External review according to the ESG
Self-assessment report

June 2020
Swiss agency of accreditation and quality assurance AAQ
External review according to the ESG
(Renewal of ENQA membership and EQAR registration)
Self-assessment report adopted by the steering group on 19 June 2020

June 2020
Table of contents

1 Introduction 4
2 Development of the self-assessment report (SAR) 5
3 Higher education and QA of higher education in Switzerland 6
4 History, profile and activities of the agency 10
5 Higher education quality assurance activities of the agency 12
6 Processes and their methodologies 16
7 Agency’s internal quality assurance 19
8 Agency’s international activities 21
9 Compliance with European Standards and Guidelines (Part 3) 22
10 Compliance with European Standards and Guidelines (Part 2) 32
11 Information and opinions of stakeholders 49
12 Recommendations and main findings from previous review and the agency's resulting follow-up 51
13 SWOT analysis 53
14 Current challenges and areas for future development 54

Glossary of terms/abbreviations 55
Annexes 57
1 Introduction

This self-assessment report (SAR) was written in the first half of 2020. We are lucky to state that restrictions linked to the Covid-19 pandemic had no negative influence on the writing process. However, the self-assessment does not take into account any actual measures taken during procedures that are underway in this period. At AAQ, the proper execution of procedures is subject to respecting the special measures by the authorities and by the higher education institutions (HEIs). No decisions on changing our guides or other material describing the procedures have been taken so far.

The self-assessment covers all the external evaluation procedures run by AAQ within the scope of the ESG:

• Institutional accreditation in Switzerland according to the Higher Education Act, HEdA (core activity)
• Programme accreditation in Switzerland (according to HEdA, as well as to a combination of HEdA with the Medical Professions Act or with the Health Professions Act)
• System accreditation in Germany
• Certification procedures in Austria (institutional quality audit)
• National and international evaluation procedures

AAQ is mandated to run other procedures on the basis of Swiss legislation such as programmes in medical and psychology postgraduate specialist training. These procedures are not part of this ESG review and thus not part of this self-assessment. However, these procedures have an influence on available resources and are fully included in the internal quality assurance system of AAQ. Above all, AAQ applies the principles and values of the ESG in designing and implementing these procedures. EQAR confirmed in its letter dated 10 March 2020 that the activities with respect to these procedures are not in the scope of ESG.

The self-assessment presented here is an important part of the quality assurance of AAQ. It covers facts and analyses over the past years and considers a follow-up from the 2016 review throughout the report. A summary of the follow-up measures and considerations since the last review is given in section 12.
2 Development of the self-assessment report (SAR)

AAQ started planning the current ESG-review in November 2019. The planification was defined by two milestones:

- End of the registration in EQAR: 31 July 2021
- Suitable weeks for inviting staff and stakeholders to the on-site visit: 1st half of November 2020

AAQ established a working group (WG-SAR) composed of three staff members – two of them are conducting external evaluation procedures, a third is in charge of thematic analyses, databases and resources.

In short meetings, the group collected the required information in order to start the self-assessment process, to secure internal information and to contact ENQA and EQAR.

The ESG-review of AAQ serves two purposes:

- application to the European Association for Quality Assurance in Higher Education (ENQA) for full membership renewal;
- application to the European Quality Assurance Register for Higher Education (EQAR) for registration renewal.

AAQ further established a steering group chaired by the director and completed by a member of the Commission of AAQ.

The self-assessment report (SAR) is organised as defined in Annex I of ENQA Guidelines for ENQA Agency Reviews (2016). The report covers all of AAQ's external quality assurance activities within the scope of the ESG-review (see Introduction) and as agreed in the terms of reference. Annexes are listed at the end of the report. Most evidence is referenced with internet links appearing in the text.

Information and reflection referring to those specific activities are colour coded; information and reflection referring to AAQ and its activities in general are provided without colour codes. The colour codes are defined in section 5 of this report.

Before starting the self-assessment, the WG-SAR analysed the outcomes of the ENQA-webinar named ‘How to prepare a good self-assessment report’ of 4 December 2019. A key lesson learnt was to pay special attention to stakeholder involvement and how to include the follow-up of recommendations of the 2016 ESG-review as well as the substantial changes report issued to EQAR. Sections 11 and 12 are dealing with these subjects.

Involvement of the team of AAQ and the steering group

When writing the draft report, members of the working group had regular contact with those team members able to provide accurate and up-to-date information about topics to be described and self-assessed.

The draft of the SAR was then shared for several weeks with the team of AAQ, allowing feedback on factual errors to be collected and assessments to be re-evaluated. In a final discussion, the SWOT analysis, areas for improvements and future perspectives have been shared with the team. The director of AAQ was invited to participate in this cooperative phase of the work.

The steering group formally adopted the SAR to be sent to ENQA.
3 Higher education and QA of higher education in Switzerland

Higher education in the context of the federal Swiss system

In the federal system of Switzerland, it is the cantons that have the final responsibility for education. However, the Federal Constitution (BV Art. 63a) makes the federal government and cantons jointly responsible for ensuring that the higher education sector is of a high quality and able to compete. Three decrees have been enacted in order to fulfil this constitutional obligation and came into force on 1 January 2015:

- Federal Act on Funding and Coordination of the Swiss Higher Education Sector (Higher Education Act, HEdA, SR 414.20);
- Intercantonal Agreement on the Swiss Higher Education Sector (Hochschulkonkordat);
- Cooperation Agreement between the Confederation and the Cantons (ZSAV-HS).

The HEdA regulates the higher education system as a whole, i.e. is applicable to the different types of HEI distinguished in the act (universities, universities of applied sciences and universities of teacher education).

The Intercantonal Agreement regulates cooperation in the coordination of the Swiss higher education sector, both between the cantons themselves and with the federal government.

The Federal Act and the Intercantonal Agreement delegate competences (financial and higher education policy) to joint bodies which are created in the Cooperation Agreement: the Swiss Conference of Higher Education Institutions, the Rectors’ Conference of Swiss Higher Education Institutions and the Accreditation Council.

The three joint bodies created by the HEdA have jurisdiction over all types of public and private higher education institutions.

3.1 Swiss Conference of Higher Education Institutions (SCHE)

The SCHE has two forms of assembly (Plenary Assembly and Higher Education Council). It is the highest policy-making body within the Swiss higher education sector and is responsible for the Swiss-wide coordination of the activities of the federal government and the cantons within the higher education sector. One of the competences given to the SCHE by the HEdA is the adoption of the legal framework of accreditation in Switzerland, i.e. the HEdA Accreditation Ordinance.

3.2 Rectors’ Conference of Swiss Higher Education Institutions (swissuniversities)

The responsibilities of the Rectors’ Conference of Swiss Higher Education Institutions are assumed by the association ‘swissuniversities’. Swissuniversities represents all the accredited and/or recognized Swiss HEIs – public or private. Its members are the rectors and presidents of all public Swiss higher education institutions and one rector or president representing each type of private HEI.

Swissuniversities comments on SCHE business and submits requests to the latter on behalf of HEIs. It also represents the interests of Swiss higher education institutions in Switzerland and at international level, and may assume mandates from the Confederation and responsibility for management of programmes and projects.
3.3 Swiss Accreditation Council and Swiss Agency of Accreditation and Quality Assurance

The Swiss Accreditation Council (SAC) is the joint body of the Confederation and cantons for accreditation and quality assurance in the Swiss higher education sector. With its expertise, SAC shall ensure that all Swiss higher education institutions are accredited in accordance with the procedural legal requirements (HEdA Accreditation Ordinance and European Standards and Guidelines).

The HEdA defines the SAC as the body competent to take decisions of institutional accreditation and programme accreditation according to the HEdA. Further, the SAC is competent to recognise agencies to perform procedures of institutional accreditation and programme accreditation according to the HEdA in Switzerland. The decision of accreditation is based on a proposal by AAQ or another recognised agency.

The Accreditation Council is independent by law (Art. 21 para. 4 HEdA).

The members serve their mandate ad personam but are representative of public and private higher education institutions, the professional environment, students, mid-level faculty staff and academic staff. Teaching and research departments of HEIs must be fairly represented on the SAC. At least five members must be involved in activities abroad.

Members of the Swiss Accreditation Council are elected for a period of office of four years by the Swiss Conference of Higher Education Institutions (SCHE). In line with Swiss political usage, the international members are elected from a list of candidates proposed by the SAC. The members representative of Swiss stakeholder groups are elected from lists of candidates proposed by the respective stakeholder group.

The SAC currently comprises 20 members. The actual composition of the Swiss Accreditation Council (SAC) complies with the requirements on stakeholder representation introduced above (Annex 1).

Currently, there is no legal right of appeal against decisions by the SAC; HEdA Art. 65 para. 2 excluded this legal right explicitly. In order to amend this situation, the SAC has set up an Appeals Commission that handles requests to reconsider accreditation decisions. The Appeals Commission works in exactly the same way as the ENQA Appeals and Complaints Committee. The Organisational Regulations of the Appeals Commission (OReg-AC) gives full details. A change of law to reinstate the legal right to appeal against decisions by the SAC is scheduled to be handled by Parliament in 2020.

Swiss Agency of Accreditation and Quality Assurance

The Swiss Agency of Accreditation and Quality Assurance (AAQ) is introduced in the HEdA (Art. 22) and is established in the Cooperation Agreement as a public law institution without legal entity (legally dependent), subsidised by the SCHE. The agency is subject to federal law, in particular with respect to HR and finances (e.g. annual audit of accounts by the Swiss Federal Audit Office (SFAO)).

The HEdA places AAQ under the supervision of the legally independent SAC. Through its Organisation Regulations (OReg-AAQ), the SAC reaffirms the operational independence of AAQ in Art. 2: ‘The Accreditation Agency is professionally independent from the Federal Administration, from the cantons and from higher education institutions and other institutions within the higher education sector. The Swiss Accreditation Agency is a legally dependent institution and is supervised by the independent Swiss Accreditation Council (Art. 22 para. 2 HEdA) to which it is solely accountable.’
The SAC further underlines the operational independence of AAQ by focusing its supervision on three aspects: the nomination of the director, the annual budget and financial statements and the strategy (OREg-SAC, Art. 15).

The director of AAQ recruits the staff of AAQ independently and assumes sole responsibility for the budget allocated by the SCHE.

**Governance of the accreditation system**

Article 21 paragraph 1 point 7 HEdA assigns the role of regulator to the Accreditation Council (‘It may recognise other Swiss or foreign accreditation agencies.’). The Swiss system of accreditation according to the HEdA is thus organised in three levels (see figure 1):

- The SCHE as the policy making body defines the legal framework (Accreditation Ordinance)
- The Accreditation Council as the regulator of the accreditation system recognises agencies to operate in the system, takes decisions on accreditation based on the agencies’ proposals and oversees agencies.
- The agencies as operationally independent bodies plan and conduct procedures of institutional accreditation protecting the integrity of the procedures through their methodologies and internal quality assurance. The agencies propose to accredit institutions or programmes based on external reviews in line with the Accreditation Ordinance and the ESG. Currently six agencies are recognised by the SAC.

![Swiss Council of Higher Education Diagram](image)

**Figure 1: Governance of accreditation**

**Relationship between SAC and AAQ, internal structure of AAQ**

As explained above, HEdA assigns the role of regulator to the Accreditation Council. At the same time, points 6 and 8 assign supervisory responsibilities over AAQ (‘The Swiss Accreditation Council manages (…) the budget of the Swiss Accreditation Agency’, ‘it issues Organisational Regulations for the Swiss Accreditation Agency’).
Following the 2016 review and the recommendations made by the review panel, AAQ suggested changes in the Organisational Regulations of the SAC that clarify the responsibilities and assign them to different bodies. On 16th September 2016, the SAC revised its OReg-SAC in order to distinguish between the tasks of

- the Accreditation Council as an accreditation body (Art. 14)
- the Accreditation Council as the supervisory body of AAQ (Art. 15 para. 1)
- the Commission of AAQ (Art. 15 para. 2)

In practice, this means that the SAC performs the three responsibilities assigned by the HEdA (nomination of director, approval of strategy, approval of budget and financial statement) and assigns all functions related to the supervision of the operation and internal quality assurance of the agency as well as the decision of procedures outside the HEdA to the Commission of AAQ.

For the time being, the SAC has decided not to nominate members of this commission but to assume responsibility for the tasks of the Commission of AAQ. As a consequence the meeting agendas show two parts: one for the Accreditation Council and one for the Commission of AAQ.

The relationship between the SAC and AAQ is further complicated by the fact that AAQ – through the Organisational Regulations – is mandated to manage the secretariat of the SAC for a flat rate. Implementing Article 5 of the OReg-AAQ, the director has assigned resources preparing the meetings, drafting the minutes and communicating the decisions of the SAC as well as ensuring implementation of these decisions, general administrative support and handling petitions for reconsideration or considering supervisory appeals.

The director of AAQ nominates an AAQ employee as responsible for supporting the SAC in its activities. She or he fulfils the task of the office manager of SAC assisted by AAQ administrative staff, all of these being supervised by the AAQ director.

→ Annex 1:
• Composition of the SAC


4 History, profile and activities of the agency

AAQ is the successor organisation to the Swiss Center of Accreditation and Quality Assurance in Higher Education (OAQ). OAQ was replaced by the Swiss Agency of Accreditation and Quality Assurance (AAQ) when the Federal Act on Funding and Coordination of the Swiss Higher Education Sector (HEdA) came into force on 1 January 2015. HEdA brought in a new name for the agency; however, the procedures have been continued without any changes, with the exception that accreditation under HEdA replaces activities under the previous legal basis.

The duties and activities of AAQ are wide ranging. The HEdA entrusts it with the implementation of procedures for institutional accreditation and programme accreditation pursuant to HEdA, Art. 32, including programme accreditations for state-regulated courses of study (basic medical and health profession education). In addition, AAQ is entitled to accept assignments from third parties if it has the capacity to do so (Art. 7 ZSAV-HS). AAQ currently acts on behalf of third parties to conduct evaluations, certification of the internal university quality management systems in the form of quality audits (in Austria) and system accreditations (in Germany). Outside the scope of the ESG, AAQ runs accreditation procedures of programmes in medical and psychology postgraduate specialist training, according to the relevant Swiss legislation.

In terms of strategy, AAQ is committed to international networking; this also fulfils its legal mandate (Art. 32 HEdA). It works closely with other European accreditation and quality assurance agencies and is an active member of the leading European and international networks (ENQA, INQAAHE, ENAEE, FrAQ-Sup). This guarantees that the quality assessments conducted by AAQ meet both national and international standards and can be modified to reflect the latest developments. AAQ has been a full member of the European Association for Quality Assurance in Higher Education (ENQA) since 2006 and has been listed in the EQAR register since 2012.

In 2009, the agency (OAQ at that time) was licensed to conduct programme accreditations and system accreditations in Germany. It has since developed and consolidated its international activities, first in Germany and then, from 2012, in Austria, where AAQ is entitled as an EQAR-registered agency to conduct quality audits in accordance with the Act on Quality Assurance in Higher Education (Hochschul-Qualitätssicherungsgesetz - HS-QSG) in Austria.

The work in neighbouring countries, such as Germany and Austria, fulfils part of AAQ’s legal mandate; i.e. the conduct of procedures at international level. In Germany, the agency is able to gain experience from the particularities of a different accreditation system; in Austria, it has the opportunity to apply the Swiss quality audit to a different higher education system.
**Organisational structure of the agency**

The director leads the accreditation agency and is in charge of operations. He or she is responsible for the agency’s finances and personnel, and instigates and terminates contracts of employment, according to the Organisational Regulations of the Swiss Agency of Accreditation and Quality Assurance (OReg-AAQ).

AAQ has three personnel categories: direction, project managers for external quality assurance and administrative staff. The duties and responsibilities of staff are set out in the individual job descriptions.

The director oversees the 14 members of staff directly; there are no further hierarchy levels. The director has a deputy director.

The core task of project managers in external quality assurance is the coordination of quality assurance procedures. All project managers also have specific responsibilities, either in centralised roles or transversal functions and they are in charge of procedural formats. In addition, the project managers devise methodologies, revise instruments and cultivate national and international networks. One AAQ staff member is nominated by the director to act as the office manager of the Swiss Accreditation Council (SAC, see section 3).

The administrative staff assist the director and the project managers with procedures and ensure the smooth operation of the agency.

The organisational structure of the agency illustrates the responsibilities:

![AAQ organigram](image-url)

**Figure 2: AAQ organigram**
5  Higher education quality assurance activities of the agency

Figure 3: AAQ homepage

AAQ presents its activities on its website according to formats (methodologies), whereby a distinction is made first between the levels of institution and programme, and then according to legal frameworks (Figure 3).

The activities in this report are organised according to the legal framework.

<table>
<thead>
<tr>
<th>Format</th>
<th>Legal framework</th>
<th>Competence for standards</th>
<th>Decision-making body</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional accreditation</td>
<td>Higher Education Act (HEdA)</td>
<td>Swiss Conference of Higher Education (SCHE)</td>
<td>Swiss Accreditation Council (SAC)</td>
</tr>
<tr>
<td>Programme accreditation</td>
<td>HEdA</td>
<td>SCHE</td>
<td>SAC</td>
</tr>
<tr>
<td>System accreditation</td>
<td>Interstate Treaty Specimen Decree</td>
<td>German Federal States</td>
<td>German Accreditation Council (GAC)</td>
</tr>
<tr>
<td>Quality audit</td>
<td>Act on Quality Assurance in Higher Education (HS-QSG) in Austria</td>
<td>AAQ</td>
<td>Commission of AAQ</td>
</tr>
<tr>
<td>Programme accreditation of basic medical education</td>
<td>Medical Professions Act (MPA)</td>
<td>Federal Department of Home Affairs (FDHA)</td>
<td>SAC with consultation of the Commission of Medical Professions</td>
</tr>
<tr>
<td></td>
<td>HEdA</td>
<td>SCHE</td>
<td></td>
</tr>
<tr>
<td>Programme accreditation of education in the health professions</td>
<td>Health Professions Act (HPA)</td>
<td>Federal Department of Home Affairs</td>
<td>SAC</td>
</tr>
<tr>
<td>Evaluation</td>
<td>None</td>
<td>AAQ</td>
<td>Commission of AAQ</td>
</tr>
</tbody>
</table>

Table 1: Overview of AAQ activities by format and legal framework
The procedures of AAQ build on systemic, development-oriented principles. These are derived from ESG and are underpinned by the understanding that the central responsibility for quality and quality assurance lies with the higher education institutions themselves.

**Accreditation under HEdA**

AAQ has a legal mandate under HEdA to conduct regular assessments of whether Swiss higher education institutions (universities, universities of teacher education and universities of applied sciences) have a quality assurance system that allows them to safeguard the quality of their teaching, research and services in the long term and develop them further. To this end, AAQ conducts institutional accreditation procedures in the Swiss higher education sector.

Institutional accreditation gives universities the right to use the designation ‘university’, ‘university of applied sciences’ or ‘university of teacher education’ or the derived designation ‘university institute’ or ‘UAS institute’. Private providers must undergo the same process of accreditation if they wish to use the Swiss-wide system of protected designations.

Institutional accreditation is also a requirement for higher education institutions regulated by public law in order to receive financial contributions from the federal government.

Finally, institutional accreditation provides an entitlement to programme accreditation under HEdA.

The requirements and quality standards for institutional accreditation are defined in the Ordinance of the Higher Education Council on Accreditation within the Higher Education Sector (HEdA Accreditation Ordinance, SR 414.205.3).

Since 2015, AAQ has conducted 42 procedures within this format. 27 of them are ongoing (see the annexed list of procedures).

The verification of the fulfilment of conditions is a separate process and is not included in the institutional accreditation procedure. AAQ has carried out five procedures so far.

AAQ also carries out programme accreditations in Swiss higher education institutions under the same guidelines. Bachelor, Master and postgraduate degree courses with a minimum of 60 ECTS, e.g. Master of Advanced Studies (MAS) or Executive Master of Business Administration (EMBA), can be accredited against HEdA programme accreditation standards. Programme accreditation is voluntary and conditional on the relevant university already having obtained institutional accreditation. No procedures within this format have been conducted so far.

**System accreditation**

In 2009, AAQ (formerly OAQ) was permitted to perform procedures of system accreditation by the German Accreditation Council (GAC). Since 01.01.2018, the Interstate Treaty has been in force. Thus, the accreditation system in Germany has received a new legal basis.
AAQ is still permitted to conduct system accreditation procedures and is responsible for the preparation of the expert report, but the GAC is the new accreditation body.

The rules and criteria for these procedures are defined by the Specimen Decree.

Since 2015, AAQ has completed five system accreditation procedures and two verification of the fulfilment of conditions procedures. Under the new law, the verification of the fulfilment of conditions procedures are no longer conducted by the agencies. Four more system accreditation procedures are currently underway.

Quality audit

Following an enquiry from an Austrian university, AAQ (formerly OAQ) decided in 2012 to offer an institutional quality audit.

The Higher Education Quality Assurance Act (HS-QSG) is the basis for the rules and standards of a quality audit in Austria. EQAR registration is the only condition for recognition of an agency by the Austrian ministry in order to conduct the required institutional quality assessments.

Since 2012, AAQ has completed six quality audits and three procedures for the verification of the fulfilment of conditions; one audit is underway.

Programme accreditation according to the Medical Professions Act (MPA)

Basic medical education (human medicine, dentistry, veterinary medicine, pharmacy and chiropractics) is regulated in Switzerland (Federal Act on University Medical Professions, Medical Professions Act, SR 811.11). Only the graduates of accredited medical degree courses are allowed to access the federal examination for medical professions.

Every seven years, AAQ conducts accreditation procedures of the basic medical degree courses at Swiss universities (Bachelors and Masters degrees). These accreditations take the form of programme accreditations under HEdA, with the HEdA quality standards complemented by specific requirements derived from the Medical Professions Act.

The second cycle took place in 2018-20, of which 13 procedures are completed and one is underway.

Programme accreditation according to the Health Profession Act (HPA)

According to the Federal Act on Health Professions (SR 811.21, Health Professions Act, HPA¹), selected health degree programmes leading to a federally recognised title must be accredited.

Federal titles may be obtained in nursing, physiotherapy, ergotherapy, midwifery, nutrition and dietetics, optometry and osteopathy.

¹ No English version is available. The abbreviation HPA is only used in this SAR.
These accreditations take the form of programme accreditations under HEdA, with the HEdA quality standards complemented by specific requirements derived from the Health Professions Act.

According to Art. 10 of the Health Professions Ordinance, the FDHA specifies the details of the accreditation procedure in line with Arts. 6-9 of the Health Professions Act. The FDHA also issued the quality standards (after hearing from the responsible organisations) and determined that an agency which is recognised by the Accreditation Council should carry out the external evaluation.

The first procedures of this format may start in 2020.

**Evaluation**

AAQ acts on behalf of third parties to provide evaluations based on standards compiled in line with the requirements of the institution or the study programme. The main purpose of an evaluation is quality improvement. Evaluations do not lead to a formal decision and are conducted on a voluntary basis.

Following a successful evaluation, these programmes/institutions are awarded an evaluation label that indicates the year in which the evaluation took place. The evaluation has no period of validity.

The quality standards used by AAQ in the evaluation procedures are existing sets of standards: the quality standards for institutional accreditation pursuant to HEdA, the quality standards for programme accreditation pursuant to HEdA and the standards for the quality audits according to HS-QSG. Depending on the objective, ‘tailor-made’ evaluations can be carried out, according to the wishes of the client.

In the years 2015-2020, AAQ conducted 16 evaluations. Two procedures are ongoing.

AAQ is mandated by federal authorities with two other quality assurance activities outside the scope of the ESG: programme accreditation of postgraduate medical and psychology training. Both activities are outside higher education. The postgraduate medical training leads to the licence to practice a speciality in medicine, the postgraduate training in psychology leads to a licence to practice therapy. Both activities are supervised by the Federal Office of Public Health (FOPH). Although these activities are outside the scope of the ESG and AAQ is mandated with the external evaluation only, AAQ applies the principles and values expressed in the ESG to these procedures, notably expert panels, site visits and the publication of the reports.

→ Annex 2
- List of Procedures
6 Processes and their methodologies

See also section 5 for details according the methodologies of the different formats.

Accreditation under HEdA

In accordance with international practice, the accreditation procedure includes the following phases:

- Filing the application with the Accreditation Council;
- Admission to the institutional accreditation procedure by the Accreditation Council (decision on admission);
- Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
- Self-assessment by the HE institution;
- External assessment by independent experts, including a preliminary visit, an on-site visit and an expert report;
- Accreditation proposal from the agency and position statement given by the HE institution;
- Accreditation decision issued by the Accreditation Council;
- Publication;
- If appropriate, verification of the fulfilment of conditions.

For programme accreditation the procedure differs slightly:

- Filing the application with the agency;
- Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
- Self-assessment by the HE institution;
- External assessment by independent experts, including a preliminary visit, an on-site visit and an expert report;
- Accreditation proposal from the agency and position statement given by the HE institution;
- Accreditation decision issued by the Accreditation Council;
- Publication;
- If appropriate, verification of the fulfilment of conditions.

The detailed description of the process steps can be found in the guide.

- Evidence:
  - AAQ guide institutional accreditation:
  - AAQ guide programme accreditation:
    (guide is only available in DE and FR)
**System accreditation**

- Acquisition/offer;
- Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
- Self-assessment by the HE institution;
- External assessment by independent experts, including a first inspection, a second inspection and an accreditation report;
- Evaluation report from the agency and position statement given by the HE institution;
- Approval of the report by the Commission of AAQ;
- Accreditation decision by the German Accreditation Council (GAC);
- Publication.

The detailed description of the process steps can be found in the guide.

- **Evidence:**

For the procedures in Germany, a sounding board was established in order to support AAQ under the new law to create the procedures innovatively and to develop new process approaches. The board meets once a year.

**Quality audit**

- Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
- Self-assessment by the HE institution;
- External assessment by independent experts, including a preliminary visit, an on-site visit and an expert report;
- Certification proposal from the agency and position statement given by the HE institution;
- Certification decision issued by the Commission of AAQ;
- Publication;
- If appropriate, verification of the fulfilment of conditions.

The detailed description of the process steps can be found in the guide.

- **Evidence:**
    (only in German)

**Programme accreditation according to HEdA and the Medical Professions Act (MPA)**

- Filing the application with the agency;
- Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
- Self-assessment by the HE institution;
• External assessment by independent experts, including an on-site visit and an expert report;
• Accreditation proposal from the agency, position statement given by the HE institution and statement given by the MEBEKO;
• Accreditation decision issued by the Accreditation Council;
• Publication;
• If appropriate, verification of the fulfilment of conditions.

The detailed description of the process steps can be found in the guide.

Evidence:

Programme accreditation according to HEdA and the Health Professions Act (HPA)

• Filing the application with the agency;
• Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
• Self-assessment by the HE institution;
• External assessment by independent experts, including on-site visit and an expert report;
• Accreditation proposal from the agency and position statement given by the HE institution;
• Accreditation decision issued by the Accreditation Council;
• Publication;
• If appropriate, verification of the fulfilment of conditions.

The detailed description of the process steps can be found in the guide.

Evidence:

Evaluation

• Filing the application with the agency
• Planning and initiating the procedure, including signing an agreement between the agency and the HE institution;
• Self-assessment by the HE institution;
• External assessment by independent experts, including an on-site visit and an expert report;
• Evaluation report from the agency and position statement given by the HE institution;
• Approval of the report by the Commission of AAQ;
• Publication.
• Follow-up two years after report approval.

The detailed description of the process steps can be found in the guide.

Evidence:
7 Agency’s internal quality assurance

The agency’s internal quality assurance is one of the four transversal functions. The staff member responsible for this function coordinates all internal quality assurance activities.

AAQ’s understanding of quality and its internal quality assurance system are published in the AAQ paper titled ‘Qualitätsgrundsätze’ (Quality Principles). The paper was discussed and approved by AAQ over the course of 2014. The Commission of AAQ approved the Quality Principles in 2015.

The agency’s priority is to adhere consistently to the quality principles laid down in the quality paper. AAQ sees itself as a learning organisation with a corporate culture marked by respect, mutual support and loyalty. It places the same severe quality demands on the outcomes of its own work and its processes as placed on the procedures conducted at higher education institutions. Competent and motivated employees are of central importance to AAQ.

The AAQ bases its work on the following quality principles:

- The work done by AAQ is efficient, reliable and of high quality. It respects both AAQ’s strategic aims and the legal requirements.
- The outcomes of the work done by AAQ are meaningful and transparent. Thus, the agency gains the trust of external stakeholders.
- External and internal feedback channels, together with external evaluations, underpin quality development in all fields of work covered by AAQ.
- All employees are involved in internal quality development and assurance.
- All procedures are subject to a process of continuous improvement.

AAQ’s internal quality assurance system is illustrated below:
AAQ has a series of tools at its disposal for the implementation of the quality principles:

- Regular internal team meetings attended by all employees. Minutes are taken. A follow-up of all pending tasks is made at the beginning of each meeting.
- A monthly open-format round table to share current work experiences among all team members except the director of AAQ.
- Two thematic meetings a year at which specific topics are discussed in depth (e.g. quality of reports, interpretation of standards, etc.).
- Strategic meetings in which employees hold talks with the director, do preliminary work on policy documents or confer on the development of the agency before a full team discussion.
- Bilateral staff/director evaluation discussions that are used to agree targets, reflect and give feedback on individual work structuring.
- Collection of feedback from the experts involved in procedures. Feedback is evaluated and discussed within the agency.
- Feedback from the questionnaire completed by the higher education institutions at the end of each procedure, evaluated within the agency.
- AAQ gives details of the impact of internal quality development and assurance in the annual reports, the online newsletter 'aaq Informs' and the synthesis reports.
- AAQ is part of national and international networks. Its mechanisms for quality development and assurance are discussed within relevant expertise groups, thus ensuring continuous improvement.
- AAQ maintains an organisation handbook on the intranet, which defines the processes to assure the quality of the procedural formats and the transversal functions of the AAQ, and refers to standardised templates.

Furthermore, AAQ has established and published a code of conduct, which is applicable to all processes.

Finally, the Commission of AAQ functions as the supervisory body of AAQ and oversees the composition of expert groups and the quality of all reports.

As an active member of the former iQA working group of ENQA, AAQ was able to benchmark its internal quality assurance system against that of other agencies in ENQA and profit from the exchange of good practices, debates, workshops and seminars.

The current internal quality assurance system has been developed according to European good practices and is adapted constantly. All formal aspects have been improved over the last few years. A controlling and monitoring system (internal control system IKS) for all aspects covering human resources, the budget and financial statements (Jahresrechnung) has been developed and introduced since 2018.
Internal control system

As explained, AAQ started to implement the web-based QM-Pilot (Figure 5) in 2018. The QM-Pilot is a process, document and risk management system. First introduced to describe back-office duties, it progressively replaced the Organisationshandbuch (organisation handbook) to master all internal processes in the agency as well as the procedures of the different formats (methodologies).

All processes of the different formats are separately described and linked with corresponding templates, other documents and risks. The processes and risks are in German, while the templates are in all languages that are used in the respective format.

Internal communication and the improvement of the information exchanged at regular meetings, including the establishment of detailed protocols, help assure efficiency and clarity. This is particularly relevant for an organisation with a high number of part-time employees. Regular review of the purpose of internal communication and tools to consolidate procedural improvements are in place.

- Evidence:

8 Agency’s international activities

AAQ is committed to international networking and it is part of its strategy. This also fulfils its legal mandate (Art. 32 HEdA). It works closely with other European accreditation and quality assurance agencies and is an active member of European and international networks (ENQA, EQAR – and DEQAR, INQAAHE, ENAEE, Réseau Francophone des agences qualité pour l‘enseignement supérieur – FrAQ-Sup, Quality Audit Network – QAN, AACSB). This guarantees that the quality assessments conducted by AAQ meet both national and international standards and can be adapted to reflect the latest developments. AAQ has been a full member of ENQA since 2006 (with a board representation since 2013) and has been listed in the EQAR register since 2012. AAQ is founding member of FrAQ-Sup (2016) and QAN (2007).

Since 2009, the agency has conducted system accreditations in Germany, currently based on the Interstate Treaty between the German federal states accompanied by the related Specimen Decree. Since 2012, AAQ is entitled as an EQAR-registered agency to conduct quality audits in accordance with the Act on Quality Assurance in Higher
Education (Hochschul-Qualitätssicherungsgesetz - HS-QSG) in Austria. In addition to these frameworks, the AAQ may conduct tailored-made evaluation procedures on a voluntary basis at national and international level, with no legal consequences, as these procedures are essentially improvement oriented.

The work abroad, mainly in neighbouring countries, fulfils part of AAQ's legal mandate, i.e. the conduct of procedures at international level. In Germany, the agency is able to gain experience from the particularities of a different accreditation system; in Austria, it has the opportunity to apply the previous Swiss quality audit model to a different higher education system. The number of procedures the AAQ is able to conduct abroad is globally very low, due to its limited capacity and the priority always given to its national legal mandates.

International cooperation is an area from which all AAQ staff can benefit in terms of mutual learning or networking. In 2018, one AAQ project manager took part in a staff development programme organised by ENQA, and so did two project managers in 2019. All specialised staff have the opportunity to attend relevant conferences and workshops mainly in Europe, with an average of 2 events per staff member per year.

Whenever a topic of current AAQ interest is treated in international working groups, one AAQ staff member has always represented the agency, actively contributing to the outcomes of the group. Currently, the agency is active in only one group, coordinated by ENQA, the topic being 'Staff-development', all other groups having achieved their objectives.

The AAQ can also be partner in international projects. It is currently directly involved in the project ‘Developing a European Approach for Comprehensive QA of (European) University Networks’ (EUniQ) coordinated by the Accreditation Organisation of the Netherlands and Flanders (NVAO). The project is funded by the Erasmus+ Programme Key Action 3 – Support to Policy Reform. It aims at testing a crossborder European quality assurance framework in pilot procedures, with the newly established European universities as the object.

9 Compliance with European Standards and Guidelines (Part 3)

9.1 ESG Standard 3.1 Activities, policy and processes for quality assurance

- Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

External quality assurance activities

AAQ is a cross-sector accreditation agency. In keeping with its values, in particular the respect for the autonomy of higher education institutions, AAQ devises its accreditation procedures to ensure that it acts as an external partner for higher education institutions in the design of their quality assurance systems, thus making a contribution to the development of a quality culture. The agency’s work and networking at international level guarantee the quality of services and build up trust among higher education institutions.
The duties and activities of AAQ are wide ranging. The HEdA entrusts AAQ with the implementation of procedures for institutional accreditation and programme accreditation pursuant to HEdA (Art. 32). The programme accreditations also include procedures in basic medical education (HEdA and MePA) and health profession education (HEdA and HPA). In addition, AAQ is entitled to accept assignments from third parties if it has the capacity to do so (Art. 7 ZSAV-HS). AAQ currently acts on behalf of third parties to conduct programme accreditations in postgraduate medical training (out of the scope of ESG) and postgraduate psychology training (out of the scope of ESG), evaluations, certification of the internal university quality management systems in the form of quality audits (in Austria) and system accreditations (in Germany).

Detailed descriptions of these procedures can be found in sections 5 and 6.

Goals and objectives

The mission statement is published on AAQ’s website and is part of the strategy of AAQ. An action plan translates the strategy into everyday operation.

AAQ prolonged its strategy for the period 2016-2019 to 2020 in order to get in sync with the federal planning cycle. The following information relates to the 2016-2020 strategy. The strategy 2021-2024 is in preparation.

AAQ's strategy is published on its website in four languages (German, French, Italian and English). It formulates AAQ’s mission, vision, values and aims.

- Evidences:
  - AAQ strategy on its website: https://aaq.ch/en/the-aaq/strategy/

As an external partner, it is the mission of AAQ to support Swiss higher education institutions in the development of their quality assurance system, notably by means of institutional accreditation. In close partnership with the Swiss Accreditation Council, its supervisory body, it thereby contributes to the growth of a quality culture in the Swiss academic community and to the reinforcement of the Swiss higher education sector. The national and international engagement of AAQ ensures the quality of the services provided and underpins international trust in the Swiss higher education system. Through its quality assurance activities in neighbouring countries and beyond, AAQ supports the aims of the European Higher Education Area as well as the spread of its values in other countries.

In its vision, the AAQ label is a guarantee of quality recognised by all partners and interest groups, both in Switzerland and abroad; it contributes to quality development in higher education. With its expertise and analyses, AAQ counts for much in the national and international debates about new challenges related to quality assurance.

The two fundamental values are:

- Respect for the autonomy of higher education institutions and for the diversity of disciplines and institutions;
- Commitment to Swiss multiculturalism and linguistic diversity.

In addition, AAQ pursues the following principles:

- Focus on the ‘quality enhancement’ approach in external quality assurance procedures and to its added value for the higher education institutions;
- Constant attention to the quality of the procedures with a special consideration for transparency and communication;
• Commitment to the mutual exchange of expertise and to the international benchmarking within and beyond the European Higher Education Area;
• Dedication to the competency, professionalism, integrity and independence of AAQ staff and experts;
• Continuous self-reflection and development as an organisation.

The aims of the agency can be defined as follows:
• Maintain the privileged position of the AAQ in external quality assurance for Swiss higher education institutions and its active role in neighbouring countries;
• Facilitate the participation of interest groups and regular communication with them;
• Maintain the quality of the experts through a rigorous selection and to guarantee the relevance of their contribution through AAQ support;
• Facilitate the development of the AAQ’s internal quality assurance system, paying particular attention to staff development.

Translation of objectives into the daily work

How AAQ translates its goals and objectives is presented in section 10.2 (Designing methodologies) and 10.3 (Implementing of processes).

Involvement of stakeholders in governance and daily operation

Section 10.2. provides a description of how AAQ involves its stakeholders in governance and daily work from the perspective of designing processes; this is equally applicable to the implementation of the processes.

Involvement of stakeholders through a newsletter

A newsletter is a traditional form of one-way communication. ‘aaq Informs’ addresses all stakeholder groups equally, i.e. it covers a broad range of subjects: the newsletter informs about current developments, gives room for stakeholders to present their point of view and informs about the outcome of AAQ activities.

Due to sustainability and faster communication, AAQ decided to change the manner in which the newsletter is communicated. The newsletter ‘aaq Informs’ is no longer published in print, but it is distributed electronically.

Experience of the past few years shows that this instrument of communication is well suited to maintaining relations with stakeholders. In particular, the newsletter helps to maintain a relation with former experts; the newsletter can keep them interested in external quality assurance in general and the agency in particular.

Involvement of stakeholders through a conference

In 2016, AAQ started to organise a national conference in Bern, which takes place every two years (AAQ Institutional Accreditation Day). The aim of this conference is to improve the exchange with stakeholders, mainly those interested in institutional accreditation. The theme of the conference in 2016 was communication, in 2018 the discussed topic was participation. For 2020, the conference is still in preparation.

Evidences:
• AAQ Day: https://aaq.ch/en/category/events/
• Meeting with experts and HEI representatives are presented in section 10.2
• Annual report is presented in section 9.5
Further developments

In 2019, the AAQ director mandated an internal working group to consider revising the mission statement and the vision of the agency in order to prepare the AAQ strategy 2021-2024 and a related action plan for the same period.

9.2 ESG Standard 3.2 Official status

→ **Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.**

AAQ is introduced in the HEdA (Art. 22) and established in the Cooperation Agreement as a public law institution without legal entity (legally dependant), subsidised by the SCHE. The agency is subject to federal law, in particular with respect to HR and finances (e.g. annual audit of accounts by the Swiss Federal Audit Office (SFAO)).

9.3 ESG Standard 3.3 Independence

→ **Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.**

Organisational independence

The HEdA places AAQ under the supervision of the legally independent SAC. Through its Organisation Regulations (OReg-AAQ), the SAC reaffirms the operational independence of AAQ in Art. 2: ‘The Accreditation Agency is professionally independent from the Federal Administration, from the cantons and from higher education institutions and other institutions within the higher education sector. The Swiss Accreditation Agency is a legally dependent institution and is supervised by the independent Swiss Accreditation Council (Art. 22 para. 2 HEdA), to which it is solely accountable.’

The SAC further underlines the operational independence of AAQ by focusing its supervision on three aspects: the nomination of the director, the annual budget and financial statements and the strategy (OReg-SAC, Art. 15).

Operational independence

Whereas the director is nominated by the Swiss Accreditation Council, the bylaws delegate all operational power to the director. The director defines the strategy, proposes a budget, hires staff, plans the procedures and takes responsibility for the procedural independence at all stages. Up to the delivery of reports of all external quality assurance activity to the relevant decision-making instance, the AAQ acts autonomously without influence from third parties. Procedural implementation is explained in detail in section 10.3.

AAQ nominates and appoints external experts independently from third parties. The procedure of nomination and appointment of experts is described in chapter 10.4.

Independence of formal outcomes

The director of the agency takes responsibility for all proposals of accreditation based on the expert report. This is applicable for all AAQ activities.
Evidence:

Extracts from the OReg-AAQ:
- Art. 2 OReg-AAQ: The Accreditation Agency is professionally independent from the Federal Administration, from the cantons and from higher education institutions and other institutions within the higher education sector. The Swiss Accreditation Agency is a legally dependent institution and is supervised by the independent Swiss Accreditation Council (Accreditation Council) under Art. 22 para. 2 HEdA to which it is solely accountable.
- Art. 7 OReg-AAQ:
  - (b.) Handling the groundwork for decisions of the Accreditation Council for accreditation procedures set forth in HEdA and submitting accreditation requests to the Accreditation Council.
  - (c.) Handling the groundwork for third-party mandates and preparing the decisions of the Accreditation Agency.

Extracts from the OReg-SAC:
- Art. 15 para. 1:
  - (d.) [The Accreditation Council] may establish a Commission of AAQ as the decision-making authority of the Accreditation Agency in procedures on behalf of third parties and as an authority of internal quality assurance in all procedures of the Accreditation Agency.
- Art. 15 para. 2: As the Commission of the AAQ, the Accreditation Council performs the following tasks in particular:
  - (a.) It assures that the procedures of the Accreditation Agency carried out on behalf of third parties comply with the international standards for accreditation and quality assurance.
  - (b.) It adopts the quality standards and guidelines of procedures of the Accreditation Agency on behalf of third parties.
  - (c.) It adopts the review panels in the procedures of the Accreditation Agency.
  - (d.) It decides on procedures of the Accreditation Agency on behalf of third parties [...].

Extracts from the HEdA:
- Art. 21 HEdA: (1) The Swiss Accreditation Council comprises 15-20 independent members; [...] (4) It is independent. (5) It organises itself. It issues its own Organisational Regulations [...]. (6) The Swiss Accreditation Council manages its own budget and the budget of the Swiss Accreditation Agency; each maintain their own accounting records. [...] (8) At the request of the Director of the Swiss Accreditation Agency, it issues Organisational Regulations for the Swiss Accreditation Agency; these Organisational Regulations require approval by the Higher Education Council.
- Art. 32 HEdA: The Swiss Accreditation Agency and other accreditation agencies recognised by the Swiss Accreditation Council shall carry out the accreditation procedure according to this Act and under the terms of the Cooperation Agreement. The accreditation procedure must meet international standards.
- Art. 33 HEdA: Referring to the request submitted by the Swiss Accreditation Agency [...], the Swiss Accreditation Council shall decide on institutional accreditation and programme accreditation.
- Art. 35 HEdA: The Swiss Accreditation Council and the Swiss Accreditation Agency shall charge general cost-covering fees for their decisions and services.
- Art. 13 of the HEdA Accreditation Ordinance: (3) [...] Experts must be independent and impartial.
The subordination of AAQ to the SAC, the latter being a fully independent body, serves the accountability of AAQ activities. Structurally, operational independence is assured at all levels of the organisation and for all AAQ activities, with a key quality assurance role played by the Commission of AAQ.

Temporarily, due to the early retirement of the SAC office manager, this function is assigned ad interim to an AAQ coordinator of external QA procedures. This temporary solution could fill the gap and assure the continuity of the functioning of the AAQ and the SAC duties. However, it is far from ideal and a sustainable solution is being considered, outsourcing this function entirely. This would also assure fairness towards all other agencies recognized by the SAC for undertaking procedures in Switzerland based on HEdA.

The independence of experts is a cornerstone of the entire system, as is the total impartiality of the decision-making body, both of which are assured by legislative acts and demonstrated by AAQ’s tools and activities.

Further developments

The SAC and the Commission of AAQ have clearly distinguished roles. However, for the time being, the SAC has decided not to nominate members of this commission but to assume responsibility for the tasks of the Commission of AAQ, as explained in section 3.3. In order to maximise their roles and potential, it would be recommendable for the Swiss authorities to review this element, although it has no influence on the AAQ independence of AAQ, guaranteed at all levels and steps of its organisation and operations.

9.4 ESG Standard 3.4 Thematic analysis

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

Following the recommendation of the last ENQA review, AAQ further developed its thematic analyses and reports. A specific research subject came up when analysing the 2013-2014 quality audit cycle conducted in Swiss universities. The research project concerned the dynamic of the discussion between expert panels and HEI members during the on-site visit. The question was addressed through discourse analysis, led by investigating three on-site visits held in 2015 and 2016, as a cooperation project with an external partner (Applied Linguistics, ZHAW).

Thematic analyses on system accreditation in Germany, evaluations between 2011-2014, strengths of quality assurance at HEIs in Switzerland and a synthesis report on the accreditation cycle of postgraduate medical education programmes pursuant to MPA have been published by AAQ. The analysis of evaluations 2011-2014 made a particular focus on quality standards concerning participation in decision-making processes with respect to continuing education.

It is a long-standing practice of the agency to reflect on a finished cycle in a synthesis report. These reports enable the agency to account for the activities within that cycle to the governing body that mandated the cycle.

These reports are also an element of the internal quality assurance system of the agency. They reflect on methodological aspects of the cycle, include feedback from all stakeholders and make suggestions for the development of the methodology.

The findings of each accreditation cycle are based on different sources, one being the results of the feedback questionnaires designed for and completed by all parties involved in external QA procedures. Online links to questionnaires are sent to units
under assessment and to expert panels at the end of each single procedure. Anonymity is assured in the treatment of responses. The response rate is estimated at about 75% on average.

The synthesis reports further sum up the results of a cycle. However, the external quality assurance processes at the institutional level are not designed to allow comparisons between institutions.

- **Evidences:**
  - All reports and analyses are published on AAQ’s website.

### Further developments

AAQ will further exploit the opportunity to gain insight into the higher education system from the specific angle of a QA agency, broadening the thematic breadth of ongoing analyses on this issue.

#### 9.5 ESG Standard 3.5 Resources

> **Agencies should have adequate and appropriate resources, both human and financial, to carry out their work**

AAQ employs 14 people (10.5 full-time equivalent). The composition of the team is characterised by diverse academic backgrounds, with employees from a number of different regions. Three official languages of Switzerland are represented in the team. AAQ has three personnel categories: direction, project managers for external quality assurance and administrative staff. In order to support the team occasionally, a new project was started to employ student assistants (currently one post at 20%).

One AAQ staff member is nominated by the director to act as the office manager of the Swiss Accreditation Council. Until June 2019, the director had assigned a staff member without any other responsibilities, i.e. without responsibilities to coordinate procedures of external quality assurance, in order to protect the integrity of AAQ’s procedures. After this person left for early retirement, AAQ and SAC have agreed to explore other options to organise the secretariat, e.g. an outsourced secretariat monitored by the director of AAQ. In order not to create a position within AAQ that would then have to be suspended within a short time, the director assigned the temporary responsibility to a staff member also active as a coordinator of procedures until a new solution for the secretariat of the SAC is found.

The staff recruitment practices duly ensure that external quality assurance project managers and administrative personnel have the required expertise. The tasks of the employees are specified in the individual job profile. Performance evaluations with the director, regular team meetings and training courses are designed to develop skills. As one objective of the strategy 2016-2020, AAQ paid particular attention to staff development. Needs and opportunities for training and knowledge are regularly explored through the annual ‘Personalentwicklungsbesprechungen’ (PEG, staff development talks) and the individual target agreements. However, no comprehensive analysis of gaps in the team skills is available.

The salaries and HR regulations are determined by federal regulations. Federal conditions for employees apply.

Working conditions are particularly favourable for employees and their families with flexible working hours based on an annual number of hours to be worked and home-office possibilities, and thus have a positive impact on staff stability and accountability.
In addition, employees attend conferences – both national and international – and organise workshops and events. An annual budget makes further training available to staff members.

Based on a team training in occupational medicine in 2019, a working group was set up with the aim of making the daily working life healthier and more efficient. The group has taken care of many small improvements and it organised a one-day workshop in business health in January 2020.

The office premises are situated in Berne just a few minutes’ walk from the main railway station. The open-space office covers an area of about 180 m² and is equipped with a modern infrastructure.

The agency has its own protected data network with related servers (database ProKon). AAQ regularly applies internet-based tools, such as file storage in the cloud as well as software for accounting and controlling purposes. All employees have a personal computer. The agency’s other facilities include a project table with flat screen for presentations, several meeting rooms for conferences and workshops, a small library and an archive.

The agency receives public funding in the amount of CHF 2 million annually, with the Federation and the cantons each contributing half. In addition to this budget, the agency generates income from assignments on behalf of third parties (system accreditations, quality audit, evaluations, and procedures outside the scope of the ESG). The agency is required to charge cost-covering fees for all these activities (Art. 35 paragraph 1 HEdA). This additional income varies a lot, because the distribution of assignments of third parties over time is very irregular. It accounted for about 20% of total earnings in 2018, and was 46% in 2017! In other years, fees from third parties contributed 27% of total earnings in 2016 and 15% in 2015.

The changing numbers in income generated by fees reflects the changes in the activities from year to year. However, the CHF 2 million allocated by the Federation and the cantons cover all costs of staff and infrastructure. As AAQ is a publicly funded agency, all extra income (surplus) will go back to the Federation and cantons at the end of the year.

A huge challenge in terms of resources is the fact that Federal Personnel Act creates favourably stable conditions for staff, but less flexibility to react to peaks of activities due to the fact that HEI and third parties decide autonomously when to apply for accreditation. As a publicly funded agency, AAQ cannot and will not decline an application for accreditation. In order to make for more even allocation of resources, AAQ has taken steps to involve other agencies, especially in those procedures generating a peak in workload. To achieve this, as of July 2020, all recognised agencies are allowed to charge the same price for all programme accreditation procedures in Switzerland, according to HEdA, MPA and HPA.

- Evidences:

Further developments

According to AAQ’s self-assessment, integrity of its procedures is not secured as long as the office manager of the SAC is also active as a coordinator of procedures. The AAQ director, conscious of the limits of this temporary solution, is exploring options to separate the office management of the SAC from the AAQ business.
E-mail is the main communication channel when working with expert panels. In the future, AAQ will test protected environments in order to secure the exchange of arguments and documentation with experts and institutions.

Peaks in workload are experienced for different reasons. In addition to involve recognised agencies in external evaluation procedures in Switzerland, AAQ is looking for other ways to improve planning of its activities and human resources management when facing heavy workload in some sectors of activity.

9.6 ESG Standard 3.6 Internal quality assurance and professional conduct

 Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

See section 7 for a detailed description of the internal quality assurance system.

Development of the internal quality assurance system since 2015

As recommended in the last ENQA review, the internal quality assurance system was developed further into a cross-format quality assurance system. With the QM-Pilot, a structured revision of all processes was made possible. Every format responsible gets a reminder at least once a year to revise the processes and documents for which she or he administrates. The QM-Pilot is a process-, document- and risk management tool. Until now, the risks are only implemented to a certain extent. This part will be further developed.

The QM-Pilot works very well in addition to the project management database (ProKon) that is used for the planning and documentation of each procedure. ProKon was extended in 2018 with a finance tool for the documentation of the budget of each project (procedure), the monitoring of internal costs and issuing invoices. In order to improve the search for experts, the expert pool in ProKon was extended and updated.

AAQ announced in the review of 2016 that it would enhance the performance of the internal data network to speed up processes and reduce the risk of errors. In 2019, the internal data network was replaced with the cloud-based data management tool SharePoint (Microsoft Office 365) to improve data availability and collaboration.

Code of conduct

A code of conduct is applied in every procedure in order to assure that all persons involved in a procedure are competent and act professionally and ethically. The code of conduct can be found in the guides for the different formats that are published on AAQ’s website.

- Evidences:

Additional feedback from the stakeholders

AAQ started to host round tables in 2018 to get direct feedback from the stakeholders. In 2018, it conducted a feedback workshop for experts, which was extended in 2020 to also include the HEI partners. This is an especially valuable way of getting direct feedback and will be continued.
Further developments

The feedback sessions will be continued and shall include experts and HEI partners from all formats. An in-depth review of the different feedback forms used for continuing improvement is underway (see section 10.2 of this report).

Considering the new feedback forms, the introduction of QM-Pilot and the specific role of the Commission of AAQ as supervisory body, the AAQ director decided to revise the internal quality assurance system. A working group directed by the holder of the transversal function ‘internal quality assurance’ has been charged to prepare a proposal by autumn 2020.

9.7 ESG Standard 3.7 Cyclical external review of agencies

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG

The agency has undergone four external reviews since the beginning of its activities in 2001 (previously known as OAQ, then renamed AAQ since 2015 with the entry into force of the HEdA) and is undergoing its 5th external review in order to demonstrate that it continues to adhere to the principles enshrined in the ESG.

<table>
<thead>
<tr>
<th>Cycle</th>
<th>Year</th>
<th>Type of review</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st round</td>
<td>2006</td>
<td>Two-fold review</td>
<td>Internal national review mandated by the Swiss University Conference</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>ENQA review: eligibility for ENQA membership</td>
</tr>
<tr>
<td>2nd round</td>
<td>2009</td>
<td>Review by the German Accreditation Council (GAC)</td>
<td>Authorisation for undertaking accreditation in Germany</td>
</tr>
<tr>
<td></td>
<td>2011</td>
<td>Review against the ESG</td>
<td>Renewal of ENQA membership and admission to EQAR</td>
</tr>
<tr>
<td>3rd round</td>
<td>2016</td>
<td>Multi-purpose review</td>
<td>Renewal of ENQA membership, renewal of admission to EQAR, renewal of GAC authorisation</td>
</tr>
<tr>
<td>4th round</td>
<td>2021</td>
<td>Review against the ESG</td>
<td>Renewal of ENQA membership, renewal of admission to EQAR</td>
</tr>
</tbody>
</table>

Table 2: Agency review cycles

Further developments

ENQA is giving the opportunity to benefit from a progress visit to reviewed agencies two years after the board decision. The AAQ considers this as a chance to speed up some improvement processes that may be recommended at the conclusion of the review.
10 Compliance with European Standards and Guidelines (Part 2)

10.1 ESG Standard 2.1 Consideration of internal quality assurance

-> External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.

Self-assessment

Within the Swiss higher education landscape, the approach in external assessments has always been based on institutional responsibility for quality assurance.

Accordingly, Swiss universities have never been subject to programme accreditation, with the exception of study programmes giving access to regulated professions. Before the introduction of HEdA in 2015, universities were audited every five years, assessing their internal quality assurance system.

Universities of applied sciences, which were established in the 1990s, had to undergo accreditation of their programmes until the introduction of HEdA; also, these procedures were based on the principle of institutional responsibility for quality assurance.

Therefore, Swiss HEIs could to some extent see a continuity with the introduction of the HEdA later in 2015. HEdA introduces the obligation of institutional accreditation for all HEIs and postulates their responsibility for quality assurance (Art. 30 HEdA). With regard to quality assurance, the HEdA continues the path established by the previous paradigm: the internal quality assurance system of HEIs and its effectiveness are at the centre of institutional accreditation. The same applies to programme accreditation according to HEdA, which remains voluntary, except for MPA and HPA accreditation (regulated professions), where it is obligatory, with the addition of a specific discipline-oriented set of standards.

Institutional accreditation HEdA

The quality standards for institutional accreditation according to HEdA were adopted by the Swiss Conference of Higher Education (SCHE). Although AAQ has no formal competence in the definition of these standards, the SCHE mandated AAQ to draft a proposal together with all relevant stakeholders. Through this process, AAQ was able to safeguard ESG, including ESG 2.1.

The quality standards used for the institutional accreditation according to HEdA focus on the internal quality assurance system and address the elements anchored in HEdA itself – teaching, research, service provision and staff, admission requirements, management, participatory rights, equal opportunities and gender equality, economic, social and environmental sustainability, fulfilment of the mandate and resources – and in ESG Part 1.

AAQ provides a guide that supports HEIs and experts alike in the self or external evaluation process. This guide includes an explanation of all quality standards, which serves to assist all stakeholders in the homogeneous interpretation of standards and ensures a common understanding (same principle as ESG guidelines). The explanation gives an idea of the various aspects that can be taken into account during the evaluation of standards and of the evidence-based documentation to be provided and analysed.
The quality standards for institutional accreditation according to HEaD are structured around five areas: quality assurance strategy, governance, teaching, research and service provision, resources, and internal and external communication.

As shown in the annex, a mapping of HEaD standards against the ESG demonstrates how AAQ fulfills ESG 2.1. With the exception of ESG 1.2, which is reflected only implicitly in HEaD standards, and ESG 1.3, which is reflected mainly in the ‘explanations’ to HEaD standards, ESG Part 1 is built into HEaD standards.

The weak focus of HEaD standards on the design and approval of programmes (ESG 1.2) is directly linked to the institutional focus. ESG 1.2 is explicitly present in HEaD standards for programme accreditation. On the other hand, HEaD standard 3.3 and its explanation encompasses the consideration of the ESGs, through the respect of the principles and objectives linked to the EHEA. A direct reference to ESG 1.2 is provided in the ‘explanations’.

The overall design of institutional accreditation is a direct response to ESG 1.10: it is mandatory and cyclical. HEaD standards underline the need for a periodic analysis of the relevance of the quality assurance system at HEIs.

Programme accreditation HEaD

The quality standards for programme accreditation according to HEaD were adopted by SCHE based on a proposal made by AAQ together with all relevant stakeholders.

As shown above, the standards of the compulsory institutional accreditation encompass ESG Part 1 to a very large degree. Institutional accreditation is a prerequisite for programme accreditation according to HEaD, the latter being a voluntary procedure.

The quality standards for study programmes concentrate therefore on the proper application of the institutional quality assurance system at the programme level. As shown in the annex, the mapping of ESG standards on to HEaD quality standards for programme accreditation demonstrates that the Swiss procedure allows assessment of programmes according to ESG standards 1.1-1.10.

Programmes in the health professions based on HPA (in addition to HEaD) are accredited against the HEaD programme accreditation standards, where a specific discipline-oriented set of standards has been added. Based on the analysis above, these programmes are therefore assessed assuring ESG standards 1.1-1.10 are addressed.

The same applies to the accreditation of programmes for basic medical education based on MPA (in addition to HEaD).

System accreditation

The criteria for system accreditation are defined by the Interstate Treaty between the German federal states accompanied by the related Specimen Decree.

The GAC, which is the decision-making instance for accreditations within this legal framework, has made a mapping between the standards in force for system accreditation and ESG Part 1, as shown in the annex. None of the agencies authorised by GAC to conduct the external evaluations within the system accreditation procedures based on German law have authority on the legal framework and on the applied quality criteria.
Quality audit in Austria

The procedure is based on the former Swiss audit system, which was based on ESG (2005) Part 1. In 2018, AAQ revised the quality standards in order to achieve conformity with the revised Higher Education Quality Assurance Act (HS-QSG) and the revised ESG.

As shown in the annex, the mapping of ESG standards with standards for institutional quality audit in Austria demonstrates that the procedure allows assessment of institutions according to ESG standards 1.1-1.10, with the exception of ESG standard 1.3 on student-centred learning. None of the quality audit standards refers to student-centred learning or the encouragement of students to take an active role in the learning process.

Assessment of students is referred to under standard 2.2 (processes for the assessment of student performance shall be periodically reviewed). However, this standard does not directly mention the role and participation of students in the creation of the learning process. The HS-QSG does not provide a sufficient legal basis for such a quality standard. Moreover, stakeholders noted that the quality standards of AAQ were too detailed.

<table>
<thead>
<tr>
<th>ESG Part 1</th>
<th>Institutional accreditation HEdA</th>
<th>Programme accreditation HEdA (subject to institutional accreditation)</th>
<th>Quality audit HS-QSG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard 1.1</td>
<td>Standards 1.1, 1.2, 1.3, 2.3 and 5.1</td>
<td>Standards 4.1, 4.4</td>
<td>Standards 1.1, 1.3, 5.1 and 5.2</td>
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<tr>
<td>Standard 1.2</td>
<td>Indirectly Standards 3.1 and 5.2 Explanations of Standard 3.3</td>
<td>Standards 1.1, 1.2, 2.1, 2.2</td>
<td>Standards 1.4, 2.1, 5.1 and 5.3</td>
</tr>
<tr>
<td>Standard 1.3</td>
<td>Explanations of Standard 3.2</td>
<td>Standard 2.3</td>
<td>Standard 2.2</td>
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<td>Standard 1.4</td>
<td>Standard 3.4</td>
<td>Standard 2.3</td>
<td>Standard 5.1 and 5.3</td>
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<td>Standard 1.5</td>
<td>Standards 4.2 and 4.3</td>
<td>Standard 3.3</td>
<td>Standards 4.1, 4.2 and 4.3</td>
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<td>Standard 3.2</td>
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<td>Standard 2.2</td>
<td>Standard 4.2</td>
<td>Standard 1.4</td>
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<td>Standard 5.2</td>
<td>Inst. standard 5.2</td>
<td>Standard 5.3</td>
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<td>Standard 1.9</td>
<td>Standards 3.2 and 5.1</td>
<td>Standards 2.2, 3.1, 4.1</td>
<td>Standards 2.1 and 5.2</td>
</tr>
<tr>
<td>Standard 1.10</td>
<td>Standard 1.4</td>
<td>Inst. standard 1.4</td>
<td>Standard 1.3</td>
</tr>
</tbody>
</table>

Table 3: AAQ assessment standards: approximate correspondence grid with ESG Part 1
Evaluation

Evaluations are carried out on a voluntary basis and lead to the delivery of the AAQ-evaluated label, indicating the year in which the evaluation took place. No validity period applies. They build on the rules and standards of regulated formats with the necessary adaptations to support the development of the institution or programme. Evaluations are conceived to be context sensitive and always fit for the purpose. An HEI unit can ask to be evaluated against an existing set of standards, which can be adapted to individual needs ad hoc. Evaluations therefore build on other quality standards used in AAQ assessments, such as institutional accreditation, programme accreditation and quality audits. As these quality standards are in compliance with ESG, so are the evaluations run by AAQ. This is clearly stated in the guide.

- Evidence:
  - Quality standards for accreditation under HEdA, MPA, HPA and quality audit, as well as information on evaluation, are included in the respective guides: https://aaq.ch/en/accreditation/guidelines-quality-standards/
  - Annexes 3-6
    - Mapping of Quality Standards HEdA for institutional accreditation against ESG Part 1
    - Mapping of Quality Standards HEdA for programme accreditation against ESG Part 1
    - Mapping of AAQ quality audit standards against ESG Part 1
    - Mapping of System accreditation standards against ESG Part 1 (GAC document)

Further developments

Even though ESG Part 1 is built into all the procedures conducted by AAQ, ESG 1.2 (design of programmes) is not referred to directly in the quality standards for the institutional assessments conducted by AAQ. ESG standard 1.3 (student-centred learning) might be referred to more directly than it currently is. These aspects should be taken into account more closely in all future revisions of standards and instruments where AAQ is involved.

Awareness of the ESGs has been raised among AAQ stakeholders very effectively in institutional and programme accreditation based on HEdA with the explicit references made in the AAQ guide, under the explanation of the single quality standards. This model may be considered for other AAQ activities. More explicit ESG dissemination is made at the biannual ‘AAQ Institutional Accreditation Day’, where ESG in different languages are made available to all participants, coming mainly from Swiss HEIs. According to the topic of the event, a clear reference to the relevant ESG(s) is made by speakers or referees. This will be continued in the future.
10.2 ESG Standard 2.2 Designing methodologies fit for purpose

External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

Stakeholder involvement through the Swiss Accreditation Council

As the accreditation body under the HEdA and supervisory body of AAQ, the Swiss Accreditation Council (SAC) is responsible for the quality assurance of the procedures and rulings. Its members must by law (Art. 21 para. 1 HedA) represent all stakeholders, in particular higher education institutions, the working environment, students, mid-level faculty staff and teaching staff. Teaching and research departments at HEIs are fairly represented.

As the supervisory body of the agency, the Commission of AAQ is involved in the design and continuous improvement of the external quality assurance activities undertaken by the agency. Draft projects and concepts are presented, discussed and, if needed, improved before being implemented. Feedback and results of synthesis reports are also brought to its attention in order to discuss and plan measures for improvement. The main function of the Commission of AAQ is to continuously assure the fitness for purpose of all AAQ activities, as defined in the organisational regulations.

As all relevant stakeholder groups are represented on the SAC by law, and therefore on the Commission of AAQ as well, several mechanisms of internal quality assurance guarantee the involvement of stakeholders on a basic level (see section 7 in this report).

The Commission of AAQ

- adopts all expert panels of all formats;
- adopts all reports before they go to the decision-making bodies;
- adopts all instruments prepared by AAQ;
- adopts all synthesis reports.

Involvement of students

The Swiss agency has a long-standing tradition of involving students in its processes. Ten years ago, AAQ institutionalised cooperation with the Swiss Student Union (VSS) to search for and prepare student experts for the procedures. VSS and AAQ meet regularly in order to analyse and improve student involvement in accreditation procedures. Recently, VSS added tools to better meet the expectations of student experts and institutions and to improve possibilities to give feedback. Compulsory preparation of student experts is offered twice a year, and it is planned to expand it with a specific course for French-speaking candidates.

Meetings with experts and HEI representatives

Three years after the start of institutional accreditation, late in 2018, AAQ organised a meeting with experts mandated in the past procedures. The discussions held there allowed the briefing of expert groups in the forthcoming procedures to be improved. In February 2020, two meetings, one with HEI representatives and another with mandated experts, again took place in our office. Specific issues of institutional accreditation were discussed, namely on the role of external

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2 Synthesis reports are used to review finished cycles in order to adapt the format.
experts, the interpretation of quality standards, practical aspects of the procedures and communication among all participants.

**Stakeholder involvement through outreach initiatives**

In 2016, AAQ started to organise the AAQ Institutional Accreditation Day on a biannual basis, giving room to discuss quality issues regarding institutional accreditation with HEI representatives and other stakeholders (see ESG 3.1).

**Stakeholder involvement through national networks**

AAQ is actively involved in networks that function as platforms for the exchange and discussion with HEIs and other partners on adjustments or improvements of processes. AAQ is regularly invited to the meetings of the Kommission Qualität und Akkreditierung, a network of those in charge of quality assurance strategy and operations at Universities of Applied Sciences (UAS). Similar contacts are established with the Kommission Qualitätsentwicklung, allowing all those in charge of quality development in Universities of Teacher Education to meet.

**Flexibility of external quality assurance, workload and cost**

As the law (HEdA Art. 30) emphasises assessment of the internal quality assurance system, the process developed for accreditation according to HEdA allows, or more precisely demands, that HEIs demonstrate the effectiveness of their internal quality assurance system.

Workload and cost of accreditation is an unsolved issue for the smaller HEIs, but it is generally understood that the format has to be the same for all HEIs. For renewal of an institutional accreditation, a lighter procedure might be proposed in the future, reducing workload and costs. Further enquiries on this topic are under way under the leadership of the SAC.

AAQ updated the guide for system accreditation in 2019 on the basis of the Interstate Treaty between the German federal states released a year before. Procedural steps and the structure of the external evaluation report is pre-defined by the German Accreditation Council (GAC). AAQ runs the procedures in Germany according to these rules while applying its usual step-by-step descriptions and templates.

The GAC by law represents different stakeholder groups:

- academia;
- students;
- employers;
- relevant organisations and unions;
- political authorities.

Thus, GAC can guarantee a basic stakeholder involvement. The Rectors’ Conference of German Universities traditionally has a strong position, as does the Standing Conference of the Ministers of Education and Cultural Affairs of the German federal states. Stakeholder involvement is therefore assured without dedicated processes.

In 2017, AAQ organised a meeting with those responsible for the quality assurance system at the HEI for which the agency had run the system accreditation procedure beforehand. Feedback from this meeting was used to optimise the
procedure and to clarify in which way AAQ could assist and consult the HEI when preparing their accreditation. Four times a year, agencies active in Germany meet to exchange experiences with current procedures of system accreditation (Agenturentreffen). Furthermore, GAC organises a meeting with all accredited agencies in Germany every year (Hearing).

Since 2012, AAQ has performed quality audits in six HEI in Austria based on a format developed in Switzerland. In 2018, AAQ revised the guide in order to offer these procedures in conformity with the Higher Education Quality Assurance Act (HS-QSG), in its revised form valid since January 2019. The new guide has been developed based on a meeting with five quality managers of the visited HEIs and also taking into account the feedback of experts mandated in the past procedures.

All EQAR-registered agencies are eligible to run quality audits in Austria, using their own quality standards. The standards of AAQ can be discussed and generally reviewed at meetings held by the Quality Audit Network (QAN) and at events arranged by the Austrian quality assurance agency (AQ Austria).

Further developments

AAQ involves stakeholders in all its activities effectively and transparently. A recent analysis on the effectiveness of the use made from feedback for continuous quality improvement of the agency summarised the increasing importance of discussion forums, such as expert meetings or meetings with HEI representatives, and the AAQ Day. The internal quality assurance system will take into account these forms of generating feedback and transparently set its significance when designing methodologies.

Evidence:

10.3 ESG Standard 2.3 Implementing processes

→ *External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:*
  * a self-assessment or equivalent
  * an external assessment normally including a site visit
  * a report resulting from the external assessment
  * a consistent follow-up

External quality assurance processes of AAQ

Irrespective of the legal framework, AAQ’s quality assurance processes follow – as documented in the corresponding guides – common principles:
- the guides are developed with the involvement of the stakeholders;
- guides, once adopted, are published on the AAQ website and are used by all stakeholders: HEIs, experts, agency, decision-making and supervisory bodies;
- all procedures follow the 4-step structure of self-evaluation, external evaluation, decision, follow-up;
all self-evaluations are based on a template and result in a self-evaluation report;
• all external evaluations comprise a site visit by a group of independent experts, during which written documentation is complemented by interviews with stakeholders;
• all experts profiles are approved by the Commission of AAQ;
• all external evaluations result in a report based on an AAQ template;
• all external evaluation reports contain: a. the experts report (including the analysis of the fulfilment of the legal requirements, recommendations for quality enhancement, conditions that correct a weakness related to specific quality standards if necessary, a profile of strengths and weaknesses, a final judgement or proposal for accreditation), b. the AAQ contextual report (legal basis, procedural information, description of the unit under assessment, AAQ judgement or proposal for accreditation), c. the position statement of the HEI under assessment, d. the integral formal decision;
• all HEIs have a hearing right before the decision is taken: they can comment on the report and on the procedure in a written position statement;
• the fulfilment of conditions is always verified in a formal follow-up procedure.

Differences in the implementation of the quality assurance processes refer to the length of the site visit, to the decision-making process and to the follow-up process.

For accreditation according to HEdA, based on the experts report and the position statement of the HEI, AAQ formulates a proposal for accreditation to the SAC, which then makes a decision based on these documents.

Accreditation according to HEdA has two elements of follow-up:
• the process of assessing the fulfilment of conditions, usually no later than two years after the decision (the SAC decides the deadlines and the modalities of the process directly in the decisional deliberation, which is then published with the external assessment report);
• the explicit treatment of recommendations in the renewal of the accreditation (by law, every 7 years).

The site visit lasts on average 3.5 days for institutional accreditation (1 day for the preliminary visit and 2.5 days for the visit) and 1.5 days for programme accreditation.

The same applies to the accreditation of programmes in the health professions based on HPA and HEdA.

For system accreditation, the experts report (including their accreditation proposal) is approved by the Commission of AAQ (internal quality assurance measure of the AAQ) and sent to the HEI who must handle it to GAC, together with other documents. GAC makes the accreditation decision.

In system accreditations, the follow-up is conducted in the process of assessment of the fulfilment of conditions, nine months after the GAC decision.

The site visit lasts on average 3.5 days (approx. 1 day the preliminary visit and 2.5 days the visit).

For the quality audit, based on the experts report and the position statement of the HEI, AAQ formulates a proposal for decision to the Commission of AAQ, which can deliver the certification to the positively assessed HEI.
Quality audits according to HS-QSG have two elements of follow-up:

- the process of assessment of the fulfilment of conditions no later than two years after the decision;
- the explicit treatment of recommendations in the next audit.

The AAQ guide to quality audits according to HS-QSG forms the basis for the procedure. The site visit for quality audits lasts 2.5 days.

The accreditation of basic medical education according to MPA is procedurally identical with programme accreditation according to HEdA, with the difference that the Swiss Commission of Medical Professions is consulted before the SAC makes its decision on accreditation. This is clearly illustrated in the corresponding guide. The procedure has the same two elements of follow-up: verification of fulfilment of conditions and the explicit treatment of recommendations in the renewal of the accreditation. The site visit lasts 1.5 days.

Evaluations are voluntary procedures that involve the Commission of AAQ for the approval of the external evaluation report; they do not have a period of validity and are used mainly by institutions and programmes for their own development and quality enhancement. A follow-up procedure foresees the delivery of a progress report two years after the conclusion of the evaluation. Progress reports do not follow a pre-defined format; however, a strong focus on the development and implementation of the experts’ proposals for quality enhancement is highly recommended. The length of the site visit varies according to the object of the evaluation, the size of the unit and the standard set chosen. All elements are fit for the purpose and agreed upon between the HEI and the AAQ and formalised in a contract.

Each procedure is described step-by-step in a procedural flowchart, as shown in the annex.

**Quality assurance of implementation:**

AAQ assures the consistent implementation of quality assurance processes by its internal quality assurance system (see section 7).

A key element in this context is the QM-Pilot, available to staff on the intranet. This quality management tool defines all organisational and procedural aspects of AAQ activities. More importantly, it contains step-by-step descriptions and templates for all phases of all AAQ procedures, thus supporting all AAQ staff in consistent implementation of the procedures.

A second key element in this internal quality assurance system is the role of the Commission of AAQ (approval of expert groups in all procedures, approval of external assessment reports for quality audit, system accreditation, evaluation) and the SAC (approval of external assessment reports for HEdA, MPA and HPA procedures). These formal approvals enable the consistency of implementation of the procedures to be monitored.

The third element of this internal quality assurance system is the synthesis report, in which finished accreditation cycles are critically reviewed and measures to improve consistency are consequently developed.

- Annex 7
- Procedural flowcharts
Further developments

Currently in Switzerland, stakeholders are investigating various models and possibilities of re-confirming institutional accreditation according to HEdA during the second accreditation round, starting in 2023. One scenario might be to give broader importance to the ‘Follow-up’ process on the results of the 1st accreditation round and somehow lighten the rest of the procedure.

10.4 ESG Standard 2.4 Peer-review experts

External quality assurance should be carried out by groups of external experts that include (a) student member(s)

At the heart of all of AAQ’s external quality assurance procedures, irrespective of the legal framework, is a group of experts. AAQ supports the principle that only experts can bring the knowledge necessary to assess the standards for the external quality assurance procedure. Experts endowed with a beneficial mandate can make recommendations to the HEI that will be useful to its further development. Acting as peers of the HEI, experts can guarantee the acceptance of their assessment and recommendations by the HEI.

Selection, skills and competencies of the experts

Different legal texts predefine the requirements for the composition, selection, skills and competencies of the expert groups of all AAQ’s formats. AAQ formulates the selection criteria consistently in the guidelines of the different formats.

Institutional accreditation according to HEdA demands a group of at least five experts who, as a whole, possesses national and international experience and the knowledge necessary to accomplish the task. In particular, skills and competencies should include experience in leading the internal quality assurance and development of an HE institution, experience of teaching and research, the student perspective and, if necessary, an extra-academic perspective, adequate knowledge of the Swiss higher education landscape, and active knowledge of the language of the procedure.

Ideally, the chair of the group (peer leader) will be an active member of the management of an HEI. One member of the group must come from the student body. Furthermore, the HEdA Accreditation Ordinance demands that the composition of the group should include an international dimension and take into account the gender, origin and age of the experts, and the specific characteristics of the institution and, if necessary, its particular teaching methods. Experts must be independent and able to make impartial judgments.

AAQ applies the rules for system accreditation, based on the procedure developed by the German Rectors’ Conference, when composing the group of experts. This procedure ensures that the expert group has sufficient knowledge of the German higher education system. Three HEI teachers must have experience in the quality assurance of education. A majority of experts must be experienced with accreditation procedures. One member must represent the professional practice and one member should be a student. AAQ oversees the independence and impartiality of the experts and includes the evaluated HEI in doing so.
Quality audits according to HS-QSG require a group of five experts. One member, where possible the chairperson, will be an active member of the management of a university. The other members will have experience in the management of a university, or of their sections, and of quality assurance within an HEI. One member will be drawn from the student body. In addition, the guidelines demand that the expert group as a whole has sufficient knowledge of the Austrian higher education landscape.

Programme accreditation according to HEdA and medical education according to MPA must have an expert group of at least three. The actual size and composition depend on the discipline and the needs of the HEI in regard to development. One member will be a student.

The same applies to the accreditation of programmes in the health professions based on HPA and HEdA.

Programme evaluation procedures of continuing education programmes must also have groups of three experts. As these procedures cover professional specialist education, it is not possible to add undergraduate and graduate experience to the expert group through students at Bachelor or Master level. Participants are mainly professionals combining study and work. Rather than students, alumni might be recruited as experts with careful attention to the criterion on independence.

AAQ establishes all its expert groups for all formats through a process that it calls the ‘long list’. This process serves two purposes: first, it ensures that the expert group matches the profile and expectations of the HEI; second, it gives the HEI the right to propose or veto members before the list of possible experts (the long list) is established. During the opening meeting of all assessment procedures, the profile of the expert group is discussed in detail with the HEI; the result of this discussion is written up as the ‘profile’ and made available to the HEI. Subsequently, AAQ will put together a long list of potential names (ideally, at least 15) for the expert group. After verification of their independence, the list is then submitted to the HEI. The latter can remove persons if a conflict of interests is suspected or a lack of independence appears in relation to the HEI. After the list has been checked by the HEI, the agency then submits the remaining names to the Commission of AAQ for adoption (internal quality assurance). After the list is adopted, the agency puts together an expert panel according to the predefined criteria and informs the HEI.

As described, the evaluated HEI and AAQ search for potential names based on the profile they defined. Student members are proposed by the national student union (VSS), at least three students per procedure.

All experts sign a contract. Part of the contract is a declaration of no conflict of interest.

The names of all experts are listed in AAQ’s annual reports.

AAQ has found this procedure to be good practice. The HEI is involved in the selection without compromising the integrity of the process, and the agency can preserve a certain degree of flexibility while ensuring that the group of experts reflects the profile required by the HEI.
Training and briefing

AAQ provides training or briefing to all its experts in all external quality assurance formats.

The first element of the preparation of the expert group for institutional accreditation and the programme accreditation according to HedA is the documentation package compiled by AAQ. It provides a step-by-step description of the process, defines key terms of the Swiss higher education landscape, contains the HedA Accreditation Ordinance, a commentary on the standards (similar to the ESG guidelines, but more detailed) and a code of conduct.

The second element of preparation is the briefing session on the first day of the preliminary visit (at least one month before the on-site visit). One of the main goals is an explanation of the particularities of the Swiss system, focused on the type of HEI under assessment.

The format of system accreditation provides two elements of preparation of the group of experts: AAQ’s guide to system accreditation, which is provided with the contract, and a written briefing sent at the same time as the self-evaluation report to each expert.

The format of quality audit provides two elements of preparation: AAQ’s guide to the quality audit, which is provided with the contract, a briefing session on the first day of the site visit.

The format for the accreditation of basic medical education according to MPA provides the guide as a first element of preparation and the structured telephone briefing with the experts as second element.

Students of all formats receive extra training through their student unions. The Swiss student union (VSS) organises this training and AAQ contributes to them participating personally in dedicated training sessions and by covering the costs.

Irrespective of its form, the preparation is aimed at reaching an understanding of the experts’ role and the scope of their work, in particular:

- the characteristics of the respective HE sectors;
- the specificities of the unit to be assessed;
- the characteristics of the assessment;
- the scope, terms and conditions of their contribution;
- the code of conduct to be followed;
- expectations of a qualitative external assessment report (based on an AAQ template).

The briefing also allows discussion of:

- topics and questions to be addressed during the visit;
- further documentation that may be required;
- on-site visit programme.

Further developments

As described under ESG 2.2 in section 10.2 of this report, AAQ has developed mechanisms to receive stronger and more pertinent feedback from the experts after the procedures. Two meetings have been organised with experts mandated in past procedures of institutional accreditation. AAQ is examining the potential to find similar ways to meet experts of other formats to discuss challenges and room for improvement in the processes.
10.5 ESG Standard 2.5 Criteria for outcomes

Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

The quality standards and criteria for outcomes (recommendations, judgements or formal decisions) for all AAQ accreditation activities in Switzerland (accreditation according to HEdA, accreditation according to MPA and to HPA) are an integral part of a legal framework. The same applies for system accreditation in Germany. Standards and criteria for outcomes are published by the competent authorities and incorporated in the publicly available AAQ guides and are the basis for the external assessment; the fulfilment of the legal requirements is the basis for the accreditation decision.

For quality audits in Austria, standards are not integrated in Austrian law, they are developed by AAQ and published in the AAQ guide, which encompasses the criteria for outcomes.

Evaluation procedures have no legal basis and different existing published sets of standards can be applied according to the specific needs of the evaluated unit. Considering the nature of AAQ evaluation procedures being ‘tailored-made’, standards and further requirements are agreed upon with the requiring HEI and confirmed in contractual terms. Coherency can and must be assured, where as consistency is by definition not applicable, as each evaluation is unique and serves exclusively the individual enhancement objectives of a given HEI.

AAQ includes quality standards and criteria for outcomes in the published guides for each activity, except for evaluations, due to the multiple choice offered in terms of the standard set in each evaluation procedure, as mentioned above. AAQ published guides on procedures represent the main instrument assuring equity and reliability, with pre-defined criteria available for all stakeholders, on which experts can consistently base recommendations and judgements, and on which the decision-making authorities can consistently base their formal decisions. For each activity, indications are provided concerning the evaluation scale and in what cases it is advisable to give recommendations and/or conditions, as well as what leads to a positive final judgement and what would not. These criteria are also an integral part of the briefing package for experts in all AAQ external quality assurance activities.

For the institutional and programme accreditation according to HEdA, AAQ has developed a commentary to the standards, which, similar to the ESG guidelines, helps HEIs, experts, the agency and the SAC come to a common interpretation of the standards and assure any outcomes are evidence based.

For all formats, it is one of the key responsibilities of the agency’s representative at the site visit to ensure that the experts base their judgements exclusively on the standards. If they formulate a condition, the agency ensures that the condition and its wording refer directly to a standard.

A second line of internal quality assurance concerns the role of the AAQ director, who delivers the external assessment file for the SAC decision, including an own proposal for accreditation decision, that is closely based on the experts proposal but might slightly differ in nuances, taking into account the position statement of the HEI and the consistency with other assessments within the same activity. This step might also be used for proposing minor adjustments and calibrations assuring the respect of the legal provisions.
A third line of assuring the quality of AAQ’s work is provided by the SAC, which reviews the integrity of the report before making a decision (based on HEdA, MPA, HPA): are conditions consistent and based on a standard? Is the assessment consistent with other assessments within the same format? If not, the Council will return the report to the agency for improvement. The same role is assumed by the Commission of AAQ for reports in the frame of evaluations (case by case), quality audits and system accreditation.

Transparency is assured at all steps, as experts reports with their proposal for accreditation, the AAQ proposal for accreditation, the position statement of the HEI and the SAC accreditation decision are all public and can be found in the comprehensive external assessment report for each procedure.

This triple check of accuracy, coherency and consistency leads to a solid and reliable system, well accepted by the different stakeholders. Criteria for the admission into an accreditation procedure based on HEdA might still be made clearer, although they were applied consistently overall (see next paragraph).

Since 2015 and the introduction of the accreditation system based on HEdA, only one negative decision was taken by the SAC, although the experts’ and agency’s proposals for accreditation were positive, due to the divergent interpretation of an upstream criterion. The appeals procedure is still ongoing. Although this is a unique case, the SAC asked to the competent authorities for clarifications within the HEdA institutional accreditation system, in further defining the characteristics of the different types of HEIs admitted to an accreditation procedure. Criteria for admission are out of the scope of the AAQ or any agency recognised by the SAC for conducting institutional accreditation procedures based on HEdA in Switzerland. These fall within the responsibility of the Swiss Conference of Higher Education (SCHE) and are applied by the SAC. However, the SAC may delegate the verification of fulfilment of the criteria for admission into a HEdA procedure to the AAQ. In these circumstances, it is important to assure clarity in the application of criteria for all parties involved.

- Evidences:
  - Link to AAQ guides:

Further developments

While criteria for outcomes are clear, published and applied consistently, the roles played by the various actors are still a source of confusion, although well described in the guides. In the next revision of AAQ guides, it might be good to illustrate even better what role the experts, the AAQ and the decision-making body play in the formulation of outcomes and the respective formal consequences.

10.6 ESG Standard 2.6 Reporting

→ Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

Swiss law favours the right to personal privacy. Publication of full reports under Swiss law requires explicit language in the HEdA, which was not provided under the current law or former laws. Without a legal basis, AAQ must negotiate the publication of reports with the competent stakeholders in order to be in compliance with ESG 2.6.
In practice, publication of reports is presented in all AAQ guides as final the step of each external quality assurance assessment and it is made binding in contractual agreements with the assessed institutions. Evidence shows, that full reports of every single activity by AAQ and its predecessor OAQ have been published, as a result of successful negotiations.

The legal situation presents itself differently in Germany: the legal framework for system accreditation demands publication. Therefore, all reports are published in full as a procedural obligation.

The same applies for quality audit in Austria.

Evaluations do not imply a positive or negative decision. Reports end up with recommendations for improvement and the Commission of AAQ approves the reports, overseeing the quality of AAQ’s work. All reports are published as a contractual commitment between the AAQ and the evaluated unit.

Currently, there is no legal basis for the publication of reports leading to negative decisions. However, considering that accreditation according to HEdA leads to the right to use protected denominations (section 5 HEdA), it is clear and transparent which HEIs are part of the Swiss higher education landscape (having obtained accreditation) and which are not. The same applies for the programme accreditation of regulated professions (MPA and HPA): only accredited programmes leading to a recognised federal title allow the practice of the profession.

An institution or programme undergoing any external assessment conducted by AAQ has the right to withdraw its application at any point during the procedure until the decision is made. Based on the very few cases so far, experience shows that a negative report leads to the withdrawal of the accreditation application before the decision is taken and thus before any formal consequence occurs, according to the legal framework. Once the accreditation application has been withdrawn, all files are archived.

Clarity and comprehensiveness of reports

Experts reports are based on a template provided to the panels as soon as they receive the self-evaluation report of the unit under assessment. The table of contents includes:

1. Presentation of the unit under accreditation
2. Assessment of the formal requirements
3. Strengths and areas of improvement, recommendations for quality enhancement
4. Proposal for accreditation

Full external assessment reports of AAQ, once published, contain 4 sections:

a. The full decision by the decision-making body
b. The accreditation procedure (filled in by the AAQ): context, legal basis, self-evaluation phase, external evaluation phase (group of experts, on-site visit), main findings, AAQ proposal for a decision
c. Full experts report
d. Position statement of the unit under assessment

Reports of procedures based on MPA also contain a position statement of the ‘Commission of Medical Professions’ in a 5th section.

All reports contain a profile of strengths and areas of improvement, as well as the proposed recommendations for the quality enhancement or accreditation conditions, wherever it applies. For each assessed item (be it a standard, criterion or any formal
requirement), the experts are asked to provide a short description, a synthetic analysis, outcomes on the fulfilment, and recommendations or conditions for the quality enhancement.

The work on the external reports is coordinated by the peer leader of the expert group, but all experts contribute to the report. Their contribution varies according to the procedure and to the expectations put forward by the peer leader. Normally, expert group members are involved in the critical reading of the first draft and invited to provide comments, proposals for modification and remarks. This feedback is then used to improve the argumentation of the report; it is not used to affect the outcome of the assessment, as the outcome is agreed among group members at the end of the on-site visit. Finally, group members are invited to approve the final report.

The structured templates constitute an effective tool in the clarity of the reports and additional editorial support is provided by AAQ. A primary responsibility of AAQ is to ensure that coherency and consistency is maintained throughout the report and in line with the legal requirements of a given procedure.

The SAC in its function as supervisory body will also assess the coherency and consistency of AAQ’s work, approving external assessment reports. The Commission of AAQ does the same for quality audit procedures, system accreditation procedures and evaluations.

The factual accuracy of each report is cross-checked by the unit under assessment, which is given the opportunity to point out errors of fact before the report is finalised. More importantly, the unit under assessment is also given the opportunity to comment on the experts report and the agency’s proposal for accreditation in a written and signed position statement (due process, right to be heard). Expert groups may correct or adapt their final report based on the position statement of the unit under assessment.

AAQ invests a lot of resources in assuring the quality of reports, taking into account the purpose they serve and their publication. Reports can be quickly found on AAQ’s website, under a dedicated section named ‘Reports’. In no more than 2 clicks, any report can be found and downloaded. AAQ has engaged in negotiations with the other partners in order to ensure easy access to all information on any given procedure for the general public.

All reports issued after a formal follow-up process in connection with a previous assessment procedure are published directly in conjunction with the original external assessment report. This happens for example when an accreditation procedure ends with a positive decision with conditions to be fulfilled within a given timespan. In the German system, there are mid-term evaluation reports between a system accreditation and its renewal. Even in this case, follow-up reports are published together with the original report.

Formal decisions taken on the basis of external quality assurance procedures conducted by AAQ within the scope of the ESG are all published together with the report.

- Evidence:
  - AAQ link to all reports: https://aaq.ch/en/procedural-reports/

Further developments

In the definition of the 2nd HEdA institutional accreditation cycle (renewal of accreditation), a further step would be proposed by the AAQ to the competent authorities, namely to add the publication of positive reports as an institutionalised practice in all HEdA procedures, which is in practice already the case.
10.7 ESG Standard 2.7 Complaints and appeals

Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Appeals against a decision

In all appeal procedures, the HEI may question the formal outcomes of the process where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the processes have not been consistently implemented.

The Higher Education Act explicitly exempts decisions of the Swiss Accreditation Council (SAC) from the right of appeal at the Federal Court (Art. 65 para. 2 HEdA). However, the SAC has established an appeal system identical to the appeal system of ENQA.

The SAC decides on accreditations according to HEdA, to HPA and to MPA based on the proposal from the agency, the expert report and the position statement from the HEI (and the position statement of the Commission of Medical Professions for MPA procedures). The HEI has the opportunity to appeal against the decision of the SAC. The appeal is handled by the Appeals Commission, which comprises three members elected by the SAC.

The Appeals Commission can also handle appeals of decisions taken by the Commission of AAQ (in the frame of quality audits in Austria and evaluations), but this has never happened so far due to the nature of the external assessments, which are highly improvement oriented rather than control tools, and because the number of procedures conducted per year are very low, which reduces the casuistry.

The establishment of the Appeals Commission is ruled under Art. 13 OReg-SAC, whereas the procedure is defined in the organisational regulations of the Appeals Commission, available online and therefore accessible to the public. Requests to reconsider decisions must be sent within 30 days after the notification of the decision to the Accreditation Council, which then passes these on to the Commission for a response. The Commission must communicate its position to the SAC within two months of receipt of the request. The SAC deals conclusively with the appeal request in its next meeting.

Since 2015, the Appeals Commission has handled 3 requests for reconsideration of an SAC decision.

Decisions of the German Accreditation Council (for system accreditation in Germany) can be appealed following the instructions and the procedure available on the GAC’s website ‘Informationen zu Möglichkeiten von Stellungnahmen, Einsprüchen, Beschwerden und Klagewegen’.

Information about appeals is not only available on AAQ’s website, it is also explicitly mentioned in all AAQ guides for external assessments within the scope of the ESG. Considering that appeals concern specifically the decision-making bodies, AAQ is not directly involved in handling these issues other than making clear and accessible information to HEIs in the different procedural instruments.
Complaints against the AAQ

Complaint procedures allow HEIs to state dissatisfaction about the conduct of the process or those carrying it out. Complaints against AAQ’s work (the conduct of a procedure) can be submitted to the Commission of AAQ as the authority of internal quality assurance in all procedures of the agency. A complaint has no prescribed form and is not subject to any deadlines. Information, including the email address for addressing complaints, is available on AAQ’s website. So far, however, complaints as forms of dissatisfaction were addressed directly to the AAQ, to its director or to the project managers having conducted the procedure. This concerns a very limited number of cases. Another channel to express comments on the conduct of the process or the people involved is the feedback form that all experts and HEIs receive at the conclusion of each external quality assessment procedure. Comments are handled by the internal quality assurance responsible (and included in the improvement cycle of the AAQ, see section 7) and are also analysed in the synthesis reports at the end of each accreditation cycle.

Further developments

Although all actors concerned are well informed about appeals procedures, channels for submitting a complaint against the AAQ are less explicitly mentioned in the public guides, the main information area being the AAQ’s website. This may be improved in the future.

Evidence:

• AAQ webpage on appeals and complaints:
  https://aaq.ch/en/accreditation/appeals/

11 Information and opinions of stakeholders

Information and opinions of stakeholders is a transversal subject dealt with under several ESG Standards, especially 2.2, 3.1, 3.4 and 3.6. The newsletter ‘aaq Informs’ not only distributes information of the agency but offers space allowing different personalities to express their experiences, wishes and visions with respect to AAQ. The President and members of the Swiss Accreditation Council, a University Rector, a Vice-Rector of UAS, a staff member of the Swiss Student Unions Federation, the President of a local Student Association and the head of a FOEF department were among these personalities in recent years. The same is true for the biannual AAQ Day.

Opinions of stakeholders about the agency and its field of activity are expressed in political instances such as the SCHE or in working groups mandated to develop external evaluation procedures of HEIs or programmes. Besides very positive appreciations such as the independence or expertise of AAQ, a main concern of various stakeholders is the workload generated by these activities. Agency members are involved in developing ways to streamline re-accreditation procedures and project responsible have taken up the role of the secretary of expert groups, providing the first draft of the expert report.

AAQ involves stakeholders in all its activities for continuous quality improvement of the procedures effectively and transparently. Synthesis reports sum up the results of any cycle of procedures, including based on the feedback questionnaires designed for and completed by all parties involved. A recent analysis on the effectiveness of the use made from formal and informal feedback showed the increasing importance of discussion forums such as expert meetings or meetings with HEI representatives.
Experts meetings institutional accreditation

As described under ESG 2.2, in section 10.2 of this report, AAQ has developed mechanisms to receive stronger and more pertinent feedback from the experts after the procedures. Two meetings have been organised with experts mandated in past procedures of institutional accreditation. AAQ is examining the potential to find similar ways to meet experts of other formats to discuss challenges and room for improvement in the processes.

HEI’s quality responsible feedback meeting on institutional procedures

Since 2017, AAQ has organised several meetings with those responsible for the quality assurance system at the HEI for which the agency had run an institutional procedure beforehand. Results of these meetings are considered when procedural guides are revised. For example, improvements of the expert briefing are implemented and HEIs are informed about the steps taken to optimise the preparedness of experts.

For the planning and implementation of the accreditation cycles according to GesBG / MedBG and HEdA, collaboration between AAQ and FOPH works smoothly and efficiently.

On-line enquiry in 2020 for the self-assessment process

When preparing the actual self-assessment report, AAQ wished to give the opportunity to selected stakeholders (AAQ staff, members of the Commission of AAQ, experts and HEI partners involved in accreditation according to HEdA) to give free format feedback on strengths and/or improvements of the agency. This non-representative on-line enquiry has mainly been set up in order to identify subjects that would have been overlooked in the self-assessment of the ESG Standards.

Very little feedbacks arrived, 20% or less per group of stakeholders, meaning that the usual feedback channels of AAQ work in a satisfactory way. The anonymised answers of the on-line enquiry are available in the annex. Some feedback allowed further developments to be envisaged by the agency. These are set out under the relevant ESG Standards in section 9 and 10 of this report. Some challenges reported by the respondents are included in section 14 (current challenges and future developments).

Internal quality assurance through the SAC and Commission of AAQ

As part of its internal quality assurance, AAQ presents all its guides and key documents for adoption by either the SAC or Commission of AAQ (depending on legal framework of methodology). The same applies for the selection of experts. The discussion entailed is another form of stakeholder involvement, because these bodies are representative of stakeholder groups.

- Evidence:
  - Annex 8
  - On-line enquiry 2020
12 Recommendations and main findings from previous review and the agency’s resulting follow-up

In 2015/2016, AAQ underwent a review against the ESG (2015) coordinated by the German Accreditation Council (GAC). Based on the external review report, ENQA renewed the agency’s membership in September 2016. AAQ submitted this report to the EQAR register committee, requesting renewal of the registration. EQAR approved AAQ’s application in July 2016.

The recommendations made by the panel in the GAC-coordinated review concerned:

- designing methodologies fit for purpose (ESG 2.2);
- implementing processes (ESG 2.3);
- peer-review experts (ESG 2.4);
- criteria for outcomes (ESG 2.5);
- use of external quality assurance procedures for higher education (ESG 3.1);
- independence (ESG 3.3);
- thematic analysis (ESG 3.4);
- resources (ESG 3.5);
- internal quality assurance and professional conduct (ESG 3.6).

The agency published the follow-up table of these recommendations on its website and updated the status of their implementation biannually. This document also includes commendations expressed by the review panel of 2016, defining actions taken in order to secure and develop these good practises.

In September 2018, the agency delivered its follow-up report to ENQA. In its letter dated 2 January 2019, ENQA acknowledged the progress made and informed the agency about approval of the report.

The follow-up table provides comments or actions taken by AAQ, either completed or to follow, for each commendation or recommendation formulated by the expert panel on the basis of the last ESG review. Actions taken since the publication of the follow-up report are outlined under the respective ESG Standard in section 9 and 10 of this report.

Summary of completed actions

Since the adoption of the follow-up report, AAQ has completed more follow-up actions:

- Approval of AAQ guides and policy documents by the SAC, such as its strategy and quality paper, are communicated to the stakeholders and the public through the website (ESG 2.2);
- Internal rules on consistent preparation of decision making are represented in the QM-Pilot, the new process-, document- and risk management system of AAQ (ESG 2.5);
- Information about filing complaints and appeals on the implementation of procedures by AAQ are available on the website (ESG 2.7);
- Finally, AAQ extended its project management database (ProKon) in order to monitor past, present and upcoming procedures and to integrate transversal functions alongside with managing procedures (ESG 3.5).
In the course of its assessment of the AAQ review in 2016, the EQAR Committee flagged the following issues:

- Consideration of ESG Part 1 in AAQ’s methodologies for evaluations and accreditation of basic medical education (ESG 2.1);
- Publication policies (ESG 2.6);
- Need of precise roles of AAQ and SAC with regard to the criteria and procedure for selection of experts (ESG 2.4) as well as criteria for SAC’s decision (ESG 2.5)
- Limited scope of complaints procedures (ESG 2.7).

Moreover, two recommendations concerned the Swiss Accreditation Council (SAC) as supervisory body of the AAQ:

- Specify the selection procedures and criteria of SAC members in a binding document;
- Publish its code of conduct.

The agency addressed some issues in ‘Substantive Changes Reports’: accreditation of basic medical education, 2018; introduction of the Commission of AAQ, 2020. An account of the agency’s implementation of the recommendations is given under the respective ESG Standard in the course of this report. Recommendations to the SAC are out of the scope of this review.

For the publication of negative decisions, as mentioned in the present report, no political agenda addresses the issue. However, due to the direct link between institutional accreditation and the right to use protected designations (University, University of Applied Sciences, University of Teacher Education and all derivates in any language), it is transparent within the system which institutions are part of the Swiss higher education landscape and which are not part. The same applies to the regulated professions, where all running programmes leading to a recognized federal title have been accredited, all others by definition were not accredited.

- Evidence:
  - ESG review 2016: AAQ Follow-up table
    https://aaq.ch/en/the-aaq/international/ (Downloads)
### SWOT analysis

#### Strengths
- Full formal independence of AAQ.
- Public funding covering basic functioning of the agency and development of new evaluation features.
- Strong and stable relations to all stakeholder groups.
- HEIs and external experts contribute directly to the improvement of AAQ procedures.

#### Weaknesses
- No comprehensive analysis of gaps in the team skills and no plan to overcome them.
- Weak engagement into transparent information for the general public.
- Diversity and number of different procedural formats requiring a constant updating effort.
- Email as main communication channel with expert groups and HEIs.

#### Opportunities
- Strategy to develop the profiles of members of the team.
- Revision of bylaws of HEdA before starting reaccreditation of HEIs in 2023 allows improvement of quality standards and procedure.
- Diversity and number of different procedural formats offering the opportunity for constant improvement.
- Insight into the higher education system from the specific angle of a QA agency through targeted thematic analyses.

#### Threats
- Very irregular demand of bulk number of procedures per year in some of the different formats.
- Confusion of roles played by the various actors in the decision-making process.
14 Current challenges and areas for future development

Areas of improvement

The formal absence of ESG 1.2 and 1.3 (Design and approval of programmes and student-centred learning, teaching and assessment) in the HEdA standards for institutional accreditation already mentioned by AAQ five years ago. Since the beginning of 2020, the new SCHE-Ordinance on the coordination of education at the Swiss HEIs (SR 414.205.13) has been in force. It regulates the main aspects of the Bologna Declaration and thus ESG 1.2 and 1.3. There is a link between the quality standards in the HEdA Ordinance and the new SCHE regulations. AAQ plans pointing at this in all communication in relation to HEdA accreditations (institutional, programme, with MPA and HPA), especially in the procedural guides.

The obligation to publish reports (ESG 2.6) and to subject decisions of the Swiss Accreditation Council to a right of appeal before the Federal Court (ESG 2.7) is still not regulated in the legal basis in Switzerland. AAQ will continue working on this with its partner organisations.

Future perspectives

Areas of improvement and future developments are included in the self-assessment carried out in sections 9 and 10. The main future perspective recognised on top of these concerns the development of quality culture within the Swiss higher education sector.

The end of the first round of institutional accreditation under HEdA is approaching. It appears that issues on defining the different types of HEIs are being discussed among the competent authorities. Other open questions relate to the burden (financial and manpower) of the procedure to be carried out, especially in the case of small HEIs.

More generally, it will be interesting to find out whether the right to use protected denominations really changed the Swiss landscape of higher education. This question might be analysed with special attention given to private HEIs, considering topics such as recognition of diplomas and mobility of students and staff.

3 No English version is available.
### Glossary of terms/abbreviations

See also the section with legal texts for abbreviations of legal texts.

#### List of abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AACSB</td>
<td>The Association to Advance Collegiate Schools of Business</td>
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<td>AAQ</td>
<td>Swiss Agency of Accreditation and Quality Assurance</td>
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<td>DEQAR</td>
<td>Database of External Quality Assurance Results</td>
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<td>EHEA</td>
<td>European Higher Education Area</td>
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<td>EMBA</td>
<td>Executive Master of Business Administration</td>
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<td>ENAEE</td>
<td>European Network for Accreditation of Engineering Education</td>
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<td>ENQA</td>
<td>European Association for Quality Assurance in Higher Education</td>
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<td>EQAR</td>
<td>European Quality Assurance Register</td>
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<td>ESG</td>
<td>Standards and Guidelines for Quality Assurance in EHEA</td>
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<tr>
<td>EUUniQ</td>
<td>Developing a European Approach for Comprehensive QA of (European) University Networks</td>
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<td>FDHA</td>
<td>Federal Department of Home Affairs</td>
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<td>FOPH</td>
<td>Federal Office of Public Health</td>
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<tr>
<td>FrAQ-Sup</td>
<td>Réseau Francophone des agences qualité pour l’enseignement supérieur</td>
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<td>GAC</td>
<td>German Accreditation Council</td>
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<td>HEI</td>
<td>Higher Education Institution</td>
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<td>IKS</td>
<td>Internal Controlling System</td>
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<td>INQAAHE</td>
<td>International Network for Quality Assurance Agencies in Higher Education</td>
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<tr>
<td>iQA</td>
<td>internal Quality Assurance</td>
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<tr>
<td>MBA</td>
<td>Master of Business Administration</td>
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<td>MAS</td>
<td>Master of Advanced Studies</td>
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<td>MEBEKO</td>
<td>Commission for Medical Professions</td>
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<tr>
<td>OAQ</td>
<td>Swiss Center of Accreditation and Quality Assurance in Higher Education (predecessor of AAQ)</td>
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<td>PEG</td>
<td>Staff development talks</td>
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<tr>
<td>ProKon</td>
<td>Project-Control-Database</td>
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<td>QA</td>
<td>Quality Assurance</td>
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<td>QAN</td>
<td>Quality Audit Network</td>
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<td>SAC</td>
<td>Swiss Accreditation Council</td>
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<td>SAR</td>
<td>Self-assessment Report</td>
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<td>SCHE</td>
<td>Swiss Conference of Higher Education</td>
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<tr>
<td>SFAO</td>
<td>Swiss Federal Audit Office</td>
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<tr>
<td>swissuniversities</td>
<td>Rectors’ Conference of Swiss Higher Education Institutions</td>
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<tr>
<td>UAS</td>
<td>University of Applied Sciences</td>
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<td>VSS</td>
<td>Swiss Student Union</td>
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<td>ZHAW</td>
<td>Zurich University of Applied Sciences</td>
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### Legal texts

<table>
<thead>
<tr>
<th><strong>Federal Constitution</strong></th>
<th>Federal Constitution of the Swiss Confederation</th>
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<tr>
<td><strong>HEdA</strong></td>
<td>Federal Act on Funding and Coordination of the Swiss Higher Education Sector (Higher Education Act)</td>
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<tr>
<td><strong>HPA</strong></td>
<td>Health Professions Act (Bundesgesetz über die Gesundheitsberufe) – <em>no translation available</em></td>
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<td><strong>HS-QSG</strong></td>
<td>Act on Quality Assurance in Higher Education</td>
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<tr>
<td><strong>Interstate Treaty</strong></td>
<td>Interstate Treaty on the organisation of a joint accreditation system to ensure the quality of teaching and learning at German higher education institutions (Interstate study accreditation treaty)</td>
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<td><strong>MPA</strong></td>
<td>Medical Professions Act (Bundesgesetz über die universitären Medizinalberufe) – <em>no translation available</em></td>
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<tr>
<td><strong>OReg-AAQ</strong></td>
<td>Organisational Regulations of the Swiss Agency of Accreditation and Quality Assurance</td>
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<tr>
<td><strong>OReg-AC</strong></td>
<td>Organisational Regulations of the Appeals Commission</td>
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<tr>
<td><strong>OReg-SAC</strong></td>
<td>Organisational Regulations of the Swiss Accreditation Council</td>
</tr>
<tr>
<td><strong>Specimen Decree</strong></td>
<td>Specimen decree pursuant to Article 4, paragraphs 1 – 4 of the interstate study accreditation treaty</td>
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<tr>
<td><strong>ZSAV-HS</strong></td>
<td>Agreement between the Confederation and the cantons on cooperation in higher education (Vereinbarung zwischen dem Bund und den Kantonen über die Zusammenarbeit im Hochschulbereich) – <em>no translation available</em></td>
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Annexes

1. Composition of the SAC
2. List of Procedures 2015-2020
3. Mapping of Quality Standards HEdA for institutional accreditation against ESG Part 1
4. Mapping of Quality Standards HEdA for programme accreditation against ESG Part 1
5. Mapping of AAQ quality audit standards against ESG Part 1
7. Procedural flowcharts
8. On-line enquiry 2020