

Guide for Applicants and Registered Agencies

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1. Introduction

1.1 The Role of the European Register of QA Agencies

The European Quality Assurance Register for Higher Education (EQAR) is a register of agencies that have demonstrated their substantial compliance with a common set of principles for quality assurance adopted by the 48 member countries of the European Higher Education Area (EHEA). These principles are set out in the Standards and Guidelines for Quality Assurance in the EHEA (ESG).

The guarantee of compliance with the ESG plays a significant role in improving trust among quality assurance agencies, facilitating the recognition of quality assurance decisions and reducing opportunities for “accreditation mills” to gain credibility. The recognition of credible agencies is meant to further enhance the confidence of students, institutions, the labour market and society more generally in the quality of higher education provision in Europe. The use of the ESG by quality assurance agencies also enhances the recognition of degrees across different EHEA members states.

A number of countries use EQAR as a reference in their national legislation in order to recognise external quality assurance agencies and their results. These legal frameworks, for example, provide higher education institutions with the possibility to identify themselves a registered quality assurance agency that suits the institution's profile and meets its individual needs for external QA, or provide for the recognition of qualifications that were subject to quality assurance by an EQAR-registered agency.

An overview with examples of different legal frameworks recognising the activity of EQAR-registered agencies within EHEA is available on our website at: <https://eqar.eu/projects/map.html>.

EQAR's vision, mission and value statement can be read here: <http://eqar.eu/about/mission.html>

1.2 About this Guide

The Guide for Applicants and Registered Agencies addresses potential applicants preparing for inclusion on the Register and registered agencies planning renewal of their registration. It might also be a helpful reference for external review panels carrying out a review against the revised ESG.

The Guide for Applicants and Registered Agencies explains the provisions made in EQAR's official documents (Statutes, Procedures

for Applications, Appeals Procedure and Policy on the Use and Interpretation of the ESG, see Table 1).

• Guide for Applicants	Explanatory document, covering all relevant information for QA agencies
• Statutes	Organisational structure of EQAR
• Procedures for Applications	Formal rules for applications
• Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies	Explaining how EQAR applies and interprets the ESG
• Specific policies, including: Complaints, Mergers	Addressing specific issues or circumstances

Table 1: Status of EQAR's main reference documents

The Guide is updated as appropriate, based on the feedback received from quality assurance agencies and EQAR's own experience in dealing with applications.

Readers are thus invited to make comments and suggestions for improvement of this Guide. This can be done either via the regular feedback questionnaires or directly to the EQAR Secretariat (info[at]eqar.eu).

Please check the EQAR website regularly for updates of the Guide as well as to consult the section on **Frequently Asked Questions (FAQ)**.

<http://www.eqar.eu/application/faq-for-applicants.html>

All official documents, this Guide and further information on EQAR are available on the EQAR website: <http://www.eqar.eu/>.

1.3 Changes in the Application Process 2015

At the ninth EHEA Ministerial Conference in Yerevan (May 2015), Ministers adopted the revised version of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). The new version of the ESG brought along a number of changes in EQAR's processes and procedures.

EQAR has revised the present Guide, its Procedures for Applications and published a new Policy on the Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies.

With the new application process, agencies need to apply for inclusion on the Register (or renewal of registration) before initiating the external review. The following table summarises these changes, which are further explained below:

	New	Old
Application deadline:	Any time	15 Mar & 15 Sep
Check of eligibility:	First step of process	Prior check optional
External review:	After eligibility check	Before application
Review report submission:	15 Mar & 15 Sep / Expiry of registration	With application
Publication policy:	Full documentation	Decision only

Table 2: Changes in the application process

In the first step of the application process, the applicant agency is asked to provide a description of its different areas of activity. The agency will indicate before undergoing an external review which of its activities it considers to be within the scope of the ESG and which not (see further details under 4.1 External Quality Assurance Activities). The applicant is asked also to provide information about the review coordinator and submit the draft terms of reference for the planned review. The application can be made at any time as there are no deadlines for submitting the application.

EQAR will respond to the online application within three weeks and confirm which activities are considered within the scope of the ESG and, thus, relevant to the application. The agency is then expected to forward this information to the review coordinator and make sure that (at least) all those activities will be addressed in the external review.

If the application is not eligible (e.g. the planned review does not fulfil the requirements, or the applicant does not carry out any activities within the scope of the ESG), the application will be rejected.

After the external review, the agency is expected to submit the external review report, a declaration of honour by the coordinator as well as – optionally – its statement on the external review report. The application fee is charged after the external review documents have been submitted.

In case of initial applications there are two annual deadlines for submitting external review reports: **15 March and 15 September** (previous application deadlines).

For renewal applications, see 8.1 Application for Renewal.

The EQAR Register Committee will then consider the application and make a decision on admission of the agency to the Register or renewal of its registration, respectively.

2. Publication Policy

All decisions by the Register Committee on eligible applications are published as set out in EQAR's Procedures for Applications. This is in the interest of greater transparency and to avoid misinformation about the reasons for the Register Committee's decisions.

In addition to the approval and rejection decisions that are published, the full documentation of applications will be published as well. This includes further clarification received from applicant agencies or review panels, additional representation made by agencies, as well as any other documents submitted with the application.

In case of approval, the applicant will be admitted to the Register of quality assurance agencies at: <http://www.eqar.eu/register.html>. A specimen entry is shown on the following page.

For applications that were withdrawn after submission of the review report, there will be no decision taken therefore no decision to be published. However, these applications will figure on the list of complete and eligible applications.

Applications that do not meet the eligibility requirements (e.g. due to the nature of its activities) can not be considered by the Register Committee and therefore they will not be published.

In addition, Substantive Change Reports and the resulting decision by the Register Committee are also published.

//// SPACE - Specimen Agency for Accreditation in Central Europe

Notes:	Additional remarks
Admission valid until:	2019-08-28 (listed since 2015-03-07)
Based in*:	Slovenia
HE systems where agency conducted reviews**:	
Reports by the agency:	www.space.qaa/review/programme/reports.html
External review report:	SPACE_ExternalReviewReport_2014.txt SPACE_ApprovalDecision_2015.txt RC01_FormalWarning_2016.txt

Contact details

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Information on the agency's work

SPACE was founded in 1992 as a regional agency for quality assurance in Central Europe. After initially operating in Austria, Czech Republic and Slovenia SPACE has since widened its activities to numerous countries.

Specialisation:	SPACE is specialised on higher education programmes in the sector of aeronautics .
Types/Methods of quality assurance used:	SPACE normally provides accreditation (based on self-evaluation and peer review) at the level of study programmes. For departments or institutions that already had at least one programme accredited by SPACE it also provides institutional accreditation.
ENQA membership:	ENQA full member since November 2014

This is a specimen page to illustrate how entries on the register look. All information is entirely fictional. Should there be any similarities to (an) existing establishment(s), these are completely coincidental and unintentional. No prejudice on future (non-)inclusion of any agency shall be constituted.

3. No-Conflict-of-Interest Policy

EQAR attaches high importance to avoiding any conflict of interest of review panel members, review coordinators and members of its own decision-making bodies.

EQAR Procedures stipulate that the review coordinator, the review panel and the Register Committee members considering an application need to be independent and without conflict of interest.

The Procedures refer to a few examples of a conflict of interest:

- Employees or consultants of an applicant, as well as members of an applicant's statutory bodies,
- Members of the review panel reviewing an applicant,
- Those holding a position in a higher education institution or programme currently under review by the applicant,
- A representative of a reviewed applicant becomes panel member for an agency one of the panel member belonged to.

These are examples and there might be further circumstances that constitute a conflict of interest. Also, a person who has been in a situation as mentioned above until very recently or has a close relative who is in such a situation might have a conflict of interest.

As a general rule, EQAR expects all involved parties (applicants, review coordinators, review panels and members of its statutory bodies) to address (potential) conflicts of interest of their own accord.

3.1 External Review

In cases where the applicant itself initiates or commissions its external review, it is the applicant's responsibility to identify a review coordinator who is sufficiently independent and has no conflict of interest with the applicant. In cases where a national authority coordinates the review or commissions an organisation to coordinate the review, it is the authority's responsibility to ensure independence.

When submitting their application, agencies will be requested to declare in writing that the review coordinator is sufficiently independent from them.

The review coordinator bears the responsibility to ensure the independence of all review panel members. It is expected to take appropriate measures to prevent appointing any review panel members who might have a conflict of interest.

The review coordinator will be required to declare, using the 'Declaration of Honour', that appropriate measures were taken to avoid any conflict of interest of the review panel with the applicant and that the coordinator has no conflict of interest itself. The full CVs of all review panel members have to be attached to this declaration (see [Declaration of Honour Form](#)).

3.2 EQAR Decision-Making Bodies

Members of EQAR's decision-making bodies who have a (potential) conflict of interest are expected to refrain from taking part in the decision-making process and to declare this of their own accord.

Should an applicant, a review coordinator or a review panel member consider a member of an EQAR body to have a conflict of interest, this should be addressed to the President of the EQAR Executive Board, either directly or via the EQAR Secretariat.

3.3 Addressing Conflicts of Interest

Despite the general rule that a conflict of interest should be addressed of the person's own accord, there might be cases where an applicant or person involved in the review considers an involved person or a member of an EQAR body to have a conflict of interest.

If that is the case, the person may bring this to the attention of the EQAR Secretariat or the President of the EQAR Executive Board.

4. Eligibility

The eligibility requirements for registration on EQAR cover two main dimensions:

1. the external quality assurance activities of the applicant and
2. the external review process.

4.1 External Quality Assurance Activities

Registration is open to organisations that carry out external quality assurance activities in higher education, regardless of whether they are based in Europe or outside, regardless of whether they are national or international in nature and whether the review carried out is part of a statutory mandate or initiated by a higher education institutions on a voluntary basis.

Quality assurance agencies applying for an EQAR registration have to carry out external quality assurance activities within the scope of the ESG. The ESG cover different type of reviews, i.e. audit, evaluation or accreditation of higher education institutions or programmes that relate to learning and teaching in higher education, including the learning environment and relevant links to research and innovation (see below General Types of EQA Activities). All such external quality assurance activities are considered pertinent to registration, irrespective of the mode of study or place of delivery.

If the organisation (or a clearly identified sub-unit of the organisation) does not directly perform external quality assurance activities, it can not be considered for inclusion on the Register.

In a number of cases there have been different understandings between the agency, the external review panel and the EQAR Register Committee as to which of the agency's activities are within the scope of the ESG and, consequently, should be addressed in the external review of the agency (e.g. reviews carried out occasionally abroad were not addressed by the panel, or there was no differentiation provided between the consultancy and external quality assurance activities carried out by the applicant).

It is therefore important to determine each of the applicant's activities that are within the scope of the ESG and thus pertinent to EQAR registration. All these activities should be covered in the external review of the applicant. This is done in the first step of the application process (see chapter 7. Application Process).

Cross-border external quality assurance activities

Several quality assurance agencies also operate in other countries than their base country. Users of the Register will assume that all registered quality assurance agencies always work in substantial compliance with the ESG.

Therefore, applicants and registered agencies are expected to comply substantially with the ESG (in their evaluation, audit and accreditation activities) wherever they operate, within or outside the European Higher Education Area (EHEA). They are expected to employ a transparent approach to cross-border external QA, based on clearly defined and published procedures and criteria.

Voluntary external quality assurance activities

External quality assurance activities may be commissioned by higher education institutions on a voluntary basis in order to gain an additional external feedback or a specific quality label. Such 'voluntary' reviews are most often carried out in addition to the periodic, obligatory external review.

While these reviews might have little or no formal consequences for the institution or study programme, users of the Register will rely on the fact that any evaluation, accreditation or audit by a registered agency is carried out in compliance with the ESG. Such voluntary reviews fall within the scope of ESG and must thus be covered in the external review of the agency.

General Types of EQA Activities

Quality assurance agencies have designed and developed a wide range of external quality assurance procedures to fit the purposes and requirements of their contexts.

While there is no universal terminology and taxonomy of EQA procedures, most EQA procedures fit into one of the following categories:

Accreditation - Accreditation procedures usually leads to a formal decision. The judgement is based on a set of pre-defined standards and criteria.

Audit - Audit schemes address in a comprehensive manner the processes the HEI uses to maintain and develop the quality of its education and other activities.

Evaluation - Evaluation schemes are activities of measurement, analysis and development of quality for institutions. The evaluation

processes does not directly lead to an approval of an institution, degree type or programme, or any other type of formal decision.

When completing your application you will be asked to assign each of your agency's EQA activities to one of these broad categories. In case of doubt, please choose the category you think fits best, even if not perfectly.

A more comprehensive list of examples of possible EQA activities is presented in Table 3. Please note that the list is not exhaustive and that – due to the lack of a universal terminology – two procedures called the same in two different places might yet vary in their design and focus.

Examples of EQA activities	Main characteristics
Initial accreditation (or authorisation) of higher education institutions	The EQA activity is carried out to determine whether the institutions meets the requirements needed to perform higher education activities.
Initial accreditation (or authorisation) of study programmes	The EQA activity is carried out to determine the potential quality of a new study programme which could lead to a decision of authorisation.
Programme accreditation	The objective of the EQA activity is to evaluate and assess a study programme or groups of study programmes. This usually concerns programmes that already award (nationally) recognised degrees.
Institutional accreditation/ System Accreditation	The focus of this type of EQA activity is on the mission, management, facilities and internal QA systems of an institution of higher education.
Institutional audit	The aim of an institutional audit is to examine the strengths and weaknesses of quality mechanisms established by an institution of higher education. The process will lead to further quality improvement.
Management audit	This EQA activity will address mainly the general management, general policy and policy making of the higher education institution.
Institutional evaluation	Examining the quality of all activities within an institution that may include i.e. the management of the organisation, financial matters, facilities, teaching and research etc.

Examples of EQA activities	Main characteristics
Programme evaluation	Examination of teaching and learning activities within a study programme that may lead to a formal degree.
Thematic evaluation	Examination of a specific theme within higher education that may be linked to elements of learning and teaching, the learning environment or other relevant links to research and innovation.

Table 3: Non-exhaustive list with examples of EQA activities

4.2 Planned External Review

EQAR attaches high importance to the organisation of the external review, as it has to rely on the evidence and analysis set out in the review report and the judgements made by the review panel.

As part of the verification of eligibility the applicant is expected to submit a draft of the terms of reference for the planned external review. These are agreed between the applicant and the review coordinator in advance. This ensures that all parties involved are clear about their roles and responsibilities and that the review process is properly defined.

The terms of reference should at least specify the purpose of the external review, the composition of the review panel and outline key steps in the review process.

The requirements for external reviews are described in the following chapter.

The EQAR Secretariat is at the applicants' disposal to answer questions with regard to EQAR's rules and requirements that may arise when planning an external review.

5. External Review

The next step in the application process is the external review of the applicant. It is of utmost importance that the external review is sound and reliable, and provides the Register Committee with sufficient information. Since the external reviews of applicant agencies are organised by third parties and are not under EQAR's direct supervision, the external review must adhere to some important requirements, which are explained in the following.

5.1 Objective

An assessment of the level of compliance with the ESG should be clearly defined as one purpose of the external review and the fact that the review report will be used for an application for (renewal of) inclusion on EQAR. This will help to avoid misunderstandings during the review process.

In some cases a review of an agency might have other, additional purposes, such as an independent overall assessment of the applicant's performance. Such a review with additional purposes might as well be used for an application to EQAR, as long as compliance with the ESG is addressed.

5.2 Principle of Independence

The external review needs to be conducted in an objective and unbiased manner. The review coordinator and the review panel need to be completely independent from the applicant. It has to be ensured that neither the review coordinator nor any review panel member has a conflict of interest.

5.3 Review Coordinator

The review coordinator is the organisation that conducts the practical organisation of the review process.

The applicant itself has to identify a suitable review coordinator that has the necessary professional capacity and is independent from the applicant. Two common examples are the reviews coordinated by the European Association for Quality Assurance in Higher Education (ENQA) or the German Accreditation Council (GAC).

The review coordinator plays an important role in developing the Terms of Reference, recruiting an independent review panel and being responsible for the overall management of the review process. The

coordinator also has to provide appropriate guidance to the review panel throughout the whole process.

Therefore it is crucial that the review coordinator is completely independent from the applicant, to guarantee an unbiased and objective process. Furthermore, the coordinator must have the necessary professional capacity to organise an external review, so that it can adequately fulfil all its responsibilities.

5.4 Self-evaluation

Following the confirmation of eligibility (see 4.1 External Quality Assurance Activities) the agency is expected to ensure that all confirmed eligible activities will be addressed in the self-evaluation and external evaluation process.

The self-evaluation report shall reflect on the applicant's compliance with each of the ESG in parts 2 and 3, while including under ESG 2.1 a mapping of their criteria and procedures onto the standards of Part 1;

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.

5.5 Review Panel

The review panel must consist of at least four persons. Those need to be fully independent from the applicant and should possess the knowledge, expertise and experience required to review the applicant's compliance with the ESG. Two of the members of the panel will usually fulfil the role of the Chair and Secretary during the review process.

The review panel should comprise of members who represent a broad range of expertise and cover the perspectives of the different stakeholders in higher education. There must always be at least one student and one academic staff member of a higher education institution on the review panel. The academic staff members is expected to be involved in teaching and research. An academic working in administration does not fulfil the requirement.

To ensure an international dimension at least one review panel member must come from a country other than the applicant's.

In order to safeguard the independence of review, the panel members must have no conflict of interest in exercising their role (e.g. member of the staff being involved in projects with an agency and later in the review of that agency). The coordinator is responsible for ensuring that in recruiting the panel and throughout the review process. The

CVs of the panel members have to be submitted to EQAR with the Declaration of Honour signed by the review coordinator.

5.6 Site Visit

During the site visit, the external review panel is expected to interview all relevant stakeholders of the applicant agency, including students and staff, as well as external stakeholders, such as employers and external partners of an institution.

5.7 Review Report

The external review report needs to provide sufficient evidence of the applicant's substantial compliance with the ESG. The Register Committee's decisions are primarily based on the external review report, the quality and reliability of which are therefore of crucial importance.

The report should clearly address each relevant ESG (standards 2.1 to 2.7 and 3.1 to 3.7) and reflect on the agency's compliance with it. It benefits readability and comprehensibility if the report contains for each standard a summary of the evidence reviewed, a weighing analysis of the agencies' activities in the light of the standard and an argued conclusion demonstrating the agency's compliance with the standard.

In order to ensure that these reviews are a sufficient and robust basis for the Register Committee's decisions, it is vital that coordinators are aware of the policy on the **Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies** (see Annex 2), and ensure that the panel undertaking a review takes them into account in preparing the review.

In addition to the formal requirements the Register Committee has prepared a check-list (see Annex 2, Use and Interpretation of the ESG) to assist all those involved in the conduct of external reviews of quality assurance agencies.

In reviews that will be used for renewal of an agency's registration, it is expected that the review report explicitly addresses the issues that were flagged when the agency was admitted to the Register, where applicable.

The review report should be agreed amongst all review panel members, although it might reflect majority judgements or opinions on issues where there was no unanimity.

The review panel should provide the applicant with the draft report for comment on factual errors before it is finally agreed upon. Should the

applicant still have comments on the final report, those may be submitted to EQAR with the application.

The review report should be submitted to EQAR including all annexes and dissenting opinions, where such exist.

6. Criteria for inclusion

Quality assurance agencies that wish to be included on the Register need to demonstrate that they operate in substantial compliance with the ESG. This Guide assumes that the reader is familiar with the latest version of the ESG. For further information and the text of the ESG please consult <http://www.eqar.eu/register/criteria-for-inclusion.html>.

Parts 2 and 3 of the ESG are those with direct relevance to quality assurance agencies and thus serve as criteria for inclusion on the Register. While the standards in Part 1 may be addressed differently depending on the type of external quality assurance carried out, the agency is expected to systematically include all standards of Part 1 of the ESG in their criteria and procedures used to evaluate, accredit or audit institutions or programmes.

6.1 Substantial Compliance

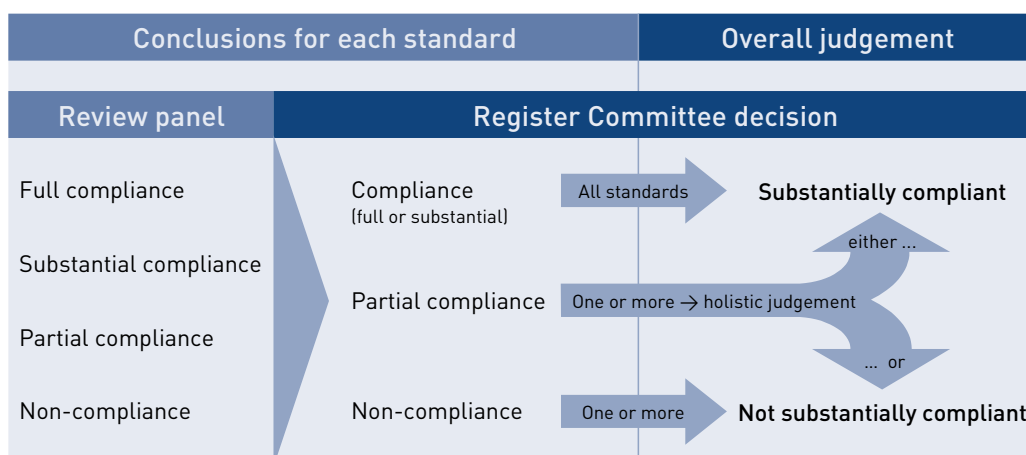
The ESG focus on principles rather than on prescribing procedural details. While the ESG are not used as pre-set check-list, EQAR expects applicants to be in substantial compliance with the ESG: that is, if a standard is not fulfilled by the letter of the law, the applicant might still be considered substantially compliant if the stipulated principle is appropriately respected in practice.

In reviewing the application the Register Committee does an assessment of each standard and concludes on *compliance* (which may be *full* or *substantial*), *partial compliance* or *no compliance*.

If the agency is in *compliance* with all standards it is in substantial compliance with the ESG as a whole.

While there are no numerical rules for arriving at a holistic judgement for substantial compliance (e.i. there is no set number of standards with partial compliance that determine the final conclusion), a conclusion of *non-compliance* for any one standard prevents an overall judgement of *substantial compliance*.

The Register Committee's final judgement on the agency's compliance with the ESG as a whole can either be substantially compliant or not substantially compliant. There is no distinction between *substantial compliance* 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 (see figure below).



If the Register Committee finds that there are grounds for rejecting the application, the agency is invited to make additional representation, after which the Register Committee takes a final decision.

6.2 Use and Interpretation of the ESG

EQAR's policy on the Use and Interpretations of the ESG (see Annex 2) provides ex ante the official interpretation of the ESG by the EQAR Register Committee. It aims to increase transparency, understanding and consistency within the decision-making process of the Register Committee. The document replaces the previous "Practices and Interpretations" published in 2013.

The document summarises the principal interpretations by the Register Committee of the different standards and specifies what the Committee expects the agency's self-evaluation and external reports to show in order to demonstrate compliance with the standards.

Agencies are recommended to consult carefully the Policy on the Use and Interpretation of the ESG when planning their application for inclusion on EQAR and when analysing their substantial compliance with the ESG.

7. Application Process

7.1 Overview

As first step in the application process, EQAR verifies that the applicant agency is eligible for registration and determines which of the applicant's activities fall within the scope of the ESG (see chapter 4. Eligibility).

EQAR further verifies whether the planned external review adheres to all requirements.

The application can be made at any time, without fixed deadlines.

EQAR will respond within three weeks on whether the applicant meets the eligibility requirements and will confirm which activities are considered within the scope of the ESG and, thus, relevant to the application.

The agency is then expected to forward this information to the review coordinator and to make sure that (at least) all those activities will be addressed in the external review.

Please note that the confirmation of eligibility is not binding in case it is later revealed that the applicant's activities or the actual external review process differ substantially from what was initially declared.



The second and main step of the application process commences after completion of the external review process. The applicant is expected to submit the external review report and a Declaration of Honour signed by the review coordinator.

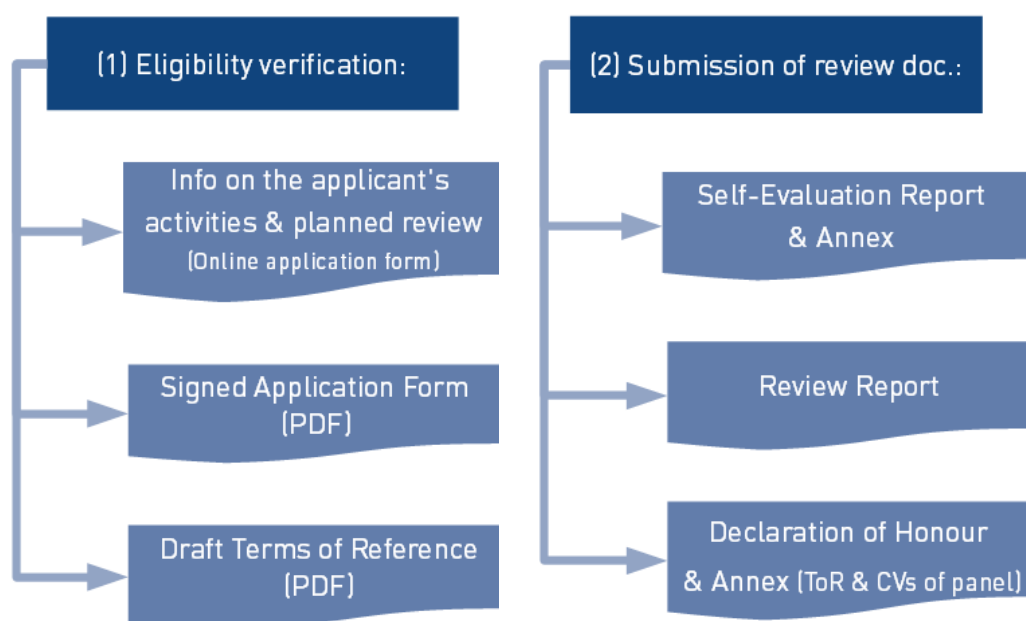
7.2 Report Submission Deadlines

While the first step of the application process (eligibility verification) can be initiated at any moment, the external review report must be submitted by specific deadlines:

For initial applications for inclusion on the Register there are two annual submission deadlines: 15 March and 15 September. Reports submitted by these deadlines will be considered by the Register Committee in May/June or November/December, respectively.

Agencies applying for renewal of registration have to submit the external review report before the expiry of registration (see Figure 2: Typical timing for a review).

7.3 Application Documents and Forms



Agencies have to submit the following documents for the two steps of the application process (see also Figure 3: Eligibility verification and Figure 4: Submission of review doc.):

(1) Eligibility verification:

1. Online application form ([link to form](#))

The online form includes a description of the agency's activities, indicating which activities the applicant itself considers to be within the scope of the ESG, and information about the planned external review process and coordinator of the review.

The full form is available online ([PDF](#)) for your preparation.

The online application will provide EQAR with all necessary information to be published on the Register in case the application is successful.

The following documents need to be submitted together with the online application form (you will be asked to upload those documents when completing the form):

2. Signed application form ([PDF](#), [DOC](#), [ODT](#))

The application for (or renewal of) inclusion on EQAR should be signed by a person authorised to engage legally the applicant vis-à-vis third parties.

The application form is available online.

3. Draft terms of reference of the external review (PDF document)

The draft terms of reference to be agreed between the review coordinator and the applicant should specify all activities that will be analysed during the external review process.

(2) Submission of review documents:

4. Self-evaluation report (PDF document)

There is no need to submit all appendices to the report, but EQAR might request you to submit individual appendices if necessary.

5. External review report (PDF document)

The external review report represents the primary basis of the Register Committee's decision making.

Please read carefully the information in chapter 5. External Review

6. Declaration of honour ([PDF](#), [DOC](#), [ODT](#)) & Annexes

A declaration from the review coordinator stating that there is no known conflict of interest between panel members,

coordinator and applicant and that the review was carried out independently needs to be **duly completed and signed** by the review coordinator, including as attachments the **final terms of reference** and the full **curriculum vitae (CVs)** of all review panel members. The Declaration of Honour form is available on the EQAR website <http://eqar.eu/register/application-forms.html>).

Additionally the following documents should be submitted where applicable:

- **Applicant's statement** on the external review report;
- For ENQA full members, a **confirmation letter (or equivalent proof of ENQA membership)**; including prior correspondence between the applicant and ENQA.

EQAR will publish the Register Committee's decision on the application (see chapter 2. Publication Policy) including the application documents and all further communication with the applicant.

The applicant can decide to withdraw their application without consequences (no publication, no charges) only before the submission of review documents.

The online application and forms are available from the EQAR website at: <http://www.eqar.eu/register/application-forms.html>.

7.4 Supplementary Documentation

In addition to the documents mentioned above, applicants might wish to include supplementary documents in their application for inclusion on the Register.

Applicants should, however, bear in mind that, as a rule, the external review report serves as the main basis for EQAR's decision making. Therefore, supplementary documentation should remain as concise as possible. The documentation is expected to provide additional information to the analysis in the external review report, and not substitute it.

7.5 Language

All documents have to be submitted in English. If original documents are in another language the applicant is expected to arrange for their translation.

7.6 Format

In order to ensure proper readability across all platforms and to prevent unintentional modifications, all attached documents should be

sent as PDF files (Portable Document Format) as specified for each case above. Please do not use other formats.

7.7 Fees

There are two types of fees, a one-time application fee and an annual listing fee.

After submission of the external review report you will receive an invoice for the application fee. The application fee is not refundable.

If the application is approved, the annual listing fee must be paid for each year of inclusion on the register.

Agencies will receive an invoice for each calendar year (for the first time a few weeks after their inclusion, then in the beginning of each year) requesting payment of the listing fee for full months included on the register in the respective year.

As an example, an agency included from 15.4.2014 until 31.5.2016 would receive the following invoices (excl. VAT):

2014: 8 full months (May – December)	688,00 €
2015: full year	1 032,00 €
2016: 5 full months (January – May)	430,00 €

Applicants that have their registered office in a state party to the European Cultural Convention will be charged the reduced “EHEA” fee. All other applicants will be charged the “Others” fee.

The following fees (in EUR) will be charged:

	EHEA		Others	
	ex. VAT	incl. VAT	ex. VAT	incl. VAT
application fee	1 032,00	1 248,72	2 064,00	2 497,44
listing fee (per month)	86,00	104,06	172,00	208,12

7.8 Decision-Making Process

The decision-making of the Register Committee on applications for inclusion on the Register is prepared by Committee members serving as rapporteurs. Two main rapporteurs analyse the external review report as well as other documents submitted by the agency. The rapporteurs make a judgement on each standard based on the findings, analysis and conclusion of the panel. Rapporteurs then make

a recommendation to the Committee and prepare a draft decision to approve or reject the application.

Before consideration by the Committee, a third rapporteur reviews the analysis and recommendation made, and comments on them from an additional perspective.

7.9 Requests for Information or Clarification

In some cases, rapporteurs might request additional information or clarification from the applicant or the external review panel before the Register Committee considers the application at its meeting.

This happens if a request can be plausibly answered in a 2 – 3 week period. If such a request is made, it usually reaches the applicant about 3 – 4 weeks after the application deadline.

If a request is referred to the review panel or coordinator, the applicant will always receive a copy for information.

7.10 Decision of the Register Committee

Following **initial consideration** of its application by the Register Committee, the applicant will receive an official response by EQAR.

There are two possible responses:

1. The Register Committee **approves the application** and the applicant is admitted to the Register for five years.
2. The Register Committee **considers rejecting the application**. The applicant receives an account of the grounds for which rejection is considered and is invited to make additional representation before the Register Committee takes a final decision.

In the second case, the application is deferred to the next meeting of the Register Committee. Applicants will have 3 – 4 months to make additional representation (see Figure 5: Application Process and Decision by the Register Committee).

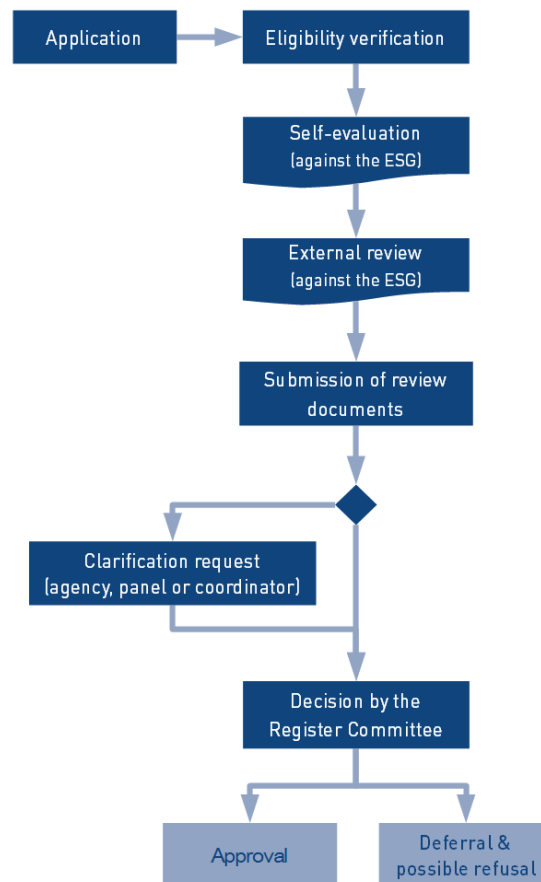
The applicant can also withdraw the application instead of making additional representation. Should EQAR not receive any notice by the deadline this will be deemed a withdrawal of the application.

If an application is withdrawn, it will be mentioned in the list of all eligible applicants, published on the EQAR website. There is, however, no decision published.

If an application is rejected, the applicant receives a reasoned rejection decision in writing. The rejection decision will only be published once it is final, i.e. after the deadline for appeal has passed and a potential appeal has been dealt with (see chapter 13. Appeals Procedure for details).

Rejected applicants may reapply within 18 months from the date of the rejection decision by undergoing a focused external review addressing those issues that led to rejection. If the re-application is successful the agency shall be included for five years from the date of the first, full external review report. If no focused review is submitted within the 18-month period, a new full external review is required.

The Register Committee may also invite the rejected applicant to reapply without an additional external review, if it can be verified on the basis of documentation submitted that the issues that led to rejection have been satisfactorily addressed.



8. Periodic Renewal

If an application is approved, the agency is admitted to the Register for a period of five years, counted from the date of the external review report.

The ESG themselves specify that agencies have to undergo an “external review at least once every five years” (see ESG 3.7).

8.1 Application for Renewal

The renewal of registration every **five years** follows the same process as for initial applications. Each application for renewal must be based on a new external review.

In order to ensure an uninterrupted registration on EQAR, a registered agency has to plan its **application for renewal so that the external review will be completed and submitted before expiration** of its registration (see Figure 2: Typical timing for a review), or within three months after expiration at the very latest.

The agency should normally apply for renewal at least 10-12 months before expiry to ensure that the review is completed in time. It is the agency’s responsibility to plan timely enough so as to be able to submit the review report and all other required documents within the deadline.

Only if these deadlines are respected, the registration will remain fully active and valid until a final decision is made on the application for renewal.

Registered agencies are advised to plan their periodic reviews with sufficient spare time. The three-month period is intended to cater for timing difficulties or unexpected delays, and there is no possibility to grant any further exceptions.

9. Reporting Substantive Changes

All registered agencies are expected to notify EQAR about changes to their legal form and status, amendments to their statutes and substantial changes in their process or methodology (see §6.1 of the EQAR Procedures for Applications).

9.1 Objective

It is the registered agency's responsibility to inform EQAR of substantive changes that have occurred or are going to occur, so that EQAR will become aware of situations where an agency's current practice differs substantially from the situation when it was reviewed against the ESG and admitted to the Register.

The requirement to report substantive changes is not intended to discourage change and innovation among registered agencies, and EQAR aims to minimise the burden on registered agencies.

EQAR therefore suggests that registered agencies keep their information on substantive changes as brief as possible, while giving a comprehensive picture of the nature and impact of the changes.

EQAR will normally merely take note of substantive change reports and update information on the Register, if necessary.

Only in case of major concerns whether a registered agency continues to comply substantially with the European Standards and Guidelines (ESG) will the Register Committee consider further action. This is described further in chapter 11. Extraordinary Revision of Registration.

9.2 Whether or Not to Report Changes

Substantive changes include any type of change that may impact on the registered agency's ability to comply substantially with the European Standards and Guidelines for Quality Assurance (ESG). This includes changes to the agency's legal form and status, amendments to its statutes and substantial changes in its processes or methodologies (see list of guiding questions below).

As a rule, if the answer is a clear "yes" to either of the main heading questions, a substantive change report should be made. If you are unsure whether the answer is "yes", it should be "yes" if there is anything to report under one of the sub-headings or in an area of similar relevance.

If you are unsure whether a substantive change report is warranted or not, please seek advice from the EQAR Secretariat.

9.3 When to Report Changes

Changes should be reported as soon as the changes are sufficiently clearly defined to allow providing comprehensive information on their nature and impact. This may be before or after the changes actually take effect.

Changes should be reported as soon as the changes are sufficiently clearly defined to allow providing comprehensive information on their nature and impact. This maybe before or after the changes actually take effect.

EQAR may also become aware of substantive changes based on information from third parties or information that is in the public domain. In this case, EQAR will contact the agency and ask it to report these changes.

9.4 Procedure

Registered agencies are requested to submit substantive change reports (including possible appendices) through the web form available at:

www.eqar.eu/register/reporting-and-renewal/substantive-change-report.html

Agencies might include appendices related to the changes. These should be limited to what is absolutely necessary to provide comprehensive information. Appendices can be attached in PDF format when filling the form (please avoid Word documents or any other formats) or provided as a hyperlink.

Please do not send any documents by regular mail, fax or otherwise.

Documents in another language than English will not be reviewed.

The timeframe in which substantive change reports are considered by the Register Committee depends on the complexity of the substantive changes.

Should EQAR require clarification to fully understand the nature and impact of the substantive changes it may contact the registered agency.

There are no fees or other costs related to substantive change reports.

9.5 How to Describe Changes

Registered agencies are recommended to use the guiding questions below in reporting substantive changes and to submit their report via the on-line form.

The main headings are formulated as yes/no questions. Under each main heading, there are examples of what type of changes might occur and what type of information is typically relevant for EQAR. These lists are, however, not exhaustive.

The nature of the changes should be described concisely under the corresponding sub-heading or separately, if they do not fall within these examples.

In all aspects the key question is how the current situation differs from the situation when the external review of the agency was carried out or when substantive changes were last reported regarding that aspect, respectively. The key consideration relates to the ways in which the changes impact on the agency's substantial compliance with the ESG.

9.6 Guiding Questions

Please use the web form to submit your report:

www.eqar.eu/register/reporting-and-renewal/substantive-change-report.html

A. Has the organisational identity of the registered agency changed?

If yes, please specify the changes. These might include:

- i. changes to the legal form or status;
- ii. merger with/into another body/entity, another body/entity becoming part of the agency (please specify the legal successor in title of the registered agency, and which of the involved bodies/entities carried out external QA of HE programmes/HEIs before);
- iii. changes in parent entity, if applicable;
- iv. liquidation, bankruptcy or similar proceedings.

B. Has the organisational structure changed?

If yes, please specify the changes. These might include:

- i. role or composition of governing or managing bodies (only changes of the general composition/membership categories – there is no need to report regular changes of individuals, e.g. when their terms end);
- ii. establishment or discontinuing of governing or managing bodies;

- iii. major/dramatic changes in the staffing or financial situation;
- iv. outsourcing of activities with significant relevance for the agency's external quality assurance activities.

C. Have the external quality assurance activities implemented by your agency changed?

This includes all external quality assurance activities within the scope of the ESG: reviews, audits, evaluations or accreditations of higher education institutions or programmes that relate to learning and teaching in higher education, including the learning environment and relevant links to research and innovation; regardless of whether these activities are carried out within and outside the EHEA, and whether they are obligatory or voluntary.

If yes, please specify the changes and address the following:

- i. Are there new types of activities? If so, were they developed from scratch or on the basis of specific existing activities?
- ii. Are there substantial changes in existing activities?
- iii. Have some or all existing activities been discontinued?

If the answer to C.i or C.ii is yes, please describe the following key aspects of their methodology, if possible in relation to existing activities that were subject to the last external review:

- (a) purposes and development of the activity, involvement of stakeholders (ESG 2.2)
- (b) criteria used, how they were developed, measures implemented to ensure consistency, how ESG 1.1 – 1.10 are reflected in the criteria (ESG 2.1 & 2.5)
- (c) review team composition, selection, appointment and training of reviewers (ESG 2.4)
- (d) site visits (ESG 2.3)
- (e) publication of reports (ESG 2.6)
- (f) follow-up (ESG 2.3)
- (g) appeals system (ESG 2.7)
- (h) embedding in thematic analyses and internal quality assurance of the agency (ESG 3.4 & 3.6)

10. Third-Party Complaints

Individuals or organisations that have substantiated concerns about a registered agency's compliance with the ESG or the external review process may bring those to EQAR's attention.

In line with EQAR's Complaints Policy, a complaint will only be considered if it is credible, substantiated and supported by appropriate evidence, references, examples etc. The complaints may only relate to a registered agency's substantial compliance with the ESG, or the integrity of the external review process on the basis of which EQAR admitted an agency to the Register.

EQAR does not have a mandate or authority to review individual processes or decisions of registered agencies concerning a particular higher education institution or programme. Further EQAR can not be expected to interpret national legislation, European Union law, or any other applicable rules. These concerns should be addressed with the competent courts or authorities.

The Register Committee will analyse the complaint (if it is in line with the Complaints Policy) and check whether there is *prima facie* evidence for a systemic problem in terms of ESG compliance. The agency will be informed of the complaint and may be asked to provide clarifications or informations related to the complaint.

If the complaint is not substantiated the Register Committee will take no action on the complaint.

If the complaint is substantiated it may result in:

- A formal warning statement published on the entry of the agency on the Register. The Register Committee may decide on a formal warning if the reported issue relates to an isolated case and does not affect the agency's substantial compliance with the ESG in general. The warning does not influence the registration status of the agency.
- An extraordinary revision of registration (see following chapter).

In the last scenarios the agency is invited to make representation before a final decision is made. The final decision is then communicated to the agency, the complainant and published.

11. Extraordinary Revision of Registration

As a result of a Substantive Change Report (see chapter), a third-party complaint (see chapter) or based on publicly available information, EQAR may initiate an Extraordinary Revision of an agency's registration, if there are major concerns whether the agency continues to substantially comply with the ESG.

The Register Committee may take one of the following decisions to reduce or terminate the agency's registration before the 5-year period has elapsed:

1. If there are substantial concerns about the agency's compliance with the ESG, but it is not possible to judge clearly whether or not the agency still fulfils the criteria, the remaining period of inclusion on the Register may be reduced, thus triggering a need for an earlier external review. If the concerns reveal to be unsubstantiated or minor, the Register Committee may conclude the extraordinary review is not necessary.
2. If the criteria for inclusion are no longer fulfilled (for example, due to a substantial change of the agency's methodology that is in obvious contradiction with the ESG's principles) the agency may be removed from the Register.
3. If the criteria for inclusion were not fulfilled when the initial decision (to include the agency) was made, the inclusion may be declared "void ab initio". That is, the agency is removed from the Register immediately and is deemed to have never been rightfully included.

The registered agency is invited to make representation before a final decision is made. The final decision is then communicated to the agency and published.

12. Appeals Procedure

Applicants may appeal decisions of the Register Committee on procedural grounds or in case of perversity of judgement. The Appeals Committee has the responsibility to consider appeals.

12.1 Grounds of Appeal

The possible grounds of appeal are limited to procedural errors and perversity of judgement. Mere disagreement with the Register Committee's judgement does not constitute a valid ground of appeal.

An appeal on procedural grounds may be lodged if EQAR's Statutes, Procedures or other regulations, any applicable legislation or generally accepted principles of fair and equal process were violated.

Perversity of judgement may be claimed if a decision is clearly unreasonable or disproportionate in the light of the available evidence, for example in that evidence that was at EQAR's disposal had not been duly considered.

12.2 Possible Consequences

If the Appeals Committee accepts the appeal, the Register Committee's decision is voided and the case referred back to the Committee. The Register Committee will take due account of the grounds of appeal and the reasoning of the Appeals Committee in taking a new decision.

An appeal is rejected if it is either unsubstantiated or not based on valid grounds.

12.3 Appeals Process

Appeals need to be submitted to EQAR in writing within 90 days of being notified of the rejection of an application. The appeal has to clearly specify on which grounds it is lodged. The Appeals Committee will decide on the appeal within 120 days.

Before taking a decision the Appeals Committee might request clarification or comments on the grounds of appeal from the Register Committee, the review coordinator, the review panel or the applicant.

Procedures for Applications

Register Committee

Definition of terms:

“**Register**” hereinafter refers to the register of quality assurance agencies operating in Europe published by EQAR;

“**applicant**” hereinafter refers to a quality assurance agency that seeks inclusion on the Register;

“**registered agency**” hereinafter refers to a quality assurance agency that has been admitted to the register by the Register Committee;

“**external review**” hereinafter refers to a review of a quality assurance agency’s work by a “**review panel**”, coordinated by a “**review coordinator**”;

“**external review report**” hereinafter refers to the written report that has been agreed by the review panel following completion of the external review;

“**self-evaluation report**” hereinafter refers to the report compiled by the applicant for consideration by the external review panel;

“**ESG**” hereinafter refers to the Standards and Guidelines for Quality Assurance in the European Higher Education Area, as adopted by the European ministers responsible for higher education in Yerevan on 15 May 2015, or any succeeding document;

“**Europe**” hereinafter refers to all countries part of the European Higher Education Area (EHEA).

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In accordance with article 16 b. of the EQAR Statutes the Register Committee, in consultation with the General Assembly, adopted the following Procedures for Applications:

1. Eligibility requirements

- 1.1 The fulfilment of the eligibility requirements is a prerequisite for applications to be considered against the criteria for inclusion.
- 1.2 If the eligibility requirements are not fulfilled the application shall be refused without any possibility of additional representation; no fees shall be charged.

Eligible activities and organisations

- 1.3 Registration pertains to all external quality assurance activities within the scope of the ESG, i.e. reviews, audits, evaluations or accreditations of higher education institutions or programmes that relate to learning and teaching in higher education, including the learning environment and

relevant links to research and innovation. This is regardless of whether these activities are carried out within or outside the EHEA, and whether they are obligatory or voluntary.

- 1.4 Organisations (or a clearly identified sub-unit thereof) that directly conduct external quality assurance according to §1.3 are eligible for registration.
- 1.5 Registration is open to organisations regardless of whether they are based in Europe or outside, and regardless whether they are national or international in nature.

External review

- 1.6 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.
- 1.7 The review shall be coordinated by an organisation that has the necessary professional capacity and is independent of the applicant. The review shall be conducted in an unbiased, objective and independent manner.
- 1.8 The review coordinator and the applicant should agree on the terms of reference. The terms of reference shall specify that all activities according to §1.3 will be analysed by the external review.
- 1.9 The review panel shall consist of at least four persons. The panel members shall possess the knowledge, experience and expertise required to understand, analyse and judge the applicant's activities against the ESG. The review coordinator shall provide the review panel with appropriate training and guidance for its role.
- 1.10 The review panel members shall represent a range of expertise, covering the different perspectives of the key stakeholders¹. The panel shall include at least (at the time it is composed):
 - a. one academic staff member of a higher education institution;
 - b. one student of a higher education institution; and
 - c. one individual from a country other than that of the applicant.
- 1.11 The coordinator shall select and appoint the panel members according to a fair and transparent selection process, to be specified in the terms of reference.
- 1.12 The panel members shall be independent from the applicant and exercise their role objectively and without conflict of interest. It is the coordinator's responsibility to ensure the panel's independence; §9.1 applies accordingly.
- 1.13 The self-evaluation report and the external review report shall address all activities as described in §1.3.

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¹ Stakeholders are understood to cover all actors within an institution, including students and staff, as well as external stakeholders, such as employers and external partners of an institution.

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- 1.14 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.
- 1.15 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.
- 1.16 The external review report shall provide sufficient evidence of the applicant's compliance with each of the ESG in parts 2 and 3. It shall provide evidence, an analysis and a conclusion for each of the standards.
- 1.17 The external review panel shall prepare the external review report based on the self-evaluation report and a site visit to the applicant. During the site visit, the external review panel shall interview the relevant stakeholders of the applicant.
- 1.18 The external review report shall be agreed upon by all external review panel members. It shall be submitted together with all annexes and dissenting opinions where such exist.

2. Criteria for inclusion

- 2.1 To be included in the Register, applicants need to substantially comply with the ESG in all eligible activities (see §1.3). Compliance shall be demonstrated through an external review of the applicant (in accordance with §1.6 – 1.18).
- 2.2 Parts 2 (2.1 – 2.7) and 3 (3.1 – 3.7) of the ESG shall be directly relevant for inclusion on the Register, whereas ESG 2.1 includes consideration of how Part 1 of the ESG is addressed.
- 2.3 Full membership of ENQA normally constitutes satisfactory evidence for substantial compliance with the ESG.
- 2.4 The Register Committee shall adopt a policy on the Use and Interpretation of the ESG for the European Register of quality assurance agencies.
- 2.5 The Register Committee may adopt further policies to specify its understanding and application of the ESG and these Procedures in specific cases or circumstances.
- 2.6 All policies shall be published. The General Assembly shall be notified of any policies adopted.

3. Application process

- 3.1 The application process includes the following steps:
 - a. Verification of eligibility;
 - b. External review of the applicant;
 - c. Submission of the external review report;
 - d. Consideration and decision by the Register Committee.

- 3.2 Applications shall be submitted to the Secretariat as specified in the Guide for Applicants and the EQAR website.
- 3.3 All documents have to be submitted in English.
- 3.4 The applicant can withdraw the application any time before the deadline according to §3.19, but not thereafter.

Verification of eligibility

- 3.5 Applicants are required to verify before undergoing an external review their organisational eligibility, whether their (planned) external review process adheres to the eligibility requirements and to ensure that the external review covers all activities within the scope §1.3.
- 3.6 In order to verify eligibility, applicants shall submit the following documents:
 - a. Application Form;
 - b. Brief description of all activities of the applicant, indicating which activities the applicant considers to be within the scope of §1.3;
 - c. Information on the coordinator of the external review;
 - d. Draft terms of reference according to §1.8.
- 3.7 Where eligibility can be determined clearly and unambiguously based on the facts, the Secretariat may confirm eligibility or non-eligibility. The applicant may, however, request that its case be considered by the Register Committee.
- 3.8 In all other cases, the Register Committee shall consider eligibility.
- 3.9 When confirming eligibility, EQAR shall confirm which activities are within the scope of §1.3. The applicant shall then complete its self-evaluation and undergo an external review covering at least those activities.
- 3.10 Confirmation of eligibility shall not be binding if it is revealed later that the applicant's activities differ substantially or if the actual review process differs substantially from the draft Terms of Reference.
- 3.11 The Register Committee may accept an application that already includes an external review report, if the review covers all activities in the scope of §1.3 and fulfils all other requirements of the present Procedures.

Submission of the external review report

- 3.12 Following the external review, the applicant shall complete the application by submitting the following documents:
 - a. Agreed terms of reference of the review;
 - b. Declaration of honour by the review coordinator, including full CVs of all review panel members;
 - c. Self-evaluation report that was submitted for the external review;
 - d. External review report;

- e. Optionally, applicant's statement on the external review report;
- f. If applicable, documentation of the applicant's ENQA membership, including documentation on the reasons for approval.

3.13 The applicant shall make the external review report available in the public domain.

Basis for decision making on applications

3.14 The Register Committee shall make its decision based on the external review report, other documents filed with the application and further information acquired in accordance with these Procedures.

3.15 The Register Committee may request clarification from the review coordinator, the applicant or the review panel. An appropriate deadline shall be granted for providing clarification. Failure on the part of the applicant to submit requested information within the stipulated deadline shall be deemed as withdrawal of the application.

3.16 Information provided by the applicant agency is taken into account only as far as appropriate, given that it has not been reviewed by an independent panel.

Decisions and consequences

3.17 If, based on the documentation and information referred to in §3.14, the criteria for inclusion are fulfilled, the Register Committee shall approve the application for inclusion on the Register and the agency shall be included in the Register for five years from the date of the external review report.

3.18 If the criteria for inclusion are not fulfilled, the Register Committee shall reject the application.

3.19 Before a decision to reject an application is made, the applicant shall be notified of the grounds for possible rejection and have the possibility to make additional representation to the Register Committee within an appropriate deadline. Failure on the part of the applicant to make additional representation within the deadline shall be deemed as withdrawal of the application.

3.20 Applicants shall be notified of all decisions in writing, including an account of the reasons.

3.21 Rejected applicants may reapply within 18 months from the date of the rejection decision based on an additional, focused external review addressing those issues that led to rejection. The Register Committee may invite the rejected applicant to reapply without an additional external review, if it can be verified on the basis of documentation submitted by the applicant itself whether the issues that led to rejection have been satisfactorily addressed. If the re-application is successful the agency shall be included for five years from the date of the first, full external review report. The 18-month period commences with the original rejection decision, also in case an appeal is made.

- 3.22 If no focused review is submitted within the 18-month period, a new full external review is required.
- 3.23 The provisions of §3.21 do not apply to applications that were withdrawn or that were rejected on the grounds of non-eligibility.

Fees

- 3.24 An application fee shall be charged pursuant to art. 22 (2) of the Statutes for all eligible and complete applications. It is payable after submission of the external review report.
- 3.25 An annual listing fee shall be charged pursuant to art. 22 (2) of the Statutes to all Registered Agencies.
- 3.26 A registered agency can withdraw from the Register at any time by notifying the EQAR Secretariat in writing, however without any right for refund of any paid fees.

4. Renewal

- 4.1 In order to remain registered, agencies have to apply for renewal of registration every five years, based on a new external review.
- 4.2 The provisions for initial applications for inclusion on the Register (§§3.1-3.25) also apply to renewals accordingly, unless other provisions are made in this section.

Deadlines

- 4.3 A registered agency should apply for renewal of registration sufficiently early so that the external review of the agency is completed before expiry of inclusion.
- 4.4 Provided that a registered agency submits an application for renewal before expiry of inclusion as well as submits the new external review report within three months after expiry of inclusion at the latest, the agency shall remain on the Register until the Register Committee has decided on the application for renewal.
- 4.5 If the review report is not submitted on time, the agency will be removed from the Register until a decision on the application for renewal has been made.

Decisions and consequences

- 4.6 If the criteria for inclusion continue to be fulfilled the application for renewal shall be approved and registration renewed for five years from the date of the external review report.
- 4.7 If the criteria for inclusion are no longer fulfilled, the application shall be rejected and the agency shall be removed from the Register; §3.19 applies accordingly.

5. Publication

- 5.1 EQAR shall publish:

- a. A list of all eligible and complete applications for inclusion on the Register and for renewal of registration;
- b. All decisions by the Register Committee on those applications, including an account of the reasons for approval or rejection, the external review report and all documentation submitted with the application or obtained by EQAR according to §§3.15 and 3.19;
- c. Substantive Change Reports made by registered agencies (§6.1);
- d. Formal warnings according to §7.2;
- e. Decisions concerning a registered agency according to §8.4.

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5.2 For all registered agencies the following information shall be published on the EQAR's website:

- a. name and contact details of the agency;
- b. decisions of the Register Committee and other documents according to §5.1;
- c. country in which the agency has its registered address;
- d. information on the agency's quality assurance activities;
- e. countries where the agency has conducted reviews;
- f. ENQA membership status of the agency;
- g. web links to the agency's reports .

6. Substantive changes

6.1 A registered agency shall notify EQAR of its own accord about changes to its legal form and status, amendments to its statutes and substantial changes in its process or methodology.

6.2 The Register Committee shall consider whether these changes warrant an extraordinary revision of registration.

7. Third-party complaints

7.1 Individuals or organisations that have substantiated concerns about a registered agency's compliance with the criteria for inclusion may bring those to EQAR's attention. The Register Committee shall consider whether a complaint is substantiated.

7.2 If the complaint is substantiated but relates to an isolated case and does not substantially affect the registered agency's fulfilment of the criteria for inclusion, the Register Committee shall issue a formal warning to the registered agency.

7.3 If the complaint is substantiated and leads to major concerns that the registered agency no longer fulfils the criteria for inclusion, the Register Committee shall initiate an extraordinary revision of registration.

7.4 Further details shall be specified in a Complaints Policy.

8. Extraordinary revision of registration

- 8.1 The Register Committee shall review its decision to admit a registered agency if substantial procedural errors were made in reaching the initial decision, if the initial decision was based on false information or evidence, or if there are major concerns that the registered agency no longer fulfils the criteria for inclusion.
- 8.2 Any concerns shall be based on information provided by the registered agency, official third-party complaints or publicly available information.
- 8.3 The registered agency shall be notified if a revision is initiated.
- 8.4 The Register Committee may
- a. declare its decision void ab initio if the criteria for inclusion were evidently not fulfilled when the decision was made; or
 - b. exclude a registered agency if it evidently no longer fulfils the criteria for inclusion, as from the date on which it ceased to fulfil the criteria; or
 - c. reduce the remaining validity period of the registered agency's inclusion, as appropriate, if there are serious concerns about the applicant's fulfilment of the criteria and the Register Committee considers it impossible to make a judgement without a new review.
- 8.5 The registered agency concerned shall be granted the right to make representation to the Register Committee before any decision is taken with an appropriate deadline of not less than 30 days. The registered agency shall be notified of the decision and its grounds.

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9. Conflict of Interest Policy

- 9.1 A member of the Register Committee who has a conflict of interest with regard to a particular application may not take part in processing or making decisions on it. A member is assumed to have a conflict of interest if, for example:
- a. s/he receives financial compensation from the applicant as an employee, consultant or subcontractor;
 - b. s/he holds a position, whether paid or unpaid, with the applicant, for example as a member of a commission or board;
 - c. s/he was involved in the external review of the applicant;
 - d. s/he holds a position in an entity² currently being reviewed by the applicant;
 - e. any of the above applies to a family member;
 - f. any of the above applied until recently;

² The term "entity" may refer to any functional or organisational unit that is subject to quality review, such as a higher education institution, a department or a study programme; it does not necessarily refer to a legal entity or require any particular degree of organisation.

- 9.2 A member is expected to declare a conflict of interest of his/her own accord, or raise any potential conflict of interest related to another member.
- 9.3 In determining whether the members of the review panel are independent, §9.1 applies accordingly.
- 9.4 Applicants shall notify the President of the Executive Board if they consider that a member of the Register Committee has a conflict of interest with regard to their application.
- 9.5 Any disputes shall be settled by the President of the Executive Board in consultation with the Chair of the Register Committee.

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Use and Interpretation of the ESG

for the European Register of Quality Assurance Agencies

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1. 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).

The Register Committee² is EQAR's independent decision-making body that decides on inclusion of quality assurance agencies on the Register.

The ESG provide the criteria at European level against which the quality assurance agencies (QAAs) and their activities are assessed. This ensures that QAAs adhere to the same set of principles and the processes and procedures are modelled to fit the purposes and requirements of their context.

2. Aims and Target Groups

The present policy on the Use and interpretation of the ESG aims to:

- increase the transparency of the Register Committee's interpretation of the ESG;
- ensure consistency in the Register Committee's decisions;
- facilitate the understanding of the Register Committee's decisions³;
- inform quality assurance agencies, external review coordinators and external review panels *ex ante* of the Register Committee's interpretation of the ESG.

In the interest of efficient use of resources and avoiding duplication for agencies, EQAR has adopted a system that allows agencies to use one single external review process and report to support their registration on EQAR as well as for other purposes, such as membership in ENQA, fulfilling national requirements or demonstrating adherence to other standards.

Since these reviews are not organised by EQAR itself, EQAR established a set of formal requirements for external reviews and published the present policy on the Use and Interpretation of the ESG. In order to ensure that external reviews of quality assurance agencies are a sufficient and robust basis for the Register Committee's decisions it is vital that coordinators are aware of this document and ensure that the panels undertaking a review take it into account.

While key parts of the introduction to the ESG as well as the standards of Parts 2 and 3 are quoted in this document, it should always be read in conjunction with the [full text of the ESG](#).

3. Scope and Applicability of the ESG

The focus of the ESG is on quality assurance related to learning and teaching in higher education, including the learning environment and relevant links to research and innovation. [...]

The ESG apply to all higher education offered in the EHEA regardless of the mode of study or place of delivery. Thus, the ESG are also applicable to all higher education including transnational and cross-border provision. [...]

At the heart of quality assurance activities are the twin purposes of accountability and enhancement. Taken together, these create trust in the higher education institution's performance.⁴

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The Register Committee takes into account all quality assurance activities that are within the scope of the ESG (review, audit, evaluation or accreditation of higher education institutions or programmes, including joint programmes), carried out within and outside the EHEA, irrespective of whether they fulfil a statutory mandate or are initiated by higher education institutions on a voluntary basis.

The report on the external review of an agency must thus contain a thorough analysis of all such activities. Other activities that are by their nature not in the remit of the ESG (e.g. organisation of seminars, assessment of individuals) are not considered by the Register Committee.

4. Key Concepts and Definitions

The Register Committee uses the following key concepts and definitions, which are based on those defined by the ESG:

- The **standards** are requirements that have to be adhered to, based on agreed and accepted practice for quality assurance in higher education.
- The **guidelines** provide explanation in relation to the importance and possible implementation of the standard. The Committee takes into account the guidelines when interpreting the standards.
- The term "**programme**" refers to higher education provision in its broadest sense, including provision that is not part of a programme leading to a formal degree.
- Unless otherwise specified, "**stakeholders**" are understood to cover all actors within an institution, including students and staff, as well as external stakeholders such as employers and external partners of an institution.
- The term "**institution**" refers to higher education institutions. Depending on the institution's approach to quality assurance it can, however, refer to the institution as whole or to any actor(s) within the institution.
- The terms "**activity**" (of a quality assurance agency) and "**type of review**" refer to distinct types of external quality assurance deployed by an agency, each based on a separate set of processes and criteria. For instance, "programme accreditation" might be one activity and "institutional evaluation" another one. The activities may range from purely enhancement-driven ones to formal assessment and decisions.

5. Evidence Base for Decisions

The primary basis of the Register Committee's decision is the external review report, which contains evidence that has been reviewed and analysed by an independent expert panel. As a rule, the Register Committee bases its decision on the factors prevailing when the external review was undertaken.

The Register Committee may seek additional clarification from the applicant agency, the review panel or the review coordinator. However, since additional information provided by the applicant agency has not been reviewed by an independent panel, it is taken into account only as far as appropriate.

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6. Making Judgements on ESG Compliance

The criterion for inclusion on the Register is *substantial compliance* with the ESG. The Register Committee makes a holistic judgement on the agency's compliance with the ESG as a whole, based on the external review panel's findings, analyses of and conclusions on the agency's compliance with the relevant standards (ESG 2.1 – 2.7 and 3.1 – 3.7, see Figure 1).

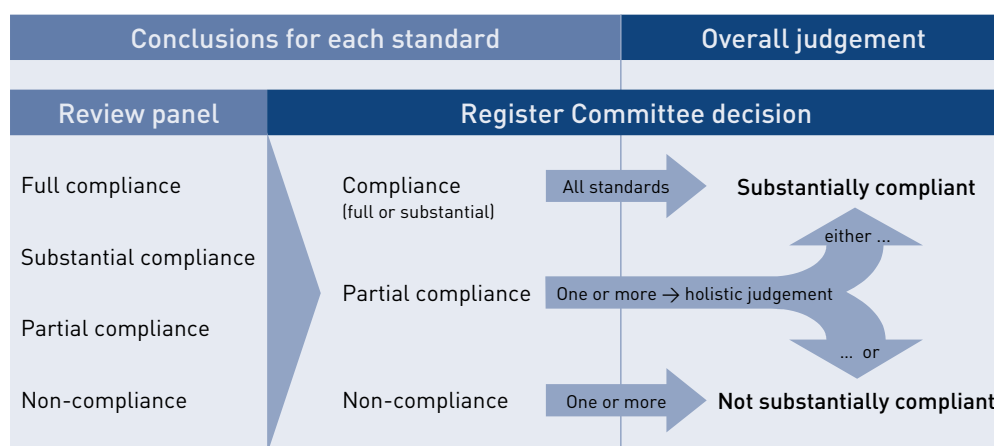


Figure 1: Steps to the Register Committee's overall judgement

In the assessment of each standard the Register Committee distinguishes between *compliance* (which may be *full* or *substantial*), *partial compliance* and *no compliance*. Should the Register Committee not consider the panel's conclusion with regard to compliance with a specific standard persuasive, this is explained in the Committee's decision³. 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.

If the agency is in (full or substantial) *compliance* with all standards it is in substantial compliance with the ESG as a whole.

If there are one or several standards with which the agency complies only partially this is considered in the holistic judgement, which might be positive or negative depending on the amount and significance of the areas where only partial compliance has been achieved. However, there are no numerical rules for arriving at a judgement.

As a rule, a conclusion of *no compliance* for any one standard prevents an overall judgement of *substantial compliance*.

The overall judgement does not distinguish between *substantial compliance* 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.

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. If specific legal requirements are the reason for an agency to only partially comply with a standard it is expected that the agency makes reasonable efforts to work with competent authorities towards a change of these legal requirements.

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7. Interpretations of Specific Standards

In the following, the document summarises the principal interpretations of the standards and expectations of the Register Committee towards reports. For the different standards, the following are provided:

- **Interpretations** – specify how the Register Committee interprets a standard. This is omitted where there is no need for specific clarification;
- **Reports should at least demonstrate** – specifies what the Register Committee expects the agencies' self-evaluation reports and external review reports to show at least in order to demonstrate compliance with the standard.

ESG Part 2: Standards and guidelines for external quality assurance

The Register Committee considers the applicant agency's compliance with Part 2 of the ESG separately in each of its activities. Where agencies have several distinct activities, it is expected that the external review report relates specifically to each activity under each standard of Part 2 (see also interpretation of ESG 3.1).

2.1 Consideration of internal quality assurance

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

- Interpretation:**
1. This standard relates to the crucial link between internal and external quality assurance of higher education institutions and programmes.

To “address” means that the agency should systematically include all standards of Part 1 of the ESG in their criteria and procedures used to evaluate/accredit/audit institutions or programmes, while they may be addressed differently depending on the type of external quality assurance.

- Reports should at least demonstrate:**
- How the agency addresses the effectiveness of internal QA processes in its evaluations, audits and accreditations.

- How standards 1.1 – 1.10 (see [Annex 4](#)) are addressed in the agency's criteria and processes for institutions/programmes.

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2.2 Designing methodologies fit for purpose

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

- Interpretations:**
2. If the agency works in different jurisdictions it should take into account the relevant regulations of the jurisdiction in which the reviewed institution is based.
 3. In the case of joint programmes, the quality assurance agency should use the European Approach for Quality Assurance of Joint Programmes⁵.

- Reports should at least demonstrate:**
- How the agency develops, reviews and updates the processes and criteria used in its different activities.
 - How the agency ensures that its methodologies are fit for purpose.
 - How stakeholders are involved in the design and continuous improvement of the agency's processes.

2.3 Implementing processes

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include

- a self-assessment or equivalent;
- an external assessment normally including a site visit;
- a report resulting from the external assessment;
- a consistent follow-up.

- Interpretations:**
4. If site visits are not part of the processes used by the agency there need to be clear reasons for that.
 5. The agency should provide follow-up procedures for all reviews that contain any sort of recommendations.
 6. It is up to the agency to determine the nature and timing of the follow-up in light of its mission and as appropriate in its context, taking into consideration the national legislation.
 7. The agency remains responsible for ensuring a consistent follow-up even if the formal decision is taken by another body or another body carries out the actual follow-up.

- Reports should at least demonstrate:**
- How the agency ensures that its processes are reliable, useful and consistent.
 - How the key features in the standard are implemented by the quality assurance agency in each of its activities.
 - If no site visits are used, how evidence provided by institutions is validated through other mechanisms.

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2.4 Peer-review experts

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

- Interpretations:**
8. The agency should make use of a wide range of experts with different perspectives, including those of institutions, academics, students and employers/professional practitioners.
 9. At least for reviews across border the agency should include experts from a variety of national origins.
 10. The agency should ensure a consistent approach to the selection of experts as well as appropriate training or briefing of experts.
 11. The agency needs to pay close attention to avoid conflicts of interest of experts, especially when the agency operates within small scientific or professional communities.

- Reports should at least demonstrate:**
- How the agency's groups of experts are composed.
 - How the agency ensures in the selection process that experts have appropriate skills and competences, and no conflict of interest.
 - How the agency organises training or briefing of experts.

2.5 Criteria for outcomes

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

- Reports should at least demonstrate:**
- How the agency published the criteria used in each of its activities.
 - How the agency ensures consistency in its application of criteria for all types of reviews.

2.6 Reporting

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

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- Interpretations:**
12. All reports should be published in full, including those that resulted in a negative decision or conclusion.
 13. The publication of summary reports (rather than full reports) does not fulfil the requirement of the standard.
 14. Reports also have to be published for voluntary or commissioned evaluations of institutions or programmes, irrespective of whether they take place in the agency's base country or elsewhere, within the EHEA or beyond.
 15. All experts should be appropriately involved in producing the report.
 16. "Published" means that reports should be easily accessible on the agency's website, while "clear and accessible" refers to the reports' structure, content, style and language.

- Reports should at least demonstrate:**
- How reports are made accessible to the public for all types of reviews.
 - How the agency ensures that its reports are clear and understandable in their structure, content and style.

2.7 Complaints and appeals

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

- Interpretation:**
17. It should be possible to appeal any formal decision.

- Reports should at least demonstrate:**
- Which appeals processes are in place for each of the agency's activities.
 - How the agency handles complaints.

ESG Part 3: Standards and guidelines for quality assurance agencies

3.1 Activities, policy and processes for quality assurance

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

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- Interpretations:**
18. Agencies should themselves conduct external quality assurance activities on a regular basis, using established processes and criteria. Organisations that only occasionally organise reviews of institutions or programmes do not comply with the standard.
 19. The involvement of stakeholders should be organised in a way that ensures the agency's independence (see ESG 3.3).

- Reports should at least demonstrate:**
- How the agency complies with standards 2.1 – 2.7 (in a distinct chapter, each standard should be addressed separately for each different type of review).
 - How the agency's mission translates into its daily activities.
 - How stakeholders are involved in the agency.
 - How the agency ensures a clear distinction between external quality assurance and its other fields of work, if applicable.

3.2 Official status

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

- Interpretations:**
20. For international organisations it might be a prerequisite to be registered on EQAR in order to be formally recognised by a (national) public authority. In such a case, the agency is not expected to be formally recognised as a quality assurance agency before it is registered on EQAR.

- Reports should at least demonstrate:**
- What is the legal status of the agency.
 - In which higher education system(s) the agency is formally recognised as a quality assurance agency.

3.3 Independence

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

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- Interpretations:**
21. 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.
 22. The integrity of expert groups' reports should be ensured by preventing undue influence of stakeholders 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 undue influence.
 23. If the agency has other activities than external quality assurance (e.g. seminars, consultancy), adequate policies and processes should be in place to safeguard independence of the respective organisational units in performing their QA functions.

- Reports should at least demonstrate:**
- How the agency's organisational independence is demonstrated by official documentation.
 - How the agency operates independently de facto, especially in terms of defining procedures and methods as well as nomination and appointment of experts.
 - How the agency ensures that the outcomes of its quality assurance processes are its independent responsibility.

3.4 Thematic analysis

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

- Reports should at least demonstrate:**
- How the agency conducts and publishes analyses of the general findings from its activities.
 - How it uses the outcomes of these analyses.

3.5 Resources

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

- Reports should at least demonstrate:**
- How the agency's financial arrangements ensure the sustainability of its activities within the scope and in line with the ESG.

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3.6 Internal quality assurance and professional conduct

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

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- Interpretations:**
24. The processes for internal quality assurance need to be formal and regular, and not just informal.
 25. Integrity of an agency's activities includes that it uses the EQAR and ESG "labels" only in connection with activities that are within the scope of the ESG and have been subject to an external review.

- Reports should at least demonstrate:**
- How the agency's internal QA system guarantees the quality and integrity of its activities.
 - How the internal QA system fosters continuous improvement within the agency.

3.7 Cyclical external review of agencies

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

The cyclical review of an agency is a prerequisite for (continued) EQAR registration and inherently fulfilled by the agency undergoing a review.

¹ The ESG were first adopted by ministers in Bergen in 2005 at the proposal of the E4 Group, including the four main European stakeholder organisations in higher education: the European Association for Quality Assurance in Higher Education (ENQA), the European Students' Union (ESU), the European University Association (EUA) and the European Association of Institutions in Higher Education (EURASHE). Between 2012 and 2015, the ESG were thoroughly revised. The new version of the ESG was adopted by EHEA governments in their Ministerial meeting in Yerevan, in May 2015. See also: <https://eqar.eu/application/criteria.html>

² The Committee comprises of quality assurance experts from different backgrounds, who are nominated by EQAR's Founding Members (ENQA, ESU, EUA, EURASHE), BUSINESSEUROPE and Education International, but act in their personal capacity as independent experts. See also: <https://eqar.eu/about/register-committee.html>

³ Published at: <https://eqar.eu/publications/decisions.html>

⁴ Standards and Guidelines for Quality Assurance in the EHEA (2015 version), p. 5, see https://eqar.eu/fileadmin/documents/e4/ESG_endorsedMay2015.pdf

⁵ See <https://eqar.eu/projects/joint-programmes.html>

Annex 1:

Checklist for Agencies

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When preparing for an application for registration or renewal of registration, agencies should ensure that:

- They submit their application, including a brief description of their activities and the draft terms of reference of the external review, to EQAR before the external review process;
- They forward the confirmation received from EQAR as to what activities should be covered by the external review to the review coordinator;
- For renewal applications: they forward the Register Committee's previous decision on approval/renewal to the review coordinator;
- Their self-evaluation report demonstrates the agency's compliance with each standard of Parts 2 and 3 of the ESG separately;
- The self-evaluation covers all external quality assurance activities within the scope of the ESG, as confirmed by EQAR, and addresses them separately for each standard of Part 2, including under ESG 2.1 a mapping of their criteria and procedures onto the standards of Part 1;
- For initial applications: the review is well-timed for the annual deadlines for submission of external review reports (15 March & 15 September);
- For renewal applications: the review report will be completed before their current registration expires.

Annex 2:

Checklist for Review Coordinators

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When preparing an external review, coordinators should ensure that:

- The agency submits the draft terms of reference to EQAR;
- The review panel members are independent and have no real or apparent conflict of interest with regard to the agency;
- The review panel includes the stakeholder perspectives required (a panel which does not include a student, an academic staff member and an international expert is not accepted; consultation with those constituencies is no a substitute for their presence on the panel);
- The review panel receives adequate training for their work;
- The review panel members receive the EQAR policy on the Use and Interpretation of the ESG (this document);
- In case of a review for renewal of registration: the review panel receives the Register Committee's previous decision on approval/renewal;
- The review panel interviews the stakeholders of the agency during the on-site visit;
- The chair of the review panel is available to provide clarification to EQAR, if requested.

Annex 3:

Checklist for Review Panels

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When carrying out an external review, review panels should ensure that:

- The EQAR policy on the Use and Interpretation of the ESG (this document) is taken into account in its analysis;
- The review report provides clear evidence, analysis and conclusions for each standard of Parts 2 and 3 of the ESG separately, whereas ESG 2.1 include an analysis of how the standards of Part 1 are addressed in the agency's criteria and procedures;
- The report covers all external quality assurance activities of the agency within the scope of the ESG, as confirmed by EQAR, and addresses them separately for each standard in Part 2.

Annex 4:

ESG Part 1: Standards for internal quality assurance

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1.1 Policy for quality assurance

Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

1.2 Design and approval of programmes

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

1.3 Student-centred learning, teaching and assessment

Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

1.4 Student admission, progression, recognition and certification

Institutions should consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression, recognition and certification.

1.5 Teaching staff

Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

1.6 Learning resources and student support

Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

1.7 Information management

Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

1.8 Public information

Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

1.9 On-going monitoring and periodic review of programmes

Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

1.10 Cyclical external quality assurance

Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

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