

ENQA TARGETED REVIEW

# SWISS AGENCY OF ACCREDITATION AND QUALITY ASSURANCE (AAQ)

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European Association for  
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# CONTENTS

<b>CONTENTS</b> .....	<b>1</b>
<b>EXECUTIVE SUMMARY</b> .....	<b>3</b>
<b>INTRODUCTION</b> .....	<b>5</b>
<b>BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS</b> .....	<b>5</b>
BACKGROUND OF THE REVIEW .....	5
SCOPE OF THE REVIEW.....	5
MAIN FINDINGS OF THE 2020 REVIEW.....	6
REVIEW PROCESS.....	6
<b>CHANGES WITHIN THE AGENCY</b> .....	<b>8</b>
HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM.....	8
AAQ'S ORGANISATION/STRUCTURE .....	9
AAQ'S FUNDING.....	9
AAQ'S FUNCTIONS, ACTIVITIES, PROCEDURES .....	9
<b>FINDINGS: COMPLIANCE OF AAQ WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG) WITHIN THE SCOPE OF THE REVIEW</b> .....	<b>10</b>
<b>ESG PART 3: QUALITY ASSURANCE AGENCIES</b> .....	<b>10</b>
ESG 3.3 INDEPENDENCE.....	10
<b>ESG PART 2: EXTERNAL QUALITY ASSURANCE</b> .....	<b>12</b>
ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE.....	12
ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE.....	17
ESG 2.4 PEER-REVIEW EXPERTS.....	18
ESG 2.6 REPORTING.....	20
<b>ENHANCEMENT AREAS</b> .....	<b>24</b>
<b>ESG 3.4: THEMATIC ANALYSIS</b> .....	<b>24</b>
<b>ADDITIONAL OBSERVATIONS</b> .....	<b>26</b>
<b>GENERAL COMMENDATIONS</b> .....	<b>26</b>
<b>CONCLUSION</b> .....	<b>27</b>
<b>SUMMARY OF COMMENDATIONS</b> .....	<b>27</b>
<b>OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS</b> .....	<b>27</b>

<b>SUGGESTIONS FOR FURTHER IMPROVEMENT .....</b>	<b>27</b>
<b>ANNEXES.....</b>	<b>29</b>
<b>ANNEX 1: PROGRAMME OF THE SITE VISIT .....</b>	<b>29</b>
<b>ANNEX 2: TERMS OF REFERENCE OF THE REVIEW .....</b>	<b>35</b>
<b>ANNEX 3: GLOSSARY .....</b>	<b>43</b>
<b>ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW .....</b>	<b>44</b>
DOCUMENTS PROVIDED BY AAQ .....	44
OTHER SOURCES USED BY THE REVIEW PANEL.....	44

## EXECUTIVE SUMMARY

This targeted review analyses the compliance of the Swiss Agency of Accreditation and Quality Assurance (AAQ) with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) following the methodology described in the Guidelines for ENQA Targeted Reviews.

The purpose of the review is to ensure AAQ's compliance with the ESG in order to renew the agency's membership in the European Association for Quality Assurance in Higher Education (ENQA) and its registration in the European Quality Assurance Register for Higher Education (EQAR). The review was conducted between April 2025 and January 2026, with a site visit conducted from 15th to 17th October 2025.

The AAQ is Switzerland's national agency responsible for quality assurance and accreditation in higher education. It was established in 2001 (originally as OAQ) and renamed AAQ in 2015 under the Federal Act on Funding and Coordination of the Higher Education Sector (HEdA). It operates under the authority of the Swiss Accreditation Council (SAC) and is publicly funded by the Swiss Confederation and university cantons.

AAQ supports Higher Education Institutions in fulfilling their core missions and fostering active, participatory citizenship while advancing objectives related to sustainable development, equal opportunities, and digitalisation acts as an independent external partner to support institutions in developing effective quality assurance systems.

Under the HEdA, AAQ is responsible for implementing institutional accreditation procedures, which are mandatory for all higher education institutions in Switzerland, as well as programme accreditation in accordance with the Act. This includes the accreditation of state-regulated study programmes, such as basic medical and health profession education. In addition, AAQ may accept assignments from third parties when resources allow. Currently, AAQ conducts evaluations on behalf of external partners, including quality audits of internal university quality management systems in Austria and system accreditations in Germany. Beyond the scope of the ESG, AAQ also manages accreditation procedures for postgraduate specialist training programmes in medicine and psychology, in line with Swiss legislation.

According to the terms of reference, this targeted review has evaluated the extent to which AAQ continues to fulfil the requirements of the ESG. The focus areas addressed include those ESGs with a partial compliance conclusion by the EQAR Register Committee after AAQ's previous review in 2020, namely ESG 2.1 (Consideration of internal quality assurance), ESG 2.2 (Designing methodologies fit for purpose), ESG 2.4 (Peer-review experts), ESG 2.6 (Reporting). In light of a substantive change reported by the agency, the recent integration of the SAC Office into the organisational structure of the AAQ, the panel has also analysed compliance regarding ESG 3.3 (Independence).

Through the triangulation of evidence, the panel has also confirmed AAQ's compliance regarding the ESGs that were not specifically addressed, as no other significant changes have been introduced from the last full review of the agency in 2020.

AAQ has chosen ESG 3.4 (Thematic analysis) as the elective enhancement area. A specific workshop was organized as part of the site visit in order to discuss several key issues at the strategic, tactical and operational level regarding thematic analysis. The discussion triggered various reflections and can open an opportunity for a broader discussion in the future. In particular, the workshop revealed opportunities to further build audiences and dissemination channels, strengthen methodological approaches, establish internal spaces for brainstorming and develop a formalized policy on thematic analysis.

### Summary of agency's compliance with the ESG (Parts 2 and 3)

ESG	Compliance according to the targeted review <sup>1</sup>	Compliance transferred from the last full review <sup>2</sup>
2.1	Compliant	N/A
2.2	Compliant	N/A
2.3	Not included in the targeted review	Substantially compliant → Compliant
2.4	Compliant	N/A
2.5	Not included in the targeted review	Fully compliant → Compliant
2.6	Compliant	N/A
2.7	Not included in the targeted review	Fully compliant → Compliant
3.1	Not included in the targeted review	Substantially compliant → Compliant
3.2	Not included in the targeted review	Fully compliant → Compliant
3.3	Compliant	N/A
3.4	Not included in the targeted review	Fully compliant → Compliant
3.5	Not included in the targeted review	Substantially compliant → Compliant
3.6	Not included in the targeted review	Substantially compliant → Compliant
3.7	Not included in the targeted review	Fully compliant → Compliant

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<sup>1</sup> Compliance refers to the focus areas that were evaluated in depth and are part of the Terms of Reference, i.e., standards that were only partially compliant with the ESG during the last full review, ESG Part 2 for newly introduced or changed QA activities of the agency, ESG 2.1 for all QA activities and any standard affected by substantive changes since the last full review. If any of the standards of Part 2 of the ESG are covered due to the newly introduced or changed QA activities, a remark “for new or changed QA activities only” is added in brackets to the compliance assessment.

<sup>2</sup> Compliance refers to the last EQAR Register Committee decision for renewal of inclusion on the Register, or in case when an agency is not renewing its registration in EQAR, compliance refers to the last ENQA Agency Review report and should its judgement differ from that of the panel, the judgement of the ENQA Board, as stipulated in the membership decision letter by the ENQA Board. Compliance refers to the QA activities of the agency that were reviewed during the previous full review.

# INTRODUCTION

This report analyses the compliance of the Swiss Agency of Accreditation and Quality Assurance (Schweizerische Agentur für Akkreditierung und Qualitätssicherung, Agence suisse d'accréditation et d'assurance qualité, Agenzia svizzera di accreditamento e garanzia della qualità, AAQ) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. It is based on an external review conducted between April 2025 and January 2026 and should be read together with the external review report of the agency's last full review against the ESG in 2020. The objective of the review is the renewal of ENQA membership and of registration in EQAR.

## BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

### BACKGROUND OF THE REVIEW

ENQA's regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015.

Registration on EQAR is the official instrument established by the European Higher Education Area (EHEA) for demonstrating an agency's ESG compliance. An external review is a prerequisite for registration.

As AAQ has undergone four successful reviews against the ESG Parts 2 and 3, it is eligible and has opted for a targeted review. The purpose of a targeted review is to ensure the agency's compliance with the ESG by covering standards that were found partially compliant during the agency's last renewal of registration in EQAR and on standards that could have been affected by substantive changes<sup>3</sup> during the past five years while at the same time further strengthening the enhancement part of the review.

### SCOPE OF THE REVIEW

AAQ is carrying out the following activities within the scope of the ESG:

- Institutional accreditation according to HEdA
- System accreditation
- Quality audit
- Programme accreditation according to the Medical Professions Act (MedPA)
- Programme accreditation according to the Health Professions Act (HPA)
- Programme accreditation pursuant to HEdA
- Evaluation

The following activities of the applicant are outside the scope of the ESG:

- Accreditation of postgraduate medical education programmes pursuant to MedPA
- Accreditation of advanced training for a psychology profession pursuant to the Psychology Professions Act (PsyG/LPsy)

According to the Terms of Reference (ToR), this targeted review has evaluated the extent to which AAQ continues to fulfil the requirements of the ESG. The review covers the following areas:

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<sup>3</sup> e.g. organisational changes, the launch of new external QA activities.

- Those ESGs with a partial compliance conclusion in the EQAR Register Committee’s decision regarding AAQ’s previous review in 2020, namely ESG 2.1 (Consideration of internal quality assurance), ESG 2.2 (Designing methodologies fit for purpose), ESG 2.4 (Peer-review experts) and ESG 2.6 (Reporting).
- The ESGs affected by any substantive change. In this case, in light of the recent integration of the Swiss Accreditation Council (SAC) Office into the organisational structure of the AAQ, ESG 3.3 (Independence) was also included as a focus area.
- The selected enhancement area: ESG 3.4 (Thematic analysis).

The targeted review may also address any matters that come up during the process and that may affect the agency’s compliance with the ESG. In the case of AAQ’s targeted review, the review panel did not identify any matters regarding ESG compliance that would need to be covered apart from the ones listed above and addressed upon in the ToR.

## MAIN FINDINGS OF THE 2020 REVIEW

According to the decision of the EQAR Register Committee based on the previous full review conducted in 2020, AAQ was found to be in compliance with the following ESG standards: ESG Part 2: 2.3, 2.5, 2.7; ESG Part 3: 3.1, 3.2, 3.3, 3.4, 3.5, 3.6, 3.7. AAQ was found to be in partial compliance with ESG 2.1 (Consideration of internal quality assurance), ESG 2.2 (Designing methodologies fit for purpose), ESG 2.4 (Peer-review experts) and ESG 2.6 (Reporting).

The agency reported to EQAR in January 2025 a substantive change to its responsibilities that could affect ESG 3.3 (Independence), the integration of the Swiss Accreditation Council (SAC) Office into the organisational structure of the AAQ.

Other than that, the panel confirms, through the triangulation of evidence, that no other substantive changes occurred within the agency affecting the agency’s compliance with the ESGs, and thus acknowledges the status of the following ESG standards from the last full review: ESG part 2: 2.3, 2.5, 2.7; ESG Part 3: 3.1, 3.2, 3.4, 3.5, 3.6, 3.7

## REVIEW PROCESS

The 2025 external targeted review of AAQ was conducted in line with the process described in the *Guidelines for ENQA Targeted Reviews*, the *EQAR Procedures for Applications*, and in accordance with the timeline set out in the *Terms of Reference*.

The panel for the targeted review of AAQ was appointed by ENQA and composed of the following members:

- Bryan Maguire (Chair), Director of Integration at QQI (Ireland), Quality assurance professional (ENQA nominee).
- Teresa Sánchez Chaparro (Secretary), Professor at Universidad Politécnica de Madrid (Spain), Academic (ENQA nominee).
- Terhi Nokkala, Research Professor at University of Jyväskylä (Finland), Academic (EUA nominee).

- Damon Mohebbi, Student (MD Medicine, B.A. Social Science, PhD Medicine) at University of Düsseldorf (Germany), Student (ESU nominee, member of the European Students' Union Quality Assurance Student Experts Pool).

Milja Homan (ENQA Project and Reviews Officer) acted as the review coordinator. The panel wishes to express their gratitude to Milja Homan for her expertise and valuable support throughout the review process.

This targeted review of AAQ began with the tripartite agreement on the Terms of Reference, followed by the agency's preparation and submission of its self-assessment report (SAR). The ENQA review panel received the SAR on 7<sup>th</sup> July 2025. The briefing meeting with the review coordinator, including input from EQAR, was organised on the 17<sup>th</sup> September 2025. Furthermore, the review panel held a preparatory meeting with the agency on 30<sup>th</sup> September 2025 and an internal preparatory meeting on 14<sup>th</sup> October 2025.

The review panel studied the SAR and all the relevant documentation, and conducted a site-visit to interview AAQ's internal and external stakeholders, to add further evidence and clarify various details, as well as to deepen their understanding of the agency. The site visit was conducted in AAQ's premises in Bern on 15<sup>th</sup>, 16<sup>th</sup> and 17<sup>th</sup> October 2025. Based on all the collected information, and the review panel members' internal deliberation during and after the site visit, the panel jointly and unanimously produced this review report in the period between the site visit and January 2026. As part of the report writing process, the panel provided an opportunity for AAQ to comment on the factual accuracy of the draft report.

### **Self-assessment report**

As described in AAQ's self-assessment report (SAR), the process of preparing the SAR started with the appointment of a working group comprising two staff members: one responsible for international relations, and the other for internal quality assurance and thematic analysis.

The working group began by gathering the necessary information to initiate the self-assessment process and to ensure access to the relevant internal data, involving the entire AAQ team. The draft SAR was subsequently shared with the entire team, allowing for the identification of any factual inaccuracies and the re-evaluation of assessments where necessary.

The team met on two occasions to discuss the content of the report. The first meeting provided an opportunity for an initial discussion on the overall report, while the second focussed specifically on the elements related to the standard selected for enhancement and the SWOT.

AAQ also established a Steering Group composed of the AAQ's Director and one member of the Swiss Accreditation Council (SAC). This group met twice during the internal evaluation process and formally approved the SAR for submission to ENQA.

The SAR included links to all relevant additional documentation and information and a number of Annexes with relevant information. The panel commends the SAR for its exceptional clarity and its well-structured format. Alongside the supplementary documentation requested by the panel, the SAR served as a robust foundation for facilitating the targeted review process.

### **Site visit**

The visit took place at AAQ's premises in Bern on 15<sup>th</sup>, 16<sup>th</sup> and 17<sup>th</sup> October 2025. In readiness for the site visit, the review panel thoroughly reviewed the SAR and the agency's prepared documentation.

The panel made additional documentation requests, all of which were consistently and efficiently fulfilled by AAQ.

During the site visit, the review panel conducted eleven meetings with the relevant internal and external stakeholders of AAQ. In particular, these meetings included sessions with:

- The Director and the Deputy director of AAQ.
- The staff in charge of transversal functions, EQA processes and supporting processes.
- Ministry representatives at the federal and cantonal level.
- The SAC and the SAC office.
- The heads of some reviewed HEIs.
- Quality assurance officers of HEIs.
- Representatives from the reviewers' pool.
- A selection of relevant stakeholders, including the Swiss Student Union, Swissuniversities, the Swiss Business Federation and two trade unions in the higher education sector, Swissfaculty and Actionuni.

As part of the site visit, a workshop session was organized in collaboration with the agency in order to explore the selected enhancement area, thematic analysis (ESG 3.4).

The meetings with the staff of the agency in charge of supporting processes, quality assurance officers at HEIs, leaders of HEIs, and representatives of the reviewers' pool were conducted in hybrid format using Zoom provided by ENQA, as some of the participants were present online. All information related to the schedule of the visit as well as the position of the interviewed participants can be found in Annex I. The site visit took place in a welcoming and open environment. The panel wishes to thank the AAQ direction and staff and all other involved stakeholders for their candid and supportive attitude throughout the review process. In particular, the panel wishes to acknowledge the proactive and collaborative attitude of the participants to the workshop as well as the quality of the exchanges.

## CHANGES WITHIN THE AGENCY

### HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM

In Switzerland, the Higher Education Act (HEdA) governs universities, universities of applied sciences, and teacher education institutions. Two major changes occurred between 2020 review and today.

First, Article 65 was amended: since March 2021, institutions can appeal Swiss Accreditation Council decisions before the Federal Administrative Court within 30 days, with further recourse to the Federal Supreme Court. These decisions were not subject to appeal before.

Second, the transitional period for institutional accreditation ended on 31 December 2022. From January 2023, institutions must be accredited under HEdA to use protected designations.

The panel considered that these changes do not substantially affect the procedures of AAQ nor the compliance of the agency with the ESG.

Additionally, the quality standards for institutional accreditation, originally approved in 2015, are currently under review. While no substantive changes are planned, the revision aims to improve clarity and structure and ensure greater emphasis on core activities: research, teaching, and services. The revised standards are expected to be approved in 2026.

Together with the revision of the standards, the Swiss Accreditation Council has proposed reducing the validity period for initial accreditation from seven to five years and extending the validity period of reaccreditation to eight years. The changes are expected to enter into force in July 2026.

## AAQ'S ORGANISATION/STRUCTURE

The Swiss Accreditation Council decided in December 2023 that the SAC Office would be fully integrated in AAQ's structure. As part of the revised organisational structure, a new unit – "Accreditation and Quality Assurance" – has been created. It is led by a newly created management position responsible for overseeing all external quality assurance procedures. The Head of this unit also serves as Deputy Director of the agency.

The panel has analysed the impact of this change over the independence of the agency (ESG 3.3).

Other than that, the agency has reviewed its values and operating principles to align with evolving expectations. It has also shifted from a five-year strategic planning cycle to a rolling planning approach, in order to enhance agility and responsiveness in a dynamic higher education landscape.

It has also modified its internal quality assurance system to include thematic sessions (dedicated team meetings focused on specific topics) as well as a system of micro-project to address specific internal needs.

## AAQ'S FUNDING

No significant changes have been identified regarding the funding of the agency.

## AAQ'S FUNCTIONS, ACTIVITIES, PROCEDURES

The accreditation activities carried out by the agency remain unchanged since the last full review.

# FINDINGS: COMPLIANCE OF AAQ WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG) WITHIN THE SCOPE OF THE REVIEW

## ESG PART 3: QUALITY ASSURANCE AGENCIES

### ESG 3.3 INDEPENDENCE

Standard:

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.

#### 2020 review recommendation

The 2020 panel found the agency fully compliant regarding ESG 3.3 and did not make any specific recommendations. However, in light of the recent integration of the Swiss Accreditation Council (SAC) Office into the organisational structure of the AAQ – a substantial structural change – and in accordance with the Terms of Reference for this review, the panel has primarily assessed the effectiveness and impact of the measures implemented to safeguard the agency’s independence in response to this development.

#### Evidence

##### Organisational independence

The organisational structure, responsibilities, and operational framework of the agency are defined in the OReg-AAQ in combination with the OReg-SAC. According to this legal framework, the Swiss Accreditation Council (SAC) serves as the supervisory body of AAQ. SAC appoints the Director of AAQ, approves the agency’s strategy, and adopts the annual budget and financial reports for submission to the Swiss Conference of Higher Education Institutions. However, SAC has no role or influence over AAQ’s internal or external quality assurance processes. Indeed, Article 2 of the OReg-AAQ states that “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”.

##### Operational independence

Following the creation of the SAC Office and its integration into AAQ, a new organisational chart, available both on the AAQ website and in the AAQ’s Internal Regulations, has been established. According to the new structure, the SAC office now reports directly to the Director of AAQ. Additionally, a new role of Head for Accreditation and Quality Assurance has been established. This Head is now directly responsible for all external quality assurance procedures, enabling the Director to concentrate on broader strategic matters.

More specifically, according to AAQ’s Internal Regulations, the Director is responsible for managing the agency in technical, organisational, and personnel matters, and for leading its strategic development. Strategic responsibilities of the Director include developing the agency’s strategy and monitoring the external environment.

The Head of Accreditation and Quality Assurance, who also serves as Deputy Director, is responsible for coordinating the work of project and format managers, approving reports and proposals, and representing the Director when required. The role also includes managing the team in charge of external quality assurance procedures, which involves recruitment, performance evaluation, and professional development support.

The SAC Office operates in accordance with a specific Performance Agreement established in OReg-SAC, a legal ordinance that defines the organisational structure, responsibilities, and operational framework of the SAC. As outlined in this ordinance and in AAQ's Internal Regulations, the SAC Office is responsible for preparing and following up on SAC meetings, managing the SAC's budget and financial reporting, and handling communication with stakeholder groups, including maintaining the SAC website, publishing accreditation decisions and managing general correspondence. Furthermore, it also acts as the liaison between SAC and AAQ in the context of the accreditation procedures within the scope of the Higher Education Act.

AAQ's Internal Regulations also clearly establish that the Office has no role in the supervision of AAQ, which is exerted by the SAC. As explained above, communication with external stakeholders regarding SAC's decision-making function is handled by the SAC Office, while the external representation of the Council in the broader higher education system and its supervisory role over AAQ are carried out by the SAC Presidency.

The SAC Office is led by one full-time Head of Office. The Head of SAC Office is supported administratively by one part-time assistant who also supports AAQ. During the site visit, it was observed that the Head of Office felt well integrated into the AAQ team on a personal level, while maintaining professional independence and not interfering in AAQ's operational procedures. Meanwhile, the assistant works closely with the rest of AAQ's administrative staff, following a logic of efficiency and shared resource use.

During the site visit, evidence showed that the AAQ and the SAC Office operate entirely independently in their day-to-day activities. Their files, documents, and information are kept completely separate. The SAC Office does not take part in any meetings related to accreditation procedures, although it does attend a periodic meeting focused on "Resources."

### **Independence of formal outcomes**

In addition to the structural changes reflected in AAQ's organisational chart, the agency has decided to discontinue the publication of SAC decisions within its accreditation reports. Instead, these decisions are now referenced via a hyperlink. The panel reviewed several recent accreditation reports and confirmed that this new practice has been implemented.

### **Analysis**

During the site visit, it was confirmed that the integration of the SAC Office and the internal reorganisation leading to the creation of the new Direction for Accreditation and Quality Assurance have been positively received by both external and internal stakeholders.

From an external perspective, the changes are seen as contributing to a clearer separation of roles between SAC and AAQ – an aspect that, according to several stakeholders interviewed during the visit, was worth clarifying. Indeed, the creation of the Office has helped to distinguish more clearly the SAC's supervisory role over AAQ and its function as a decision-making body. As the SAC Office exclusively supports the latter function, communication with external stakeholders is now clearly differentiated for each of these two roles. This, in turn, makes AAQ's specific role in external quality assurance procedures more visible and easier to understand for external audiences. Despite these positive developments, the panel noted that some confusion regarding the respective functions of AAQ and SAC still persists among certain stakeholders. Internally, the AAQ team considers the establishment of a dedicated unit in charge of methodology and procedures, distinct from strategic

leadership, to be a positive development, as it provides a closer point of reference for day-to-day operations. Moreover, this structural distinction is viewed as enhancing the agency’s resilience, particularly in situations such as the succession of the Director.

At the same time, the shared use of resources between SAC and AAQ is regarded by the panel as both sensible and responsible, reflecting a commitment to organisational efficiency. The panel closely assessed the potential risks to independence associated with this arrangement and identified no significant concerns. In particular, regarding the risk that the SAC might interfere in accreditation processes, organisational measures have been put in place to keep the two bodies clearly separated. While sharing resources could in theory lead to one organisation being prioritised over the other, the evidence suggests strong teamwork and effective support that mitigates such risks.

Furthermore, the fact of no longer including SAC decisions directly in accreditation reports – now referenced via a web link – is seen by the panel as a positive step towards reinforcing the independence of AAQ’s formal outcomes. Moreover, it enables the agency to publish reports with both positive and negative recommendations for decision, which was one of the concerns raised during the previous review (see Standard 2.6 for further details).

### **Panel suggestions for further improvement**

- 1) Continue to disseminate information about the respective roles of SAC and AAQ to the different external stakeholders.

### **Panel conclusion: compliant**

## **ESG PART 2: EXTERNAL QUALITY ASSURANCE**

### **ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE**

Standard:

External quality assurance should address the effectiveness of the internal quality assurance processes described in Part I of the ESG.

### **2020 review recommendation**

During the 2020 review, the panel found AAQ to be substantially compliant with ESG Standard 2.1 and formulated the following recommendation:

- 1) “To work in order to have ESG 1.2 and ESG 1.3 explicitly included into its institutional accreditation and quality audit standards and ensure that both ESGs are systematically assessed”.

Based on this assessment, EQAR issued a judgement of partial compliance, noting that “these standards [ESG 1.2 and ESG 1.3] are fully addressed only in programme accreditation, which is voluntary except for health professions”. Since institutional accreditation is AAQ’s core activity and the only mandatory external quality assurance process for all Swiss higher education institutions, EQAR emphasised that it should, on its own, ensure full coverage of ESG Part I.

As a result, the Terms of Reference for the current review explicitly tasked the panel with assessing whether all aspects of ESG Part I are adequately covered by the criteria used in institutional evaluations.

## Evidence

In Switzerland, accreditation processes and criteria are regulated by law; specifically, by the Ordinance of the Higher Education Council on the Coordination of Teaching at Swiss Higher Education Institutions, which governs key aspects of the Bologna Declaration, and the Higher Education Act. The accreditation standards are operationalised through the Accreditation Ordinance, issued by the SAC, which complements the Higher Education Act. This ordinance explicitly refers to the European Standards and Guidelines (ESG), specifying that institutional accreditation procedures must be based on internationally recognised standards, and directly identifying the ESG as the reference framework.

AAQ does not have the legal authority to amend these standards. This responsibility lies with the Swiss Conference of Higher Education Institutions. Revisions are carried out by the SAC, and AAQ is punctually invited to contribute to the process. The current standards for institutional accreditation have been in place since 2015. A new set of standards is currently under revision but is not expected to come into force until approximately 2026.

Regarding Quality Audits in Austria, the Austrian Higher Education Quality Assurance Act (Hochschul-Qualitäts-sicherungsgesetz – HS-QSG) defines a set of “Audit Areas”. AAQ defines the relevant standards of each Audit Area. AAQ does not have any capacity to influence the development of the Audit Areas. As regards system accreditation in Germany, 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 I. 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.

AAQ produces guidance documents for experts and institutions to support the implementation of the accreditation standards, such as the Explanations of Quality Standards and the Guide to Institutional Accreditation. In evaluating alignment of the accreditation standards with the ESG, the panel consulted both the relevant legal documents and the supplementary materials provided by AAQ.

The correspondence between the accreditation standards for all AAQ processes and the ESG is shown in the mapping below, extracted from the Self-Assessment Report (p. 34 and annex I) of the 2020 ENQA review.

<b>ESG Part I</b>	<b>Institutional accreditation HEdA</b>	<b>Programme accreditation HEdA (subject to institutional accreditation)</b>	<b>Quality audit HS-QSG</b>	<b>System accreditation in Germany under Interstate Treaty</b>
Standard I.1	Standards 1.1, 1.2, 1.3, 2.3 and 5.1	Standards 4.1, 4.4	Standards 1.1, 1.3, 5.1 and 5.2	Standard 17
Standard I.2	Indirectly Standards 3.1 and 5.2 Explanations of Standard 3.3	Standards 1.1, 1.2, 2.1, 2.2	Standards 1.4, 2.1, 5.1 and 5.3	Standard 17
Standard I.3	Explanations of Standard 3.2	Standard 2.3	Standard 2.2	Standard 17
Standard I.4	Standard 3.4	Standard 3.3	Standard 5.1 and 5.3	Standard 17
Standard I.5	Standards 4.2	Standard 3.3	Standards 4.1, 4.2 and 4.3	Standard 17
Standard I.6	Standards 4.3	Standard 3.4	Standard 1.4	Standard 17
Standard I.7	Standard 2.2	Standard 4.2	Standard 1.4	Standard 17
Standard I.8	Standard 5.2	Standard 5.2	Standard 5.2	Standard 17

Standard 1.9	Standards 3.2, 3.1, 4.1	Standards 2.2, 3.1, 4.1	Standards 2.1	Standard 17
Standard 1.10	Standard 1.4	Inst. Standard 1.4	Standard 1.3	Standard 17

Moreover, the following tables, extracted from the 2025 SAR, show more specifically how the standards used in institutional accreditation correspond to ESG 1.2 and 1.3.

<b>ESG 1.2. Design and approval of programmes</b>	
Institutions should have processes for the design and approval of their programmes (HEdA 3.1 and 3.3). The programmes should be designed so that they meet the objectives set for them, including intended learning outcomes (HEdA 3.1 and 3.3). The qualification resulting from a programme should be clearly specified and communicated (HEdA 5.2) and refer to the correct level of national qualifications framework and the Framework for Qualifications of the European Higher Education Area (HEdA 3.3).	<ul style="list-style-type: none"> <li>• HEdA 3.1 states that teaching, research and service provision should be linked to type, profile and strategic objectives.</li> <li>• The explanation to this standard points out that the coherence of programme offerings relation to HEI's profile implies, among other things, the design and approval of programmes, learning objectives learning outcomes, and level of qualification to be achieved.</li> <li>• HEdA 3.3 states that quality assurance system should take into account EHEA principles.</li> <li>• HEdA 5.2 states that the HEI should publish objective information about programmes.</li> </ul>
<b>ESG 1.3. Student-centred learning, teaching and assessment</b>	
Institutions should ensure that programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach (HEdA 3.2).	<ul style="list-style-type: none"> <li>• HEdA 3.2 stipulates periodic evaluation of teaching and research activities and service provision. The explanation to this standard refers specifically to ESG 1.3.</li> </ul>

The panel also reviewed a sample of reports to assess how ESG standards 1.2 and 1.3 were implemented in the institutional accreditation process. Specifically, four institutional accreditation reports were selected, representing a diverse set of institutions: three public and one private, including two French-speaking institutions, one Italian-speaking institution, and one German-speaking institution.

The panel confirms that extensive evidence of the implementation of various aspects of ESG 1.2 and 1.3 was found in these reports. With regard to ESG 1.2, multiple instances illustrated that the experts had explicitly considered programme design mechanisms and processes supporting the continuous (re)design of programmes, as well as the inclusion of stakeholders in these processes.

As for ESG 1.3, the standard emphasises that institutions should deliver their programmes in ways that encourage students to take an active role in shaping their own learning process, and that assessment methods should reflect and support this student-centred approach, evidences of which were found in all analysed reports.

A selection of excerpts from the reports related to ESG 1.2 and 1.3 is included in the table below.

Report type	Selection of excerpts from the reports related to ESG 1.2	Selection of excerpts from the reports related to ESG 1.3
<b>R1-Private/French</b>	<p>“While some calls for more innovative didactical and pedagogical approaches to programme development were expressed, the group of experts recognise that there was strong support of the actions taken to update programmes and ensure that they are relevant, adaptable and responsive to evolving markets and trends.”</p> <p>“The design of programmes at the institution is enriched through collaborations with academics in other institutions and the wider [name of the specific industry] industry.”</p>	<p>“Quality as transformation – looks at learning that is centred on the student and views quality as the value-added transformation and empowerment of a student through the learning process.”</p> <p>“Students are included in programme committees, where they contribute towards programme development, monitoring and review. The group of experts supported this decision and agreed that students were more likely to be confident in their roles and their contributions.”</p>
<b>R2-Public/French</b>	<p>“X also currently lacks an institution-wide procedure for reviewing programme curricula at the institutional level. X proposes [a number of measures] to standardise curricula and develop procedures for reviewing them.”</p> <p>“Decisions to introduce new Bachelor’s and Master’s degree programmes are within the remit of the X’s Direction, and are made in response to changing societal needs.”</p>	<p>“X seeks to encourage student autonomy. [X’s learning center] provides a range of resources to help students learn to work independently and effectively, such as videos on group work, e-books, tests that allow them to assess their knowledge online and other tools that help develop learning habits.”</p>
<b>R3-Public/Italian</b>	<p>“The creation of new programmes responds to strategic objectives identified by the Rectorate and by the Faculties in their respective development plans, which are approved by the University Council. The needs analysis often takes into account the expectations of the labour market and international trends.”</p> <p>“When designing new study programmes, X consults external experts and representatives of the professional world, and the proposals are often developed in collaboration with other universities, both in Switzerland and abroad.”</p>	<p>“The institution has a clear pedagogical orientation that favours active student participation, small class sizes, and close interaction between teachers and students. The limited size of the university allows for direct and personal learning relationships.”</p> <p>“Teaching methods at X encourage discussion, group work, and the practical application of theoretical concepts. Several programmes include project-based courses and case studies to develop critical thinking and problem-solving skills.”</p>
<b>R4-Public/German</b>	<p>“The reviewers noted during the on-site meetings that students, mid-level academic staff, faculty members, and</p>	<p>“The module descriptions include references to standards, credit allocation, and objectives related to</p>

	administrative staff are well involved in the implementation and development of quality assurance.”	knowledge, learning, and skills. Each module description also contains information about the format and content of the assessment.”  “Subjects and practical training are evaluated from the perspective of both teaching and research staff, as well as students. These evaluations are based on the twelve training standards and are complemented by online surveys and semester evaluations.”
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During the visit, and particularly during the meetings with staff responsible for EQA processes, the reviewers and representatives of the HEIs, the panel aimed to understand the overall approach adopted by AAQ in institutional accreditation procedures. The panel found strong evidence that AAQ follows a fit-for-purpose approach, with review processes adapted to the specific characteristics of each institution while keeping a good balance between compliance and enhancement.

It also became clear throughout the visit that institutional accreditation is focused on understanding the strategic objectives of the institution, assessing the effectiveness of its internal quality assurance system in order to adapt to those objectives, and ensuring compliance with the legal framework, an approach fully in line with the ESG. All standards from part I of the ESGs are explicitly considered throughout the process. In particular, reviewers interviewed confirmed that student-centred learning is a core element of their evaluation procedures, and that the development of new programmes is systematically considered in the assessments.

**Analysis**

The panel reviewed all available evidence and concluded that there is a clear alignment between the 2015 standards and the ESG across all AAQ processes falling within the scope of the ESG, including institutional accreditation and quality audits. In the specific case of institutional accreditation, standards I.2 and I.3 are addressed both in the institutional accreditation standards and in the accompanying explanations. Moreover, the panel was reassured that both ESGs are appropriately and systematically covered not only in the accreditation framework but also in its implementation.

The panel thus found no concerns regarding the systematic application of ESG standards in institutional accreditation; however, it noted that AAQ applies a fit-for-purpose approach to these evaluations. As a result, although all ESG standards are always considered in the evaluations, depending on the specific characteristics or the previous record of the institution, not all standards carry the same weight in all cases, nor are they equally visible in the final reports. This became evident during the analysis of specific reports, where ESG I.3, for instance, was given particular emphasis in certain cases due to the institution’s specific context, and reviewers explored it in greater depth, while being less explicit about it in other cases.

The panel fully acknowledges that this tailored approach is both logical and advisable in an institutional accreditation process. Nevertheless, it would be worthwhile to remain vigilant to ensure that all ESG Part I standards are clearly visible in all cases in the experts’ evaluation reports.

**Panel recommendations**

- 1) Remain vigilant to ensure that all ESG Part I standards are clearly visible in all cases in the experts’ evaluation reports.

## Panel conclusion: compliant

### ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

Standard:

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.

#### 2020 review recommendation

The 2020 review panel concluded that AAQ was substantially compliant with ESG Standard 2.2 and issued the following recommendation:

- 1) The panel recommends AAQ to reflect on the criteria applied and include additional quality-oriented content when identified as necessary, jointly with stakeholders.
- 2) The panel recommends to develop and extend the stakeholders involvement in the design of methodologies by bringing about more discussion opportunities.
- 3) As already mentioned by the 2016 review panel, AAQ and SAC should increase the professional world involvement at all levels.

For its part, EQAR pronounced a judgement of partial compliance regarding this standard, and requested the panel to assess whether the feedback from stakeholders is being efficiently and systematically utilized to enhance the agency's activities.

#### Evidence

The agency does not have the autonomy to develop quality standards, as this responsibility, according to the Higher Education Act, lies with the Swiss Conference of Higher Education Institutions. However, under the AAQ Regulations, AAQ retains full independence to design and develop its own processes and methodologies (see Article 4 of OReg-AAQ).

Feedback is collected systematically through various mechanisms, including surveys, debriefings after site visits, workshops, informal collaboration with IQA units, and the use of Sounding Boards in Germany and in institutional accreditation. Evidence of these practices across all EQA processes was confirmed during meetings with EQA staff, reviewers, HEI officers, and HEI representatives.

Over recent years, feedback collection methods have evolved to prioritize direct interaction over surveys. These changes were introduced following a thematic analysis conducted by AAQ in 2020. The study, titled *Internal Quality Assurance and Development by Accreditation Agencies: Which Methods Are Effective for Gathering and Using Feedback?* confirmed that stakeholder input has significantly contributed to improving AAQ's procedures. It also highlighted the growing importance of participatory forums – such as expert meetings, discussions with HEI representatives, and workshops – while revealing that surveys were less effective.

The panel noted that feedback mechanisms have also evolved over time to reflect new stakeholder configurations, such as the creation of a community of practice for HEI quality officers, which made the Sounding Board mechanism obsolete for institutional accreditation.

The panel found specific evidence that feedback gathered has informed several changes in ESG-related activities. In particular, the institutional reaccreditation process has introduced several important changes, such as an open “Meet and Greet” slot, focus themes, and a new integrated report. Stakeholders interviewed during the visit confirmed that these changes resulted from consultation processes and viewed them as steps toward enhancing efficiency and relevance of the institutional accreditation, though they noted that the impact would need to be assessed in practice.

The panel also observed that AAQ has introduced changes in other processes, although of lesser scope. For example, in the different programme accreditation processes run by the agency, the respective guides have been adapted to comply with the new SAC fee ordinances released in 2020. More significant changes include the introduction of an integrated report in programme accreditation under Higher Education Act and the Medical Professions Act.

### **Analysis**

After reviewing the available evidence, the panel is confident that feedback is collected systematically across the various ESG-related EQA processes managed by the agency and is effectively used to enhance those processes. The panel noted in particular that, as recommended during the 2020 review, AAQ has introduced qualitative components – especially in institutional accreditation – by allowing institutions to select a focus area to be explored in greater depth.

The panel noted that feedback mechanisms are not standardized across all formats. Feedback is gathered more formally and intensively in institutional accreditation – the agency’s core activity – than in processes with a less prominent role. The collection and use of feedback therefore appear proportional to the scale of activities, which the panel considers appropriate and indicative of an efficient use of resources. The panel also considered the adaptation of feedback mechanisms following the thematic analysis and the emergence of new stakeholder configurations as a positive development, which illustrates that the agency is following both an informed and a flexible approach.

While this flexible approach is understood and appreciated, the panel thinks it would still be useful for AAQ to identify opportunities for streamlining feedback mechanisms and transferring good practices across EQA processes.

Regarding the involvement of professionals in AAQ and SAC, the panel noted that while AAQ includes professionals in all its panels, it does not have the authority to enforce composition criteria on SAC.

### **Panel recommendations**

- 2) Explore opportunities to streamline feedback mechanisms and facilitate the transfer of good practices across the agency’s various EQA processes.

### **Panel conclusion: compliant**

## **ESG 2.4 PEER-REVIEW EXPERTS**

Standard:

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

### **2020 review recommendation**

The 2020 panel found that AAQ was substantially compliant regarding ESG 2.4. It issued the following recommendation:

- 1) The panel recommends AAQ to include a student member for all programme evaluation procedures, including for continuing education programmes.

Given that continuing education programmes in Switzerland are aimed at professionals already active in the workforce, AAQ submitted a request to ENQA for a review of the experts' judgement. The ENQA Board upheld the agency's position and revised the recommendation as follows: "The agency should invest its efforts and continue to include a perspective represented by participants of non-degree programmes (i.e. of programmes that fall within the scope of the ESG) in the evaluation panels for these programmes".

Nevertheless, EQAR considered that AAQ was partially compliant regarding this standard and mandated the 2025 panel with the task of assessing whether the agency includes student members in all panels of its ESG-aligned activities.

### **Evidence**

The criteria for selecting experts and the training mechanisms have remained largely unchanged since the last review.

Regarding expert selection, the criteria are defined in the legal framework (HEdA Ordinances) and detailed in the guidelines prepared by the agency for the various EQA processes. A long list of candidates is compiled based on the expertise requirements set by the HEI, while also considering potential conflicts of interest. This list is reviewed by AAQ, the corresponding HEI, and SAC. From this list, the specific evaluation panel is then appointed.

For institutional accreditation, the panel consists of at least five experts, including academics, quality assurance professionals, and one student. The same composition applies to quality audits in Austria and system accreditations in Germany. For programme accreditation under HEdA, a minimum of three experts is appointed, one of whom is a student. For continuing education programmes requesting accreditation and falling within the scope of the ESG (i.e. Master of Advanced Study programmes), AAQ always includes a "student equivalent", this is to say, a participant's perspective – typically a professional already active in the workforce, which reflects the target audience.

For voluntary EQA evaluations tailored to specific scopes and objects of analysis (such as IQA systems, programmes, or departments), the expert group comprises three to five members, including a student or, in the case of evaluations related to continuing education, a "student equivalent."

Regarding the training of experts, evidence gathered during the visit confirmed the information provided in the guidelines prepared by AAQ for the different EQA processes, as well as in the SAR corresponding to the 2020 review. Experts receive training, mainly on an individual and mission-specific basis. In all cases, they receive the corresponding guidelines and a briefing – either paper or telephone-based. In institutional accreditation procedures, the panel meets a month before the site visit.

In the case of student panel members, specific training sessions are organized jointly by the Swiss Student Union (VSS) and AAQ. AAQ actively participates in these sessions and assumes their costs. The panel noted that the agreement with the VSS has been recently renewed and observed during the site visit that VSS expressed satisfaction with the collaboration.

In addition to the formal training provided to panel members, evidence shows that AAQ staff provides extensive support to experts before, during, and after the missions, while safeguarding the rigour of the process, a contribution that reviewers and HEIs particularly value.

## Analysis

After analysing the available evidence, the panel concluded that the mechanisms for selecting experts – based on a long-list/short-list approach – remain appropriate. As acknowledged by the HEIs during the site visit, this method provides flexibility while ensuring that the panel’s expertise is tailored to the specific needs of each institution and that conflicts of interest are avoided.

The panel observed that the training mechanisms were highly individualized and adapted to the specific requirements of each mission. Indeed, it became evident during the site visit that AAQ places strong emphasis on personalized support. The panel considered this an understandable practice given the dynamic nature of the expert pool, the diversity of missions, and the multilingual context. Furthermore, the panel noted the high level of satisfaction expressed by HEIs regarding the composition of panels, which demonstrates that AAQ succeeds in assembling panels with highly relevant expertise adapted to each institution and process.

Regarding the inclusion of students in panels, evidence gathered during the review confirmed that students – or their functional equivalents – are represented in all panels in all EQA processes that fall within the scope of the ESG. In the case of continuing education programmes, the panel found it appropriate to include active professionals, as these programmes are specifically targeted at that profile. This approach, in the panel’s view, fulfils the underlying principle of including students in panels – namely, ensuring that a participants’ perspective is incorporated into EQA processes.

Additionally, the panel considered that students receive appropriate training and regarded the recent renewal of collaboration with the Swiss Student Union (as confirmed by testimonies collected during the site visit) as evidence of a constructive relationship that AAQ and VSS have built and strengthened over time.

## Panel commendations

- 1) The panel commends AAQ for its ability to assemble panels that are both flexible and highly relevant to institutions – a challenging task given the cultural, institutional, and linguistic diversity of the context.
- 2) The panel wishes to recognize AAQ for its professionalism at providing support to both HEIs and reviewers.

## Panel conclusion: compliant

## ESG 2.6 REPORTING

Standard:

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.

## 2020 review recommendation

In 2020, the panel found that AAQ was substantially compliant regarding this standard and issued two recommendations:

- 1) As already mentioned by the review panel in 2016, the present panel also recommends AAQ to publish negative reports.

- 2) The panel recommends AAQ to alert the regulatory bodies on the existing risk that HEIs can decide not to authorise the publication of the external evaluation report because of no legal notice for this. In the meantime, the agency should anticipate this risk with a process to apply if a HEI takes this type of decision.

However, AAQ submitted a complaint with ENQA, arguing that the agency had consistently published all reports despite the lack of an explicit legal basis for publication in Switzerland. As a result of this complaint, the first recommendation was withdrawn, and the second was reclassified as a suggestion for further improvement by the ENQA Board. Consequently, the ENQA Board issued a judgment of full compliance regarding this standard.

Nevertheless, EQAR considered the standard to be only partially compliant and requested the panel to verify whether the agency publishes all reports from its ESG-aligned activities, including those resulting in a negative decision.

### **Evidence**

The panel verified that publication of reports is presented in all AAQ guides as a final 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 activity by AAQ and its predecessor OAQ have been consistently published and are available via AAQ website.

Expert reports include the following sections:

- Section A – Decision of the Swiss Accreditation Council (SAC)
- Section B – Proposal of the agency
- Section C – Expert Report
- Section D – Position Statement of the Assessed HEI

Previously, Section A reproduced the SAC's accreditation decision. To reinforce the independence between both bodies, AAQ now limits its role to providing a link to the SAC's decisions. The panel reviewed reports published in 2025 and confirmed that this practice has been fully implemented. Indeed, section A now includes the following sentence in all reports: "The Swiss Accreditation Council publishes its positive accreditation decisions." This sentence is accompanied by a generic link to the SAC website where accreditation decisions are published.

Section B contains a synthesis report summarizing the main conclusions of the assessment, including the recommendations and conditions – mandatory elements that the HEI should fulfil to maintain accredited status – as well as an accreditation proposal. This proposal reflects the overall opinion of the expert group, which is endorsed by the agency, regarding the HEI's compliance with accreditation criteria. The SAC remains free to issue its own judgment based on the expert report; however, as a general rule, the agency's recommendation is followed.

As stated in the guidelines of each process and in the contract established with HEIs, the agency publishes all its reports containing – as mentioned before – recommendations for accreditation, whether positive or negative. At the same time, the SAC is only mandated to publish positive accreditation decisions.

Negative accreditation decisions are expected to be very rare, as HEIs prefer to withdraw their applications if an unsuccessful outcome appears likely. Indeed, as specified in the Accreditation Ordinance, HEIs may withdraw their application before the accreditation decision if they receive a negative recommendation or an excessive number of conditions. In such cases, the report is not published, and there is no public record of the process. During the site visit, AAQ provided the panel with a full list of institutional accreditation procedures and the state of each procedure since the

moment the institutional accreditation process was implemented in Switzerland. The panel observed that ten procedures had been withdrawn. From those, one of them was terminated by AAQ due to the detection of irregularities and another one was in fact withdrawn due to the institution's integration into a wider faculty. In conclusion, eight applications were withdrawn due to a potential negative accreditation, which stands for approximately 12% of the total initial accreditation applications handled by AAQ.

During the site visit, the panel observed that the reports are read by both the government and other universities. They are used by HEIs for quality enhancement and benchmarking against peer institutions. The government relies on these reports to implement control measures upon programmes and institutions.

The panel was also made aware in the SAR and through evidence during the visit that AAQ has decided to modify the format of the report for the institutional accreditation process. Indeed, as a result of feedback gathered after the first round of institutional accreditation, the format has now evolved towards an integrated model with the self-assessment and the expert panel report published in a single document.

### **Analysis**

The panel understood that the Swiss legal and cultural context tends to limit transparency regarding negative decisions, as the legal framework prioritizes confidentiality. HEIs have the right to withdraw from the procedure at any time before the formal decision, and the agency has no authority to prevent this. In such cases, the procedure is legally considered as if it never occurred, making publication of the report virtually impossible. The panel was reassured to observe that the number of withdrawn procedures remains relatively small within the Swiss system.

The panel reflected on this situation, examined the legal constraints, and assessed compliance in terms of AAQ's actions within its mandate.

In this regard, the panel welcomed AAQ's recent decision to exclude SAC decisions from its reports. This measure allows AAQ to publish reports containing both positive and negative accreditation recommendations without interfering with SAC's mandate, which restricts it to publishing only positive decisions.

The panel noted that, to date, no case has arisen where AAQ has published a report on its website with a negative accreditation recommendation. However, under the current framework, such cases may occur in the future; particularly, if an HEI receives a negative accreditation recommendation and does not withdraw its application. In the panel's view, this represents a significant improvement in transparency within the Swiss system. Previously, systemic constraints made it virtually impossible to find any trace of a negative assessment of an HEI or programme in any possible case.

The panel also realised that, should such a case like this arise, two scenarios are possible:

- 1) A report published on AAQ's website with a negative accreditation recommendation, while SAC – if it follows AAQ's opinion – does not publish the decision on its own website.
- 2) A report published on AAQ's website with a negative recommendation, while SAC – if it does not follow AAQ's opinion – publishes a positive decision on its website.

In both cases, the general public could be confused, and the panel suggests that this situation should be explained carefully to avoid misunderstandings.

Furthermore, the panel considered the recent evolution towards an integrated format of the expert report in the institutional accreditation – where the self-assessment and the expert panel report are

published as a single document – an interesting development. This approach could enhance the clarity of the report, making it more self-explanatory, and, again, improve transparency within the system, as, regardless of the legal context, it ensures that not only the experts' evaluation report is published but also the HEI's self-assessment.

**Panel suggestions for further improvement**

- 2) Develop clear communication strategies to explain to the general public the meaning and implications of a report containing a negative accreditation recommendation, should such a situation arise. It is suggested that this explanation explicitly outline the respective roles of AAQ and SAC and their respective policies regarding publication to avoid confusion.

**Panel conclusion: compliant**

# ENHANCEMENT AREAS

## ESG 3.4: THEMATIC ANALYSIS

### Introduction

As expressed in the SAR and in the preliminary discussions with the agency, AAQ wished to profit from the ENQA targeted review to analyse their current thematic analysis practices and find opportunities for improvement. Particularly, in light of recent technological developments, such as artificial intelligence (AI), the agency was considering how it could become even more effective and relevant in the area of thematic analysis.

The agency produces two types of reports: synthesis reports and transversal analyses. Indeed, the agency regularly publishes synthesis reports for each of its accreditation formats. These documents present the main findings from a given accreditation cycle, providing reflections on methodological aspects of each cycle, incorporating feedback from all stakeholders involved, and offering recommendations for methodological improvement.

AAQ also regularly publishes transversal analyses on topics relevant to quality in higher education. These studies draw on a range of sources and cover diverse themes – sometimes focusing on a specific topic, other times examining processes or outcomes through a transversal lens. They may be conducted in collaboration with partner organizations or outsourced to third parties. Most of these studies are completed within one to two years.

While the agency has a clear understanding of the role synthesis reports play within its internal quality assurance system, there is no defined process for deciding when transversal analyses should be carried out or how topics should be selected.

### Description of the work done during the visit

To explore this issue, a two-hour workshop was held during the site visit. After a brief introduction, the workshop was divided into two parts. The first part focused on strategic reflection, guided by the question: “Why conduct thematic analysis and for whom?” The second part focused on the tactical and operational level, addressing processes, methods, and tools for conducting thematic analysis; it was guided by the question: “How should analyses be conducted?”

Each reflection lasted 45 minutes. Six participants from AAQ took part, including the general and the deputy director and four project managers. These participants split into two breakout groups. The members of the expert panel divided between the groups and acted as facilitators. Between the two parts, plenary discussions were held to share insights. The full programme of the workshop can be found in Annex 4

In addition, the expert panel gathered evidence during the visit regarding the role thematic analysis plays for AAQ and stakeholders’ perceptions of it.

### Summary of key ideas

Below is a summary of key ideas that the panel believes emerged from the discussion. The panel wishes to emphasize that the exchange was highly stimulating and that the agency engaged actively and constructively in the discussions. Collaborative written outputs were produced and retained by the agency. Here we summarize a set of essential ideas from the panel’s perspective, although the agency has likely drawn its own conclusions beyond these.

Following the discussion, the panel understood that the agency currently interprets thematic analysis primarily as relating to methodology and procedures. It also considers it useful for its internal quality assurance system and for various stakeholders. However, during the visit, it became clear that

stakeholders were largely unaware of thematic analyses and did not read them, even though it seemed evident that a natural audience for the current reports could be HEIs' quality assurance officers.

Given this situation, the panel believes the question is twofold:

- 1) How can the existing approach be improved?
- 2) Could thematic analysis evolve towards content-oriented analyses that inform different audiences (HEIs, policymakers, etc.) and add value to the system?

Regarding the first question, based on the workshop and evidence gathered during the visit, there appears to be room for improvement in the current approach, particularly in:

- Defining target audiences;
- Adapting content and format accordingly;
- Communicating more effectively about thematic analyses.

Moreover, the agency could make better use of material generated through accreditation processes to stimulate internal discussions, facilitate exchange in existing forums, and report on conclusions reached. This would require structuring a process around thematic analysis.

Regarding the second question, the panel wishes to clarify that expanding this area towards generating more content does not necessarily imply engaging in research activities – there is a strong view against this within the Swiss system. The panel recognizes these constraints and the framework within which the agency operates. Nevertheless, a wealth of valuable information is being collected by AAQ as part of its daily EQA activity. While its primary purpose is to inform individual accreditation decisions and HEIs' internal learning, aggregated information could also provide insights into system-level trends and the quality of higher education – not just into quality assurance processes. Unlocking this potential would probably imply reinforcing analysis capacities of AAQ staff (e.g. learn about qualitative content analysis techniques and tools). At present, much of this potential value remains untapped, representing a missed opportunity and a waste of resources for the Swiss system.

## **Conclusion**

The workshop triggered these and other reflections and can be seen as a prototype for a broader discussion within the agency, possibly involving external stakeholders. In the view of the panel, the agency does not need to expand its data sources, but rather to:

- Build audiences and dissemination channels;
- Strengthen its methodological approach;
- Establish internal spaces for brainstorming and exchange on thematic analysis (e.g., dedicated project meetings);
- Formalize this work into a coherent internal process and policy.

The panel hopes this experience has served as a starting point to stimulate internal reflection within AAQ and that it was as rewarding for the agency as it was for the panel.

# ADDITIONAL OBSERVATIONS

## GENERAL COMMENDATIONS

During the visit, several stakeholders highlighted the agency's professionalism, particularly its ability to strike an excellent balance between rigor and support. AAQ maintains the necessary distance in its evaluations while providing constructive guidance to both review panels and higher education institutions, fostering trust and collaboration through careful relationship management.

The agency also demonstrates remarkable efficiency in resource utilization, notably through the synergies built in the process of integration of the SAC Office into AAQ's structure; it also shows resilience as an organization in an evolving environment.

AAQ stands out as a strong example of an agency that has successfully carved out a niche in a complex higher education landscape. It adds clear value by aligning with the ESGs while remaining firmly rooted in Switzerland's cultural and legal context. This adaptability, combined with its recognized expertise, makes AAQ highly appreciated by stakeholders and reinforces its role as a key actor in promoting quality and continuous improvement in higher education in Switzerland.

# CONCLUSION

## SUMMARY OF COMMENDATIONS

### ESG 2.4:

- 1) The panel commends AAQ for its ability to assemble panels that are both flexible and highly relevant to institutions – a challenging task given the cultural, institutional, and linguistic diversity of the context.
- 2) The panel wishes to recognize AAQ for its professionalism at providing support to both HEIs and reviewers.

### General commendations:

- 3) The panel commends AAQ for its professionalism. In particular, for its ability to strike an excellent balance between rigor and support in running EQA processes.
- 4) The panel wishes to commend AAQ for its efficiency in resource utilization, notably through the synergies built in the process of integration of the SAC Office into AAQ's structure.
- 5) The panel recognizes AAQ success in carving out a niche in a complex higher education landscape. It adds clear value by aligning with the ESGs while remaining firmly rooted in Switzerland's cultural and legal context.

## OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

### ESG 3.3: Compliant

### ESG 2.1: Compliant

- 1) Remain vigilant to ensure that all ESG Part I standards are clearly visible in all cases in the experts' evaluation reports.

### ESG 2.2: Compliant

- 2) Explore opportunities to streamline feedback mechanisms and facilitate the transfer of good practices across the agency's various EQA processes.

### ESG 2.4: Compliant

### ESG 2.6: Compliant

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, AAQ is in compliance with the ESG.

## SUGGESTIONS FOR FURTHER IMPROVEMENT

### ESG 3.3:

- 1) Continue to disseminate information about the respective roles of SAC and AAQ to the different external stakeholders.

### ESG 2.6:

- 2) Develop clear communication strategies to explain to the general public the meaning and implications of a report containing a negative accreditation recommendation, should such a situation arise. It is suggested that this explanation explicitly outline the respective roles of AAQ and SAC and their respective policies regarding publication to avoid confusion.

# ANNEXES

## ANNEX I: PROGRAMME OF THE SITE VISIT

SN	TIMING	TOPIC	PERSONS FOR INTERVIEW
1	14h00-15h20 (80 min)	Review panel's kick-off meeting and preparations for site visit (without agency)	Panel members
	15h20-15h30	Break	
2	15h30-16h30 (60 min)	An online clarifications meeting with the agency's resource person to clarify the agency's changes since the last full review against the ESG and to understand the background and motive of the agency's choice of the self-selected ESG standard for enhancement (next to the overall HE and QA context of the agency)	Director
3	16h30-17h00 (30 min)	Wrap-up	Panel members
4	16h00-17h30 (90 min)	Review panel's pre-visit meeting and preparations for day 1	Panel members
5	As necessary	A pre-visit meeting with the agency's resource person to clarify any remaining questions after the online clarifications meeting	Director Head of Accreditation and Quality Assurance, Deputy Director
6	8h30-9h00 (30 min)	Review panel's private meeting	
7	9h00-9h45 (45 min)	Meeting with AAQ Director and Deputy Director	Director Head of Accreditation and Quality Assurance, Deputy Director; Format manager institutional accreditation.
	9h45-10h00 (15 min)	Review panel's private discussion	

SN	TIMING	TOPIC	PERSONS FOR INTERVIEW
8	10h00-10h30 (30 min)	Meeting with the team responsible for preparing the SAR	Director Project Manager (Internal Quality Assurance) Project Manager (National and International Relations)
	10h30-10h45 (15 min)	Review panel's private discussion	
9	10h45-11h30 (45 min)	Meeting with representatives from team in charge of transversal functions transversal functions	Project Manager (Internal Quality Assurance) Head of Accreditation and Quality Assurance, Deputy Director (Communication) Project Manager (National and International Relations)
	11h30-11h45 (15 min)	Review panel's private discussion	
10	11h45-12h45 (60 min)	Meeting with key staff of the agency/staff in charge of external QA activities	Project Manager (Format manager accreditation MedPA). Project Manager (Format manager accreditation HEdA and GesBG/LPSan) Project Manager (Format manager System accreditation) Project Manager (Format manager quality audit and evaluations) Project Manager (Format manager accreditation PsyG/Lpsy). Project Manager (Format manager accreditation HEdA and MedPA)
	12h45-13h45 (60 min)	Lunch (panel only)	

SN	TIMING	TOPIC	PERSONS FOR INTERVIEW
I1 (online)	13h45-14h30 (45 min)	Meeting with key staff of the agency/staff in charge of supporting processes	Assistant AAQ and HR. Online Assistant SAC and Accountant. Online
I2	14h30-15h00 (30 min)	Review panel's private discussion and workshop preparation	
I3	15h00-17h00 (120 min)	Discussion/workshop regarding thematic analysis	Director Head of Accreditation and Quality Assurance, Deputy Director; Format manager institutional accreditation. Project Manager (Format manager accreditation MedPA). Project Manager (Communication, Data) Project Manager (Thematic analysis) Project Manager (Format manager accreditation HEdA and MedPA)
I4	17h00-18h00 (60 min)	Wrap-up meeting among panel members and preparations for day 2	
I5	8h30-9h15 (45 min)	Review panel's private meeting	
I6	9h15-10h (45 min)	Meeting with ministry representatives	<u>Federal level</u> Deputy Director State Secretariate for Education, Research and Innovation <u>Cantonal level</u> Head of Department, Canton and Republic of Wallis/Valais Head of Department, Canton and Republic of Bern
	10h-10h15 (15 min)	Review panel's private discussion	

SN	TIMING	TOPIC	PERSONS FOR INTERVIEW
17 (online)	10h15-11h (45 min)	Meeting with heads of some reviewed HEIs/ HEI representatives	CEO Les Roches, Crans Montana Rector University of Teacher Education Wallis/Valais Former Rector of the University of Bern <i>Former Prorector Education RWTH Aachen. online</i>
	11h-11h15 (15 min)	Review panel's private discussion	
18	11h15-12h (45 min)	Meeting with the SAC Office and the SAC	Head of the Office SAC Vice-president of SAC
	12h-13h (60 min)	Lunch (panel only)	
19 (online)	13h-13h45 (45 min)	Meeting with quality assurance officers of HEIs	<i>Head of Quality Assurance, University Linz. Online</i> Head of Staff Vice-Rectorate for Quality and Sustainable Development. Head of Quality Assurance, University of St. Gallen. <i>University of Teacher Education Vaud (online)</i> Head of Quality Assurance, University of Applied Sciences Lucerne.
	13h45-14h (15 min)	Review panel's private discussion	
20  Online	14h-14h45 (45 min)	Meeting with representatives from the reviewers' pool	Expert, Government Commissioner VRT <i>Expert, ZHAW. Online</i> Expert, FernUni <i>Expert, IMD Lausanne. Online</i>

SN	TIMING	TOPIC	PERSONS FOR INTERVIEW
			Expert, University of Teacher Education ST. Gallen Student expert (UZH).
	14h45-15h (15 min)	Review panel's private discussion	
21	15h-15h45 (45 min)	Meeting with stakeholders, such as employers, students, local community	Secretary General, VSS Head of Division Higher Education Policy, Swissuniversities Head of General Economic Policy & International Relations, Ständiger Ausschuss Arbeitswelt, Economiesuisse. President, Swissfaculty Board Member, Actionuni
	15h45-16h (15 min)	Review panel's private discussion	
22	16h-17h (60 min)	A session to further investigate additional topics that may arise during the site visit regarding agency's compliance with the ESG (as necessary)	Director Head of Accreditation and Quality Assurance, Deputy Director
23	17h- 18h30 (90 min)	Wrap-up meeting among panel members: preparation for day 3 and provisional conclusions	
24	8h00-9h00 (60 min)	Meeting among panel members to agree on final issues to clarify	
25	9h00- 10h00 (60 min)	Meeting with AAQ Director to clarify any pending issues	Director Head of Accreditation and Quality Assurance, Deputy Director

SN	TIMING	TOPIC	PERSONS FOR INTERVIEW
26	10h00-11h30 (90 min)	Private meeting between panel members to agree on the main findings	
27	11h30-12h00 (30 min)	Final de-briefing meeting with staff and Board members of the agency to inform about preliminary findings	
	12h00-13h00 (60 min)	Lunch	

## ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

# Targeted review of Swiss Agency of Accreditation and Quality Assurance (AAQ) against the ESG

# Annex I: TERMS OF REFERENCE

The present Terms of Reference were agreed between AAQ (applicant), ENQA (coordinator) and EQAR.

April 2025

## 1. Background

Swiss Agency of Accreditation and Quality Assurance-AAQ has been registered on the European Quality Assurance Register for Higher Education (EQAR) since 2011 and is applying for renewal of EQAR registration based on a targeted external review against *the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)* coordinated by The European Association for Quality Assurance in Higher Education (ENQA).

Swiss Agency of Accreditation and Quality Assurance-AAQ has been a member of the European Association for Quality Assurance in Higher Education (ENQA) since 2012 and is applying for renewal of ENQA membership.

AAQ is carrying out the following activities within the scope of the ESG:

- Institutional accreditation in Switzerland according to HEdA
- System accreditation
- Quality audit
- Programme accreditation according to the Medical Professions Act (MPA)
- Programme accreditation according to the Health Profession Act (HPA)
- Programme accreditation pursuant to HEdA
- Evaluation

All these activities will be included on the agency's profile on the EQAR website and linked to DEQAR database. NB: The agency may not upload reports from other activities to DEQAR.

The following activities of the applicant are outside the scope of the ESG:

- Accreditation of postgraduate medical education programmes pursuant to MedPA

- Accreditation of advanced training for a psychology profession pursuant to PsyG/LPsy

While these activities are not relevant to the application for renewal on EQAR, it is AAQ's choice – in agreement with the review coordinator – whether those activities should be commented upon by the review panel.

## **2. Purpose and scope of the targeted review**

This review will evaluate the extent to which AAQ continues to fulfil the requirements of the ESG. The targeted review aims to place more focus on those parts that require attention and provide sufficient information to support AAQ's application to EQAR.

The review will be further used as part of the agency's renewal of membership in ENQA.

### **2.1 Focus areas**

- A) Standards with a partial compliance conclusion in the Register Committee's last renewal decision:
  - a. ESG 2.1 Consideration of Internal Quality Assurance
    - Whether all aspects of ESG Part 1 are covered in the criteria of the Institutional Evaluation
  - b. ESG 2.2 Designing methodologies fit for purpose
    - Whether the feedback from stakeholders is being efficiently and systematically utilized to enhance the agency's activities
  - c. ESG 2.4 Peer-review experts
    - Whether the agency includes student members in all panels of its ESG aligned activities
  - d. ESG 2.6 Reporting
    - Whether the agency publishes all reports from all of its ESG aligned activities, including the reports that lead to a negative decision.
- B) Standards 2.1 to 2.7 for the following activities:
  - a. n/a
- C) Standards affected by other types of substantive changes:
  - a. The effectiveness and impact of the measures implemented to safeguard the independence of the agency in the light of the recent merge of the Swiss Accreditation Council (SAC) into the organisational

structure of the Swiss Agency of Accreditation and Quality Assurance (AAQ) (ESG 3,3).<sup>4</sup>

- D) ESG 2.1 Consideration of internal quality assurance;
- E) Selected enhancement area: ESG 3.4 Thematic analysis
- F) Other matters regarding ESG compliance that come up during the targeted review and that may affect the agency's compliance with the ESG (if any).

These issues should be investigated by the review panel as far as possible, providing an analysis and conclusion on the ESG standard(s) concerned.

### **3. The review process**

The review will be conducted in line with the requirements of *the EQAR Procedures for Applications* and *the Policy on Targeted Reviews*, and following the methodology described in the *Guidelines for ENQA Targeted Reviews*.

The evaluation procedure consists of the following steps:

- Agreement on the Terms of Reference between EQAR, AAQ and The European Association for Quality Assurance in Higher Education (ENQA);
- Nomination and appointment of the review panel by The European Association for Quality Assurance in Higher Education (ENQA);
- Self-assessment by AAQ including the preparation and publication of a self-assessment report;
- A site visit by the review panel to AAQ;
- Preparation and completion of the final review report by the review panel;
- Scrutiny of the final review report by ENQA's Agency Review Committee;
- Analysis of the final review report and decision-making by the EQAR Register Committee;
- Decision on ENQA membership by the ENQA Board;
- Attendance to the online follow-up seminar.

#### **3.1 Independence of the review coordinator**

The coordinator has not provided remunerated (e.g. consultancy) or unremunerated services to AAQ during the past 5 years, and conversely AAQ has not provided any remunerated or unremunerated services to the coordinator.

#### **3.2 Nomination and appointment of the review team members**

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<sup>4</sup> See more in [Decision on Substantive Change Report from 2025-03-14](#)

The review panel consists of four members including an academic employed by a higher education institution, a student member and one other expert. At least two members are from another country.

At least one panel member should be a quality assurance professional that is currently employed by a QA agency and has been engaged in quality assurance within the past five years. When requested by the agency under review or when considered particularly pertinent, other stakeholders (for example, a representative of the labour market) may be included. In this case, an additional fee is charged to cover the reviewer's fee and travel expenses.

One of the members serves as the chair of the review panel, and one as the review secretary. At least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated reviewers. If requested, the labour market representative may come from the Business Europe nominees or from ENQA. At least two panel members come from outside the national system of the agency under review (if relevant).

The panel will be supported by the ENQA Review Coordinator (an ENQA staff member) who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the process. The Review Coordinator will not be the secretary of the review and will not participate in the discussions during the site visit interviews.

ENQA will provide the agency with the proposed panel composition and the curricula vitarum of the panel members to establish that there are no known conflicts of interest. The reviewers will have to agree to a non-conflict of interest statement that is incorporated in their contract for the review of this agency.

Once appointed, the coordinator will inform EQAR about the appointed panel members.

### **3.3 Self-assessment by AAQ, including the preparation of a self-assessment report**

AAQ is responsible for the execution and organisation of its own self-assessment process and shall take into account the following guidance:

- Self-assessment includes all relevant internal and external stakeholders;

The self-assessment report is expected to contain:

- a description of the self-assessment process and the production of the SAR;
- a description of changes occurred within the agency since the last full review, including any eventual changes in the higher education system and quality

assurance system in which the agency predominantly operates, the agency's structure, funding, its list of external quality assurance activities within the scope of the ESG, as well as the changes in the agency's quality assurance activities abroad (where relevant);

a section that addresses the focus areas of the review, including standards that were considered to be partially compliant with the ESG in the last full review as well as ESG 2.1 and one self-selected ESG standard for enhancement (see

- **2.1 Focus areas**);
- a SWOT analysis of the agency as a whole;
- for each of the individual standards enlisted above (see section 2) a consideration of how the agency has addressed the recommendations as noted in the previous EQAR Register Committee decision of inclusion/renewal (if applicable).

The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which AAQ fulfils its tasks of external quality assurance and continues to meet the ESG and thus the requirements for EQAR registration.

The self-assessment report is submitted to the review coordinator, which has two weeks to carry out a screening. The purpose of a screening is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The coordinator will not judge the content of information itself but rather whether or not the necessary information, as outlined in the *Guidelines for ENQA Targeted Reviews*, is present. If the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to ask for a revised version within two weeks.

The final version of the agency's self-assessment report is then submitted to the review panel a minimum of eight weeks prior to the site visit. The agency publishes the completed SAR on its website and sends the link to ENQA. ENQA will publish this link on its website as well.

### **3.4 A site visit by the review panel**

The review panel will draft a proposal of the site visit schedule considering the aspects included under the focus area (as defined under point 2.1 of the Terms of Reference).

The schedule will include an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site visit. The approved schedule shall be given to AAQ at least one month before the site visit, in order to properly organise the requested interviews.

The site visit should enable the review panel to explore how the agency has addressed the standards where it has been found to be partially compliant (if the case), aspects of substantive change, consideration of internal quality assurance (ESG 2.1) and the self-selected ESG standard(s) for enhancement. The panel will include extra time during the site-visit to address any other arising issues (if the case) that might have an impact on the agency's compliance with the ESG.

The site visit will close with a final de-briefing meeting outlining the panel's overall impressions but not its judgement on the ESG compliance of the agency.

Prior to the physical site visit, the panel attends a joint briefing call between the panel, ENQA and EQAR to clarify the review expectations and address any possible arising matters.

In advance of the site visit (at least two weeks before the site visit), the panel will organise an obligatory online meeting with the agency. This meeting is held to ensure that the panel reaches a sufficient understanding of:

- The specific national/legal context in which the agency operates;
- The specific quality assurance system to which the agency belongs;
- The key characteristics of the agency's external QA activities.

### **3.5 Preparation and completion of the final review report**

The review report will be drafted in consultation with all review panel members and correspond to the purpose and scope of the review as defined under articles 2 and 2.1. In particular, it will provide a clear rationale for its findings concerning each ESG. When preparing the report, the review panel should bear in mind the *EQAR Policy on the Use and Interpretation of the ESG* to ensure that the report will contain sufficient information for the Register Committee for application to EQAR<sup>5</sup>.

The external report will present the facts and analysis reflecting the reality at the time of review. This will form the main basis for the Register Committee's decision making.

A draft will first be submitted to the ENQA Review Coordinator who will check the report for consistency, clarity, and language. After panel has considered coordinator's feedback, the report will go to the agency for comment on factual accuracy. If AAQ chooses to provide a position statement in reference to the draft report, it will be submitted to the chair of the review panel within two weeks after the receipt of the draft report.

Thereafter, the review panel will take into account the statement by AAQ and submit the document for scrutiny to ENQA's Agency Review Committee and then to EQAR along with the remaining application documents (self-evaluation report, Declaration

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<sup>5</sup> See here: <https://www.eqar.eu/assets/uploads/2025/01/EQAR-UseInterpretation-v4.0.pdf>

of Honour, statement to review report-if applicable). The report is to be finalised normally within 2-4 months of the site visit and will normally not exceed 30 pages in length. All panel members will sign off on the final version of the external review report. The coordinator will provide to AAQ the [Declaration of Honour](#) together with the final report.

#### **4. Publication and use of the report**

AAQ will receive the expert panel's report and publish it on its website once the ENQA Agency Review Committee has validated the report. Prior to the final validation of the report, the ENQA Agency Review Committee may request additional (documentary) evidence or clarification from the review panel, review coordinator or the agency if needed. The review report will be published on ENQA website regardless of the review outcome. The report will also be published on the EQAR website together with the decision on registration, regardless of the outcome.

ENQA will retain ownership of the report. The intellectual property of all works created by the review panel in connection with the review contract, including specifically any written reports, will be vested in ENQA. In the case of an unsuccessful application to EQAR, the report may also be used by the ENQA Board to reach a conclusion on whether the agency can be admitted/reconfirmed as a member of ENQA.

#### **5. Decision-making on EQAR registration and ENQA membership**

The agency will submit the review report via email to EQAR before expiry of the agency's registration on EQAR. The agency will also include its self-assessment report (in a PDF format), the Declaration of Honour and any other relevant documents to the application to EQAR (i.e. annexes, statement to the review report).

EQAR is expected to consider the review report and the agency's application at its Register Committee meeting in (Spring, 2026). The Register Committee's final judgement on the agency's compliance with the ESG as a whole can either be substantially compliant (approval of the application) or not substantially compliant (rejection of the application). In case of a positive decision (substantially compliant with the ESG), the registration is renewed for a further five years (from the date of the review report).

The decision on ENQA membership by the ENQA Board will take place after EQAR Register Committee decision.

To apply for ENQA membership, the agency is requested to provide a letter addressed to the ENQA Board outlining its motivation for applying for membership and the ways in which the agency expects to contribute to the work and objectives of ENQA during its membership. This letter will be considered by the Board together with the confirmation of EQAR listing when deciding on the agency's membership.

Should the agency not be granted the registration in EQAR or the registration is not renewed, the decision on ENQA membership will be taken based on the final review report, the application letter, and the statement from the Agency Review Committee. The decision on membership will be published on ENQA's website.

## 6. Indicative schedule of the review

Agreement on Terms of Reference	April 2025
Appointment of review panel members	May 2025
Self-assessment report (SAR) completed by AAQ	20 June 2025
Screening of SAR by ENQA Review Coordinator	June/July 2025
Preparation of site visit schedule and indicative timetable	August 2025
Briefing of review panel members	September 2025
Review panel site visit	October 2025
Submission of the draft review report to ENQA Review Coordinator	December 2025
Factual check of the review report by the AAQ	January 2026
Statement of AAQ to review panel (if applicable)	January 2026
Submission of review report to ENQA	January 2026
Validation of the review report by the Agency Review Committee	February 2026
EQAR Register Committee meeting and decision on the application by AAQ	Spring, 2026
Decision on ENQA membership by the ENQA Board	June 2026

## ANNEX 3: GLOSSARY

AAQ	Swiss Agency of Accreditation and Quality Assurance
EHEA	European Higher Education Area
ENQA	European Association for Quality Assurance in Higher Education
EQAR	European Quality Assurance Register for Higher Education
ESG	<i>Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015</i>
HE	higher education
HEdA	Federal Act on Funding and Coordination of the Higher Education Sector
HEI	higher education institution
HPA	Health Professions Act
MedPA	Medical Professions Act
PsyG/LPsy	Psychology Professions Act
QA	quality assurance
SAR	self-assessment report
SAC	Swiss Accreditation Council

## ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

### DOCUMENTS PROVIDED BY AAQ

- Self-assessment report and its annexes
- Guides related to all EQA processes run by the agency
- Full list of institutional accreditation processes and their state
- List of conditions related to ESG 1.2 and 1.3
- A model of the contract established between AAQ and the HEIs

### OTHER SOURCES USED BY THE REVIEW PANEL

- AAQ website
- AAQ evaluation reports

## ENQA TARGETED REVIEW 2026

THIS REPORT presents findings of the ENQA Targeted Review of the Swiss Agency of Accreditation and Quality Assurance (AAQ), undertaken in 2025.

**enqa.**

European Association for  
Quality Assurance in Higher Education