on the other hand, the principles of equality and consistency across decisions. Overall assessments will take into consideration the characteristics of the specific institution and its challenges, and must not be based on a number of detailed indicators. In other words, the institutional accreditation process should be fit for purpose.

Another challenge concerns less detailed documentation as opposed to a solid understanding of quality assurance practice at the higher education institution. On the one hand, the law and the higher education institution expect less detailed documentation and that most of the documentation will be produced in advance. On the other hand, the accreditation procedures are also expected to provide a solid understanding of and insight into quality assurance practice at the higher education institution.

Thirdly, accreditation is only one of the methods of regulation and governance in the field of higher education. The different regulation mechanisms could limit the responsibility of the institution when working to improve the quality of its study programmes. There is also a risk that governance will indicate different directions with different incentives. In order to deal with this challenge, overlap between regulations should be avoided, and the documentation used in one system should also be used in connection with accreditation.

Finally, a major challenge is to avoid a situation in which higher education institutions build up separate administrative structures for the purpose of accreditation which are separate from perceived student quality and from everyday quality assurance regarding study programmes from teachers and the management of the study programme. The aim of the new system is to establish close interaction between external and internal quality assurance systems and practice, and to emphasise that the responsibility for and ownership of quality assurance lies with the institution. In order to achieve this goal, the guidelines emphasise that higher education institutions are free to organise their quality assurance activities in a way that fits their organisations and specific circumstances. Differences among higher education institutions are respected and emphasised, and the guidelines are not prescriptive, as they do not demand that the criteria must be fulfilled in any single, specific way.

II.6 Finnish Higher Education Evaluation Council (FINHEEC)

Sirpa Moitus

July, 2013

1 Terminology, purpose and aim

The Audit Manual of the Finnish Higher Education Evaluation Council (FINHEEC)[1] provides the following definition of an audit: "An audit is an independent and systematic external evaluation. It assesses whether the quality system of a higher education institution is fit for purpose and functioning and whether it complies with the agreed criteria. An audit focuses on the procedures that the institution uses to maintain and develop the quality of its operations."

In the first audit round, between 2005 and 2011, the central aim was to support Finnish higher education institutions in developing a quality system that would correspond to the ESG and also cover the entire range of operations of the institutions. The FINHEEC model establishes a threshold for passing the audits. The audits are carried out in Finnish, Swedish and English.

One of the founding ideas behind the FINHEEC audits was respect for the autonomy of higher education institutions. A central principle was that higher education institutions should be able to make independent decisions concerning their internal quality systems based on their own strategic goals. FINHEEC also accounted for the wishes of higher education institutions when preparing the schedule for the first audit round. The audits will be conducted at six-yearly intervals.

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1 Audit manual for the quality systems of higher education institutions 2011–2017. FINHEEC Publications 3:2011. Available at: http://www.kka.fi/index.phtml?C=266&product _id=241&s=79

The first audit round covered Finland's entire higher education system, which in 2011 consisted of 16 universities and 25 universities of applied sciences. In addition, three higher education institutions outside of the administrative branch of the Ministry of Education and Culture chose to undergo the audits voluntarily. In the first audit round, nine of the 49 higher education institutions audited were required to undergo a re-audit.

During the first audit round, the focus was on stabilising quality systems, and the majority of the audits were performed by Finnish experts. For the second audit round, which began in 2012, a greater proportion of the higher education institutions requested international auditing. The aim of the second audit round is to produce an even clearer assessment of how the quality system supports the strategic leadership and the management of operations at higher education institutions and to review the evidence higher education institutions have on the impact of the quality system on the development of operations.

So far, accreditation has been used in the national evaluation system mainly for the purpose of ensuring a minimum quality level, whereas auditing is considered to offer better support for the continuous development of higher education institutions. Since its establishment in 1966, FINHEEC has implemented the principle of enhancement-led evaluation, which is likely to be a contributing factor to the confidence shown by higher education institutions in the evaluation activities. In enhancement-led evaluation, "the purpose of all evaluations is above all to assist universities and universities of applied sciences in developing their own provision and operations. The aim is to apply evaluation methods and carry out all the stages of the evaluation process in accordance with the principle of enhancement-led evaluation. FINHEEC interacts closely with higher education institutions and operates transparently."

In addition to the audits, FINHEEC has designated centres of excellence and conducted thematic evaluations as well as programme evaluations. FINHEEC's evaluation methods complement one another and produce institution-specific and national evaluation data from different viewpoints. The audits provide an overview of quality management in Finnish higher education institutions. The thematic evaluations produce information on central themes from the viewpoint of education policy, whereas designating centres of excellence supports the pedagogical development of higher education institutions and the identification and dissemination of best practices.

2 National legislation

2.1 Internal and external quality assurance at higher education institutions

According to the Decree on FINHEEC (794/2009), FINHEEC's task is to:

1. assist the higher education institutions and the Ministry of Education in matters pertaining to evaluation;
2. conduct evaluations relating to the activities and quality assurance systems of higher education institutions;
3. support quality assurance and enhancement in higher education institutions; and
4. participate in international evaluation activities and cooperation concerning evaluation.

When, between 2005 and 2008, FINHEEC piloted and established the audit model for quality systems, participation in the audits was optional for higher education institutions. Under the Universities Act and the Polytechnics Act[2], which entered into force in August 2009 and at the start of 2010 respectively, higher education institutions are required to "participate in external evaluation of their operations and quality assurance systems on a regular basis and to publish the findings of these evaluations".

The principle of autonomy signifies that each higher education institution develops its quality system based on its own needs and goals. There are no legal requirements regarding how Finnish higher education institutions should set up their internal quality systems. Instead FINHEEC has, in accordance with its role as defined in the decree, aimed to support the construction and development of higher education institutions' internal quality systems. These support measures are discussed in more detail in section 4.2.

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2   The Finnish Universities Act 558/2009 (Amendment 558/2009) and Polytechnics Act 351/2003 (Amendment 564/2009)

2.2 External quality assurance procedures outside of the audit

The auditing of quality systems is the only type of evaluation that is mentioned in legislation and participation in which is mandatory for higher education institutions. All other evaluation types used by FINHEEC are defined in FINHEEC's Plan of Action 2010–2013[3]. Even though participation in forms of evaluation other than the audits is not mandatory for higher education institutions, in practice all higher education institutions have taken part in thematic evaluations and the designation of centres of excellence.

According to the national division of labour, three main parties are responsible for quality management in Finnish higher education. The higher education institutions are responsible for the quality of education and research and their societal impact. The role of FINHEEC is to contribute to improving the quality of higher education. FINHEEC evaluations provide a qualitative external dimension that complements and enriches the quantitative assessment carried out by the Ministry of Education and Culture.

The Ministry drafts educational legislation and provides performance-based funding, largely based on information obtained from its quantitative databases[4]. All higher education institutions hold negotiations with the Ministry at the beginning of each three-year agreement term. The purpose of these negotiations is to set operational and qualitative targets for the institution and to determine the resources required. The agreement also covers the monitoring and evaluation of target attainment (e.g. number of completed degrees and scientific publications) and the development of operations.

2.3 Consequences of an audit

Before the launch of an auditing project, the higher education institutions in question and FINHEEC sign a contract on the audit covering aspects such as

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3   *FINHEEC Plan of Action 2010-2013.* FINHEEC Publications 10:2010. http://www.finheec.fi/files/1083/KKA_1010.pdf

4   The national *VIPUNEN database* (earlier KOTA database) has provided statistical data and nationally agreed upon indicators since 1981 and serves as a key tool in the steering of the higher education sector.

the schedule and method of implementation of the audit. With this contract, the higher education institutions also agree to a possible re-audit.

Higher education institutions that pass the audit receive a quality label and are added to the register of audited institutions maintained on the FINHEEC website. The quality label is valid for six years from the Evaluation Council's meeting at which the audit decision was made. The audit certificate states whether the audit was carried out by a Finnish or international audit team and provides a summary of key findings.

In the event that the higher education institution is required to undergo a re-audit, the targets that are in essential need of development and will be subject to the re-audit are recorded in the report. The re-audit will be implemented approximately two years after the audit decision. The re-audit procedure is described in the Audit Manual.

The significance of a re-audit decision for the higher education institution in question mainly consists of damage to its reputation. It has no impact on the status or funding of the institution. Out of the nine higher education institutions that were given a re-audit decision in the first audit round, all but one passed the re-audit. Following a request from the Ministry of Education and Culture, the higher education institution in question decided that its next audit would be implemented ahead of schedule in 2014.

2.4 External quality assurance of the agency

FINHEEC is required by law (794/2009) to participate in the international evaluation of its own activities on a regular basis. The legislation also permits FINHEEC to accept other commissions relating to evaluation from Finnish and foreign operators.

FINHEEC values its memberships of both ENQA and the EQAR. In accordance with the ENQA membership criteria, FINHEEC is required to undergo external reviews once every five years. The ENQA Board approved FINHEEC's application to renew its full membership on 2 September 2010. FINHEEC's listing in the EQAR is valid until July 2015.

3 Scope

The audit targets and criteria are defined in the FINHEEC Audit Manual. FINHEEC appointed a working group for the preparation of an audit manual for the first and second audit rounds. The working group included representatives from universities and universities of applied sciences, from student organisations in both sectors as well as from the world of work.

It was clear as far back as 2005 that the model should correspond to the ESG. In the FINHEEC audit model, the quality management of higher education covers all degree cycles. Furthermore, in 2010 FINHEEC conducted a separate evaluation of the implementation of the Bologna Process in Finland.[5]

When preparing the audit model, FINHEEC organised a national event to discuss the focus of the auditing. In this context, higher education institutions considered it important that auditing of quality management should cover the entire range of their operations. As a result, a decision was made to incorporate the following aspects into the FINHEEC audit model for the first round of audits, carried out between 2005 and 2011: research, development and innovation activities, societal impact and regional development work, support services and stakeholder participation. The higher education institutions also expressed their wish that the consequences of the audits be in the form of re-audits.

When developing the audit model for the second audit round, it was possible to utilise feedback collected from higher education institutions during the initial round of audits as well as feedback obtained from the external evaluation of FINHEEC. On these grounds, evidence concerning samples of degree education was added to the list of audit targets. These can be used, for example, to assess how quality management related to the national qualifications framework, recognition of prior learning, lifelong learning, the relevance of degrees for working life and internationalisation is implemented during programmes leading to a Bachelor's or Master's degree.

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5   Niemelä, J. & al. 2012. *Evaluation of the Bologna Process Implementation in Finland.* FINHEEC Publications 6:2012. http://www.finheec.fi/files/1471/KKA612Evaluation_Bologna_nettiin.pdf

The audit targets in the second audit round, implemented between 2012 and 2017, are:

1. The quality policy of the higher education institution
2. Strategic and operations management
3. Development of the quality system
4. Quality management of the higher education institution's basic duties:
   a) Degree education (including first-, second- and third-cycle education)
   b) Research, development and innovation activities, as well as artistic activities
   c) Societal impact and regional development work (including social responsibility, continuing education, open university and open university of applied sciences education, as well as paid-services education)
   d) Optional audit target
5. Three samples of degree education: degree programmes
6. The quality system as a whole.

The audit process of an individual higher education institution covers all of the abovementioned audit targets. In addition, each institution must choose one optional audit target. The intention is for each higher education institution to select a function central to its strategy or profile on which it would like to receive feedback from the audit team. Themes chosen by higher education institutions up to now (July 2013) have included sustainable development, the wellbeing of students, the promotion of entrepreneurship through studies and lifelong learning.

The work of the audit team is supported by a set of criteria, defined in the Audit Manual, in which the stage of development of higher education institutions with reference to each audit target are described using a four-point scale: 'absent', 'emerging', 'developing' and 'advanced'. The audit team determines the higher education institution's stage of development for each audit target and produces a report that corresponds to the stages of development identified. In the final chapter of the report, the audit team provides an appraisal of whether the institution should pass the audit or whether a re-audit is needed. The audit team can propose that the institution passes the audit if none of the targets is 'absent' and if the quality system as a whole is at least 'developing'.

The quality system of a higher education institution is at a 'developing' stage if it displays the following features:

- The quality management procedures constitute a functioning system.
- The system covers the essential aspects of the basic duties of the higher education system and provides meaningful support for developing operations.
- There is evidence that the system has an impact on the development of operations.
- The development of operations is based on an existing quality culture.

The FINHEEC Council decides on the audit result on the basis of a proposal by the Secretary General. The Council and the Secretary General are responsible for ensuring that the audit decisions are impartial and of equal quality. The Council is responsible for determining the national thresholds for passing the audits, and may thus diverge from the proposal put forward by the audit team, where necessary. In addition, the uniform level of the audits is ensured by providing the auditors with sufficient orientation and using the same auditors in several different audits. FINHEEC project managers, who often have experience of numerous auditing projects, play a central role in supporting the work of the audit teams.

4 Audit procedure

4.1 Audit stages

The audit stages are defined in the FINHEEC Audit Manual. The audit process consists of the following stages:

1. The higher education institution's registration for an audit
2. Agreement negotiation
3. Appointment of the audit team
4. Compilation of audit material by the higher education institution
5. Auditor training
6. Briefing and discussion event
7. Audit team's visit to the higher education institution
8. Audit team's recommendation regarding the audit result
9. The FINHEEC Council's decision on the result

10. Publication of the report
11. Concluding seminar
12. Feedback to FINHEEC
13. Follow-up seminar.

4.2 Supportive measures before the audit process

FINHEEC has supported higher education institutions in the development of quality management before the auditing process using the following means:

1. When preparing audit models, FINHEEC has organised *national quality management seminars* open to everyone interested in the topic. In addition, members of the FINHEEC Council and Secretariat have given presentations at quality management seminars organised by individual higher education institutions.

2. FINHEEC has provided financial support for the organisation of *training in issues related to quality assurance and enhancement* for those involved in quality enhancement activities at higher education institutions. The organiser of the training was chosen through a competitive bidding process. More than 120 people have taken part in the training since 2005. The training has consisted of contact teaching and a personal development project focusing on the quality system of the higher education institution in question. Based on feedback received by FINHEEC, the training has enhanced the networking of quality managers and contributed to a clear increase in the independent benchmarking of quality systems carried out by the higher education institutions themselves.

3. FINHEEC has channelled funding into supporting domestic and international benchmarking projects. For example, in 2012 a decision was made to support the quality management of the internationalisation of higher education institutions. By the appointed time, FINHEEC received a total of 35 applications, seven of which were granted funding. Projects funded include: Benchmarking Best Practices in Acquiring, Resourcing and Managing Strategic Partnerships; Benchmarking of International Services; Best Practices in Russian and European Joint Degrees; Strategic Success Factors in Cooperation with China.

4. All audit reports are published in their entirety on the FINHEEC website. In addition, FINHEEC has produced summaries of good practices identified in the quality systems.

4.3 Audit teams and auditor pool

The composition of the audit teams, their selection criteria, the tasks of the team, auditor training and auditors' operating principles and ethical guidelines are set out in the FINHEEC Audit Manual.

An audit team usually has five to seven members, selected so that they represent the two higher education sectors, students and the world of work outside the higher education sector. The team members must also have experience in the tasks of different staff groups, as well as in the basic duties and management of higher education institutions. Each team should preferably include some individuals with prior experience as auditors. An individual with special experience in the optional audit target can also be appointed to the team, if required.

The criteria used in the selection of auditors include:
• Good knowledge of the higher education system
• Experience in evaluation or audits
• Knowledge of quality systems.

Moreover, the chair of the audit team is expected to have:
• Prior experience in the evaluation of higher education institutions and their operations
• A comprehensive and deep understanding of the higher education system
• Knowledge or experience of higher education management.

Auditors are required to participate in the training arranged by FINHEEC. The aim is to train members of several audit teams at once. In the training, the auditors learn about FINHEEC's operations, the audit's objectives and procedure, as well as the tasks and operating principles of the audit team. In addition to this, international auditors are familiarised with the Finnish higher education system.

After completing auditor training, the auditors are added to the FINHEEC auditor pool, which is the main resource used when recruiting auditors. Occasionally, FINHEEC will also invite higher education institutions and its international sister agencies to offer suggestions for new auditors. Similarly, at the end of each audit, FINHEEC will collect auditor feedback, where auditors are, among other things, requested to provide suggestions for future auditors.

4.4 Audit visit

Around four weeks prior to the audit visit, the chair of the audit team and FINHEEC's project manager visit the higher education institution that is to be audited. The purpose of the visit is to arrange an open event for the institution's staff and students at which the objectives and implementation of the audit can be discussed.

The actual visit, conducted by the whole audit team, lasts from three to five days. During the first day, the team interviews representatives of the institution's management, teaching staff and other staff groups, students and external stakeholders. At this stage, the focus is on the quality system as a whole. After the first day, the evaluation focuses in particular on the quality management of degree programmes and the assessment of the optional audit target within the institution's various units. The audit team may also conduct evaluation visits to individual faculties, departments or units to verify the functioning of quality management in practice. Moreover, the audit team may arrange joint discussions for various parties within the institution concerning key topics related to quality management. The visit concludes with a final interview with the management. At the end of the meeting, the audit team gives the institution preliminary feedback on the functioning of its quality system based on the observations made during the visit.

FINHEEC and the higher education institution that was subject to the audit arrange a joint seminar, usually within one month of the audit decision. The seminar gives the institution's staff and students the opportunity to openly discuss the audit results and conclusions with (a) representative(s) of the audit team and FINHEEC.

4.5 Follow-up

FINHEEC conducts follow-ups for the audits in two different ways. The 'development of quality system' audit target includes a follow-up section for higher education institutions undergoing a second FINHEEC audit. The audit looks at how systematically the higher education institution improved the quality system's functionality and fitness for purpose.

Secondly, FINHEEC organises national follow-up seminars, as described in the Audit Manual. Three years after the audit, the higher education institution prepares a written report of the development of the quality system carried out after the audit. The report is then presented in a follow-up seminar. During the seminar, the higher education institutions comment in pairs on the development carried out on their quality systems, after which the audience will have an opportunity for comments and questions. The routine of holding this mid-term seminar was adopted based on the wishes of higher education institutions, as the six year intervals between the audits were generally felt to be quite long. These follow-up seminars offer higher education institutions the opportunity to discuss the development of quality systems and exchange experiences and good practices related to quality assurance and enhancement. These seminars have been rather popular, attracting almost 200 participants each year.

5 External assessment / effects and impact

5.1 Audit outcome reports

FINHEEC has compiled two reports of the outcomes of the audits, the first of which was drafted halfway through the first audit round[6] and the second after the completion of the first audit round[7]. Audit reports from the first audit round were used as source material for both reports. Content analysis was used for the theoretical background.

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6   Moitus, S. 2010. *Analysis on FINHEEC Audit Outcomes 2005–2008.* FINHEEC Publications 15:2010. http://www.finheec.fi/files/1163/KKA_1510.pdf

7   Talvinen, K. 2012. *Enhancing quality. Audits in Finnish Higher Education Institutions 2005-2012.* FINHEEC Publications 11:2012. http://www.kka.fi/files/1598/KKA_1112.pdf

FINHEEC used the audit outcome reports when planning the audit model for the second round of audits. FINHEEC also used studies on the impact of the audits to redirect the thematic evaluations. In addition to the aforementioned Bologna evaluation, thematic evaluations have been conducted on themes such as the research, development and innovation activities of Finnish universities of applied sciences and the evaluation of doctoral education.

Based on the results from the first audit round, room for improvement was particularly detected in stakeholder cooperation and the quality management of internationalisation. As a consequence, funding to support evaluation was channelled to international benchmarking projects (see section 4.2), and a research project was launched on quality management in stakeholder cooperation (see section 5.2).

5.2 Independent impact studies

In 2008, FINHEEC decided to direct funding to support evaluation to independent external studies focusing on the impact of the audits. Out of 14 applications submitted by higher education institutions, the Council chose to finance two two-year projects. The first study[8] analysed the impact of the audit process on universities, with a special focus on faculty and department levels. The institutions under review were the multi-faculty Universities of Helsinki and Tampere and their faculties of medicine, education/behavioural sciences and humanities. The second study[9] looked into the impact of audits on quality assurance and the operations of universities and universities of applied sciences. The review was undertaken as a two-year process in 2009 and 2010. The first stage consisted of interviews with a total of 38 people in one university and in one university of applied sciences. The second phase was an

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8   Ala-Vähälä. T. 2011. *Mitä auditointi tekee? Tutkimus korkeakoulujen laadunvarmistus-järjestelmien auditointien vaikutuksista.* [What do audits accomplish? Research on the impact of HEI quality assurance system audits] FINHEEC Publications 8:2011. http://www.kka.fi/files/1271/KKA_0811.pdf

9   Haapakorpi, A. *Auditointiprosessi ja sen vaikutukset yliopistossa.* [The audit processes and their outcomes in universities]. FINHEEC Publications 7:2011. http://www.kka.fi/files/1272/KKA_0711.pdf

online survey conducted in four multi-faculty universities and four universities of applied sciences. The questions were based on prior studies and the interviews conducted at the first stage.

As stated above, the selection of the 2010 research topic was influenced by the fact that the quality management of stakeholder cooperation had on several occasions been identified as a development target for higher education institutions. The third study was related to quality management in stakeholder cooperation.[10] The study comprised three phases: background analysis, mapping the current status through thematic interviews at three universities and two universities of applied sciences and outlining the future using a panel of experts employing the Delphi method.

6 Current and future challenges and developments

At the moment there is a national commitment to enhancement-led evaluation in Finland, and no major shifts are expected in this respect in the near future. The schedule for the second audit round has been established until 2018, and more than half of the higher education institutions have chosen an international FINHEEC audit. For the higher education institutions in question, this creates the challenge of producing their audit material in English. Correspondingly, it is the responsibility of FINHEEC to recruit the best possible international auditors.

One challenge associated with the audits highlighted by the Haapakorpi study is related to the institutional nature of the audits: in the university departments and faculties, the audit feedback was often deemed unhelpful, as it did not focus on these levels but addressed the quality management mostly on an institutional level. For this reason, FINHEEC is seeking to develop evaluation methods that would also cover the degree programme level. One initiative like this is cooperation with the EUR-ACE (EURopean ACcredited Engineer) Quality Label. Once the planning phase and pilots have been completed to a high standard, FINHEEC will be eligible for the right to grant

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10   Lyytinen, A. & al. 2012. *Korkeakoulujen sidosryhmäyhteistyön laadunhallinta. Nykytilan kartoitus ja tulevat haasteet.* [Quality management in stakeholder cooperation at higher education institutions: a survey of the current status and future challenges.] FINHEEC Publications 12:2012. http://www.finheec.fi/files/1576/KKA_1212.pdf

EUR–ACE accreditation. Another interesting prospect is based on the statutory right of FINHEEC to also operate outside the national borders. The first cross-border audit by FINHEEC was published in autumn 2013.

On a national level, the greatest challenge is that from the beginning of 2014 official evaluation activities concerning primary, secondary and tertiary education will be concentrated into an independent Finnish Education Evaluation Centre. Among other things, this change will provide an opportunity for methodological interaction.

II.7 German Accreditation Council (GAC)

Friederike Leetz

March 2013[1]

1 Terminology, purpose and aim

As an institutional approach to external quality assurance, 'system accreditation' was added to the German framework of quality assurance in higher education in 2008 to complement the established accreditation of study programmes.

Its subject matter is the internal quality assurance system of a higher education institution in the field of learning and teaching.[2] The higher education institution is awarded a positive system accreditation when its structures and processes related to teaching and learning are suitable to achieve the qualification objectives and to ensure the high quality of its study programmes in a manner that complies with national and international standards. As a consequence all Bachelor's and Master's study programmes either set up within the accredited system or that have been the subject matter of the internal quality assurance in question are accredited. They carry the quality seal of the Accreditation Council and thereby fulfil the legal obligation of accreditation as a requisite for state approval according to the specific provisions of the respective federal state.[3]

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1   Updating the information of Hopbach, Achim: Germany, in: AQA (Ed.): Trends of Quality Assurance and Quality Management in Higher Education Systems. Vienna 2009, pp. 83-87.

2   The subject matter of system accreditation as well as the rules for the procedure and its criteria are subsumed within the resolution of the Accreditation Council "Rules for the Accreditation of Study Programmes and for System Accreditation" as of 08.12.2009, last amended on 20.02.2013, available online at http://www.akkreditierungsrat.de.

3   According to Germany's federal structure, the responsibility for higher education lies predominantly with the 16 federal states (Länder). Therefore, the legal consequences of

For the purpose of sustainable quality assurance and improvement in higher education, the introduction of system accreditation is an important milestone in the development of the German accreditation system. Its institutional and systemic approach is fully oriented towards the aim of continuously enhancing the quality of study programmes and, to this end, towards consistently fostering a higher education institution's primary responsibility for the quality of learning and teaching.

Notwithstanding the above, system accreditation serves the needs of accountability, since it demonstrates compliance with quality standards to stakeholders and society at large.

2 National legislation

As a matter of principle, system accreditation, its objectives, arrangement and especially its legal status can better be understood in light of the German accreditation system and its previous development.

Introduction to system accreditation: historical background[4]

As in many other western European countries, the German accreditation system has predominantly been in development since the mid-nineties. Quality assurance, which until then was carried out as part of the state approval procedure for study programmes and was based on general examination regulations, was replaced by non-governmental and more flexible accreditation of single study programmes. Then, as now, accreditation of study programmes was mandatory and is requested for state approval according to the specific regulations of the respective federal states.

Over time, there has been increasing interest in the development of the accreditation system and procedure: accreditation should become more supportive with regard to systematic and management-related feedback for higher education institutions and less static during the periods between external reviews. In effect, the intention was not to introduce a completely

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accreditation decisions are based upon federal state law and accreditation is determined either directly as an approval decision or, in various forms, as its prerequisite.

4   Within the Standing Conference of the Ministers of Education and Cultural Affairs of the Länder (KMK), the federal states coordinate matters related to higher education.

new approach, but rather further develop the existing one by focusing more strongly on continuous quality improvement in higher education as well as on an institution's autonomy and self-responsibility.

Against this background, system accreditation was adjusted and implemented for the internal management and quality assurance system of a higher education institution directed towards learning and teaching. Nevertheless, the emphasis is still on study programmes: the procedure is centred on an institution's capacity to systematically guarantee the high quality of its Bachelor's and Master's programmes.

Two approaches: intended parallelism

From the very beginning, system accreditation was intended to exist in tandem with the accreditation of single study programmes. Given both the diversity in German higher education and institutional autonomy, higher education institutions should be able to choose between the two procedures. Therefore, the legal consequences of system and programme accreditation have a corresponding effect: study programmes become accredited when they are set up within an accredited system or were at least once part of the internal quality assurance. As a result, system accreditation acts to all intents and purposes like another process for the previously exclusive accreditation of study programmes, and higher education institutions can decide the way in which they fulfil the obligation of accrediting their study programmes. Incidentally, this does not rule out the potential for a higher education institution which has successfully received system accreditation continuing to opt for programme accreditation in individual cases, like for instance specific fields of study or joint programmes.

Meanwhile, the parallel existence of programme accreditation and system accreditation has proven to be effective. The option to choose not only promotes diversity in German higher education, but in particular deals with the issue that the establishment of entire quality assurance systems in higher education institutions had mainly only recently begun, with development stages varying widely.

Two-tier accreditation system and consulting limitations

As the German accreditation system is organised in a decentralised manner, one of its characteristics is that accreditations are carried out by accreditation agencies, who in turn are accredited by the Accreditation Council. Currently,

ten agencies have been certified by the Accreditation Council, nine of which are entitled to carry out system accreditation procedures.

While a higher education institution is free to opt for an accreditation agency, the agency is bound by the rules set by the Accreditation Council. These rules not only determine the procedural routines and criteria, but also establish the prerequisites to be met by a higher education institution in order to be admitted to system accreditation. Bearing in mind the current state of development of higher education institutions, the latter shall guarantee the existence of an assessment subject, namely an active quality assurance system.

The introduction of system accreditation undoubtedly brings with it a considerable need for consultation regarding the development of internal quality assurance systems, and agencies possess extensive experience in this field. However, the accreditation approach entails clear limits for the consulting services provided by the agencies: to ensure the impartiality of decisions in system accreditation and avoid conflict of interests, agencies must not certify their own consulting subjects. This does not rule out the possibility of higher education institutions making use of an agency's skills, as long as the accreditation procedure is assigned to another agency.

3 Scope

System accreditation refers to the management and internal quality assurance system of higher education institutions in the field of learning and teaching. In particular, the relevant processes and procedures are assessed for their suitability and reliability in ensuring the high quality of the study programmes in a manner that complies with the criteria of the Accreditation Council, the ESG and the structural guidelines of the Länder. System accreditation therefore merges two levels of criteria related to the procedure, with demands on a systemic level linked to requirements at a study programme level.

The procedure is neither joined to the system as an end in itself, nor to a single programme. The review, and therefore the criteria, is set in a way that allows the verification of whether a system is appropriate for maintaining, developing and ensuring the quality of study programmes. System accreditation complies with the ESG and this was confirmed for the Council's membership of ENQA.

System-related criteria

A total of seven criteria for system accreditation specify mainly basic conditions and objectives that the higher education institution must fulfil in the field of learning and teaching in order to become accredited. Due to the aim to grant higher education institutions the greatest possible freedom, the criteria do neither include specific stipulations for the design of the systems in detail nor are they based on a particular quality assurance or quality management model.

Instead, a binding catalogue of targeted requirements for the structures and processes related to learning and teaching has been established. This includes requirements for the higher education institution's internal management and quality assurance, prerequisites for internal and external reporting and provisions for cooperation in the field of learning and teaching. Generally speaking, a higher education institution is required to continuously use management and an internal quality assurance system, with sufficient resources allocated to it and in which competencies and responsibilities are clearly defined. While the function of the former is to steer the design, implementation and further development of study programmes, the aim of the latter is to assess the effectiveness of internal management processes as well as to assure and improve the quality of learning and teaching. Consequently, the results of the internal quality assurance must be considered by the management system in the further development of study programmes. Teachers, students, graduates and practitioners from the profession are to participate in both the development and the quality assurance of study programmes. Finally, regular internal as well as external information (internal bodies, ministry, general public) is of relevance and, for this purpose, the use of an internal reporting system.

All the criteria take into consideration the ESG and explicit reference is made to them for internal quality assurance: integrated into the overall concept, the methods of each higher education institution must meet the requirements of the ESG. As the criteria for system accreditation call for external evaluation as well, implementation of the ESG by a higher education institution might also consider the standards listed in Part II.

Criteria related to study programmes

Despite its institutional adjustment, system accreditation aims to ensure the high quality of study programmes in a manner that complies with the criteria

of the Accreditation Council related to study programmes, the ESG and the structural guidelines of the Länder. Especially the latter shall warrant equivalence of qualifications between national and European higher education systems.

The criteria related to study programmes indicate standards relevant to the quality of a programme's design, implementation and further development. In a nutshell, they refer to the proper implementation of qualification objectives into a concept that is coherent, feasible and transparent, and the further development of which takes into consideration results from an institution's (internal) quality assurance.

Similar to the system-related criteria, no detailed prescriptions are given for the quality of study programmes. Criteria are generic and subject to a concept of quality, which is relative and determined by the legitimate interests of the key stakeholders (including higher education institutions, students, the labour market and representatives of federal states). One of these common interests is to contribute to the consolidation of the EHEA. The development, principles and tools of the Bologna Process (e.g. learning outcomes and student-centred learning, students' employability, ECTS, social dimension, degree and credit mobility etc.) are therefore related to this.

4 Audit procedure

4.1 Prerequisites for admission and preliminary assessment

Considering the stage of development of quality assurance systems, the prerequisites for admission and the preliminary assessment were designed to guarantee the existence of an assessment subject, which cannot solely be reviewed on a conceptual or prognostic basis.

In particular, a higher education institution is obliged to demonstrate plausibly that a quality assurance system has been set up and is in use, and to this end submits a brief presentation of the institution and its internal management and quality assurance system. The functionality of the system must be substantiated based on at least one study programme that has already passed through the system.

4.2 Review process

Once evidence for the fulfilment of the admission requirements has been provided, the review process is made up of two major components: the review of the management and quality assurance system and an examination of its effectiveness using samples.

System accreditation corresponds to the typical four-stage process of external quality assurance - covering self-assessment, external assessment by a peer-review group including site visits, publication of a report and a follow-up procedure. A total of two on-site visits are scheduled due to the complexity of the procedure and its aim to assess a system's effectiveness, particularly through the use of samples.

Self-assessment and documentation

Self-assessment by a higher education institution is the review's starting point. In addition to descriptions of the internal management and decision-making structures in the field of learning and teaching, the documentation must focus in particular on the way internal quality assurance and quality enhancement work. Moreover, the documentation should include a statement from student representatives at the institution.

It should be stressed that it is assumed that most of the documents to be submitted by the higher education institution are not to be prepared separately for the accreditation procedure: for accountability reasons and according to the requirements for system accreditation, a higher education institution must have an internal report system anyway that documents the structures and processes in the development and implementation of study programmes, as well as the structures, processes and measures of quality assurance, their results and effects.

Two on-site visits

The external review comprises a total of two on-site visits, each of which has its own purpose. The first primarily serves to gather information on the higher education institution and its management and quality assurance system. Given the diversity of the German higher education system, the main purpose is to make the panel familiar with the specific demands and individual relevant aspects resulting from special structural features or aspects of the profile of a higher education institution, for example.

The actual review of the management and quality assurance system takes place as part of a second on-site visit, which is also used for taking samples. Besides an in-depth analysis of the documents submitted by the higher education institution, the panel holds conversations, in particular with representatives of teachers and students, people in charge of quality assurance, the management and equal opportunities commissioners as well as administrative staff.

Sufficient freedom is purposely granted to allow the on-site visits to be organised as required, since the organisation depends on both the specific conditions of a higher education institution's system and the requirements for the samples.

Samples

In substance, the focal point of system accreditation is the effectiveness of an institution's management and quality assurance system and, as a result, its suitability for guaranteeing high quality in its study programmes. In addition to the review of the overall system, the samples play an important role in answering this core question.

Involving relevant features of the design, implementation and quality assurance of study programmes, the panel is asked to examine and make valid statements on the effects of the system at a study programmes level. Although the features derive from the quality criteria and structural guidelines for the accreditation of programmes, the focus is primarily not on compliance but on impact correlations between the management and quality assurance system and the quality in teaching and learning. The sample can either be horizontal, i.e. an assessment of certain features extending to a representative number of study programmes, or vertical, as an in-depth analysis of one or more study programmes.

The panel has considerable flexibility in determining the features and study programmes as well as the method of assessment for two reasons: firstly, the samples need to be aligned to the specific design of the system under review, and secondly, the samples are supposed to be arranged in light of the findings already obtained by the panel.

4.3 Panel

In system accreditation, expert assessment by *peers* is at the heart of the procedure.

The panel of experts, the composition of which depends on the size and profile of the higher education institution, consists of at least:
*   three members with experience in the fields of managing both internal higher education institutions and internal quality assurance,
*   a student member with experience in the fields of the self-administration of higher education institutions and accreditation, and
*   a member from the world of work.

One member of each expert group should have comprehensive experience of higher education management, curriculum design for study programmes and quality assurance in the field of learning and teaching. In addition, one panel member should be from abroad.

While the formation of an expert group generally takes into account the size, organisation and technical heterogeneity of a higher education institution, further experts can be called in if necessary, for example when conducting the samples.

Given their prominent role in the procedure, importance is given to both the impartiality and the briefing of the experts. Impartiality, in this context, also refers to an expert's ability to not assess a system based on predetermined quality management models, but in connection with the higher education institution's own understanding of quality. This requirement is of course related to the experts' briefing, the emphasis of which is a clear understanding of an expert's role in the procedure and awareness of the demands and limitations of his or her task.

4.4 Reports

All the experts' findings are written down in a report, based on which the accreditation decision is made. This report contains the experts' appraisal of the individual criteria, recommendations and also a proposal for the decision. Experts are asked to pay particular attention to the causal link between the

findings from the samples and the internal management and quality assurance system.

Beside a report's relevance in the course of the decision-making process, the written statements of the experts - of course - address the higher education institution, the management and quality assurance system of which is in review. A report is therefore expected to have a positive effect on the development of an institution. But as it is published, its quality directly affects the transparency of the accreditation procedure and, as a result, substantiates the (inter)national acceptance of the accreditation decision. Moreover, public reports also promote information exchange, especially between higher education institutions, which can benefit from one another's experience. Therefore, reports must be written in a style which is clear and easily comprehensible. This is also included in the experts' briefing.

4.5 Decision and follow up

Because of its far-reaching consequences, the system accreditation process was initially designed to lead to a 'classic' yes/no decision. This was considered by many higher education institutions to be an excessively high hurdle, there was some hesitation not merely concerning the new procedure, but also regarding the development of internal quality assurance systems. For this reason, provisions were made for the option of awarding system accreditation under certain conditions, and therefore with a structured follow-up procedure.

As a general rule, accreditation must be granted if the quality requirements are met, whereas accreditation will be granted with conditions if there are any deficiencies that can most likely be remedied within nine months.[5] In the case of conditions, a higher education institution must provide evidence for their fulfilment, and take appropriate improvement measures for this purpose. The conditions tool therefore not only reduces the risk of a negative accreditation decision but also fosters quality development in

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5   Suspending a procedure is possible once and for a period of not exceeding 18 months if it can be expected that the higher education institution will remedy the defects within this period.

higher education institutions as well as in internal management and quality assurance systems.

System accreditation is limited to a restricted period of time and generally has to be renewed every eight years (six years in the first cycle).

Additionally, a midterm evaluation takes place halfway through the initial accreditation term, providing the higher education institution with further feedback. This midterm evaluation is based on a self-evaluation report by the higher education institution, covering an overview of the quality assurance procedures conducted so far.

5 External assessment and effects

The decision to introduce system accreditation had a significant impact. In light of this, the Accreditation Council gave itself the obligation of monitoring the initial system accreditation procedures, assessing the viability of the criteria and rules of procedure and their effect in advance, and, if necessary, amending the respective resolutions. In addition, the national ministers responsible for higher education asked the Council to supervise and report on the overall implementation process.

5.1 Evaluation procedure

The supervision and evaluation of the implementation of system accreditation procedures took place between 2009 and 2012. The main focus was on gaining experience-based knowledge regarding the suitability of the criteria and rules of procedure and the manner in which they take effect.

In particular, a total of six system accreditation procedures were observed by reporting members of the Accreditation Council and its head office. The head office also carried out guided interviews with the reporting members, and feedback discussions were held between the reporting members and the parties to the procedure (representatives of the higher education institutions, expert groups and agencies). The reporting members subsequently submitted a joint progress report to the Accreditation Council in which they mentioned subjects worthy of discussion and also made recommendations for the further development of individual procedural components. Based

on the observations of its reporting members, on the results of the feedback discussions, and on further suggestions that were made in the course of the implementation phase of the system accreditation, the Accreditation Council adopted a concluding progress report at the end of 2012. This report, which was published in full, summarises the central findings and evaluates the procedure.[6]

5.2 Analyses and assessments

The orientation, objectives and design of system accreditation were in general received positively. The assessment of the reporting members of the Accreditation Council and also the feedback received from parties to the proceedings showed that the approach has proven to be effective, both regarding its viability and the objectives pursued.

System-related effects
Naturally, the question of the direct impact of system accreditation on the quality of internal quality assurance and management processes can only currently be answered to a rudimentary degree. However, the feedback received from higher education institutions indicates that the approach has had its intended effect of promoting the responsibility taken by higher education institutions for the quality of learning and teaching. System accreditation was perceived as being an innovation-promoting instrument that triggers internal discussions regarding quality assurance and development. Although its challenging nature was made clear, at the same time higher education institutions emphasised the motivational power of the fact that a study programme's quality no longer primarily has to be demonstrated to external parties, but instead must be developed and ensured through self-designed procedures and processes. Ultimately, the procedure is considered to have high potential for the development of a quality culture at higher education institutions and for optimising internal quality development procedures and processes.

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6   See Accreditation Council (2012): Report of the Accreditation Council on the evaluation of first experiences with system accreditation, available online at http://www. akkreditierungsrat.de.

Ensuring the process is fit for purpose

Analysis of the design of the process has also given predominantly convincing results. No criterion was found to be irrelevant. Furthermore, the requirements are sufficiently broad to accommodate the significant diversity of the higher education institutions and to not restrict their necessary structural freedom. In general, the procedural elements are suitable for providing evidence-based information on the appropriateness of a higher education institution's system and the way it takes effect. Notably, the leeway in the procedural routines has proven to be beneficial, allowing the review, and particularly the on-site visits, to be subsequently aligned with the specific requirements of a higher education institution's system.

Nevertheless, the findings from the first system accreditation procedures also indicated several issues. Questions were raised, for example, regarding the timing of applications and the state of development of an institution's internal quality assurance system. In addition, there were some issues concerning the samples: some procedures were apparently opened before an assessable system was even in place, and this had consequences for the rest of the procedure. It not only significantly extended the timeframe of the procedure, but also made it almost impossible to assess the causal connection between the system and its effects on the study programmes level. Running a procedure at a very early point in time was one reason for the difficulties faced by experts when conducting the samples, but this was also due to the novelty of these procedural component and the corresponding uncertainties. Samples were therefore discussed critically during the evaluation of the initial experience of system accreditation, both with regard to the ratio between the benefits and the effort required as well as the complexity of impact correlations in principle. However, in the final analyses they were estimated to have fundamentally relevant potential, the value of which could possibly be better utilised.

5.3 Results and consequences

The comprehensive evaluation of the initial experience with system accreditation was, and still is, of great interest, especially to higher education institutions. The full publication of the evaluation report was particularly helpful in responding to this interest, and formed a sound basis to debate

the development of both system accreditation and the accreditation system as a whole. Additionally, it is likely to have a positive influence on the comprehensibility, viability and level of acceptance of the provisions for system accreditation.

The findings from the five-year pilot phase have already been used to further develop system accreditation, to increase the effectiveness and efficiency of the procedure, and to improve its level of acceptance. In doing so, it is, however, important to note that only some readjustment measures were needed since the overall approach has been proven to be effective. Hence, individual procedural components such as the prerequisites for admission and the samples were readjusted according to the results of the evaluation. In particular, both were formulated more clearly, and integration into the overall procedure was improved. Special attention was also given to the procedure's flexibility, so that procedural routines can be better coordinated with the needs of the system to be accredited. This applies to both the on-site visits and to the samples. This scope for adjustment was combined with greater empowerment of the experts. While this must not have a negative effect on the comparability of the procedures, the standards for the selection and briefing of experts as well as transparency requirements for reports were refined at the same time.

There were no substantial changes to the criteria, although requirements for cooperation in the field of learning and teaching were addressed more explicitly. Finally, system accreditation was opened up further to study-related organisational units within higher education institutions (such as faculties and schools) in order to support intermediate steps towards the establishment of quality assurance systems encompassing higher education institutions as a whole.

The further development of system accreditation was successfully concluded in spring 2013 and has already been taken into account in this publication.

6 Current and future challenges and developments

It should be stressed that the evaluation of the first experiences of system accreditation only represents an initial review, which resulted in readjustment measures concerning undeniable issues. Despite this progress, the findings from the five-year pilot phase clearly indicate further challenges related to the introduction of an entirely new approach to external quality assurance in higher education. While the consequent implementation of system accreditation might bring on others or even new, some of those challenges shall be outlined at this point.

In particular, a common understanding is needed by all involved in the process not only of the requirements for the procedural routines and the criteria, but particularly the underlying intended effects. Increased communication and a better dialogue between the parties to the procedure will remove uncertainties, especially those associated with new procedural components like the samples and the criteria for system accreditation. This explicitly affects the briefing of experts - although experts are familiar with accreditation procedures, the findings from the evaluation of the first experiences of system accreditation point out that the shift in perspective is currently challenging. In contrast to programme accreditation, which is a direct assessment and certification of the quality of a particular study programme, experts are confronted with a much more complex cause-effect mechanism when assessing internal processes and structures of a higher education institution for their suitability for evaluating, securing and continuously enhancing quality. Exercising care in the selection and briefing of experts is therefore particularly significant, and there are some ideas of facilitating networking, through, for instance, a collective pool of experts.

In addition to procedural issues, there are also far-reaching challenges related to the overall higher education system. For system accreditation this affects, first of all, the development and implementation of comprehensive internal quality assurance systems at higher education institutions. Although several tools and mechanisms are effectively in use, their systematic integration into integrated concepts poses challenges which should not be underestimated. Furthermore, the development of internal quality assurance systems in the area of learning and teaching appears to affect other

performance areas in higher education institutions. These side effects mean that system accreditation should be coordinated with other quality assurance procedures in higher education, perhaps to avoid possible conflicts in the evaluation process, too. In this context, the dual external review of private higher education institutions striving for state recognition has already been discussed critically, and measures were put in place to facilitate coordination. However, the further implementation of system accreditation may reveal potential links not only in the area of learning and teaching, but also within the higher education sector as a whole.

Finally, it is hardly necessary to point out that in the long term the question of to what extent system accreditation achieves its intended effects will need to be considered. However, this does not only mean monitoring the procedure's influence on the development of management and quality assurance systems at higher education institutions. As the requirements on a systemic level should in the end influence positively the quality of teaching and learning, an evaluation of the procedure always involves the question of the impact and/or perception at a study programme level. This implies additional complexity for the 'impact question' in external quality assurance, which is in any case difficult to answer.

II.8 Norwegian Agency for Quality Assurance in Education (NOKUT)

Wenche Froestad

January 2014

1 Terminology, purpose and aim

NOKUT's activity is embedded in The Universities and Colleges Act. The general aims of NOKUT's supervisory activities are to contribute to the assurance of a high international level of quality at education institutions and public confidence in the quality of Norwegian higher education and tertiary vocational education. NOKUT's supervisory activities are conducted in such a way that they also stimulate the continuous development of educational quality. NOKUT's supervisory activities include:

1. Institutional accreditation
2. Evaluation of institutional quality assurance systems
3. Programme accreditation
4. Supervision of current educational activity, including the revision of programme accreditation and general supervision of a less intrusive nature

All of NOKUT's quality assurance activities are conducted with reference to pre-defined and published standards and criteria. NOKUT may apply other means and activities than those listed above, as long as they are in accordance with the general aims of the agency. NOKUT's professional independence means that neither the Ministry, nor the higher education institutions, may interfere or overrule the agency's accreditation and recognition decisions.

NOKUT's formal terminology for audit is an "evaluation of the institution's quality assurance system for education". However, 'audit' is often used as shorthand between colleagues within the agency, as well as in communication with the pool of experts who conduct these evaluations.

2 National legislation

The Universities and Colleges Act of 2002 aligned Norwegian higher education with the Bologna Process through the introduction of the Bachelor's / Master's / PhD degree structure, the ECTS credit transfer system and a national system of quality assurance. The national authorities have embraced the ESG (2005) and adopted a National Qualifications Framework based on the European framework. As of 2011, institutions that apply to NOKUT for the accreditation of new study programmes must describe the programme according to learning outcomes. The higher education institutions had to describe learning outcomes for all the courses they provide by 2013.

Since 2005 the state and private sub-sectors of higher education have been covered by the same legislation. Any institution can apply for institutional accreditation in one of the three institutional categories: university, specialised university and university college. Each category provides different rights to start new provision without applying to NOKUT for accreditation:

- Universities have no restrictions.
- Specialised universities have no restrictions in their designated special discipline area and the same rights as university colleges in other areas.
- Accredited university colleges have the right to start new programmes at Bachelor's degree level but have to apply for accreditation for Master's and PhD degree programmes. Once a PhD programme has been accredited, the institution may start Bachelor's and Master's programmes within the same subject area without applying for accreditation.

The accreditations provided by NOKUT have no time restrictions, but as of 2013 NOKUT supervises accredited programmes three years after the accreditation was received. The institutions must ensure that their provision meets national higher education standards. Any study programme can have its accreditation revoked if NOKUT finds that it fails to comply with the accreditation standards.

Norwegian higher education institutions are themselves responsible and accountable for the quality of their educational provision, and are required by law to apply satisfactory internal quality assurance systems. Students' evaluation of courses must be included in the quality assurance system. The Ministry of Education has specified in regulations that quality

assurance systems must ensure continuous improvement, offer satisfactory documentation and reveal any poor quality. They must also assure and help improve the quality of all educational provision, including practice teaching. The systems must address all elements that influence educational quality, from the information offered to potential applicants to the very end of the programmes, including their relevance to working life. After consulting the sector, NOKUT decides the criteria for the evaluation of quality assurance systems.

In accordance with these regulations, higher education institutions design and calibrate their own systems as they deem fit in relation to their own size, academic profile and other local characteristics. NOKUT conducts evaluations of the institutions' internal quality assurance systems. For each institution, no more than six years must pass between one evaluation and the next. NOKUT decides the content and scope of the evaluations, including a time schedule. The institutions must have their voices heard in this process. The evaluations must observe international requirements.

The evaluation must result in a recommendation as to whether the system, assessed as a whole, is satisfactory and must indicate possible areas where the institution ought to develop its system further. If NOKUT finds the system to have substantial weaknesses, the institution is given a reasonable period of time, not exceeding six months, to make the necessary improvements and send NOKUT documentation of its rectified system. NOKUT will then conduct a `re-audit´. If the quality assurance system is still not recognised, the institution loses its right to launch new provision at all, in spite of any rights to start new provision achieved by institutional accreditation. Non-accredited institutions lose the right to apply to NOKUT for the accreditation of new provision. One year after the decision, the institution may ask for a new evaluation of its quality assurance system.

3 Scope

NOKUT became operative on 1 January 2003, and expect the second cycle of system evaluations by the end of 2015. The first cycle of evaluations focused on the structure of the quality assurance systems (including broad participation from students and staff), the documentation they produced and the assessments of educational quality and measures for improvement made by the institution itself.

In the second cycle of audits there is a stronger focus on the use and benefit the higher education institutions gain from their quality assurance systems. The experts must undertake a rounded assessment of the quality assurance system and the institution's active use of it, where the criteria are seen as an integrated whole. The institutions' quality assurance systems will be evaluated with reference to the following set of criteria:

a) Stimulation of quality work and a quality culture
b) Aims, plan and links to management
c) Documented information on educational quality
d) Analysis, assessment and reporting
e) Use of information for quality improvement.

System evaluations are the cyclical tool in NOKUT's supervision activities. The evaluations are designed to scrutinise documentation provided by the institutions' internal quality assurance system, which will point to areas where the quality of provision is uncertain. These indications may prompt NOKUT to begin supervision of current educational activity, which can lead to a revision of the programme's accreditation (or even of institutional accreditation), i.e. a full process with an expert panel and site visit. The programme(s) in question is (are) then tested against the accreditation standards with the possible outcome of accreditation being revoked.

NOKUT's supervision of higher education should be understood in connection with other national reporting and steering mechanisms. Institutions that receive state funding must report annually to the Database for Statistics on Higher Education (DBH) which holds data about students and PhD candidates, educational institutions, researchers' publication points, staff, finances, etc. The database provides a steering and decision-making tool for use by the Ministry, NOKUT and the educational institutions themselves. They must also send annual reports and plans to the Ministry. Along with relevant reports of NOKUT's activities, this information is considered in the Ministry's annual steering discussions with the individual institutions. State-owned institutions also report to The Office of the Auditor General of Norway. For some types of education, the institutions need accreditation from branches of government, such as the Norwegian Maritime Authority, the Civil Aviation Authority Norway etc. Naturally, several Norwegian higher education institutions also take part in various accreditation or evaluation schemes on a voluntary basis, like European University Association

(EUA) evaluations, European Quality Improvement System (EQUIS) accreditation etc.

4 Audit procedure

The NOKUT Regulations stress that all institutions have responsibility for making their own valid assessments of their educational provision. Their quality assurance activities should follow an annual cycle and must include all courses and programmes, covering all their constituent parts and all modes of delivery.

In the second round with system evaluations, all the institutions have had their system recognised once. The higher education institutions' own use of and benefit from their systems should be the focus of the evaluations.

The audits are conducted by an expert panel with three to five members, depending on the size and complexity of the institution. The panel is compiled from a pool of experts who are especially trained for this type of evaluation. Experts must not have a work relationship with the institution or the programme concerned, or any other disqualifying connection. All members of the expert panel must have experience of quality assurance work or evaluation processes. At least one of the panel members must have leadership experience from a higher education institution; at least one of the panel members must be connected with a relevant foreign institution; the panel must include a student with experience of an institutional board, management or other major representative function, and at least one of the panel members must have the competence of full professor. NOKUT will compile the panels in consideration of the act on gender equality. The institution has the right to comment on NOKUT's proposed panel of experts before the panel is appointed. The panel is supported in their work by one of NOKUT's project managers.

The audits do not rely on self-evaluations from the institutions, but rather on 'authentic' material generated by the institution's quality assurance system. Before the panel visits the institution, it must submit a presentation of the institution, its educational portfolio, an overview of the quality assurance system, annual (or other regular) reports on educational quality and quality work for the last three years and a brief statement giving an assessment of the present status and challenges related to educational quality and quality work. During the process the institution must present any relevant and available

documentation requested by the expert panel. The panel also receives the report from NOKUT's first system evaluation and a set of statistics prepared by NOKUT. The statistics are collected from a national data warehouse of educational statistics, where NOKUT has assembled data of special interest for quality assurance in a special gateway.

The process involves two site visits by the panel. The first visit lasts one day and the panel meets the institution's leadership and student representatives. After this visit, the panel decides whether certain aspects of the quality assurance system should be studied more in depth, and which groups to meet in their main visit. Between the two visits, the panel will usually request more specific items of documentation. The main visit normally lasts for two or three days, and the panel conducts a series of interviews with relevant groups of leaders, staff and students, and possibly also with members of the institution's board and external stakeholders. Time is also set aside for the panel to have discussions among themselves, study certain quality assurance aspects online, study documentation etc.

The project manager writes a draft report that is circulated among the panel members until they agree on its assessment, including their recommendation as to whether the quality assurance system should be recognised. The panel should in any case explain its conclusion, and the report will always contain recommendations concerning further improvements to the system and the institution's quality work. The higher education institutions are themselves responsible for designing adequate quality assurance systems within the strains of national regulations, and NOKUT has not made additional requirements for such systems. The report will therefore not express in precise detail what has to be improved in order to gain recognition.

Once the institution has had its chance to correct possible factual mistakes, the panel agrees on a final version of the report. The report is first presented to the institution again for a statement on its substance, and then (together with the institution's statement) to NOKUT's Board, who make the final decision concerning recognition. The institution has the right to appeal, limited to complaints about the process, not complaints about the panel's conclusion or report. As explained in chapter 3, NOKUT will re-audit the institution if the system is found to have substantial weaknesses. If the system fails to be approved once again after a new evaluation, or the institution does not request a new evaluation after one year has passed, NOKUT will start supervision of its current educational activity. An institution that obtains a positive

recognition decision can follow up recommendations and other findings at its own discretion, without any obligation to report back to NOKUT.

Feedback from the institutions after the audits has been generally positive and typically stresses the benefit that stems from informed and constructive discussions with the experts.

NOKUT's annual conference for the Norwegian higher education sector regularly attracts about 400 participants. During the conference NOKUT arranges special sessions in order to discuss challenges in the institutions' quality work. Over the years, NOKUT has also arranged a number of smaller thematic seminars. Since the start of the second cycle of audits, NOKUT has twice arranged special meetings for the evaluated institutions. The agency also takes part in conferences and seminars in the sector.

As all evaluations may look back to the outcomes of the previous round, this also allows for follow-up from one cycle to another. The previous report is included in the documentation the panel receives at the start of second round evaluations.

5 External assessment / effects and impact

From its launch in 2003 to the end of 2012 NOKUT conducted 118 audits in 76 institutions. In the first round of system evaluations the emphasis was on the structure of the system (including broad participation from students and staff), the documentation the system produced and the institutions' use of information from the system in order to put measures in place and allocate resources.

The first round of evaluations showed that the quality assurance systems often had been recently designed or implemented, and sometimes the systems were still under implementation. In the end, most of the institutions designed and implemented quality assurance systems that fit the institution's size and profile. Of the 76 evaluated institutions, 17 needed a re-audit before the system was recognised. Two institutions failed to get the system recognised after the re-audit, and another institution closed down before the re-audit was due.

A recognised quality assurance system is obligatory for providers of higher education in Norway. NOKUT therefore started a process of supervision of current educational activity for the two providers that failed to get their

system recognised. One of these institutions lost its rights to provide higher education, whereas the study programmes was reaccredited in the other. Information from the system evaluation also led NOKUT to begin supervision at a third institution. In this case, the institution closed down one of its study programmes, whereas quality was found to be satisfactory after a revision of accreditation in another programme.

NOKUT has been a full member of ENQA since it was established, continuing the membership of its predecessor. In 2007/2008 NOKUT was evaluated with reference to the ESG, and was also assessed considering NOKUT's national role as a quality assurance agency. To answer the latter question, the evaluation panel conducted a survey of members of NOKUT's audit, accreditation and evaluation panels and various stakeholder representatives. In general the institutions expressed a high level of satisfaction with how NOKUT conducted the task of evaluation and with the evaluation reports. The institutions were especially pleased with the panels' site visits. Some of the interviewees found the set of criteria used in the first round of audits to be somewhat unclear. NOKUT's criteria for system evaluation, unlike the criteria for accreditation, are not designed as specific demands that have to be fulfilled one by one. Instead, the panels consider whether the system as a whole fulfils demands set by the Ministry's regulations and by NOKUT's criteria. For institutions that had applied for accreditation, the different sets of criteria could therefore be slightly confusing. NOKUT has since improved its explanation of the criteria in manuals and meetings with the institutions. ENQA completed a 'second-round' evaluation of NOKUT in 2013 and renewed NOKUT's full membership of ENQA for five years.

The institutions' statements in response to the reports from audits indicate that the evaluations have been positively received. Most institutions found the panels' advice useful and some point out particular plans for follow-up. Again, many institutions find the discussions with the panel particularly fruitful.

In the first round of audits, NOKUT provided a small questionnaire to the institutions which requested feedback on the evaluation process. However, many institutions gave positive feedback during the evaluation process, or they did so in their formal statements to the report, and so this system of evaluating the process more or less withered away. At the start of the second cycle, the first five evaluated institutions were invited to send comments to the head of the Quality Audit Unit and to attend the annual seminar for

auditors. Again, NOKUT received positive feedback in the institutions' statements. NOKUT has recently revised its internal quality assurance system. The institutions now receive a new set of questions about the evaluation process immediately after the site visit. The new system will also contain a yearly questionnaire covering all of NOKUT's supervisory activities and more thorough evaluations, less frequently. NOKUT has made internal summary reports from both rounds of audits. The first summary report was presented at NOKUT's annual conference. Primarily the reports have been used as a basis for discussions amongst NOKUT's staff and the pool of auditors.

6 Current and future challenges and developments

It is expected that there will have to be further development of procedures and methodologies after the second round of audits is concluded. A substantial change in the external quality assurance of higher education would need adjustments in national legislation and regulations. In preparation for such a process, NOKUT has presented its concerns and ideas to the Ministry of Education and Research. Through an adjusted model for external quality assurance, NOKUT wants to achieve the following:

- higher education institutions' internal quality work to continue with a strengthened focus on quality and the relevance of the students' learning outcomes
- higher education institutions' responsibility for the quality of their provision to be highlighted through a focus on how they conduct their rights to self-accreditation
- higher education institutions to formulate ambitious yet realistic ambitions for their provision, and to have the means to go beyond the national accreditation standards
- to allow NOKUT to focus its attention less on the accreditation of new study programmes and more on supervising existing provision, and to obtain a better balance in the attention given to large and small higher education institutions
- to allow NOKUT to start more of its supervision (like risk analysis on the basis of existing data) within the agency, before external experts enter the process.

NOKUT is also working towards these aims at the moment. However, a modified model for external quality assurance would allow the agency to better concentrate its attention and resources in this direction. Together with a group of experts with prior experience of NOKUT's audit and accreditation activities, NOKUT is currently testing out some of its ideas together with three institutions, for which the Ministry has allowed the six-year audit cycle to be bypassed. Naturally, NOKUT will consider how to address the recommendations from the ENQA panel in an adjusted model for external quality assurance.

II.9 Accreditation Organisation of the Netherlands and Flanders (NVAO)

Stephan van Galen

April 2013

1 Terminology, purpose, aim

The Nederlands-Vlaamse Accreditatieorganisatie (Accreditation Organisation of the Netherlands and Flanders, NVAO) independently ensures the quality of higher education in The Netherlands and Flanders by assessing and accrediting programmes, and contributes to enhancing this quality.

2 National legislation

The history of the agency
NVAO is the successor of NVAO i.o. (in formation). This organisation was launched after the Dutch and Flemish Ministers of Education signed the Treaty establishing NVAO in September 2003.

The formal ratification process took some time, and so NVAO was not formally established until 1 February 2005. NVAO builds upon the work of the Netherlands Accreditation Organisation (NAO). The NAO was established when the Dutch law on accreditation was published in August 2002.

NVAO is the only organisation that can award the legal status of accreditation.

Higher education institutions can, however, enlist the support of quality assessment agencies. These agencies undertake external assessments and produce reports that the NVAO can use in its accreditation procedures.

Legal framework

On 3 September 2003, a Treaty for the establishment of a bi-national accreditation organisation was signed by the relevant ministers of the Netherlands and Flanders. This led to the creation of NVAO i.o. (in formation). The Treaty set out the tasks of NVAO, its form of administration and its supervision. On 1 February 2005, all legal formalities regarding the establishment of NVAO were concluded, and NVAO was formally established.

In the Netherlands, NVAO's tasks are based on the Higher Education and Research Act ("Wet op het hoger onderwijs en wetenschappelijk onderzoek").

In Flanders, the operation of NVAO is established by the Law regarding the Structure of Higher Education ("Structuurdecreet").

Independence

The legislation states that NVAO is independent and autonomous. NVAO has to operate within the system as set out in the legislation.

A committee of ministers supervises the functioning of NVAO, but has no power over NVAO's operations, procedure, methodologies or decision-making.

NVAO has the rule that board and staff members cannot be involved in the processing of applications, or any decision-making, concerning institutions that they have been associated with in any form over a certain period.

NVAO staff members are recruited directly or appointed by NVAO. NVAO bears all the labour costs for its work.

Funding

The Treaty stipulates that 60% of NVAO's finances come from the Netherlands and 40% from Flanders. External reviews of programmes are financed by the institutions themselves. These costs are therefore not borne by NVAO.

The income gained from (initial) accreditation procedures is deducted from the amount assigned to NVAO from government funds.

3 Scope

Institutional audits are operational in The Netherlands since 2011. In Flanders Institutional review will commence in 2015. The description of the system of institutional audits below refers to the Dutch system only, as the Flemish

system still had to be developed when this article was first written. The aim of the institutional quality assurance assessment is to determine whether the board of an institution has implemented an effective quality assurance system, based on its vision of the quality of education provided, which enables it to guarantee the quality of the programmes offered. Institutional quality assurance assessments are not expressly aimed at assessing the quality of individual programmes.

In essence, institutional quality assurance assessments revolve around five clear questions:
1. What is the vision of the institution with regard to the quality of the education it provides?
2. How does the institution intend to realise this vision?
3. How does the institution gauge the extent to which the vision is realised?
4. How does the institution work on improvement?
5. Who is responsible for what?

These five questions have been translated into five standards. For each of these five standards, the audit panel gives a weighted and substantiated judgement on a three-point scale: meets, does not meet or partially meets the standard. The audit panel subsequently gives a substantiated final conclusion on whether an institution has control over the quality of its programmes. This judgement is also given on a three-point scale: positive, negative or conditionally positive.

4 Audit procedure

NVAO convenes and appoints an audit panel. The audit panel is guided by an NVAO process co-ordinator and supported by a certified secretary. The secretary and the process co-ordinator are not part of the panel. The assessment process starts with an executive consultation between the management of the institution and the executive board of NVAO. This consultation focuses on the institution's organisational structure with regard to the education it provides. Based on this consultation, NVAO draws up an 'accreditation portrait', which is communicated to the institution and audit panel. A critical reflection is written by the institution, addressing NVAO's standards.

The site visit comprises two components. As a rule, the audit panel starts off by visiting the institution for a day, followed by a second visit after two to four weeks. The institution and the panel may decide to change this arrangement by mutual agreement. The first visit has an exploratory nature. The audit panel gains insight into the ins and outs of the institution, the specific points to draw to the attention of the management of the institution, and the satisfaction of students, teaching staff and other stakeholders. At the end of the first visit, the panel indicates the audit trails to be conducted. Audit trails are studies pertaining to the implementation of policy and/or the management of problems, in which the audit panel follows the trail from the institutional level to the implementation level or vice versa. Once the site visits have been completed, the secretary of the audit panel writes an advisory report that includes the panel's judgements for each standard and suggestions for improvement. The advisory report is the basis for NVAO's decision. This decision can be positive, negative or positive with conditions.

Publication policy

NVAO makes all assessment reports and (initial) accreditation decisions public. NVAO publishes on its website all (initial) accreditation decisions together with the accompanying documents (e.g. the assessment report). Any member of the public can consult NVAO's database and search by programme, institution, field of study, location, country, level and status (positive (initial) accreditation decision, negative accreditation decision, report rejected).

(Legal) appeal system

Institutions can lodge an internal appeal against an NVAO decision. The Commission for Internal Appeal then provides advice to NVAO on which decision to take concerning the internal appeal, following which NVAO will take a new decision.

If the subsequent decision is negative, the institution can take this further by lodging an external appeal against NVAO's decision with the Administrative Jurisdiction Department of the Council of State in either The Netherlands or Belgium.

II.10 Swiss Center of Accreditation and Quality Assurance in Higher Education (OAQ)

Geneviève Le Fort

December 2013

1   Terminology, purpose, aim

In Switzerland, Quality Audits are aimed at the periodic review of the quality assurance system for teaching, research and associated supporting services at public universities. As a process of external quality assurance, Quality Audits describe the current state of the quality assurance measures at universities. Quality Audits are understood by all parties to be part of a process of reflection to assist the management of universities in the development of their internal quality assurance system - with the aim of ensuring high quality in teaching, research and services. This process is also supported by experts in their role as peers in the strict sense of the term, through a critical review of existing regulations and processes.

Quality Audits differ from institutional accreditations, as the latter have a much broader scope than the quality assurance system.

Quality Audits conducted at Swiss public universities take place in partnership with all the stakeholders and are based on the following common values and principles: trust, autonomy and responsibility, subsidiarity and participation.

2   National legislation

The Federal Law on Financial Aid to Universities and Cooperation in the Higher Education Sector (UFG) obliges the Swiss Confederation and the

cantons to ensure and promote the quality of teaching and research in higher education institutions (Article 7). Furthermore, the UFG defines a review of the quality of a university's performance as a prerequisite for federal subsidies (Article 11, Paragraph 3, Letter a.).

According to the guidelines for the procedure to qualify for federal financial support, public universities have to undergo a 'summary assessment' every four years in order to review their entitlement to federal subsidies (Article 6). This 'summary assessment' is the Quality Audit. Theoretically, if a university fails the Quality Audit, it could lose part or all of its federal funding. This decision falls to the State Secretariat for Education, Research and Innovation (SERI) (i.e. the Federal Department of Economic Affairs, Education and Research, EAER). However, before such a cut is implemented, the State Secretariat would call for a second audit within twelve months.

The basic requirements regarding quality assurance at universities and the conducting of the Quality Audit by the Swiss Center of Accreditation and Quality Assurance in Higher Education (OAQ) are laid down in the Quality Assurance Guidelines of the Swiss University Conference (SUC). These are compatible with the ESG.

Quality Audits are mandatory for Swiss public universities, whereas institutional accreditation is voluntary.

A first cycle of procedures was conducted in 2003-2004, a second in 2007-2008 and the third and final one is taking place in 2013-2014 before the new Federal Law on Funding and Coordination of the Higher Education Sector (HFKG) enters into force. The SUC Guidelines, including the quality standards, were consolidated in 2006, between the first and second cycles of Quality Audits.

Quality Audits have accompanied the shaping and development of the quality assurance system at Swiss universities. The OAQ conducts the review process and does not have a consulting role for the institutions.

3 Scope

Quality Audits in Switzerland are regulated by the SUC Quality Assurance Guidelines, based on the ESG. The SUC Guidelines state that universities are responsible for developing a quality assurance system based on their mission and objectives, and define (Article 3) the minimum requirements a university's

quality assurance system must meet. The SUC Guidelines apply to all public universities that receive federal funding.

The quality standards have been developed in close collaboration with the Q-Netzwerk, a formal network of people in charge of quality assurance at strategic and operative levels at each public university, and the OAQ. The standards cover the following areas:
- Quality assurance strategy;
- Governance;
- Teaching;
- Research;
- Recruitment and development of staff;
- Internal and external communication.

Moreover, the universities have to demonstrate that their quality assurance system is efficient at the study programme level.

The quality standards are evaluated by the experts as being fulfilled, partially fulfilled or not fulfilled. The experts are expected to justify their evaluation and to provide recommendations for quality improvement whenever a standard is not totally fulfilled.

4 Audit procedure[1]

The Quality Audit procedure is divided into four phases: self-evaluation by the university, external evaluation by the experts, publication of the results, and follow-up with the Q-Netzwerk.

Self-evaluation
After the formal launch of the procedure with the OAQ, the university prepares a self-evaluation report. The self-evaluation phase takes four to six months and as far as possible involves all relevant groups at the university. The process is coordinated by a steering committee. The participation of students in the

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1   See "2013/14 Quality Audits. Guide dated 7th November 2012" on: http://www.oaq.ch/pub/en/QA_201314_Accompanyinginstruments_E.php
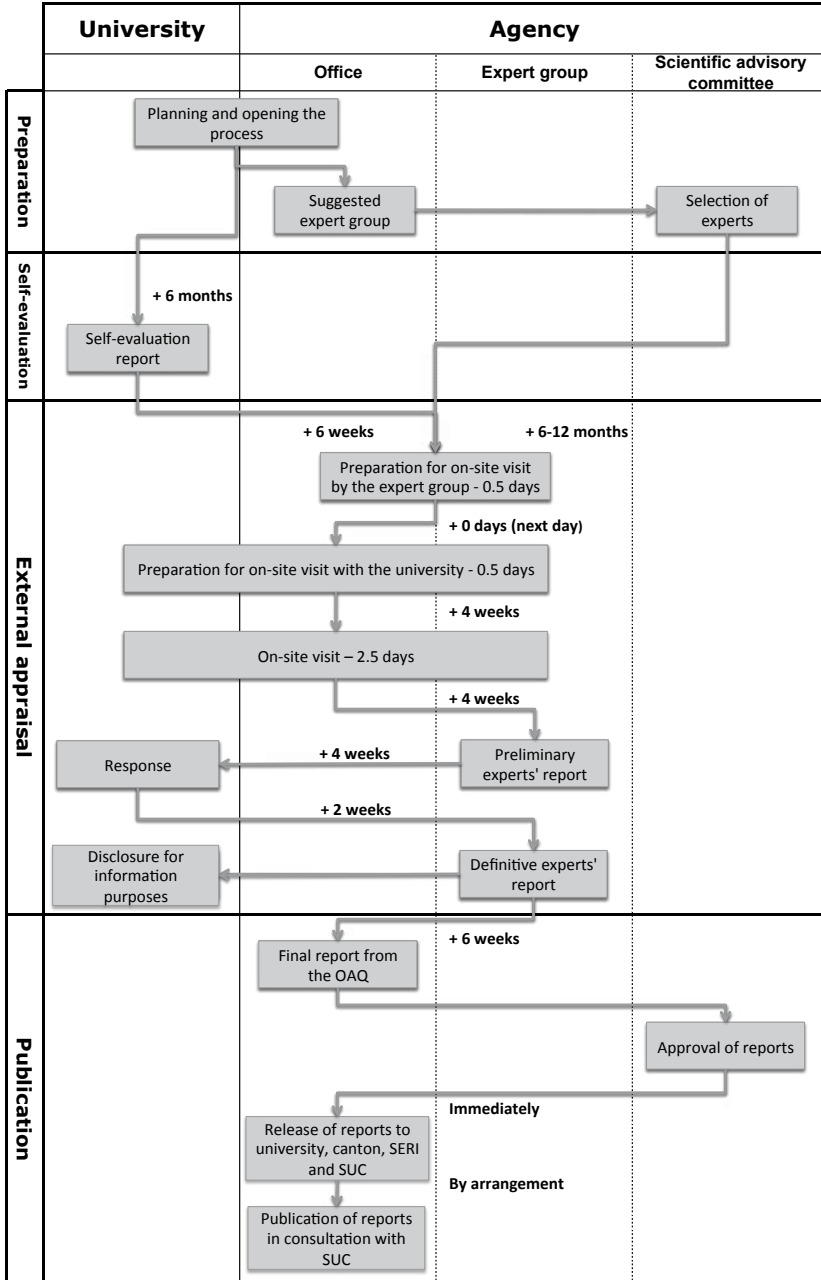
self-evaluation process is explicitly checked during the Quality Audit with the help of an ad hoc quality standard.

Information regarding the fulfilment of quality standards constitutes the core of the self-evaluation report, but the document has to include the following data:

- A presentation of the university (profile, relevant key figures);
- The process of self-evaluation;
- The implementation of the recommendations from the previous Quality Audit;
- A presentation of the quality assurance system at all levels of the university (e.g., university management, faculty/department and study programmes), as well as the state of implementation;
- An assessment of the quality standards;
- A presentation of the strengths and weaknesses with respect to the quality standards and opportunities for further development.

The self-evaluation report constitutes the basis for the experts to work with during the on-site visit. Analytical elements, in addition to descriptive ones, are therefore very important. The OAQ may provide support for the formal aspect of the process, but is otherwise not involved in the preparation of the self-evaluation report.

External evaluation
The external evaluation phase includes:

- The selection of experts;
- The preparation of the on-site visit by the expert panel;
- The preparation of the on-site visit with the university;
- The on-site visit;
- The completion of the external evaluation report by the expert panel (in two steps) and the OAQ.

The self-evaluation report is the foundation and starting point for the external evaluation; it forms the basis for discussions with academic staff and other relevant stakeholders at the university during the on-site visit.

The panel is composed of five experts, including a chairperson and a student expert. Experts must be peers. The selection of experts is carried out bearing in mind the profile and the development objectives of the university, as well as its independence. Above and beyond this, the following criteria are sought:

- A member, where possible the chairperson, is an active member of the management of a university.
- The other members have experience in the management of a university or department, and of quality assurance within a university.
- A member may come from the expert group from the previous Quality Audit in order to be able to better assess the development over recent years.
- One member is drawn from the student body.
- The expert panel as a whole shows sufficient knowledge of the Swiss higher education system.
- The expert panel has a high level of ability in the process language.
- The expert panel has an international composition.

The OAQ and the university can, on a bilateral basis, define additional specific skills for the experts. The university can express an opinion on the selected experts and, by stating important reasons such as a lack of independence or a conflict of interest, may call for the rejection of individuals. The student experts are proposed and trained by the Swiss Student Association. The scientific advisory board of the OAQ confirms the appointment of the experts following their proposal by the OAQ office.

Visits

The external evaluation by the experts involves two visits:

1. The preparation for the on-site visit by the expert panel and with the university ('pre-visit'): approximately one month before the planned on-site visit, the experts convene for a preparatory meeting. The meeting has two main foci: training the experts and an initial analysis of the self-evaluation report. This allows them to identify questions and issues that should be discussed further and to prepare the upcoming on-site visit. The preparatory meeting ensures that the experts are suitably prepared well in advance.

   This half-day working session is directly followed by a meeting between the experts and the university. The chair and one of the experts meet with the management of the university and the steering committee of

the self-evaluation process. The aim is to discuss any unresolved aspects and/or documents and records still to be submitted, as well as possible changes to the on-site visit programme. It also allows the expectations of both parties to be clarified, to avoid any misunderstandings in the aim and purpose of the Quality Audit. This also lasts half a day.

2. The on-site visit: during the on-site visit, the expert panel undertakes an in-depth analysis of the university's quality assurance system. The aspect of further development is assigned the greatest importance. Over two and a half days, the experts meet with representatives of various key groups at the university. They regard themselves as 'peers' who seek to make a contribution to the advancement of the quality assurance system through critical but constructive feedback.

The on-site visit ends with a verbal report by the expert panel.

Reports
The expert group prepares a preliminary report (experts' report) within four weeks of the completion of the on-site visit. The responsibility for the report rests with the chairperson of the expert group. The report contains, in particular:

• An acknowledgement of the self-evaluation report (formal aspects, completeness, approach);
• An acknowledgement of the on-site visit (atmosphere in the interviews, information flow);
• An acknowledgement of the implementation of recommendations from the previous Quality Audit;
• An assessment of the quality standards;
• A description and assessment of the implementation of the quality assurance system in study programmes;
• A profile of the university's strengths/weaknesses with regard to quality assurance;
• Recommendations for the further development of the quality assurance system.

After a formal examination, the OAQ forwards the preliminary version of the experts' report to the university for comment within four weeks. The university provides its opinion on the assessments and conclusions of the expert

group and, where necessary, corrects any factual errors. The response is an integral part of the documentation of the entire process.

The expert group completes the experts' report, taking into account the university's response, within two weeks. The expert group is free to decide whether and how to handle the response by the university. The chairperson of the expert group submits the definitive report to the OAQ. The OAQ forwards the definitive experts' report to the university for its information.

The OAQ then completes, within six weeks, the experts' report for the relevant authorities. The OAQ part includes technical aspects of the procedure and a final conclusion. Ideally, both the experts' report and the OAQ report form one document (an external evaluation report). The external evaluation report is examined by the OAQ's scientific advisory board within six weeks of being completed and then released to SERI.

Pursuant to Articles 6 and 7 of the guidelines for the procedure to qualify for federal financial support, and based on the results of the quality evaluations performed by the OAQ, the EAER decides whether or not the conditions for qualifying for subsidies are still fulfilled at the university.

The final reports prepared by the OAQ are published in consultation with the SUC and in compliance with individual rights and data protection considerations (Article 6 of the SUC Guidelines).

The decision as to whether the expert reports are published lies entirely with the university. If the university refuses to publish the experts' report, the OAQ will handle the experts' report and the OAQ report separately.

Follow-up

After the 2007-2008 cycle of Quality Audits, the OAQ requested feedback from universities and experts, wrote a critical synthesis report and discussed it within the Q-Netzwerk in order to improve the procedure. Two major changes were adopted for the 2013-2014 cycle: a reorganisation of the quality standards to better suit the purpose of the self-evaluation report and the 'pre-visit' by experts and with the university (see above).

The follow-up after the 2013-2014 Quality Audits will form part of the discussion for preparing for the planned institutional accreditations that will replace the Quality Audits with the entry into force of the HFKG.

5 External assessment / effects and impact

Although the impact of Quality Audits on higher education institutions has not been the object of a formal study, the outcomes of the Quality Audits are discussed within the Q-Netzwerk. It appears that Quality Audits have contributed to the development of the universities' internal quality assurance systems. Every university now has its own quality assurance office and Quality Audits are seen by both institutions and experts as an accompanying external tool for the internal process of developing a functional quality assurance system with the aim of ensuring high quality in teaching, research and related services.

After each cycle of procedures, the OAQ publishes a synthesis report that provides a critical analysis and a summary of the strengths and weaknesses of the process. Experts and institutions are involved in this process of reflection, and the results are discussed with the institutions and other partners.

6 Current and future challenges and developments

The HFKG, expected to enter into force in 2015, brings the three types of higher education institution (universities, universities of applied sciences and universities for teachers' education) under the same legal framework. Quality assurance plays a central role in the text and will take the form of compulsory institutional accreditation for all three types of higher education institution. The OAQ, together with its stakeholders, is currently in the process of creating the accompanying tools for this new procedure.

II.11 Quality Assurance Agency for Higher Education (England, Wales and Northern Ireland) (QAA)

Maureen McLaughlin

October 2013

1 Terminology, purpose and aim

QAA conducts evidence-based peer reviews of higher education providers and publishes reports detailing the findings, to provide public assurance on academic standards, quality and the provision of public information. QAA carries out reviews using a variety of methods depending on the nation or the type of higher education provider. All QAA review methods for publicly-funded higher education now have review teams that include a student member.

Separate review methods are used for:
- Reviews of higher education providers
- Educational oversight reviews for independent providers
- Reviews of professional programmes
- Reviews of international provision (i.e. UK awards delivered outside of the UK on an 'in country' basis).

The main aim of Higher Education Review in England and Northern Ireland is "to provide accessible information for the public which indicates whether an institution:
- sets and/or maintains UK-agreed threshold standards for its higher education awards as set out in *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ)
- provides learning opportunities (including teaching and academic support) that allow students to achieve those higher education awards and

qualifications and reflect the UK-agreed good practice in the *UK Quality Code for Higher Education* and other UK-agreed reference points
- produces information for applicants, students and other users that is fit for purpose, accessible and trustworthy
- plans effectively to enhance the quality of its higher education provision".

The review focuses on the procedures that the provider uses to set and maintain its threshold academic standards, to produce information and to develop and enhance the quality of its learning opportunities.

From 2002 to 2011 the review method for universities (Institutional Audit) differed from that offered to colleges delivering higher education (Integrated Quality Enhancement Review). At this stage the Agency was working with colleges in a more developmental sense to facilitate progression towards the level playing field of having embedded quality assurance systems and processes in place and the development of an enhancement culture specific to higher education.

QAA review methods are mindful of the autonomy of higher education providers in the exercise of their degree-awarding powers, and they review providers using agreed external reference points and in relation to what institutions state about their own quality assurance and enhancement processes.

QAA has purposely moved from the language of 'audit' to 'review' since 2011 in order to avoid confusion with financial auditing processes or an investigative/interrogative approach to quality assurance.

2 National legislation

The UK has a diverse range of higher education providers, which are independent and autonomous (not owned by the state).

Higher education providers with the power to award UK degrees are known as 'Recognised Bodies', and a full list is published by the UK Government's Department for Business, Innovation and Skills. There are around 160 providers in the UK that are permitted to award degrees and are recognised by the UK authorities (UK and Scottish Parliament, Welsh and Northern Ireland Assemblies). The UK authorities recognise those providers which have been granted degree-awarding powers, either by a Royal Charter, an Act of Parliament or by the Privy Council (a formal body of advisers to the Queen).

All UK universities and some higher education colleges are Recognised Bodies.

In addition to providers awarding degrees, there are also over 700 colleges and other providers which do not have their own degree-awarding powers but provide complete courses leading to recognised UK degrees. These providers are known as 'Listed Bodies'. Courses offered by Listed Bodies are validated by providers which have degree-awarding powers. Each UK degree must be awarded by a legally approved degree-awarding body (a Recognised Body) that has overall responsibility for the academic standards and quality of the qualification. This applies even if all or part of the provision is delegated to another provider. It is, therefore, important to have a strong process in place to ensure that degree-awarding powers and the right to be called a 'university' (university title) are only granted to higher education providers that properly merit the powers they seek.

In the UK, one of the responsibilities of the Privy Council is the granting of degree-awarding powers and university title. QAA advises the Privy Council on applications for degree-awarding powers and university title. All applications are rigorously scrutinised against guidance and various criteria. There are different sets of guidance and criteria for the three types of degree-awarding powers (listed below), which also vary across the four nations of the UK.

There are three types of degree-awarding powers:

i) Foundation Degree awarding powers (FDAP) - Foundation Degree awarding powers give further education colleges in England and Wales the right to award Foundation Degrees at level 5 of the FHEQ.

ii) Taught degree-awarding powers (TDAP) - Taught degree-awarding powers give higher education providers the right to award Bachelor's degrees and other taught higher education qualifications up to level 7 of the FHEQ, and to level 11 of the *Scottish Credit and Qualifications Framework*.

iii) Research degree-awarding powers (RDAP) - Research degree-awarding powers give UK higher education providers with TDAP the right to award doctoral degrees and Master's degrees, where the research component (including a requirement to produce original work) is larger than the taught component when measured by student effort. These are higher education qualifications up to level 8 of the FHEQ, and to level 12 of the *Scottish Credit and Qualifications Framework*.

QAA was established in 1997 as a single quality assurance service for providers of higher education in the UK. QAA brought together the Higher Education Quality Council (HEQC) and the quality assessment divisions of the Higher Education Funding Councils for England and for Wales. The Scottish Higher Education Funding Council agreed to contract its quality assurance activities to QAA soon afterwards.

QAA is an independent body, a registered charity and a company limited by guarantee. Its Memorandum of Association and Articles of Association are published on its public website.

QAA is funded through a number of channels:
- subscriptions from higher education providers (all publicly-funded higher education providers in the UK subscribe to QAA and pay an annual fee, as do some that are not publicly funded)
- contracts and agreements with the UK funding councils and organisations to which QAA reports annually:
    - Higher Education Funding Council for England
    - Scottish Further and Higher Education Funding Council, and Universities Scotland
    - Higher Education Funding Council for Wales and Higher Education Wales
    - Department for Employment and Learning in Northern Ireland
- providers of higher education seeking educational oversight for immigration purposes (as required by the UK Border Agency) pay a fee to be reviewed by a QAA team, as well as an annual maintenance charge
- contracts with the General Osteopathic Council (GOsC) and the Teaching Agency for Early Years Professional Status (EYPS)
- additional private contracts, consulting and business development work in the UK and internationally.

QAA is governed by its Board, which is responsible for policy development, for the handling of the Agency's finances and for monitoring its performance against agreed targets at a corporate level. The 17 QAA Board members represent a wide range of interests, both within higher education and in other areas. The eight independent members of the QAA Board form its largest single group. A number of Board members have been appointed on the basis of their experience of industry, commerce, finance or the practice of a profession, and

there are also now two student Board members. In addition, the Board membership includes representatives of UK higher education and further education providers, and the higher education funding councils.

QAA was a founder member of ENQA. Through its ENQA membership, QAA demonstrates the compatibility of quality assurance arrangements in the UK with the ESG. QAA was reviewed by ENQA in 2008 and most recently in May 2013. The Agency is the first which has been deemed to be fully compliant with all of ESG 2 and 3.

QAA is also a member of the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) and participates in the Asia-Pacific Quality Network (APQN). QAA is also a member of the Council for Higher Education Accreditation (CHEA) International Quality Group, and participates in many forums and dialogues with international partners. In addition, QAA has links with partner agencies around the world through Memoranda of Understanding and Cooperation. QAA has close relationships with international quality assurance agencies, monitoring and reporting on advances around the world, and publishes a monthly newsletter, *Quality Update International,* which covers news and a selection of articles relating to higher education and quality assurance.

3 Scope

QAA review methodologies are aligned with the *UK Quality Code for Higher Education* and/or other agreed reference points. The Quality Code has a comprehensive range of Chapters setting out agreed good practice in the form of Expectations which higher education providers are expected to meet. The Expectations are illustrated by Indicators of sound practice that set out ways in which adherence to the Expectations might be achieved.

The Quality Code, and the corresponding headings under which reviewers are expected to report, address all of the standards set out in Part 1 of the ESG. The Quality Code is developed in consultation with the higher education community and draws on their good practice in internal quality assurance. When higher education providers write their self-evaluation documents as part of the QAA review process, they respond to the Quality Code in order to demonstrate the effectiveness of their internal procedures.

QAA reviews are moving towards a more risk-based approach, whereby the intensity or frequency of the external quality assurance process is determined by the provider's record in quality assurance. The external quality assurance procedures take full account of the effectiveness of the internal processes described in Part 1 of the ESG.

The Quality Code underlines QAA's belief that all providers of higher education in the UK should be quality assured under a common framework that can be adapted in its application in different UK countries, and which also recognises the value of enhancement.

Higher education providers use the Quality Code to help them to set and maintain the academic standards of their programmes and awards, to assure and enhance the quality of the learning opportunities they make available, and to provide information about higher education.

Student representatives and students' unions can use the Quality Code in their discussions with their higher education provider, as it sets out the minimum expectations for the quality of the learning opportunities the provider makes available to its students. Reviewers use the Quality Code as a benchmark for judging whether an individual higher education provider meets national Expectations for academic standards, information and the quality and enhancement of learning opportunities.

Reviews do not expect compliance with the Quality Code, but rather a culture of alignment and active engagement, so that providers can demonstrate that they meet the UK Expectations in a manner which befits their particular mission and nature.

As part of Higher Education Review, providers may elect to address a theme to be chosen from either Student Involvement in Quality Assurance and Enhancement or Student Employability. No formal judgements are attached to the exploration of this theme. Higher Education Review in Wales also comments specifically on arrangements for postgraduate research students and internationalisation.

4 Audit procedure

The current Handbook for Higher Education Review provides all of the necessary information regarding the operational aspects of review for

providers, and can be found at: http://www.qaa.ac.uk/Publications/
InformationAndGuidance/Pages/HER-handbook-13.aspx

Briefly, the overall aim of Higher Education Review is to inform students and the wider public whether a provider meets the expectations of the higher education sector for: the setting and/or maintenance of academic standards; the provision of learning opportunities; the provision of information; and the enhancement of the quality of its higher education provision. Thus, Higher Education Review serves the twin purpose of providing accountability to students and others with an interest in higher education, while at the same time encouraging improvement.

Higher education providers with a strong track record in managing quality and standards undergo Higher Education Review every six years. Providers without a strong track record are reviewed on a more frequent basis (every four years). This allows QAA to target its resources where the more significant risks appear to be. A full programme of reviews is available on QAA's website.

The review takes place in two stages. The first stage is a desk-based analysis by the review team of a range of documentary evidence. The second stage is a visit to the provider. The programme for, and duration of, the review visit varies according to the outcome of the desk-based analysis, again allowing QAA to target its resources where there appear to be the greatest risks. The review is undertaken by peer reviewers – staff and students from other providers. The reviewers are guided by a set of UK Expectations about the provision of higher education contained in the UK Quality Code. The Agency places the interests of students at the heart of the review method. Students are full members of peer review teams. There are also opportunities for the provider's students to take part in the review, including by contributing a student submission, meeting the review team during the review visit, working with their providers in response to review outcomes, and acting as the lead student representative.

The review culminates in the publication of a report containing the judgements and other key findings. The provider is obliged to produce an action plan in consultation with students, describing how it intends to respond to those findings. QAA monitors the implementation of the action plan according to the review judgements; providers with unsatisfactory judgements are monitored more closely and regularly than those with positive outcomes.

Providers are invited to sector-wide briefings approximately a year ahead of their scheduled reviews. They are also asked to select Facilitators and Lead Student Representatives who receive additional briefing to enable them to fulfil their roles in assembling both the written self-evaluation document and the student submission. Both of these roles work productively with the team during the course of the review and are the main points of contact for the QAA and the team before, during and after the review.

Each review method has a specific Handbook for providers and there are also online briefing materials to help them to prepare written submissions and assemble supporting documentary evidence.

The QAA officer leading the review will visit the institution at least 16 weeks prior to the review to discuss the logistics of the review.

QAA has in the past undertaken two visits to the institution with the full team, but it is now moving to visiting only once, and this visit can last anything between one and five days. In the new method the team will meet offsite about four weeks before the review to agree the length of the review visit according to certain parameters, discuss agendas for the main visit and plan the schedule for the review week, indicating who they want to meet and what, if any, further documents they might need to consider.

QAA reviewers are drawn from higher education providers across the UK (there is a pilot for international observers during 2013/14) from a range of institutional types and academic disciplines. Currently there are over 700 reviewers on the register (this includes approximately 95 student reviewers). All selected reviewers must complete an intensive training programme which, as far as possible, takes them through a simulated review and mirrors all the activities undertaken in an actual review. If a reviewer is unable to complete the training, they will not be allocated to a review. Students are expected to complete the same training as other reviewers. Efforts are made to train review teams together to assist in team building before the review begins. QAA's Single Equality Scheme and the selection criteria together ensure that recruitment and selection methods are fair and equitable. Traditionally, QAA has trained reviewers by method, but now that the review methods are converging into Higher Education Review training will be merged accordingly. QAA also runs annual conferences and focus groups for reviewers as continuing professional development and to offer and receive feedback on the operation of the method.

The timetable of activities associated with review is as follows:

Working weeks	Activity
Approx -52	• QAA informs provider of dates of review visit
Approx -40	• QAA informs provider of size and membership of review team (between two and six members) and name of QAA officer coordinating the review • Provider nominates facilitator and lead student representative (LSR)
Approx -26	• QAA provides briefing event for facilitator and LSR
-16	• Preparatory meeting between QAA officer and provider at the provider
-12	• Provider uploads self-evaluation and supporting evidence to QAA's electronic folder • LSR uploads student submission • Review team begins desk-based analysis
-9	• QAA officer informs provider of any requests for additional documentary evidence
-6	• Provider uploads additional evidence (if required)
-4	• Team holds first team meeting to discuss desk-based analysis and agree the duration of, and programme for, the review visit
-4	• QAA officer informs provider of: • the duration of the review visit • the team's main lines of enquiry • who the team wishes to meet • any further requests for documentary evidence
0	• Review visit (between one and five days)
+ 2 weeks	• QAA officer sends key findings letter to provider (copied to Higher Education Funding Council for England (HEFCE), Department for Employment and Learning (DEL) and/or awarding bodies or organisations as relevant)
+6 weeks	• QAA sends draft review report to provider and LSR
+9 weeks	• Provider and LSR give factual corrections
+ 12 weeks	• QAA publishes report and issues press release
+ 22 weeks	• Provider publishes its action plan on its website

5 External assessment / effects and impact

As part of QAA's contractual arrangement with the Funding Council it prepares an annual impact analysis of all activities, which includes review outcomes. The Agency also reports to the Funding Council on a monthly basis on the progress of reviews and includes them in the dissemination of the formal outcomes of reviews for publically-funded providers.

At the end of each review all members of the review team, the provider and the QAA officers must complete an evaluation of the effectiveness of the process and the conduct of the review. These are analysed on an annual basis to help QAA ascertain areas for improvement or further support.

When generating a process to meet the aims of Higher Education Review, full consideration was given to the costs and benefits for the various groups with an interest in the effective running of the review process. Three questions perhaps more than any others threw these costs and benefits into sharp relief: Will providers need to spend more time and money on the review process? Will students' interests be at the heart of the process? Will the review team be able to make secure judgments given the time available for the review activity? The new process is designed to save providers from unnecessary effort: providers can brief themselves at their convenience; the team meets offsite to plan the review activity; there is a reliance on using information already in existence for other quality assurance purposes; aside from the pro-duction of a self-evaluation document and student submission, no new paper documentation is required; the role of facilitator helps to target requests for information; and the overall process is shorter so it should preoccupy pro-viders for a more concentrated but briefer period of time. In addition, some of the identified benefits for providers include the opportunity to demonstrate clearly to external stakeholders that quality and standards meet external ref-erence points; an evidence base to help with the preparation of action plans; the opportunity that action planning provides to show public commitment to responding to the review findings; and the possibility of working through action plans to amend an adverse judgment.

QAA designed the process with students' interests in mind, not only in the centrality of the student experience in the review judgments, but also in the way that students can participate in review. Every review team has a student reviewer, and in future there will be opportunities to receive the views of a greater number and variety of students - how the provider has responded

to the National Student Survey will become a more visible feature of review. The Agency is giving careful thought to how it might best design the report's summary for current and prospective students; review will look specifically at the management of the required information, including the information produced to inform applicants and students, and judgements will include consideration of how students have been engaged as partners in the management of quality assurance. QAA also expects greater use of the student submission by review teams now that its format is aligned more closely to that of the self-evaluation document, and thus to the report. Finally, the process expects providers to make post-review action planning a joint activity with students.

The new process has been designed to allow teams to receive, and digest thoroughly, information about the provider at the very start of the review, so that it is better placed to follow up its enquiries when actually visiting it. As well as this preparatory period, the team has the benefit of the facilitator to help it to understand the institution and to enable accurate evidence requests. There is always a meeting with representatives from the provider towards the end of the review to make sure that they understand the issues that the team has been pursuing, and to make sure that it has had the opportunity to provide the evidence that the team will rely upon to make secure judgements.

6 Current and future challenges and developments

Some of the current and future challenges have merged as a result of the 2011 publication of the UK Government's White Paper, *Students at the Heart of the System,* which proposed a number of significant higher education policy changes. One of the proposed changes was to remove the regulatory barriers that prevent equal competition between higher education providers of all types - including further education colleges and other alternative providers - to further improve student choice and to support a more diverse sector. This has broadened the landscape of providers eligible to be reviewed by the Agency and one of the major challenges for QAA is levelling this 'higher education playing field' while allowing new providers to enter the academic community in a gradual manner.

Another proposed change was the introduction of a more risk-based approach to quality assurance in England (and potentially Northern Ireland). The White Paper proposed that, in future, the nature, frequency and intensity

of external quality assurance would be guided by each higher education provider's record in quality assurance and the nature of its provision. It would be fair to say that the new methodology has moved in this direction but has not yet fully embraced the concepts of 'risk' in a systematic manner. During the summer of 2012, HEFCE undertook a consultation with the higher education sector on the more risk-based approach. The results of the consultation were published in October 2012, in a report entitled: *A risk-based approach to quality assurance: outcomes of consultation and next steps*. In November 2012, HEFCE issued a letter of guidance to QAA on the development of the new review method. Its key features include a six-year review cycle for those higher education providers with a longer track record of successfully assuring quality and standards, and a four-year review cycle for those providers with a shorter track record. Following further consultation in spring 2013 with the sector on the proposed new review method – now named Higher Education Review - QAA has adopted this approach in England from the 2013-14 academic year onwards. It has also been agreed that Higher Education Review will be adopted in Northern Ireland with the same timescale.

In April 2012, Northern Ireland launched its first higher education strategy, *Graduating to Success*, setting out the direction for higher education policy in Northern Ireland between 2012 and 2020. There is also a stated intention to establish a single quality assurance framework for all higher education provision in Northern Ireland by 2016. The framework will be developed in consultation with QAA.

In September 2012, QAA introduced a revised approach to Institutional Review in Wales, including changes to outcome judgements. Also in 2012, the Welsh Government introduced major changes to its funding system, with a new tuition fee regime for students. The Welsh Government also carried out a consultation on its draft *Further and Higher Education (Wales) Bill,* which it expects to bring forward in 2013. A recent consultation on a new method for external review (spring 2013) indicates that the method to be adopted in Wales is more likely to have a more visible focus on Enhancement and has adapted some of the facets of the Enhancement-led Institutional Review (ELIR) review method administered in Scotland.

Current proposals include:
- Arrangements for quality assurance and enhancement of provision
- Provision for effectively funded students' unions and purposeful student charters
- Powers of direct funding for higher education providers
- Amendments to the functions of the Higher Education Funding Council for Wales (HEFCW) as a result of the new funding and student-support arrangements.

QAA intends to continue Transnational Education (TNE) in country reviews on an annual basis. Approximately 500,000 students are studying for a UK degree outside of the UK. The most recent reviews have focussed on those countries where student uptake has the greatest critical mass: India (2008), Malaysia (2009), Singapore (2011) and China in 2013. The next scheduled overseas review will take place in Dubai in spring 2014.

II.12 Quality Assurance Agency for Higher Education Scotland (QAA Scotland)

Ailsa Crum

August 2013

An introductory note about QAA and QAA Scotland

QAA is a UK-wide body but, in Scotland, there is delegated responsibility for QAA Scotland to operate a range of procedures under the guidance of a Committee of the QAA Board called the QAA Scotland Committee. The Committee includes representatives from a range of sources including education, industry, a student member and an international member. The Committee chair is also a member of the QAA Board. QAA Scotland Committee has been in existence as long as QAA itself. Establishing the Committee was a condition of the Scottish university principals agreeing to subscribe to QAA.

When QAA began operating in 1997, it also opened a Scottish office. In 2002, the office was rebranded as QAA Scotland to coincide with the delegation of additional powers, including the start of the separate quality arrangements in Scotland, which were launched in 2003 as an enhancement-led approach.

The existence of the separate QAA Scotland recognises that the education system at school and university levels in Scotland is different to that in other parts of the UK (e.g. the Honours degree in Scotland requires four years of full-time study at university while in other parts of the UK it is three years). In May 1999, the Scottish Parliament was 'reconvened' (as it was described in the opening ceremony, having adjourned in 1707!). The Parliament has responsibility for a range of policy areas including education. The existence of the Scottish Parliament has meant that legislation and education policy in Scotland have tended to diverge from that in England, for example Scottish students are not charged tuition fees to study for an undergraduate degree. The arrangements for reviewing and reporting on quality and academic

standards in Scotland have been markedly different from those in other parts of the UK, although there has been a lot of interest in increasing the enhancement focus in some parts of the UK, including Wales.

1   Terminology, purpose and aim

Since 2003, QAA Scotland has participated with other key agencies in the sector to deliver an enhancement-led approach. These agencies include: Universities Scotland (which is the universities' representative body and is affiliated to Universities UK), the Scottish Funding Council, the National Union of Students in Scotland, Student Participation in Quality Scotland (sparqs, the national student development service in Scotland) and, more recently, the Higher Education Academy. The agencies work together with a partnership approach to deliver the Quality Enhancement Framework (QEF), which is an integrated arrangement for reviewing and promoting quality and standards. It has five elements:

- Enhancement-led Institutional Review (ELIR)
- Institution-led quality review
- An agreed set of public information produced by the universities
- Student engagement in quality
- A national programme of Enhancement Themes.

The ELIR method is an evidence-based peer review of the university sector institutions in Scotland. It explicitly considers the extent to which the institutions are engaging with the other elements of the QEF. More information on ELIR is provided later in this report.

Institution-led quality review is the set of arrangements that institutions manage to review their own provision at subject and programme levels. Institutions have considerable flexibility when designing the review arrangements, including the precise method and reporting structures. The Scottish Funding Council has, however, produced guidance on the characteristics which the institutions' systems need to demonstrate. For example, the reviews must use external reference points including the Scottish Credit and Qualifications Framework (SCQF) and the Quality Code for Higher Education. All review teams must include staff external to the institution being reviewed. The guidance also promotes student engagement. The current guidance can

be seen on the Scottish Funding Council website (http://www.sfc.ac.uk/web/FILES/Circulars_SFC142012/SFC142012.pdf).

With regard to public information, the institutions produce an agreed set of statistical data annually. The Scottish institutions also now participate in the Key Information Sets which can be viewed on the Unistats website (http://unistats.direct.gov.uk/find-out-more/key-information-set). This means that, from 2012-13, the Scottish higher education institutions also have to participate in the National Student Survey, which was previously voluntary for Scottish universities.

Student engagement in quality runs through many of the arrangements. For example, ELIR has included a student reviewer on each team since 2003, and institution-led quality reviews also include students on their teams. There is a national student development service in Scotland (called sparqs) which covers the higher and further education sectors. It has acted as a focus for promoting and supporting student representation and engagement within the institutions.

The national programme of Enhancement Themes is facilitated by QAA Scotland on behalf of the sector. Its work is led by a committee, the Scottish Higher Education Enhancement Committee (SHEEC), which includes amongst its membership the vice principals (learning and teaching) of all the Scottish university sector institutions. SHEEC has set out a strategic vision for its work. The institutions are expected to engage with the Enhancement Themes, but the precise way in which they do so is left to each institution to determine. There is considerable evidence both from ELIR and through the institutional submissions relating directly to the Themes that the national Themes are having a significant impact on institutional strategy and practice. The work of the Themes provides an important and dynamic set of reference points which institutions use in forming and evaluating their strategies, policies and practices. More information about the Themes is available on a dedicated website (www.enhancementthemes.ac.uk).

The QEF and the enhancement-led approach were developed in recognition of the very strong track record the Scottish institutions had in their previous engagements with quality assurance processes. These processes (in the form of institutional audit and external subject review) had been operating in various forms since the late 1980s. The vast majority of the outcomes were positive, and it was clear that running a set of processes that only considered threshold arrangements would not represent a good use of resources.

Reflection by the key agencies in the sector at that time brought about the QEF, which is designed to report on threshold academic standards but also to stretch the institutions, asking them to demonstrate how they are enhancing the quality of the student learning experience.

The Scottish sector has defined enhancement as taking deliberate steps to bring about improvement in the effectiveness of the learning experiences of students. This is set out in the current edition of the ELIR Handbook (http://www.qaa.ac.uk/Publications/InformationAndGuidance/Documents/ELIR_Handbook_3.pdf).

The Handbook indicates that ELIR is focused on the institution's strategic approach to enhancement, which will be implemented at multiple levels within the institution. The resulting enhancement may involve continuous improvement and/or more significant step-changes in policy and practice. In order to take deliberate steps, it is expected that the institution will have a clear strategic vision of the enhancement it is seeking to bring about. It is also expected that the institution will evaluate its current strengths and areas for development.

The approach the institution takes to self-evaluation forms a significant focus in ELIR. This is because considerable confidence can be derived from an institution that has systematic arrangements in place for evaluating its strengths and identifying and addressing potential risks to quality and academic standards.

In response to the guiding questions:
ELIR is intended to work as part of the QEF to promote the enhancement of the student learning experience. It fulfils the Scottish Funding Council's legal requirement to report publicly on the quality of provision in Scottish universities. Its judgements are designed to provide links to the judgements of similar processes in other parts of the UK, without being identical to them.

In addition to ELIR and the other elements of the QEF, institutions will still engage with professional, statutory and regulatory bodies to secure accreditation in particular subject areas, for example Medicine, Engineering and Accountancy. This accreditation relates to the students' (or graduates') prospective right to practice in particular professions rather than to the academic award – although the two can be closely interrelated at the point of accreditation or review. The institutions are required by the Scottish Funding Council to report annually on the outcomes of these processes.

2 National legislation

QAA Scotland is responsible for reviewing the institutions in the Scottish university sector. Currently, this comprises 18 institutions: 15 universities, a tertiary institution (providing further and higher education), a specialist art school and a conservatoire. All of the institutions are in the public sector, although the proportion of their funding they receive from the Government via the Scottish Funding Council varies greatly. They are all autonomous institutions, which means they are not owned by the Government and are governed by their own governing bodies. Of the 18 institutions, all except two have their own taught degree-awarding powers and all except four have their own research degree-awarding powers.

QAA Scotland's role is not set down in legislation. There is, however, legislation identifying that the Scottish Funding Council has a role 'to secure that provision is made for assessing and enhancing the quality' of further and higher education delivered by the institutions. The current law is the Further and Higher Education (Scotland) Act 2005 (which can be seen here http://www.legislation.gov.uk/asp/2005/6/contents). The Scottish Funding Council fulfils this legal obligation, in terms of higher education, through its service level agreement with QAA Scotland. Interestingly, the legal requirement relates to quality and does not mention academic standards, although QAA's arrangements explicitly consider both quality and academic standards.

The 18 institutions that QAA Scotland is responsible for reviewing also subscribe to QAA; doing so is a condition of their receiving funding from the Scottish Funding Council.

In response to the guiding questions:
It is a condition of funding that the higher education institutions set up internal quality systems. The Scottish Funding Council produces guidance on this which the institutions are required to follow. QAA Scotland supports the institutions in the enhancement of those systems through a variety of its work including ELIR and the Enhancement Themes. The Scottish institutions are also expected to address the UK Quality Code for Higher Education, which has been developed by QAA UK-wide with the active engagement and agreement of the whole sector. The extent to which the institutions use this guidance and other external reference points is considered during ELIR and during annual officer-led visits to the institutions.

In terms of the consequences of the ELIR judgements, if an institution received a judgement of 'limited effectiveness', they would be required to put together an action plan to address the weaknesses within twelve months of the review. The action plan would need to be approved by the Scottish Funding Council and QAA Scotland. The institution would then go through a follow-up ELIR within approximately 18 months of the original review. The precise timeframe would be agreed between QAA Scotland and the Scottish Funding Council. If the institution has a positive outcome from their ELIR, they are in any case required to produce a year-on follow-up report indicating the action taken, or planned to be taken, to address the ELIR outcomes. Institutions are also invited to participate in an event where they share the actions they have taken and discuss those taken by another institution. These post-ELIR events are a recent development for the 2012-16 ELIR cycle.

QAA itself undergoes review by ENQA – most recently in 2013.

3 Scope

There are a variety of reference points that institutions are expected to use in their evaluative practice, both in the ongoing evaluation and the special evaluation they carry out in preparation for ELIR. The UK Quality Code, which is an important reference point for institutions, and the ELIR method itself address the standards set out in the ESG. The Scottish sector has participated in the Bologna stocktaking exercises and has consistently been scored highly as part of that. The most recent exercise, in 2009, identified Scotland (as one of seven countries out of a total of 48) as having the highest grades in all indicators for quality.

ELIR includes within its scope all of the arrangements relating to the enhancement of the student learning experience. It does not include the quality of research but does include the quality of the research student experience. Research quality is considered through a separate exercise in the UK, currently led by the Funding Councils collectively, and known as the Research Excellence Framework (previously the Research Assessment Exercise).

ELIR is interested in the following: the institution's strategic approach (what its future intentions are, particularly those that relate to learning and teaching); what the trends in the student population are (e.g. is a big expansion of taught postgraduates planned); and what the impact of those two factors

(strategy and student population) is likely to be on the institution's policies and practices for securing academic standards and enhancing the quality of the student learning experience. In this way, there is scope to tailor the ELIR to the institution's context and priorities, although there are a range of set topics that will be considered and reported on in each ELIR – and these are identified in the ELIR Technical Report template (see the ELIR Handbook at http://www.qaa.ac.uk/Publications/InformationAndGuidance/Documents/ELIR_Handbook_3.pdf).

An important 'measure' of institutional effectiveness is the effectiveness of the institution's approach to self-evaluation. During 2012-13, QAA Scotland has been carrying out work considering the indicators of effective self-evaluation. This work has engaged the sector, and a dissemination event was held on 19 September.

Reviewers want institutions to make use of external reference points in their self-evaluation (so the evaluation should not simply be self-referential), demonstrating thoughtful engagement with the reference points rather than mechanistic adherence or compliance.

Reviewers will select themes to focus on during the review, based on the information the institution submits, but institutions can also ask the reviewers to focus on one or more areas. The themes are usually agreed between the ELIR team and the institution (facilitated by the QAA Scotland officer managing the review) but the ultimate decision rests with the ELIR team.

4 Audit procedure

The ELIR Handbook sets out the review method. Further Operational Guidance on a range of matters is provided on the QAA Scotland pages of the QAA website (http://www.qaa.ac.uk/InstitutionReports/types-of-review/Pages/ELIR.aspx).

Key stages include: submission of advance information including a Reflective Analysis document; two site visits by the whole team; two reports (a short Outcome report and a more detailed Technical report); a year-on follow-up report submitted by the institution and published on the QAA website; participation in a follow-up event with other institutions.

To address the guiding questions:

A senior officer from QAA Scotland manages each ELIR and provides support to the institution and to the ELIR team. The officer visits the institution and is in contact with the institution many months in advance of the visit – the support includes commenting on the self-evaluation document and the nature of other material the institution will submit. QAA Scotland also organises a preparation workshop for all of the institutions that will be reviewed that year, allowing them to come together to share experiences and questions.

There are two site visits at which the whole team is present. The first follows a set pattern (a sample agenda is on the website with the Operational Guidance) and the QAA Scotland officer is present throughout. The second visit varies in length from three to five days (in practice it is usually four or five days) and the QAA Scotland officer usually attends only at the end to support the review team in the process of agreeing their conclusions.

Institutions are required by the Scottish Funding Council to provide a written year-on follow-up report, which needs to be approved by the institution's governing body. The ELIR method requires institutions to participate in a follow-up event and, so far, institutions are enthusiastic about this. There are other sector conferences and events for sharing experience and disseminating outcomes but those are voluntary and, in some cases, organised by the institutions themselves.

Each ELIR team includes six reviewers:
- Three academic reviewers drawn from across the UK (in practice one will come from Scotland, one from outside Scotland and the other from either depending on the team composition overall)
- An international reviewer (a senior academic manager working outside the UK)
- A student reviewer (drawn from the Scottish university sector)
- A coordinating reviewer (a senior administrator drawn from across the UK).

The criteria for the different reviewer roles are set out in an appendix to the ELIR Handbook. Reviewers apply to become reviewers through a paper application form, endorsed by their institution or student association. They can remain in the reviewer pool while their experience remains current or recent (currently defined as three years from their most recent, substantive post or study experience).

All reviewer roles are trained together. Student reviewers receive one additional day's briefing in advance of the full training. The full training is delivered over 2.5 days and includes international reviewers. Attendance at training is compulsory in order to be selected for an ELIR team. In addition, continuing professional development events are held annually, where participation is encouraged but voluntary. QAA Scotland is considering ways of using podcasts etc. to share the content of these events with those who cannot attend.

ELIR teams are selected individually for each review. The selection is carried out by QAA Scotland officers, agreed by the Head of Reviews.

5 External assessment / effects and impact

QAA Scotland officers monitor the progress of each ELIR carefully and seek feedback from those involved (the institutions and all of the reviewers). QAA Scotland reports on the outcome of this monitoring to the ELIR Steering Committee (a group of sector representatives who work with QAA Scotland on developing and evaluating the method). In addition, this monitoring forms part of QAA Scotland's annual evaluative report to the Scottish Funding Council.

QAA Scotland also identifies themes in the outcomes of the reports and shares them with SHEEC (which is responsible for managing the Enhancement Themes work), with the QAA Scotland Committee and with the Scottish Funding Council – this happens at most meetings of these groups, and certainly at least annually. The outcomes of the ELIRs have an impact on the selection and shape of future Enhancement Themes and on the nature of the various events and activities that QAA Scotland runs. The amount of 'traffic' on the Enhancement Themes website suggests that this is of interest.

QAA Scotland receives very positive feedback for the support it provides to the institutions, which suggests the institutions do appreciate the support they receive for this activity. The evaluation indicates that institutions are positive about ELIR as a way of providing the stimulus for a holistic institutional evaluation of learning and teaching. Finding ways of promoting that self-evaluation is something QAA Scotland is keen to work on as its review arrangements continue to develop and evolve.

6 Current and future challenges and developments

Although the enhancement-led approach currently used has received considerable support from institutions, students and from outside Scotland (e.g. through the Bologna Process), there is a recurring anxiety in the sector that pressures from outside Scotland might threaten this approach – for example if the Government or the Scottish Funding Council decided that outcomes should match those in the English system.

Inside Scotland, there are challenges as well. There is the political uncertainty of the impact of the referendum on Scottish independence, which will take place in autumn 2014. Education is vitally important to the Scottish economy and, as such, the Scottish Funding Council is seeking to prompt the institutions (in the further and higher education sectors) to meet particular economic and social targets – for example relating to widening access. Currently, QAA Scotland has responsibility for reviewing higher education in the university sector, but not the higher education provision in the college sector where a separate body, Education Scotland, conducts reviews. There have been significant changes in the college sector in Scotland through a programme of mergers. It is likely that there will be closer working between the college and university sectors to ensure that students can start studying in one sector and make a smooth transition to study in the other. This is one likely impact of current post-16 legislation in Scotland. The precise impact of this on quality audit activity is not entirely clear yet, but it will necessitate closer collaboration between QAA Scotland and Education Scotland.

Although ELIR includes within its scope all of the higher education provision offered by an institution, the Scottish institutions continue to participate in the Transnational Education (TNE) reviews organised by QAA. Overall, this has proved to be a positive approach with liaison between QAA, QAA Scotland and the institutions ensuring that there are good links between the TNE and ELIR methods. This is something that QAA will continue to work on to ensure a smooth experience for the institutions concerned.

Within QAA Scotland, work is continuing to find clear indicators of enhancement to demonstrate and promote the impact of the work the sector is engaged in. This continues to be a challenge, but it is the subject of a current research project, which is overseen by SHEEC. There are links between that work and the activity QAA Scotland is also engaged in to identify the indicators of effective self-evaluation. QAA Scotland is keen to drawn on the relationship

between external review and the ongoing evaluative activity that institutions are undertaking all of the time. This work is likely to have an influence on the design of the next review method (or the future of ELIR).

Agencies – Quality Audit Network

Agency	Country	Webpage
National Agency for Quality Assessment and Accreditation of Spain (ANECA)	Spain	http://www.aneca.es/
Agency for Quality Assurance and Accreditation Austria (AQ Austria)	Austria	www.aq.ac.at
Catalan University Quality Assurance Agency (AQU Catalunya)	Spain (Catalunya)	http://www.aqu.cat/
Romanian Agency for Quality Assurance in Higher Education (ARACIS)	Romania	http://www.aracis.ro/
Danish Accreditation Institution	Denmark	http://en.akkr.dk/
Finnish Higher Education Evaluation Council (FINHEEC)	Finland	http://www.finheec.fi
German Accreditation Council (GAC)	Germany	http://www.akkreditierungsrat.de
Norwegian Agency for Quality Assurance in Education (NOKUT)	Norway	http://www.nokut.no/en/
Accreditation Organisation of the Netherlands and Flanders (NVAO)	The Netherlands	http://nvao.com/
Swiss Center of Quality Assurance and Accreditation in Higher Education (OAQ)	Switzerland	http://www.oaq.ch
Quality Assurance Agency for Higher Education (England, Wales and Northern Ireland) (QAA)	England, Northern Ireland and Wales	http://www.qaa.ac.uk
Quality Assurance Agency for Higher Education Scotland (QAA Scotland)	Scotland	http://www.qaa.ac.uk/scotland

The publication illustrates various approaches to auditing and reflects on their merit, as well as outlines the implementation of audits in different higher education systems across Europe. One focus is to show common aspects and apparent deviations concerning purpose and aim of the audit, national legislation, scope of the audit, external assessments and their effects. In addition it reflects on current and future challenges and developments. Contributions from twelve European quality assurance agencies provide an insight into their audit approaches. The publication is targeted at quality assurance agencies, higher education institutions and other stakeholders and aims to increase knowledge about different quality assurance procedures across borders.

www.facultas.at/verlag