

Practices and Interpretations

(as of September 2013, based on the Register Committee's decision-making practice)

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Introduction

The European Quality Assurance Register for Higher Education (EQAR) manages a register of quality assurance agencies that have demonstrated their substantial compliance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (European Standards and Guidelines, ESG¹) through an external review, coordinated by an organisation that is independent of the agency and conducted by a panel of independent experts.

Based on a mandate by European ministers responsible for higher education (cf. London Communiqué, 2007²), EQAR was established in order to:

- provide reliable information on credible quality assurance agencies operating in Europe;
- increase the transparency of quality assurance;
- enhance trust in and recognition of registered agencies and their decisions;
- support recognition of qualifications and, thus, mobility of students.

The Register Committee is EQAR's independent decision-making body that decides on inclusion of quality assurance agencies on the Register. The Committee comprises of quality assurance experts from different backgrounds³, who act in their personal capacity as independent experts.

The London Communiqué requested that substantial compliance with the ESG should serve as the criterion for inclusion on the Register. This is reflected in the EQAR Statutes and the Procedures for Applications⁴.

The Register Committee considers whether an applicant quality assurance agency substantially complies with the ESG on the basis of an external review of the agency. This review has to fulfil a set of requirements in order to ensure its robustness and objectivity; these requirements are specified in the Procedures for Applications.

This document summarises the acquired practices of the Register Committee in considering compliance with the ESG and the principal interpretations it has made with regard to the standards.

¹ See also: <https://eqar.eu/application/criteria.html>

² See also: <https://eqar.eu/about/background.html>

³ Nominated by EQAR's Founding Members (ENQA, ESU, EUA, EURASHE), BUSINESSEUROPE and Education International

⁴ January 2013 (v2.0), available at: <https://eqar.eu/documents/official.html>

In doing so, it aims to:

- increase the transparency of the Register Committee's decision-making practice;
- help demonstrate consistency in the Committee's practices, interpretations and decisions on applications;
- aid external review panels in understanding how the Committee has interpreted the ESG and used external review reports;
- facilitate the understanding of the Committee's public decisions.

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The relevant items of the EQAR Procedures for Applications (part A) and the text of each European Standard (part B) is displayed in boxes.

A. General Principles of Decision Making

The Register Committee considers every application on its own merits and solely in relation to the criteria for inclusion, as defined by the Procedures for Applications.

A.1 Substantial Compliance with the ESG

⁵2.1 To be included in the Register, applicants need to demonstrate that they operate in substantial compliance with the ESG, attested through an external review in line with the eligibility requirements.

2.2 Parts 2 (2.1 – 2.8) and 3 (3.1 – 3.8) of the ESG shall be directly relevant for inclusion on the Register.

3.8 The Register Committee shall decide on every eligible application and either approve or reject the application.

5.1 All decisions by the Register Committee on eligible Applicants (in the sense of §3.8) as well as any decision concerning a Registered Agency (in the sense of §7.4) shall be published including an account of the reasons.

The Register Committee makes a holistic judgement as to whether or not an applicant complies substantially with the ESG. In doing so, it applies the following principles:

1. The Register Committee decision is the result of a conclusion that the agency is either found to substantially comply with the ESG or not. The relevant considerations are part of the Committee's decision⁷.
2. The holistic judgement is based in the external review panel's findings, analyses of and conclusions⁶ on the agency's compliance with the relevant standards (ESG 2.1 – 2.8 and 3.1 – 3.8).

⁵ The numbers in this section refer to the paragraphs of the Procedures for Applications (v2.0 of January 2013).

⁶ The review panel's conclusions might be formulated using the typical scale of "no compliance", "partial compliance", "substantial compliance", "full compliance"; or using another scale that the panel considers appropriate and from which the Register Committee can conclude the degree of compliance.

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3. Part 1 of the ESG is referenced in standard 2.1 and is thus indirectly relevant for the Register Committee's considerations. While the review report does not need to address each standard (1.1 – 1.7) separately it should analyse how the aspects addressed in these standards are reflected in the agency's processes and criteria.
4. The Register Committee does not use the standards as a checklist. That is, failure to substantially comply with one specific aspect of one specific standard does not as a general rule mean that an agency does not comply substantially with the ESG as a whole.
5. Should the Register Committee not consider the panel's conclusion with regard to compliance with a specific standard compelling, this is explained in the Committee's decision⁷. If a specific standard is not addressed in the decision it is implied that the Committee largely concurred with the review panel's analysis and conclusion without further comments.
6. Whereas the standards are requirements that have to be adhered to, the guidelines provide additional explanation of good practice in relation to the standard. The Register Committee therefore takes into account the guidelines when considering and judging upon an agency's level of compliance with the standard.
7. The Register Committee bears in mind the specific legislative, political and socio-economic context of each agency. The external review report, however, has to demonstrate how the agency meets the requirements of the ESG in its context.
8. The conclusion does not distinguish between substantial and full compliance, since for inclusion on the Register it is sufficient to substantially comply with the ESG. Likewise, if the conclusion is "not substantially compliant", no difference is made between partial or no compliance.
9. In its decisions, the Register Committee flags areas which warrant particular attention in the future (for instance, because compliance with the ESG is less obvious). When considering an application for renewal of registration, the Register Committee considers specifically the developments in these areas.

A.2 Evidence Base and External Reviews

1.5 The Applicant's substantial compliance with the ESG needs to be evidenced through an external review by an independent expert panel according to the provisions of these Procedures.

1.11 The review panel members shall represent a range of expertise, covering the different perspectives of the key stakeholders. The Panel shall include at least (at the time it is composed):

a. one academic staff member of a higher education institution;

⁷ All Register Committee decisions as from May 2013 are published at <https://eqar.eu/publications/decisions.html>.

- b. one student of a higher education institution; and*
- c. one individual from a country other than that of the applicant.*

1.13 The self-evaluation report shall reflect on the applicant's compliance with each of the ESG in parts 2 and 3. It should be a critical reflection on the activities, strengths and weaknesses of the applicant and the added value they provide for quality improvement of higher education institutions.

1.14 The main basis for the Register Committee's decision making is the external review report. The facts on which the report is based have to still reflect reality at the time of application.

1.15 The external review report shall provide sufficient evidence of the applicant's compliance with each of the ESG in parts 2 and 3. It should encompass a summary of evidence, an analysis and a conclusion for each of the standards.

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10. The primary basis of the Register Committee's decisions is the external review report, which contains evidence that has been reviewed and analysed by an independent expert panel (following the requirements of the Procedures for Applications).

Additional information (provided by the applicant agency) is taken into account as far as it is reasonable and appropriate to do so. Bearing in mind that such information has not been reviewed by an independent panel the Register Committee aims to minimise the amount of additional information.

11. In principle, the Register Committee bases its decision on the factors prevailing when the external review was undertaken. The Committee, however, takes into account the major developments that have occurred since the external review, especially in response to the panel's recommendations.

Where agencies do not submit information with their applications on how they have acted (or plan to act) on the recommendations, the Register Committee usually requests the agency to outline its follow-up of the external review.

12. The Register Committee observes strictly the requirement concerning the composition of external review panels. That is, a review by a panel which does not include a student, an academic staff member and an international expert is not accepted for consideration. The Register Committee does not accept consultation with those constituencies (e.g. with students) as a substitute for their presence on the panel.
13. The self-evaluation report and external review report must explicitly relate to the ESG and address separately each standard of part 2 and 3.

A.3 Eligibility for Registration and Scope

1.3 Organisations (or a clearly identified sub-unit thereof) that directly conduct external quality assurance reviews of higher education institutions, their organisational units (faculties, departments, etc.) or study programmes are eligible for registration.

1.4 Registration is open to organisations operating in Europe, regardless of whether they are based in Europe or outside, and regardless whether they are national or international in nature. This is, however, notwithstanding the requirements of ESG 3.2.

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14. Only entities (organisations or clearly defined units of an organisation) that directly conduct external quality assurance activities (i.e. review, audit, evaluation, accreditation etc. of higher education institutions or programmes) are eligible for inclusion on the Register.

Organisations which carry out only meta-level activities, such as standard setting or exercising oversight of quality assurance agencies, are not eligible for inclusion on the Register.

15. The Register Committee considers that the ESG embrace a variety of quality assurance approaches, which are geared at both accountability and enhancement. The balance of these two is determined by each quality assurance agency in the light of its context, mission and objectives.
16. The Register Committee considers that neither the ESG nor EQAR's general objectives require that a quality assurance agency needs to have a permanent mandate by a national government to be within the remit of the ESG and, thus, eligible for registration.
17. The Register Committee considers all quality assurance activities (such as review, audit, evaluation or accreditation of higher education institutions or their provision) of the agency, in its home country and abroad, and both within and outside the EHEA. The external review report must thus contain a thorough analysis of all such activities.
18. Other activities that are by their nature not in the remit of the ESG (such as projects or the organisation of seminars) are not considered in considering applications for inclusion on the Register.

B. Interpretations of and Practices with regard to Specific ESG

2.1 Use of internal quality assurance procedures

External quality assurance procedures should take into account the effectiveness of the internal quality assurance processes described in Part 1 of the European Standards and Guidelines.

19. This standard relates to the crucial link between the activities of QAA's and the quality of higher education institutions and programmes. In order to provide robust assurance that agencies comply with the standard external review reports should include a thorough analysis of how ESG 1.1 – 1.7 are reflected in the processes and criteria used by the QA agency.

2.2 Development of external quality assurance processes

The aims and objectives of quality assurance processes should be determined before the processes themselves are developed, by all those responsible (including higher education institutions) and should be published with a description of the procedures to be used.

There are no specific practices or interpretations related to this standard.

2.3 Criteria for decisions

Any formal decisions made as a result of an external quality assurance activity should be based on explicit published criteria that are applied consistently.

There are no specific practices or interpretations related to this standard.

2.4 Processes fit for purpose

All external quality assurance processes should be designed specifically to ensure their fitness to achieve the aims and objectives set for them.

The key elements of quality assurance processes mentioned in the guideline to this standard are addressed under ESG 3.7.

2.5 Reporting

Reports should be published and should be written in a style which is clear and readily accessible to its intended readership. Any decisions, commendations or recommendations contained in reports should be easy for a reader to find.

20. The Register Committee understands the standard to require that full reports are published, including for procedures that resulted in a negative decision or conclusion.
21. The Register Committee considers the absence of any public reports as a major deficiency; and that the publication of summary reports (rather than full reports) does not fulfil the requirement of the standard.
22. The Register Committee understands the standard to require that review reports also have to be published for voluntary or commissioned reviews of institutions or programmes, irrespective of whether they take place in the agency's base country or elsewhere, within the EHEA or beyond.

2.6 Follow-up procedures

Quality assurance processes which contain recommendations for action or which require a subsequent action plan, should have a predetermined follow-up procedure which is implemented consistently.

23. The Register Committee understands the standard to require follow-up procedures for all reviews that contain any sort of recommendations, no matter whether they are informal or formal conditions.

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It is up to the agency to determine the nature and timing of follow-up in the light of its mission and as appropriate in its context.

24. The Register Committee acknowledges that specific national legislation or the voluntary nature of activities might influence the character of follow-up procedures and the extent to which they depend on the commitment of the institution or programme concerned.

2.7 Periodic reviews

External quality assurance of institutions and/or programmes should be undertaken on a cyclical basis. The length of the cycle and the review procedures to be used should be clearly defined and published in advance.

There are no specific practices or interpretations related to this standard.

2.8 System-wide analyses

Quality assurance agencies should produce from time to time summary reports describing and analysing the general findings of their reviews, evaluations, assessments etc.

25. The Register Committee considers that system-wide analyses are the responsibility of each agency, also in cases where an agency is part of a national or regional system. Whereas the title refers to "systems", the Register Committee considers that agencies should produce summary reports and analyses based on their quality assurance activities, irrespective of whether these cover a whole "system" or not.

3.1 Use of external quality assurance procedures for higher education

The external quality assurance of agencies should take into account the presence and effectiveness of the external quality assurance processes described in Part 2 of the European Standards and Guidelines.

See comments on the individual standards 2.1 – 2.8 above.

3.2 Official status

Agencies should be formally recognised by competent public authorities in the European Higher Education Area as agencies with responsibilities for external quality assurance and should have an established legal basis. They should comply with any requirements of the legislative jurisdictions within which they operate.

26. The Register Committee considers that the requirement of formal recognition can be interpreted in a broad sense.

Agencies, however, need to demonstrate that they are bona fide, in particular in that they adhere to the legislation of all jurisdictions within which they operate and only evaluate/accredit/audit higher education institutions that operate in compliance with the legislation of their relevant jurisdictions.

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27. Given the holistic nature of the Register Committee's judgement, the requirement of recognition in itself cannot be the sole reason for considering an agency not substantially compliant.

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3.3 Activities

Agencies should undertake external quality assurance activities (at institutional or programme level) on a regular basis.

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28. The Register Committee understands the standard to require that agencies directly conduct external quality assurance activities on the basis of permanently established processes. The Register Committee does not consider that occasional external quality assurance reviews of HEIs or programmes, implemented as ad-hoc procedures, fulfil the requirements of the standard.

3.4 Resources

Agencies should have adequate and proportional resources, both human and financial, to enable them to organise and run their external quality assurance process(es) in an effective and efficient manner, with appropriate provision for the development of their processes and procedures.

There are no specific practices or interpretations related to this standard.

3.5 Mission statement

Agencies should have clear and explicit goals and objectives for their work, contained in a publicly available statement.

There are no specific practices or interpretations related to this standard.

3.6 Independence

Agencies should be independent to the extent both that they have autonomous responsibility for their operations and that the conclusions and recommendations made in their reports cannot be influenced by third parties such as higher education institutions, ministries or other stakeholders.

29. The Register Committee considers whether the structures and official status of an agency ensure its independence, as well as whether the agency operates independently de facto.
30. The Register Committee considers it essential that the integrity of expert groups' reports is ensured by preventing undue influence on the findings, analysis, conclusions and recommendations, and that the body which takes (accreditation, audit, etc.) decisions after external QA activities operates independently and without political or other influence by external organisations.
31. Where an agency's independence is not obvious from its structures and status, the Register Committee expects that the external review panel

considers in greater detail how operational independence is safeguarded in practice.

For instance, where a governing body is composed exclusively of members coming from one stakeholder group, the agency's independence might be at risk and this warrants careful consideration.

32. If an agency has additional roles or functions at the same time, the Register Committee considers that that requires careful attention in terms of independence, especially as to whether adequate policies and processes are in place to safeguard independence of the respective organisational units in performing their QA functions.

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3.7 External quality assurance criteria and processes used by the agencies

The processes, criteria and procedures used by agencies should be pre-defined and publicly available. These processes will normally be expected to include:

- *a self-assessment or equivalent procedure by the subject of the quality assurance process;*
- *an external assessment by a group of experts, including, as appropriate, (a) student member(s), and site visits as decided by the agency;*
- *publication of a report, including any decisions, recommendations or other formal outcomes;*
- *a follow-up procedure to review actions taken by the subject of the quality assurance process in the light of any recommendations contained in the report.*

33. The Register Committee understands the standard to require that external experts reviewing an institution/programme should as a group approve the review report; if only one or some of the experts draft or sign off reports, without adequate involvement of the other experts, the Register Committee does not consider this in line with the requirement of "assessment by a group of experts".
34. The Register Committee understands the standard to require that students are part of an agency's groups of experts; it is up to the agency to determine the profiles and roles of student experts appropriate for its different external QA processes.
- There was no case in which the Register Committee found an argument persuasive that student participation would not be appropriate *per se* in certain processes.
35. The Register Committee understands the standard to regard site visits as a key element that should normally be part of all external QA processes; if site visits are not part of the procedures used by an agency clear reasons need to be provided, and it needs to be explained what mechanisms are used to validate evidence provided by institutions in their self-evaluation document.

36. The Register Committee considers crucial the expectation in the guideline to this standard to have an appeals system in place. The ESG, however, do not prescribe specific features of the appeals system, such as the grounds on which appeals can be made and the possible consequences of an appeal.

3.8 Accountability procedures

Agencies should have in place procedures for their own accountability.

There are no specific practices or interpretations related to this standard.

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