# International Standards and Guidelines for QA in TE Procedures Manual for the Review and Recognition of EQAPs

**INQAAHE** 

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## Foreword

The present **Procedures Manual** lays out detailed procedural requirements for the INQAAHE external reviews and recognition of External Quality Assurance Providers (EQAP) based on the 2022 Edition of the INQAAHE's **International Standards and Guidelines of Quality Assurance in Tertiary Education (ISGs).** The ISGs are the result of a broad participatory process including the rich expertise of tertiary education providers and their external quality assurance bodies globally. The primary purpose of the ISGs is to acknowledge and embrace the diversity of tertiary education learners and providers, safeguard tertiary education systems from bogus providers, promote the relevance, trust and credibility in quality assurance measures, as well as facilitate qualifications recognition procedures regionally and globally.

This manual should, therefore, be carefully reviewed in conjunction with the ISGs. It is designed to implement, with the objective of conducting thorough and transparent external reviews of EQAPs. The core objectives of this manual are as follows:

- to facilitate a clear understanding of the procedures and their effective application, both for EQAPs and the External Review Panels;
- to foster consistency in the external evaluation of EQAPs;
- to ensure transparency and independent decision-making;
- to prevent fragmentation and promote cohesion and harmonization of internal and external evaluation practices, while preserving the diversity of situations encountered.

This approach renders ISGs a universally applicable tool tailored to the specific contexts of each EQAP.

This manual draws inspiration from that used for alignment with the GGP and incorporates valuable insights from past experiences in diverse settings. It has undergone an extensive review by a diverse group of quality assurance experts and members of the INQAAHE Board, representing various geographic backgrounds and contexts. This manual will continue to be refined and updated as external reviews are conducted.



# Acronyms

**ARC** Appeals Review Committee

**EQAP** External Quality Assurance Provider

**ERP** External Review Panel

INQAAHE International Network for Quality Assurance Agencies in Higher

Education

IQAC Internal Quality Assurance Committee
ISG International Standards and Guidelines

QA Quality Assurance
ERP External Review Panel
RC Recognition Committee
SER Self-Evaluation Report
TE Tertiary Education

**TEP** Tertiary Education Providers

**UNESCO** United Nations Educational, Scientific and Cultural Organization



# Contents

I.	The ISG and External Reviews in a Nutshell	5	
II.	The Structure of the ISGs	6	
III.	Eligibility	9	
IV.	The Procedures	10	
1.	ISG Review		
2.	Recognition of Prior Review		
3.	Joint Recognition Review	15	
V.	Self-Evaluation Report	18	
VI.	The External Review Panel	20	
VII.	The Site-Visit	27	
VIII.	Judgments and Evaluation Matrix	30	
IX.	Decision-making	31	
X.	Follow-up	33	
XI.	External Review Fee Structure	34	
XII.	Appeals procedure	36	
XIII.	Annexes	39	



## I. The ISG and External Reviews in a Nutshell

By transitioning to the ISGs, INQAAHE enters the next level of its services to the global QA community by extending its recognition reviews of external QA providers/accreditors to QA bodies outside its membership.

With this aim, INQAAHE offers three pathways for recognition of EQA bodies/accreditors:

- ISG Recognition: Full review by INQAAHE external reviewer panel.
- Recognition of Prior Review: Alignment with ISGs based on an external review conducted by another reputable organization.
- Joint Recognition Review: Review conducted by INQAAHE in cooperation with a reputable organization.

In addition to the baseline standards, the ISGs provide three elective modules of standards tailored to an EQAP's profile and mandate seeking external assessments in the areas of i) Cross-border education and cross-border QA, ii) short-learning programs/micro-credentials, and iii) online/blended provisions.

An EQAP already recognized by a reputable organization through an external review can apply to INQAAHE for Recognition of Prior Review based on a thorough mapping conducted between the standards of the reputable organization it has been reviewed by and the INQAAHE ISGs.



## II. The Structure of the ISGs

The INQAAHE 2022 Edition of ISGs is designed to support the ever-growing diversification of tertiary education provisions by enabling enhancement-led, relevant and transformative quality assurance measures. The ISGs introduce a nuanced approach to the evaluation of external quality assurance providers (EQAPs), as per Quality Enhancement Continuum (QAC) guiding principles designed for both internal self-evaluation and external evaluation of EQAPs promoting the gradual enhancement and measurement of the transformative power of QA.

The **overall objective** of the ISGs is to guide the process of external review and, hence, recognition of EQAP's while ensuring their continuous enhancement. The ISGs can also be applied for the following purposes:

- Creating a framework to guide establishment and operationalization of EQAPs;
- Providing standards and principles for use in the self and external evaluation of EQAPs;
- Promoting professional development;
- Promoting public accountability of EQAPs.

The key benefits of the ISGs are as follows:

- Providing a firm foundation for the EQAPs in their daily operations, gradual and continuous enhancement and transformative power of QA;
- Enhancing EQAPs credibility, trust and recognition of outcomes,
- Safeguarding tertiary education systems and students from bogus QA and TE providers, thus benefiting societies at large;
- Addressing diversity of QA and TE provisions;
- Providing a strong background for promoting mutual recognition of EQA outcomes and outputs, hence facilitating recognition of TE qualifications;
- Promoting transparency in and public accountability of EQAPs operations worldwide.

The 2022 edition of the ISGs is designed in a modular approach to acknowledge and enable the recognition of the diversity of tertiary education and QA provisions.

The ISGs consist of three major sections:



- Section 1: Baseline standards
- Section 2: Thematic standards
- Section 3: Guiding principles

Section 1 of the ISGs is mandatory for all types of EQAPs and concentrates on baseline requirements crucial for trust and recognition of EQA operations. It evolves around six (6) major functional and operational standards:

**Module 1:** Baseline Standards

Standard 1: Legitimacy of the EQAP

Standard 2: The EQAP's framework for external review of quality of TEPs

Standard 3: The EQAP's review of TEPs: evaluation, decision making and appeals

Standard 4: Internationalization and external relations

**Standard 5:** Integrity, disclosure and transparency

**Standard 6:** Stakeholder role and engagement.

Section 2 focuses on specific profiles and fields of activity of the EQAP. The modules in this section are elective in nature and are built around three main themes: cross-border education and QA; short learning programs (formal and non-formal education tracks); and distance education (online & blended):

**Module 2:** Cross-border quality assurance and quality assurance of cross-border education

#### Module 2.1: Cross-border quality assurance

Standard 1: Mandate

Standard 2: Policies and Procedures

Standard 3: Relevance of Standards

**Standard 4:** Recognition

#### Module 2.2: Quality Assurance of Cross-Border Education

Standard 1: Mandate

Standard 2: Policies and Procedures



Standard 3: Relevance of Standards

**Standard 4:** Recognition

**Module 3:** Quality assurance of short learning program

Standard 1: Mandate

Standard 2: Policies and Procedures

Standard 3: Relevance of Standards

**Standard 4:** Resources

Module 4: Quality assurance of online and blended modalities of distance education

Standard 1: Mandate

Standard 2: Policies and Procedures

Standard 3: Relevance of Standards

Section 3 enables continuous enhancement of QA providers with each cycle of external review by outlining guiding principles. It also enables measurement of the transformational power of EQAP on the TE provisions under their purview. The guiding principles are expressed through three stages of enhancement:

- Efficiency
- Relevance
- Transformation

INQAAHE's approach through the Quality Enhancement Continuum (QEC) is designed to enable both diagnostic and formative assessment of an EQAP's performance, including self- and external review of EQAPs. It is based on a continuous improvement approach designed to move the focus from compliance with organizational performance standards to enabling enhancement and measurement of the impact on TE, ultimately assessing the transformations in student learning and in society at large.



# III. Eligibility

The following are the eligibility criteria for the ISG reviews:

- The EQAP is legally incorporated;
- The EQAP has standards, policies and procedures for external reviews of TEIs, its programs or short learning programs;
- The EQAP has had at least two years of experience conducting external reviews of TEIs and/or its programs.

Both INQAAHE member and non-member organizations can avail the benefits of the review procedure.



## IV. The Procedures

There are three pathways for an EQAP to demonstrate its adherence to the ISGs.

#### Procedure for RECOGNITION

- 1. **ISG Recognition**: permits the EQAP to apply for an external review by a team of experts selected by INQAAHE. In this process, the EQAP will prepare a self-assessment report and host an on-site team of reviewers who will submit a report to INQAAHE for the final decision regarding the EQAP's alignment with the ISG.
- 2. **Recognition of Prior Review:** permits the EQAP to apply for acceptance of the EQAP's adherence to the ISG by demonstrating that the EQAP has been reviewed against a set of standards or criteria set by a reputable, external organization that are considered to be substantially equivalent to or exceed the requirements set forth in the ISGs.
- 3. **Joint Recognition Review**: this procedure is conducted by INQAAHE and another reputable evaluator of EQAPs by establishing a joint review and a joint Experts Review Panel (ERP).

The ISGs procedures are based on the following key principles:

- The review is an evidence-based process carried out by independent reviewers;
- The information provided by the EQAP is assumed to be *factually correct* unless evidence points to the contrary;
- The review is a process of **verification** of information provided in the SER and other documentation (including on site visit information), and the exploration of any matters which are omitted from that documentation;
- The review process is *transparent*, and reports are *published on INQAAHE's* website (SAR and experts reports and other written production are not published. It is up to the EQAP to publish its SAR).

To facilitate the procedures, INQAAHE assigns procedure coordinators to each of the cases. The role of the procedure coordinator is to administer the procedure, facilitate communication between the external reviewer panel (ERP) and the applicant, liaison with the INQAAHE Recognition Committee and the INQAAHE Secretariat, management of the site-visit and any other steps related to the procedure.



#### 1. ISG Review

The Review procedure is carried out by INQAAHE through an international external reviewer panel. The key steps in this procedure include:

- i.Self-evaluation conducted by the EQAP against the institutional vision, as well as its mission and values and the INQAAHE ISGs, which culminates into a Self-Evaluation Report (SER);
- ii.An external review conducted by an ERP commissioned by INQAAHE. The external review includes a desk-review and a site-visit (in person, online or hybrid);
- iii.Production of an ERP report;
- iv.Review of the ERP report and the overall case by the INQAAHE Recognition Committee and production of recommendations to the INQAAHE Board;
- v.Decision-making by the INQAAHE Board;
- vi. Award of the INQAAHE ISG Alignment status;
- vii.Inclusion in the INQAAHE Register of recognized EQAPs.

An EQAP can apply for recognition against both the baseline and/or a modular review at the same time.

This review process takes approximately seven (7) months to complete. It starts when an EQAP submits a request for an external review, including the SER, to the INQAAHE Secretariat. The INQAAHE Secretariat informs the INQAAHE Board, and its Recognition Committee of the submission and the Recognition Committee decides if the EQAP is eligible for an alignment under the pathway selected by the EQAP (ISG Recognition, Recognition of Prior Review, Joint Recognition Review).

Determining eligibility takes approximately ten (10) days. The INQAAHE Secretariat informs the applying EQAP about the outcome. If the outcome is positive, the INQAAHE Secretariat will propose a time schedule for the review and a list of potential ERP members for the applicant's approval. Parallelly, a **contract** (see Annex) between the EQAP and the INQAAHE Secretariat is signed to stipulate mutual rights and obligations, including the timing for the review and the payment of the fee.

The SER submitted by the applicant EQAP provides the basis for the desk-review and the site-visit to be conducted by the ERP. The SER guides the ERP's decisions in setting the site-visit agenda, informing the program of its time-related needs for scheduling interviews with relevant stakeholders, and requesting workspace that provides privacy



and/or access to relevant records. The EQAPs are expected to submit supporting materials with the SER.

The primary purpose of the desk-review is to familiarize the SER, explore further the initial findings, cross-validate with available online resources and prepare a detailed plan for interviews and meetings during the site-visit.

The primary purpose of the site-visit is to verify the information provided in the SER and to gain first-hand exposure and knowledge about the EQAP under review. It is also an opportunity for the EQAP to engage in an exchange regarding its activities and development.

Following completion of the visit, the ERP has a two (2) week period to share the report with the EQAP under review for factual corrections. The EQAP in turn has two (2) weeks to submit any factual corrections to the report supported with relevant evidence back to the ERP.

Once the ERP report is ready, the INQAAHE Secretariat submits the report to the INQAAHE Recognition Committee (RC). The RC carefully reviews the materials and prepares a recommendation regarding the EQAP's alignment with the ISG. The recommendation, along with the full documentation, is submitted to the INQAAHE Board for decision-making.

The following is the expected timeline and should be read as "no more than x months or weeks".

3 months	Between the submission of the SER and the actual site-visit				
1 month	Between the site-visit and the submission of the external review report to the applicant EQAP for factual correctness (might take 1 week longer in online and hybrid mode)				
2 weeks	Between the receipt of the ERP report and submission of the EQAP's response to the report, along with any factual corrections				
2 weeks	Between the receipt of the agency's response and the final submission of the ERP's review report to INQAAHE				
1 month	Between the receipt of the external review materials by INQAAHE's Recognition Committee and submission of its recommendations to the INQAAHE Board for decision-making				



1 month	Between notification of the Recognition Committee's recommendations to the INQAAHE Board and final decision
2 weeks	Between the Board's decision and formal notification of the decision to the applicant.

### 2. Recognition of Prior Review

The Recognition of Prior Review process seeks to avoid duplication and requires the applicant EQAP to demonstrate external assessment alignment with INQAAHE's ISGs. The Recognition of Prior Review process focuses on quality standards' compatibility rather than strict similarity.

Within the frames of this RPS pathway, recognition confirms adherence to the ISGs baseline standards through a mapping against ISGs conducted by the applicant and a desk-review by INQAAHE Recognition Committee, without engagement of an external expert.

The RPR involves providing independent evidence from a reputable external EQAP reviewer. This pathway consists of the following procedural steps:

- i.Mapping of the previously conducted external review standards with the ISGs done by the applicant EQAP;
- ii.A detailed report clearly demonstrating alignment with the ISGs. The report is developed based on the ERP report of the reputable external evaluator of EQAPs. For the RPR, there is no need to produce a full-fledged SER similar to the SER required for the ISG Recognition or for the other external evaluator of EQAP, to the extent:
  - a. the SER has been finalized for less than two (2) years when applying to the INQAAHE RPR;
  - b. the SER allows understanding of how the ISGs are matched.
- iii.Review of the SER by the INQAAHE Recognition Committee and preparation of recommendations to the Board;
- iv.Decision-making by the INQAAHE Board;
- v.Award of the ISG label:
- vi.Inclusion in the INQAAHE Register of recognized EQAPs.

The Recognition of Prior Review pathway is for the applicant EQAP to apply for acceptance of the EQAP's alignment with the ISG by demonstrating that it has already



been reviewed against a set of standards or criteria set by a reputable, external organization that are considered to be substantially equivalent to or exceed the requirements set forth in the ISG. This pathway requires INQAAHE to review the standards or criteria set by the external organization to determine if equivalency exists. The applicant EQAP must provide evidence of the outcome of this review, including any report(s) issued by the external organization. This procedure may take a maximum of two (2) months.

The EQAPs that opt for baseline recognition will receive an official INQAAHE recognition certificate. The certificate is issued by the INQAAHE Board of Directors, on the advice of the INQAAHE Recognition Committee until a new decision-making body, independent from INQAAHE is established.

The EQAP opting for baseline recognition may be willing to go through one, two, or all three modular reviews. In such a case:

- 1. The EQAP will first conduct the mapping and the desk-review to demonstrate its alignment with ISGs baseline standards, and
- 2. Develop a Self-Evaluation report for the additional modules;
- 3. INQAAHE will organize an external review, following the same methodology as for the ISGs external reviews, i.e., a self-evaluation by the EQAP and an external evaluation by a pool of independent experts.

For each modular review, a minimum of two (2) experts is required. The methodology used is equivalent to that of a full-fledged external review but focuses on the scope of the module-specific standards. The duration of the modular review process is also shortened compared to the full-fledged review.

Those choosing modular assessments will receive, if successful, official module-specific certificates from INQAAHE, in addition to the certificate valid for baseline recognition.

The timeline for the Recognition of Prior Review is individually determined on a caseby-case basis. The Recognition of Prior Review steps are as follows.

- The applicant EQAP must submit a letter outlining the reputation and status of the external organization, including information on how to access information (e.g., website URL), and the contact information of persons in charge of the organization for the purpose of verification.
- The applicant EQAP must submit a copy of its original SER and any follow-up materials that have been submitted to the external organization.



- The applicant EQAP must submit a copy of the report from the external agency that outlines the outcomes of its review.
- In the application, the EQAP must submit a report featuring the analysis of its alignment with the ISG by cross-referencing its findings to the standards of the external organization.
- The Recognition Committee completes a review of the SER and any other submitted follow-up materials <sup>1</sup> the external EQAP decision-making/outcome report(s), and the document demonstrating the applicant EQAP's alignment with the ISG through a cross-referenced analysis with the previous set of review standards. The Recognition Committee develops a recommendation regarding the substantial equivalency requirements of this pathway.
- Based on the determination of equivalency, the Recognition Committee develops a recommendation for the INQAAHE Board to provide mutual recognition or to recommend that the EQAP undergo a visit to demonstrate alignment with the ISGs.
- The INQAAHE Board makes the final decision, which is then shared with the applicant EQAP.
- In case an EQAP believes it has already undergone an external review against standards similar to the ISG module-specific standards, the EQAP and INQAAHE will collaboratively determine the scope of recognition during the preparatory phase against the ISGs through the RPR pathway, and hence decide on the specific scope of the review.

## 3. Joint Recognition Review

The Joint Recognition Review is carried out by INQAAHE and another reputable external evaluator of EQAPs (i.e., officially and globally recognized as such, e.g., ENQA, CHEA...).

The Joint Recognition Review procedure includes the following steps:

- i. Synthesis of the review standards by both external evaluators (INQAAHE and the other external evaluator of EQAPs);
- ii.Self-evaluation conducted by the EQAP against the institutional vision, as well as mission and values and the synthesized standards;

<sup>&</sup>lt;sup>1</sup> The SER is a key albeit not sole evidence in recognition procedure, but all documentation that evidences the positive external assessment INQAAHE is recognising.



iii.A joint external review conducted by a single commissioned ERP. The external review includes a desk-review and a site-visit (in person, online or hybrid). INQAAHE and the other external evaluator each appoint a procedure coordinator or an agreement is made to assign one joint coordinator;

iv.Production of an ERP report;

v.Review of the ERP report by respective recognition committees;

vi. Two separate decisions taken by respective Boards;

vii. Award of two Recognition labels;

viii.Inclusion in the respective registers of recognized EQAPs.

This Joint Recognition Review is for an applicant EQAP to apply simultaneously for an external review by INQAAHE and another reputable QA body specialized in comparable practices. Prior arrangements with the latter must be made before an application is filed to INQAAHE. In this case, the INQAAHE Secretariat, in coordination with the counterpart external evaluator, will have to set up an international ERP to carry out the joint review procedure. The standards/criteria/guidelines of both external evaluators will be aligned to ensure elimination of potential duplication.

While the procedure for conducting the Joint Recognition Review is carried out as a single review, the decision on alignment/recognition is made independently by each of the ERP's responsible for the review, thus granting double labels to the successful applicants.

Both a baseline and/or a modular Joint Recognition Review can be done at the same time across the standards that are applicable for both organizations.

The Joint Recognition Review process requires approximately one (1) year to complete.

It begins when an EQAP submits a request for an external Joint Recognition Review to the INQAAHE Secretariat naming another external organization with which the applicant EQAP has reached prior agreement to conduct the joint review with INQAAHE. The INQAAHE Secretariat informs the INQAAHE Board and its Recognition Committee of the submission, and the Board decides if the counterpart evaluator of the EQAP is of a repute that enables the Joint Review. Then the INQAAHE Secretariat contacts the identified reputable external organization in order to reach a decision on eligibility of the EQAP for a joint review.

Once approval is reached, INQAAHE and the counterpart evaluator enter into a trilateral agreement upon the request of the EQAP. The agreement and contracting process takes approximately two (2) months.



Once the agreement is signed, the two reviewing organizations must agree upon a set of criteria, represent an appropriate synthesis of the ISG and counterpart organization 's criteria to the satisfaction of each organization. This takes about one to two (1-2) months. After the joint standards are produced, the applicant EQAP develops a SER against those joint standards. While the applicant EQAP is developing its SER, INQAAHE and the partnering external organization begin to work on the appointment of the ERP.

Once the SER is received, it is sent to the ERP for desk-review and preparations for the site-visit begin.

Following the completion of the visit, the ERP has one (1) month for writing and editing its report and submitting it to the EQAP under review, as well as to INQAAHE and the partnering review organization. The EQAP is then requested to review the report to determine if there are any factual errors. The EQAP has one to two (1-2) weeks to submit any factual correction to the report. Factual corrections should be supported with respective evidence and submitted to the ERP and respective secretariats.

Once the ERP report is ready, it is submitted to the respective recognition committees for a thorough review and recommendations to the INQAAHEE Board for decision-making. The process takes approximately two (2) months.

The timeline for joint review pathways is to be individually determined on a case-bycase basis.



# V. Self-Evaluation Report

The ISG Recognition review is premised on a Self-Evaluation Report (SER) based on the ISG modules for which the application is made. The SER is the applicant EQAP's opportunity to reflect on how it measures its alignment against the ISG and to provide respective evidence supporting the alignment. Since the SER and supporting documents provide a substantial portion of the evidence that the ERP uses in forming its initial impression of the applicant EQAP's operations, it is critically important that the SER is clear and analytic in nature, supported by evidence, with sufficient reflections and critique, transparent and honest. This allows the ERP to prepare lines of enquiry in advance of the site-visit. The SER should clearly state, not only what has been achieved to date, but also provides a reflection on practices that could contribute to enhancing the applicant EQAP's activities in the future. In other words, the SER should be both backward- and forward- looking, as well as provide an accurate snapshot of the current situation based on an in-depth analysis. The SER should follow the structure of the ISG and respond to all given standards. The SER should not exceed fifty or sixty (50 -60) pages (excluding Appendixes).

In order to harmonize the contents of the SER in terms of level of detail, thoroughness, and evaluative character, the SER should include two (2) primary sections.

i.**Section 1:** This section should establish the context in which the applicant EQAP currently operates, including, but not limited to the following:

- a brief description of the TE system within which it operates and a brief history of the applicant EQAP;
- o the quality assurance framework within which it operates;
- o an overview of the scope of QA activities carried out by the applicant EQAP, including any cross-border activities;
- o a brief description of any internal and/or external QA processes undertaken by the applicant EQAP as a review of its own activities.

ii. Section 2: This section is the main body of the SER and should contain the applicant EQAP's narrative responses to each of the ISG in the order they appear in the document and their respective order (number)<sup>2</sup>, along with respective evidence, references and/or links to the supporting documentation. The EQAP is expected to

<sup>&</sup>lt;sup>2</sup> This will facilitate the navigation of the reader, specifically the ERP, across the SER.



enclose, as annexes to the narrative report, the most crucial documentation (within reason, but not more than ten (10) annexes<sup>3</sup>) that it believes will assist the ERP in its analysis of the report. All the annexes must be properly referenced in the SER and easily identified in the annexes. The annexes are meant to support the analysis and not be analytical by nature. They may not be publicly released and may hence only shared for the purpose of the in-depth understanding of the ERP. Further documents may be prepared by the applicant EQAP for the site-visit or requested by the ERP before or during the site-visit. The SER, annexes, and additional documents **must be in English** and made easily available to the ERP. The SER should be self-sufficient and self-explanatory in nature. The purpose of the annexes is to provide further background and support any statement made, however, should not be necessary for the basic understanding of the evidence provided.

In case of the Joint Recognition Review procedure, the contents of the SER may vary from the above, depending on the partnering external QA evaluator and its review requirements.

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<sup>&</sup>lt;sup>3</sup> E.g.: organizational chart, minutes of key meetings, summary of audit reports, list of accredited programs or institutions, published policies, rules and regulations, screenshots of website, list of external experts...



## VI. The External Review Panel

The INQAAHE Secretariat invites at least three (3) international experts to join the External Review Panel (ERP) in all the three ISG Recognition Pathways. The international ERP should at least include the Chair, the Secretary, and one additional Expert. The EQAP under review may indicate that there are special qualifications needed for the ERP. The procedure is facilitated by one of the INQAAHE-trained procedure coordinators.

#### 1) Nomination

The ERP members must meet the following competencies:

- At least five years of experience in assessing programmes and/or institutions in TE:
- At least three times reviewer experience in the evaluation of EQAPs;
- Profound knowledge of QA from an international perspective;
- Be involved in various international QA activities;
- Be aware of cultural differences and able to conduct the review with respect for these differences:
- Strong communication skills (be able to report, present and discuss QA aspects both verbally and in writing);
- Have essential skills in recent technology, report production and/or conducting meetings through the use of web-based technology and in-person.

The competencies of the ERP should be complementary to each other. At least one expert should have some prior knowledge of the TE system and culture in the country or region in which the agency operates and possess the official language of the context.

All ERP members will be asked to sign a declaration of confidentiality and conflicts of interest. The experts are listed in the INQAAHE list of experts, publicly available and updated on a regular basis. Those experts have undergone INQAAHE training as well as at least one external review with INQAAHE or another organization.



#### 2) Training and Induction

Every ERP member involved in conducting an ISG review must complete training provided by INQAAHE as well as undergo an induction prior to each review procedure. The training is done either specifically for an upcoming review or may be offered by INQAAHE periodically. INQAAHE will provide continuous training with a dynamic pool of eligible experts.

#### 3) Appointment

The selection and appointment of ERP members is carried out by the INQAAHE Recognition Committee based on principles that prevent conflicts of interest and preserve the integrity of the process.

Once a case for ISG Recognition is submitted, the INQAAHE Recognition Committee appoints a procedure coordinator. The Procedure Coordinator (PC) initiates the preparatory activities, including setting up an ERP.

When appointing ERP members, a key requirement of independence and high quality of review must be reserved to ensure that the review is independent from any third-party interference as well as that the ERP has a sufficient level of knowledge, experience, and expertise to conduct the review at a high standard.

The following selection criteria are applied for identification and nomination of ERP members:

- Members should hold a Doctoral degree;
- Members should undergo training on ISG application;
- At least one ERP member should come from outside the national system of the EQAP under review. It is INQAAHE's view that international member(s) of the ERP generally provide valuable insights for the review and assist in establishing credibility for the process;
- The Chair and the Secretary may not come from the same country, and the Chair should not come from the country of the EQAP under review (in the case of nationally or regionally-based agencies);
- At least one member of the ERP should have a good working knowledge and understanding of the TE and QA system in which the EQAP (predominantly) operates;



- At least one ERP member should be fluent in the main working language of the EQAP and/or the language of the country in which the EQAP (predominantly) operates;
- No current or recent (at least five years) former members of staff of the EQAP under review can take part in the RP;
- Current members of the INQAAHE Board are not eligible to serve as ERP members in the evaluation process;
- The Chair should have previous experience in taking part in an INQAAHE review;
- The Secretary should have previous experience in drafting an ERP report.

The EQAP under review is given an opportunity to comment on the selected ERP members, to signal any potential conflict of interest or bias, and may request that a proposed ERP member be removed from consideration, only in case the EQAP has adequate evidence and justifications for such a request (e.g., an expert who served in a committee of the reviewed EQAP or tertiary education institution).

ERPs must be approved by the INQAAHE Recognition Committee. The Recognition Committee should be provided with the curricula vitae (CVs) of all ERP members as well as a brief explanation about how the ERP meets the requirements for INQAAHE ISG reviews in terms of composition, qualifications, profiles, experience, and skills as described above.

Once the ERP is established, the PC launches the process by inviting all the members to an induction meeting and developing a review program jointly with the ERP.

#### 4) Confidentiality and Conflict of Interest Policies

The Procedure Coordinator should highlight the importance of Confidentially and non-disclosure of the review details. Equally important is the policy on Conflict of Interests, notification in writing and verbally regarding these situations and the external reviewer's obligation to disclose such conflicts. To ensure this is the case, the external reviewers are asked to sign the INQAAHE Conflict of Interests and Non-Disclosure statements prior to the launch of the external review. In these declarations, the Reviewers attest to having taken note of the conflict of interest and non-disclosure policy. The final report submitted to the INQAAHE Board for decision taking should include a declaration that the assessment has been carried out independently and the findings may not be disclosed by a third party.



ERP members are required to notify the INQAAHE Secretariat in writing of any connection or interest, which could result in a conflict, or potential conflict, related to the review. Furthermore, ERP members are required to notify the INQAAHE Secretariat as soon as possible of any changes in, or additions to, the interests already disclosed which occur during the review process. If ERP members are unsure as to whether an interest should be disclosed, they should discuss the matter with the INQAAHE Secretariat.

A conflict of interests occurs when an external reviewer is involved in an activity, commitment, or interest that could adversely affect, compromise, or be incompatible with his/her obligations as an INQAAHE external reviewer.

A conflict of interest can involve conflicts of time commitment, relationship interest, financial interest, competitor's interest, or discipline-specific interests:

- A conflict of time commitment occurs when the external reviewer is involved in and committed to activities irrelevant to an INQAAHE review that interfere with his/her obligations to INQAAHE thus delaying the review procedure.
- A conflict of relationship interest occurs when an external reviewer has a blood relative that is employed by the EQAP under scrutiny, which might restrict or impair the Reviewer's ability to perform an objective and independent evaluation of the case.
- A conflict of financial interest occurs when an external reviewer is either employed or has been employed by the EQAP for the last five years or has direct or indirect financial benefits from the EQAP under scrutiny.
- A conflict of competitor's interest occurs when the external reviewer has an interest in producing a biased report that might question the objectivity and independence of the review.
- A conflict of discipline-specific interests occurs when the nature of the External Reviewer's discipline could cause situations that, while not implicating one of the conflicts listed above, could question the independence of the review.

#### 5) Roles and responsibilities

The INQAAHE ERP consists of three internationally renowned experts coordinated by the INQAAHE Procedures Coordinator. The following section outlines the roles and responsibilities for each member of the member of the panel.



#### The Chair

- Developing the visit agenda in consultation with other ERP members;
- Chairing all ERP meetings (electronic preparatory, onsite, and any follow-up);
- Reading all the documents prepared by the applicant EQAP and preparing a set of draft site-visit questions in consultation with the other ERP members (Note: these questions can be used as input for the preparatory meeting of the ERP during the visit);
- Taking part in interviews during the visit;
- Serving as the ERP's key spokesperson during the interview sessions and distributing the agreed upon questions among ERP members prior to the scheduled interview;
- Serving as the ERP's spokesperson during the final feedback session where the preliminary findings of the review are shared with the applicant EQAP's leadership;
- Providing input to the draft report written by the ERP's appointed Secretary, along with responding to and giving suggestions with regard to the handling of the applicant EQAP's response to the report
- Signing off on the final report on behalf of the entire ERP and forwarding it to the INQAAHE Secretariat;
- Taking final decisions on behalf of the ERP, whenever needed.

#### Secretary

- Reading the documents prepared by the applicant EQAP and preparing a set of draft onsite interview questions in consultation with the Chair and any other ERP member (Note: these questions can be used as input for the preparatory meeting of the RP during the visit);
- Discussing the documents and questions with the ERP;
- Actively participating in the discussion of the SER both before and during the visit:
- Taking part in interviews during the visit;
- Developing the written draft review report in consultation with the Chair and other ERP members and finalizing the version to be sent to the applicant EQAP;



Orafting the final report.

#### **Expert**

- Reading of all the documents prepared by the applicant EQAP and preparing a set of draft visit interview questions in consultation with the Chair and any other RP members (Note: these questions can be used as input for the preparatory meeting of the ERP during the visit);
- Discussing the documents and questions with the ERP;
- Actively participating in the discussion of the SER both before and during the visit;
- Taking part in interviews during the visit;
- Providing comments on the draft version of the review report as prepared by the Secretary of the ERP.

#### **Procedure Coordinator**

The PC is the main facilitator of the whole procedure and a liaison between all the parties in the procedure. In specific, the following are the key responsibilities:

- Communicating with the applicant EQAP regarding the visit (e.g., visit agenda, materials, requests for additional information, meeting and travel logistics) after the INQAAHE Secretariat has received the draft agenda for the visit from the ERP;
- Ensuring the draft agenda includes the relevant stakeholders and will then hand over the preparation of the visit to the ERP Secretary;
- Serving as the main liaison with the applicant EQAP throughout the whole procedure;
- Sending the final draft version of the review report to the applicant EQAP and informing the EQAP that it has two (2) weeks to review the report and provide any corrections for factual errors with supporting documentation of the correction(s);
- Receiving the comments from the applicant EQAP, discussing those with the ERP, and finalizing the report with amendments or not, as determined by the full ERP;



Sending the final review report as approved by the ERP to the INQAAHE Secretariat, along with a copy of the applicant EQAP's response to the draft version of the report.



## VII. The Site-Visit

One of the key steps in the external review procedure is the site-visit. The primary objective of the site-visit is to determine and/or verify the information in the SER as well as make a further inquiry into the areas in question or requiring further clarity.

The site-visit can be conducted in person, online, or in a hybrid mode.

#### 1) Preparation for the site-visit

The ERP should hold at least one preparatory meeting for which due preparation is carried out both by the ERP and the Procedure Coordinator. To prepare for the meeting, the ERP should study the SER and all the available information that supports the statements in the SER, identify areas for further inquiry, and draft an initial set of questions for diverse groups of stakeholders. The ERP should also agree on the types of meetings that should be scheduled for the site-visit, and the stakeholder groups to be interviewed.

For the preparatory phase to be productive, all relevant information (i.e., the SER and its supporting documentation) should be made available to the ERP no less than six (6) weeks prior to the scheduled site visit date. The final agenda for the site visit should be agreed upon by the EQAP and the ERP and be available to all parties two to three (2-3) weeks prior to the visit.

#### 2) During the site-visit

The advised length of a site-visit is **three (3) full working days.** Travel, accommodations, meals and hospitality related to the site-visit should be organized and financially covered by the applicant EQAP (see Annex A for a sample agenda).

During the site-visit, the schedule of meetings should provide ERP enough time to have productive conversations with selected EQAP personnel and relevant stakeholders. It is recommended:

- That a minimum of sixty (60) minutes be provided for each meeting, when possible;
- The allotment of enough time in the daily schedule for the ERP to have private internal meetings to
  - o review the data that has been gathered,



- o determine what, if any, additional information should be requested,
- and to make any adjustments in the schedule that ensure a complete and thorough review process.

The site visit kicks off and ends with a meeting with the EQAP leadership and decision-makers. The exit meeting should provide a short briefing about the panel's main findings.

The EQAP has to select representation and there should optimally be twelve to fifteen (12-15) people in each session (both on-line and face-to-face).

During an in-person site-visit, the EQAP should remind participants of and make sure the following are taken into account:

- Accommodate for time difference (more than six (6) hours) and/or travel times (more than six (6) hours), consideration of jet lag (allowing at least twenty-four (24) hours to adjust);
- Finalize transportation and bookings at least one to two (1-2) weeks prior the sitevisit starting;
- Provide name tags for all participants;
- Draft an agenda with names and representation that should be approved by the ERP a week before the site-visit;
- Comply with the agenda timing and meeting modalities (e.g., informant categories should not be mixed at the last minute, delays should be limited).

#### 3) After the site-visit

After the site-visit, the Secretary of the ERP writes the final draft version of the review report. The review report includes the following elements:

- Executive Summary: briefs on the case, major findings and key recommendations;
- Introduction to the context of where, how, and why the EQAP exists;
- Review of major findings and judgements against each of the ISGs, supplemented by commendations and recommendations;
- Conclusion, including a table with judgements per each ISG;
- Summary List of Recommendations;
- Annex 1 Copy of the site-visit agenda;



- Annex 2 Composition of the ERP;
- Annex 3 List of the meeting participants.

The Secretary works closely with the ERP members to draft the review report. The ERP members should be all in agreement with the content of the report. In case of disagreement, further inquiry needs to be made into the issue at hand until consensus is achieved at the ERP level. Once the Report is finalized and approved by the ERP, the Procedure Coordinator shares it with the applicant EQAP with a two-week (2) notice to review the Report to ensure factual accuracy. In case a factual error is detected by the applicant, respective corrections should be proposed substantiated with evidence and supporting documentation. The ERP, upon receipt of the EQAP's response to the report, may choose to amend the report or leave it as is.

The final report, including the response of the applicant to the initial draft report is submitted to the INQAAHE Recognition Committee for a review and preparation of the case, including recommendations on recognition, for decision-making by the INQAAHE Board of Directors.

The ERP Final Report is published on the INQAAHE website in full and the outcomes of the review are made public by the INQAAHE Quarterly Bulletin.



# VIII. Judgments and Evaluation Matrix

The external reviewers' report provides insights into major findings, commendations (good practices) and recommendations (areas of further improvement) against each of the applicable ISGs. The ERP report culminates in judgements based on the following grading scale:

The following judgements are made for each of the ISGs:

- Fully compliant: a case for which the applicant has demonstrated full compliance with all the sub-standards within a given ISG, permitting some minor recommendations for enhancement.
- Substantially compliant: a case for which the applicant has demonstrated overall compliance with the ISG, however around 25% of the sub-standards are still in need of further enhancement.
- **Partially compliant:** a case for which the applicant has demonstrated some compliance, however, some of the sub-standards are not met and/or more than 25% of sub-standards need further enhancement.
- Not compliant: a case for which the applicant has demonstrated non-compliance across more than 50% of sub-standards.

Each criterion is graded according to the four (4) levels of the grading scale. This forms the foundation for the overall judgment by the ERP. This judgment is then submitted to the INQAAHE Recognition Committee. INQAAHE ensures the consistent application of the grading scale across different cases. However, it is important to note that grading relies on the ERP's judgment and the unique circumstances of each EQAP, making it specific and, in any case, comparable to other EQAPs. The process also incorporates an appeal process and procedure in the event that an EQAP disagrees with the rendered judgment.



# IX. Decision-making

#### 5-year certificate of recognition

The decision on granting an ISG Recognition status lies with the INQAAHE Board of Directors. The Recognition Committee presents the case in full to the Board, along with a recommendation on the final decision, based on which the Board casts votes. In case of a tie, the President of the Board takes a decisive action. The Recognition status is granted for up to five (5) years.

Following this period, it becomes the responsibility of the EQAP to initiate the renewal process through a new procedure.

#### 2.5-year certificate of recognition

The issuance of the certificate of recognition may however be granted for two and a half (2.5) years. This is applicable in cases where INQAAHE acknowledges the EQAP's progress but deems significant improvements necessary for full recognition over the 5-year period. A shorter recognition is granted in cases in which the external reviewer report asserts that up to 50% of the sub-standards are deemed partially compliant or non-compliant, while the remaining 50% are substantially or fully compliant.

In such cases, the process is as follows:

- 1. INQAAHE issues the certificate specifying in the official letter- the expiry date of the recognition for 2.5 years;
- 2. INQAAHE appends to the final report key areas for improvement that the EQAP should consider in the follow-up report, aiming to secure an extension to 2.5 years. These areas for improvement should serve as guidance for the EQAP enhancement and are not prescriptive. The operational remediation to be taken belongs to the EQAP;
- 3. Three months before the expiry date of the shorter (2.5 years) recognition, the EQAP submits a follow-up report to INQAAHE. It is the responsibility of the EQAP to initiate the process and utilize its own template;
- 4. The EQAP is accountable for providing all evidence intended to demonstrate that significant improvements have been made or to explain the reasons for not fully meeting the requirements (e.g., changes in the legal setting, contractual factors,



- emergence of new priorities for quality assurance in the tertiary education system);
- 5. The Recognition Committee scrutinizes the follow-up report and may seek clarification on any unclear matter before formulating recommendations to the INQAAHE Board of Directors;
- 6. The INQAAHE Board of Directors takes the final decisions on the case;
- 7. If the follow-up report demonstrates that the EQAP significantly meets the recommendations, the certificate of recognition is extended by 2.5 years;
- 8. If the follow-up report is not satisfactory, the certificate is not extended. The validity of the certificate is terminated, and the EQAP will no longer be listed on the INQAAHE's website in the list of recognized QA bodies. Given such an outcome, the EQAP has the option, if desired, to initiate a new external review, in which case the process recommences entirely;
- 9. In case the EQAP chooses to showcase its progress and hence be qualified for a five-year recognition status, instead of submitting a follow up report, the EQAP may opt to begin a fully new process of recognition. Successful completion of this process allows for the issuance of a 5-year certificate of recognition.

#### Recognition of Prior Review certificate of recognition

The EQAPs undertaking a Recognition of Prior Review pathway leading to an INQAAHE Recognition status based on a review by a reputable external evaluator are granted the status in line with the effectiveness period granted by the primary evaluator.



# X. Follow-up

Based on the decision of the INQAAHE Board, the EQAP under scrutiny is requested to follow up on the recommendations as set out in the final report by submitting a follow-up plan on the recommendations within two months of the receipt of the official Letter of Recognition.

The follow-up report for an EQAP with a five (5)-year recognition serves an informative and formative purpose. It should outline positive progress towards meeting the recommendations for improvement cited as part of the INQAAHE Board decision, within the specified timeframe. This report addressing the recommendations of the Board should be submitted by the EQAP midway the recognition effectiveness cycle.



## XI. External Review Fee Structure

The INQAAHE external reviews of EQAPs for ISG Recognition are conducted by internationally renowned and highly experienced experts in the field, contracted by INQAAHE on a case-by-case basis. Hence, the following fee structure is applied:

- i. The fee covers the honoraria for the ERP, the Project Coordinator fee, and the services of the INQAAHE Secretariat;
- ii. The fee excludes the expenses related to the ERP travel, accommodation and meals, insurance and subsistence in case of an in-person site-visit. The applicant should budget for these expenses separately;
- iii. The overall fee for an external review is distributed as per the following rates:

FUNCTION	BASELINE	1 MODULE	2 MODULES	3 MODULES
Panel Chair fee	2,500 USD	2,750 USD	3,000 USD	3,250 USD
Panel Secretary fee	2,500 USD	2,750 USD	3,000 USD	3,250 USD
Panel Expert fee	2,000 USD	2,250 USD	2,500 USD	2,750 USD
Project Coordinator fee	500 USD	500 USD	500 USD	500 USD
INQAAHE fee	8,000 USD	8,000 USD	8,000 USD	8,000 USD
TOTAL	15,500 USD	16,250 USD	17,000 USD	17,750 USD

- iv. The fee should be paid before the visit as a whole; however, a request may be made to pay the fee in two (2) instalments 50% before the visit and 50% upon receipt of the review ERP's report;
- v. If the application is withdrawn before the completion of the review process, **the refund policy** is as follows:
  - Withdrawal before the desk-review 30% will be refunded
  - o Withdrawal after the desk-review 15% of refund
  - Withdrawal after the visit no refund
- vi. In case of the ISG Recognition through a Joint Review pathway, the fee structure will be set in the trilateral agreement. However, the same rates as outlined in Table 1 should be applied;
- vii. Fee for the Recognition of Prior Review against baseline standards: 3,500 USD.
  - a. If an EQAP wishes to seek recognition for elective modules that fall outside the scope of the previous review, the following fee structure will apply:



- b. 500 USD for INQAAHE project coordination
- c. 2,250 USD per expert. A minimum of two (2) experts is required per module.
- viii. An estimate of the total fee is to be agreed upon with INQAAHE, depending on the number of modules to be reviewed;
- ix. An additional fee of 10% of the total cost of the review, whatever the pathway selected, will be applied for any application from a non INQAAHE member.



# XII. Appeals procedure

The final decision made by the INQAAHE Board can be appealed. Applications for Appeal are accepted by the INQAAHE Board only in cases of procedural failures on the part of INQAAHE. The request appeal for must be sent to the INQAAHE Secretariat within ten (10) days upon the issue of the INQAAHE Board's decision. The Appeal must specify the exact reason for the act supported by respective evidence and documentations. If the appellant fails to submit the appeal within the ten (10) days grace period, the report of the review outcomes will be published on the INQAAHE website and is final.

The INQAAHE Secretariat notifies the EQAP within five (5) days on the receipt of the appeal. The request for an appeal is submitted to the Recognition Committee which determines if there is sufficient evidence to move forward with an appeal hearing. In case the evidence is convincing enough and substantiated by relevant data, an Appeals Review Committee (ARC) with appropriate expertise will be established to review the case. The ARC is independent and operates without influence from either the Recognition Committee or the INQAAHE Board.

The names of the ARC members will be shared with the EQAP to prevent any potential conflict of interests. The EQAP has seven (7) days to identify the experts that have a potential conflict of interest and notify the Secretariat by substantiating the claims. Once the final composition of the ARC is agreed upon, the review of the case begins and should take no more than twenty (20) days. The ARC shall review:

- the procedures completed by the ERP and INQAAHE in setting up and carrying out the review process
- the conclusions included in the final report that were developed by the ERP and shared with the EQAP
- the EQAP's response to the ERP's review report
- the conclusions included in the final report following receipt of any requested amendments from the EQAP with supporting evidence.

In specific, the ARC shall determine whether the INQAAHE Board and/or the ERP Members allowed procedural violations that could open to question the legitimacy of judgments. If violations are identified, the ARC is to assess whether these violations affected the conclusions made in the final report and by the INQAAHE Board.



The ARC shall also consider whether the decision of the INQAAHE Board regarding the EQAP's failure to be in alignment is justified and proportionate to the relative legitimacy of the ERP's findings. Thus, if the ARC determines that the ERP's conclusions become questionable for procedural reasons or for neglect of important facts provided by the EQAP, then the AEC may decide that the Board's final decision should be reconsidered.

The ARC shall also determine whether the appeal contains materials that were not available to the ERP during the visit or as part of the EQAP's response to the report of the ERP, thus creating circumstances that could lead INQAAHE to revise the final decision. If such materials are identified, the representatives of the EQAP will be informed which materials were not provided to the ERP during the visit and review process and cannot be considered in the appeals process.

Finally, with regard to the members of the Recognition Committee and the INQAAHE Board, the ARC shall determine whether any members have personal conflict of interests, or conflicts associated with any competing EQAP that could call into question the legitimacy of decisions made.

In light of these reviews, the ARC will make a determination if procedures were accurately followed, and, if the ERP's conclusions and the INQAAHE Board's final decision regarding "alignment" stand.

Having considered all aspects of an EQAP's appeal, the ARC may recommend one of the following two pathways for resolution:

- To confirm the INQAAHE Board's decision, citing
  - First, that no evidence was found to indicate any significant procedural violations;
  - Second, that the ERP's findings as included in the report were justified and proportionate; and
  - Third, that the appeal does not contain new materials that were missing during the review and decision-making process.
- To request that the INQAAHE Board revisit the alignment decision it needs to be based on the evidence that procedures were not clearly followed and/or on the ARC's findings that there is reason to suspect the validity of the conclusions drawn by the ERP or decision-making body gained from the documentation included in the review process.

The ARC informs INQAAHE of its recommendation to either confirm the decision or revisit the decision. The INQAAHE Board must then consider the recommendation and



notify the EQAP that either the decision stands or that the decision will be revisited. If the decision is revisited, the INQAAHE Board may request additional information to be submitted by the EQAP to address any outstanding questions.

The appeals procedure should take no more than three (3) months from the moment of appeal submission to the decision.



# XIII. Annexes

#### ANNEX A

A sample of a site-visit-visit agenda is presented below, showing the kind of meetings to be organized on each day of the visit. Please note that in order to discuss the information, also various 'ERP only' sessions are part of the program.

# EQAP's ISG Recognition Review - <u>Site-visit</u> Agenda Site-visit dates: January 1 - January 3, 2023

## Day 1 January 1, 2023

Juliudi y 1, 2020			
Time	Activities and Interview Sessions	Participants	
8:30-9:00	Preparatory meeting Day 1	ERP	
9:00-10:00	<b>Session 1:</b> EQAP President and Secretariat (inperson)		
10:00- 11:00	<b>Session 2:</b> EQAP Self-Evaluation Committee (inperson)	EQAP Committee Members and Admin Members	
11:00- 12:00	Session 3: HEIs Representatives, QA Representatives - Institutional Accreditations (online)	EQAP Stakeholders	
12:00- 12:30	Office Tour	ERP and EQAP Staff	
12:30- 13:30	Lunch Break	ERP	
13:30- 14:00	ISG RP Internal Meeting	ERP	
14:00- 15:00	Session 4: Professional Graduate School QA Representatives - Certified Evaluation and Accreditation (online)	EQAP Stakeholders	
15:00- 16:00	Session 5: EQAP's International Partners (online)	EQAP Partners	
End of Day 1			

#### Day 2

#### January 2, 2023

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Time	Activities and Interview Sessions	Participants	
9:00-9:30	Preparatory meeting Day 2	ERP	
9:30-10:00	Session 6: EQAP National Partners (online)	EQAP Partners	



10:00- 11:00	<b>Session 7:</b> HEIs QA Representatives – Program Accreditations (online)	EQAP Stakeholders	
11:00- 12:00	Session 8: HEIs Representatives, QA Representatives - Institutional Accreditations (online)	EQAP Stakeholders	
12:00- 13:00	Lunch Break	ERP	
13:00- 13:30	ISG RP Internal Meeting	ERP	
13:30- 14:30	<b>Session 9:</b> EQAP Board of Trustees (hybrid – online and in-person)	EQAP Board	
14:30- 15:00	Coffee and tea break	ERP	
15:00- 16:00	<b>Session 10:</b> EQAP's Standards Committee (inperson)	EQAP Committee members	
16:00- 17:00	<b>Session 11:</b> EQAP's Evaluators/Reviewers (hybrid-online and in-person)	EQAP ERP	
17:00- 18:00	Session 12: EQAP's Staff members (in-person)	EQAP Staff	
End of Day 2			

# Day 3 January 3, 2023

Time	Activities and Interview Sessions	Participants
9:00-9:15	Preparatory meeting Day 3	ERP
9:15-10:15	Session 13: Ministry of Education representatives (online)	Ministry representatives
10:15- 10:30	Coffee and tea break	ERP
10:30- 11:30	Session 14: EQAP's National Partners (online)	EQAP Partners
11:30- 12:30	Call back session The ERP will call for another interview session with EQAP staff if the ISG RP need to clarify or ask additional questions (in-person)	EQAP Staff
12:30- 13:30	Lunch Break	ERP
13:30- 14:00	ISG RP Preparations to deliver the Oral Exit Report	ERP
14:30- 15:00	Oral Exit Report (in-person)	EQAP and ERP

# End of Day 3



# EQAP's ISG Recognition Review - <u>Virtual</u> Visit Agenda Virtual visit dates: January 1 - January 3, 2023

# Day 1 - January 1, 2023

Time	Activity
9:00-10:00	Board of the applying EQAP
10:00-11:00	Professional staff of the applying EQAP
11:00-12:00	Administrative staff of the applying EQAP
12:00-13:00	Representatives from the Ministry of Education

## Day 2 - January 2, 2023

Time	Activity	
9:00-10:00	Representatives from Professional Associations	
10:00-11:00	Rectors or senior management representatives from HEIs with accreditation experience	
11:00-12:00	Quality Managers or equivalent with responsibility for the QA portfolio from HEIs	
12:00-13:00	Representatives from Student Associations	

## Day 3 - January 3, 2023

Time	Activity
9:00-10:00	EQAP Staff members with experience accrediting programs offered by HEIs
10:00-11:00	Call-back of the Executive Director and EQAP staff to clarify issues, if necessary
11:00-12:00	Feedback to the EQAP Board and senior management



# **ANNEX B: Sample Contract**

# International Network for Quality Assurance Agencies in Higher Education (INQAAHE)

#### **ISG Recognition Service Contract**

The International Network for Quality Assurance Agencies in Higher Education (INQAAHE) and EQAP in EQAP's country, both parties agree that:

- 1. INQAAHE will carry out a peer review to determine if the work of the EQAP complies with the INQAAHE International Standards and Guidelines of Tertiary Education Quality Assurance (ISGs), 2022.
- 2. The peer review is based on the Self-Evaluation Report (SER) and supporting documents provided by *EQAP*.
- 3. The peer review will be carried out by a panel that consists of one Panel Chair, one Secretary and one QA expert.
- 4. The INQAAHE Secretariat will identify and appoint the panel members and distribute a Declaration of Impartiality and Non-disclosure agreement (NDA) among the panel members to prevent any possible conflict of interest and ensure the confidentiality of the information.
- 5. A site-visit will be organized to verify compliance with the ISGs and to discuss with EQAP and stakeholders the self-evaluation report and the supporting documents.
- 6. *EQAP* is responsible for the practical organization of the site-visit, this includes arranging, booking, and paying for travel and accommodation of the panel members.
- 7. The INQAAHE Secretariat and the ISG Project Coordinator will provide a draft program for the ISG Recognition Review in consultation with the review panel. The ISG Project coordinator will act as a liaison between the review panel and EQAP to communicate, plan, and agree on the related matters, logistics and details of the site-visit review or virtual visit review.
- 8. INQAAHE charges a Review fee of US\$15,000 to cover the honoraria for panel members and the services of the Secretariat.
- 9. EQAP agrees to pay the review fee to INQAAHE within 30 calendar days after the reception of the invoice. The fee of US\$15,500 should be transferred by electronic



bank transfer using the given invoice. If agreed by both parties, the review fee may be paid in two installments:

- a. First installment: 7,750 USD within 30 calendar days after the signing of the ISG service contract.
- b. Second Installment: 7,750 USD upon reception of the INQAAHE final report on EQAP performance. This report shall be presented no later than 5 to 6 weeks after the virtual site-visit
- 10. After the *site-visit* the panel will compose a draft review report which will consist of the assessment of the ISG and will include the recommendations for enhancement.
- 11. The draft review report will be sent to *EQAP* between 5-6 weeks after the completion of the virtual or site-visit and *EQAP* may submit its comments and feedback within 1-2 weeks after receiving the draft report.
- 12. After receiving EQAP's comments and feedback, the panel will finalize the review report and will sign off on the review report and submit it to the INQAAHE Secretariat and Recognition Committee. Once the review report has been received, it will be included for discussion and revision by the INQAAHE Board at their earliest meeting.
- 13. The INQAAHE Board will decide whether the review has been carried out according to the requirements for the INQAAHE review and whether the review report can be published on the INQAAHE website with *EQAP* approval.
- 14. This contract is effective from the date of signature by both parties until the date of the INQAAHE Board approval of the review report and final decision.
- 15. Any disputes and differences which may arise between INQAAHE and *EQAP* relating to the provisions of this Contract, or the ISG review, or the rights or liabilities of the parties, shall so far as possible be resolved between them amicably. However, failing such amicable settlement, the parties hereby submit to the laws of Spain for the time being in force, and to the exclusive jurisdiction of the courts of Spain.
- 16. The following table contains the main activities and milestones (i.e., discussion and approval to be executed under the contract and upon revision, agreement, and approval between INQAAHE and EQAP):



	Activity/Milestone	Who	Expected Date
1	Submission of Letter of Interest to INQAAHE ISG Alignment	EQAP	
2	Submission of <i>EQAP</i> 's Self-Evaluation Report (SER)	EQAP	
2	Execution of ISG Alignment Service Contract	EQAP & INQAAHE	
3	Payment of the ISG Fee, or first instalment	EQAP	
4	Appointment of the External Review Panel	INQAAHE RC	
5	Confirmation of dates for the Visit	EQAP & INQAAHE Project Coordinator	
6	INQAAHE ISG Review - Site-visit	EQAP & INQAAHE External Review Panel	
7	ISG Review Panel will send the Draft Review Report to EQAP	INQAAHE ISG External Review Panel	
8	EQAP will submit its comments or feedback concerning the draft review report	EQAP	
9	Submission of the Final Review Report to INQAAHE Board for consideration and decision	INQAAHE RC	
10	INQAAHE Board deliberate its decision	INQAAHE Board	
11	INQAAHE Board decision announcement & Notification of Results to <i>EQAP</i>	INQAAHE Secretariat & ISG Project Coordinator	

17. This contract may be amended at any time by mutual agreement of both parties.



Signed on behalf of INQAAHE	Signed on behalf of EQAP
Name:	Name:
Date:	Date:
Signature:	Signature



### **ANNEX C: Glossary of terms**

Cross-border Tertiary Education is the delivery of tertiary education beyond the country borders/jurisdictions within which the tertiary education provider/the qualification awarding body is legally incorporated. This definition of cross-border tertiary education refers only to the education provisions encompassing crossing country/jurisdiction borders and does not cover cases wherein students cross borders to obtain a tertiary education qualification.

In some countries, CBTE is referred to as transnational education (TNE) and embraces a circumstance in which students leave the borders of their home country to pursue their education in a different country. For the purposes of this document, CBTE does not refer to student mobility.

**Cross-border Quality Assurance** Quality assurance services are those offered by EQAPs beyond the country borders/jurisdictions in which the EQAP is legally incorporated.

**Distance Education** Distance education (DE) is 'education imparted at a distance through the use of information/communication technology: radio, TV, the telephone, correspondence, e-mail, videoconferencing, audio-conferencing, CD-ROMs, or online' (UNESCO Thesaurus. n.d.). Put more simply, distance education/learning is a category of education/learning where students are at a physical distance from the instructor.

For the purposes of the ISGs:

- Distance education/learning includes all types of learning where the learner and the instructor are apart. Types of distance education other than online and blended education should be addressed using the Baseline Standards.
- Online and blended education is a type of distance education and refers to digital education, which are also types of distance education and are delivered via internet, in an online modality to support interaction between the students and the instructor synchronously or asynchronously. Different types of technology may be used for online/blended instruction, including the internet, satellite or wireless communication, and audio and video conferencing. This type of education learning is covered under selective

**Internationalization**. Internationalization at the national sector and institutional levels is defined as the process of integrating an international, intercultural, or global dimension into the purpose, functions or delivery of postsecondary education (Knight, 2003). For the purposes of external quality assurance provisions, internationalization is defined as the process of integrating an international, intercultural, or global dimension into the purpose, functions or delivery into quality assurance practices.



Quality enhancement continuum: efficiency, relevance, and transformation. The quality enhancement continuum aims to focus evaluation, to accord with EQAPs mission, provide the status of a QA body in terms of its performance creating capacity for system-wide enhancement, impact and ultimately, driving transformations. Efficiency, relevance and transformation depend on such factors as the extent of organizational optimization, self-optimization, and continuous improvement and enhancement, and the capacity to accomplish the organization's objectives in due manner. It depends on the leadership type at all levels and to what extent it promotes a healthy quality culture, and a culture of trust and accountability. The development stage of an internal QA system for the organization, its extent of effectiveness and efficiency to measure, manage, conduct quality checks and enhance all key processes and outputs and the culture of external reviews to which it subjects itself are key to defining the maturity level of an institution. Last, but not least, the quality enhancement continuum is judged based on the extent to which such processes are well-documented and continuously improved, the level of advancement of the tools and technology applied, their extent of integration, and the extent to which these technologies and tools accelerate and enhance performance.

QA body, in the context of quality in tertiary education, is a generic term encompassing all types of services (e.g., reviews, trainings, consultations) offered to enhance the quality of provisions and promote a quality culture. The services may range from external reviews to providing training, workshops, soft regulations, guidelines and the like. The QAB may or may not serve as a QA provider.

**Quality Assurance of Cross-Border Education (QA of CBE)** refers to the external QA providers that conduct quality assurance/accreditation of education units that operate across the borders of their legal incorporation.

**Quality Assurance Agency:** A QA Agency is, in the context of quality in tertiary education, shorthand for any organization that undertakes any kind of monitoring, evaluation or review of the quality of tertiary education. QA agency refers to a buffer body or a business that represents one group of people when dealing with another group, e.g., governments, establishing a buffer body/agency to conduct external reviews (e.g., accreditation, audits) of TEIs or programs.

Quality Assurance body: QA body, in the context of quality in tertiary education, is a generic term encompassing all types of services (e.g., reviews, trainings, consultations) offered to enhance the quality of provisions and promote a quality culture. The services may range from external reviews to providing training, workshops, soft regulations, guidelines and the like. The QAB may or may not serve as a QA provider.



Quality Assurance Provider: A QA Provider is a generic term that refers to an organization that is established to offer services aiming to enhance and verify the quality of TE provisions through reviews of tertiary education processes, offerings and/or performance, e.g., private (for-profit and non-for-profit) accreditors.

**Quality Culture:** A quality culture embodies professional reflection as a learning community: a community that includes all the participants. It is intrinsic to a way of life, a way of thinking and a way of coming to understand the overall enterprise which it embodies. A quality culture is not something that can be codified in a manual (Harvey, 2009), borrowed, or imposed from outside.

**Relevance of standards:** standards that meet the quality expectations from an EQAP by the community of tertiary education providers and beneficiaries.

**Short Learning Programme**: A set of activities shorter than a full degree (e.g., course, courses, modules, assessments, micro-credentials) that culminates in learner assessment and the award of a credential. Short learning programmes are designed in line with UNESCO ISCED levels 4-8; however, they are built around specific skills and competencies. Short learning programmes can be offered by formal tertiary education providers or outside formal education, e.g., industry, government, NGOs, and the like.

**Tertiary Education Institutions**: All institutions, public or private, offering post-secondary programmes, including universities, universities of applied sciences or schools offering short learning programmes and post-secondary vocational programmes (IESCD 4 to 8).

International Network for Quality Assurance Agencies in Higher Education (INQAAHE)

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