Ministry of Education
And Higher Education

TLQAA

WORK PACKAGE 2: STANDARDS AND PROCEDURES

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Content:

Part 1: Survey of Standards in the USA and Europe

The survey of standards and procedures, which is the focus of this document, aims at:

1. Identifying the standards used by international organizations

2. Rendering account about their organization

3. Investigating the meaning of each of the surveyed standards, its scope and its link with other standards

4. Identifying any related condition requested by each standard

5. Drawing the major conclusions that help in drafting the first version of LQAA standards.

The first part of the survey focuses on the experience of the U.S. higher education accreditation agencies in this field. The second part of the survey focuses on the European experiences, namely those of France, the French community of Belgium, Spain, and the United Kingdom.

I. SURVEY OF STANDARDS OF U.S. HIGHER EDUCATION QUALITY ASSURANCE AGENCIES

A. INTRODUCTION

The five U.S. agencies for accreditation of higher education institutions that have been surveyed are:

1. Middle States Association of Colleges and Schools - Middle States Commission on Higher Education (MSCHE)
2. New England Association of Schools and Colleges - Commission on Institutions of Higher Education (NEASC-CIHE)
3. North Central Association of Colleges and Schools - The Higher Learning Commission (NCA-HLC)
4. Southern Association of Colleges and Schools Commission on Colleges (SACS-COC)
5. Western Association of Schools and Colleges
   Accrediting Commission for Senior Colleges and Universities (WASC-ACSCU)

These agencies differ markedly in their presentation of standards to be applied by higher education institutions in order to obtain accreditation and/or licensure. The structure of the standards, their grouping or listing, their format, and the breadth of their content vary greatly. We have analyzed the texts to identify topics and sub-topics explored by deconstructing the conceptual framework of each agency. After identifying a long list of items, we then proceeded to group them into areas or dimensions, which explore recurrent themes or topics.

A. Format of Standards

1. MSCHE lists 14 standards in total, grouped into two areas: 7 standards under "Institutional Context", and 7 under "Educational Effectiveness". Each individual standard is expressed in one or two sentences, followed by a narrative text under the heading "Context", which is not considered part of the actual standard but serves to provide further information on the topic of the standard, its context and values, provides guidance and definition, and connects to the "Fundamental Elements" which follow. These explain the standard by specifying the particular characteristics or elements to be used to demonstrate compliance with the standard. A section on "Optional Analysis and Evidence" is also available for each standard to provide additional examples of documentation and analysis that might be carried out by each institution.

2. NEASC lists 11 standards with no grouping. Each standard is related to a dimension of institutional quality, and includes a Statement of the Standard in bold type, followed by numbered paragraphs that articulate the points to be taken into consideration for fulfillment of the Standard. A final paragraph entitled Institutional Effectiveness is present for each of the eleven standards.

3. NCA call the standards they implement Criteria for Accreditation, and have them organized under five major headings, or standard titles. Each Criterion has three elements: (a) the Criterion Statement, which defines the necessary attributes of the institution, and which should all be met by the institution to merit accreditation; (b) the Core Components, which provides evidence of meeting the criterion; and (c) Examples of Evidence, which illustrate the types of evidence that could be provided by the institution to address the core components.

4. SACS precedes the listing of standards with a section on "The Principle of Integrity" and another on "Core Requirements". The standards, called Comprehensive Standards, set forth requirements in four area groupings" (1) institutional mission, governance, and effectiveness; (2) programs; (3) resources; and (4) institutional responsibility for Commission policies. The Standards are specific to the operations of the institution and establish the level of accomplishment that is expected of the institution.

5. WASC lists two general Core Commitments and 4 standards. The commitments are; 1) Core commitment to institutional capacity, and (2) Core commitment to educational effectiveness. Each of the four Standards begins with a "statement of the standard" that defines the basis for judgment and that may include sub-sections for various topics under the standard. Each sub-section includes Criteria for Review which help identify key areas for review. In some places, Guidelines are also provided as side notes, helping to interpret the Criteria for Review by providing examples of how the institution can demonstrate that it has addressed the Criteria.

Actual standard ranges from simple straightforward titles to elaborate general ones that group several topics within (see Table 1). MSCHE, NEASC, and SACS have short standard titles that clearly cover specific topics. NCA has some specific titles, like "Mission and Integrity", and some more general ones, like "Preparing for the Future", or "Acquisition, Discovery, and Application of Knowledge", each of which encompass several topics. WASC has general standard titles, like "Achieving Educational Objectives through Core Functions" or "Creating an Organization Committed to Learning and Improvement".

NCA states that:

> *"The Criteria are intentionally general so that accreditation decisions focus on the particulars of each institution, that than on trying to make it fit a preestablished mold. The widely different purposes and scopes of colleges and universities demand criteria that are broad enough to encompass diversity and support innovation, but clear enough to ensure acceptable quality"* (p.5).

B. Inter-relation of Standards

Since standards represent various dimensions or elements of the quality of the institution, then it is necessary that the standards and their topics are inter-related. There might be a standard

on Integrity, for example, but there might also be considerations related to integrity in several of the other standards. MSCHE has a standard entitled "Integrity" (Standard #6), but also mentions integrity in Standard #4 on Leadership and Governance: "The governance structure includes an active governing body with sufficient autonomy to assure institutional integrity…". SACS has a whole section dedicated to "The Principle of Integrity" at the beginning of its document on the Principles of Accreditation.

Institutional effectiveness is another topic that permeates the document contents in multi-faceted contexts. SACS has a standard on Institutional Effectiveness for example, while the standards listed in NEASC each conclude with a paragraph on institutional effectiveness.

These issues presented difficulties in extracting a summary list of standards in the USA. Another difficulty stemmed from the fact that topics or sub-topics were given different locations and priorities by each agency. The topic of governance, for example, comes under "Leadership and Governance" for MSCHE, under "Organization and Governance" for NEASC, under "Mission and Integrity" for NCA, and under "Governance and Administration" for SACS.

Therefore we proceeded by deconstructing the contents and reconstructing them into grouped themes, based on the content of the standards surveyed. The following major topics were identified:

1. Mission
2. Goals and Objectives
3. Planning
4. Organization
5. Administration

6. Governance
7. Integrity
8. Institutional evaluation/ assessment
9. Resources – Institutional
10. Resources – Library
11. Resources - Financial/fiscal
12. Resources - Physical & technological
13. Academic Programs
14. Faculty
15. Teaching & Learning
16. Students
17. Other

These 17 topics constitute our basic list of concepts or common elements that were dealt with either directly or indirectly in the documents analyzed and that represent the multifaceted components of higher education institutions. Table 2 presents a summative table matrix that maps the location of each topic in the listing of standards for each of the five related agencies.

B. NARRATIVE DESCRIPTION BY STANDARD TOPIC

After deconstructing and reconstructing the content covered in the reference documents, the standards were grouped under 14 topic titles. Under each are some points that were synthesized from the related content presented by the U.S accreditation agencies. Following analysis of the content and discussion of the observations made, we went back and identified what each statement content represents. In curly brackets {} next to each statement, the content is identified as showing: 1) Meaning {in blue}, 2) Condition {in green}, or 3) Link to another standard {in purple}.

1. Standard Topic: MISSION

Most US accrediting agencies begin their list of standards with a standard related to the Mission of the higher education institution. Four of the five US agencies have a specific standard that includes the word "Mission" in the title: MSCHE include it under "Mission and Goals", NEASC under "Mission and Purposes", NCA under "Mission and Integrity", and SACS under "Institutional Mission". WASC refers to something similar but under a standard entitled "Defining institutional purposes and ensuring educational objectives".

Standards related to Mission cover the following content in general:

- Mission statement defines the purpose of the institution {Meaning}

- It indicates the target group/communities it serves {Meaning}

- Stated goals/objectives specify how the HEI will fulfill its mission and/or purposes (accomplishments) {Meaning}

- Mission reflects/articulates the institution's traditions or values {Meaning}

- Mission and goals utilized to shape HEI programs/curricula and practices on which expectations for student learning are developed, identify priorities and to evaluate its effectiveness (assessment) {Meaning}

- Institution operates with integrity to ensure fulfillment of mission. {Link to another standard}

- Mission and goals developed, understood, and recognized/approved with participation of HEI members and governing body $\Rightarrow$ it is communicated to the institution's constituencies. {Condition}

- Mission stated in concise manner and appears in appropriate institutional publications. {Condition}

- Mission statement is current and comprehensive. {Condition}

- HEI periodically re-evaluates content and pertinence of mission and purposes and their usefulness in providing direction in planning and resource allocation $\Rightarrow$ used to enhance institutional effectiveness. {Condition}

Note 1: Usually all other standards/components of the institution are related directly and indirectly to the mission. {Link to another standard}

Note 2: The mission may be accompanied by related statements, such as a statement of institutional philosophy.

2. Standard Topic: GOALS AND OBJECTIVES

Only two of the US agencies have a standard that is related to Goals and Objectives as such. MSCHE include it under the standard entitled "Mission and Goals". WASC mention it under the standard related to Institutional Purposes: "Defining institutional purposes and ensuring educational objectives".

- Institution has a clear and conscious sense of its essential values and character, its distinctive elements, its place in the higher education community, and its relationship to society at large. {Condition, Meaning}

- Through its purposes and objectives, the institution dedicates itself to higher learning, the search for truth, and the dissemination of knowledge. {Meaning}

- Institution establishes educational objectives aligned with its purposes and character. *{ Link to another standard }*

Note: Goals and objectives look like an extension of the mission, for mission is about goals and objectives; the latter are about values, purposes and character. {Link to another standard}

3. Standard Topic: PLANNING

All five US agencies have a topic related to the subject of Planning in their listing of standards. MSCHE include it under Standard #2: "Planning, Resource Allocation, and Institutional Renewal"; NEASC under Standard #2: "Planning and Evaluation"; NCA under Criterion #2: "Preparing for the Future"; SACS under Institutional Effectiveness under the general title "Institutional Mission, Governance and Effectiveness"; and WASC under Strategic Thinking and Planning under Standard #4: "Creating an organization committed to learning and improvement".

- Ongoing strategic planning that involves realistic analysis of internal and external opportunities and constraints. {Meaning}

- Plans for and responds to financial and other contingencies, establishes feasible priorities, and develops a realistic course of action to achieve objectives. {Meaning}

- All levels of planning align with the institution's mission, thereby enhancing its capacity to fulfill that mission. {Link to another standard}

- Institutional decision-making, particularly the allocation of resources, is consistent with planning priorities. {Link to another standard}

- Institution allocates sufficient resources for its planning and evaluation efforts. {Link to another standard}

- Developing objectives to meet mission and goals. {Link to another standard}

- Utilizing results of assessment for institutional renewal. {Link to another standard}

- Institution realistically prepares for a future shaped by multiple societal and economic needs. {Link to another standard}

- Institutional renewal {Link to another standard}

- Planning is systematic, comprehensive, broad-based, integrated, and appropriate to institution. {Condition}

- Planning involves participation of individuals and groups responsible for the achievement of institutional purposes. {Condition}

- Results of planning regularly communicated to appropriate constituencies. {Condition}

- Implementation and evaluation of success of strategic plan. {Condition}

- Institutional research is sufficient to support planning. {Condition}

- Institution systematically collects and uses data necessary to support its planning effort and to enhance institutional effectiveness. {Condition}

- Institution has a demonstrable record of success in implementing the results of its planning. {Condition}

4. Standard Topic: ORGANIZATION

Two US agencies mention the topic of Organization: NEASC under Standard #3: "Organization and Governance" and WASC under Organizational Structures and Decision-Making Processes under Standard #3: "Developing and Applying Resources and organizational structures to ensure sustainability"

- Through its organizational design, the institution creates and sustains an environment that encourages teaching, learning, service, scholarship, and research and creative activity. {Meaning}

- Authority, responsibilities, and relationships among the governing board, administration, faculty, and staff are clearly described in the institution's by-laws and in a table of organization that displays the working order of the institution. {Meaning}

- The board, administration, staff, and faculty understand and fulfill their respective roles as set forth in the institution's official documents and are provided with the appropriate information to undertake their respective roles. {Meaning}

- Institution assures provision of support adequate for the appropriate functioning of each organizational component. {Condition}

- The institution's organizational structure, decision-making processes, and policies are clear {Condition} and consistent with its **mission** and support institutional effectiveness. {Link to another standard}

5. Standard Topic: ADMINISTRATION

MSCHE include it under Standard #5: "Administration"; SACS under Standard #2: "Governance and Administration"

- Administrative structure and services facilitate learning and research/scholarship, foster quality improvement, and support institution's organization and governance. {Link to another standard}

Note: More details available in the SACS document on the following topics:

o *Organizational structure*

o *Qualified administrative/academic officers*

o *Personnel appointment*

o *Administrative staff evaluations*

o *Control of intercollegiate athletics*

o *Fund-raising activities*

6. Standard Topic: GOVERNANCE

MSCHE include it under Standard #4: "Leadership and Governance"; NEASC under Standard #3: "Organization and Governance"; SACS under Standard #2: "Governance and Administration"

- System of governance clearly defines roles of constituencies in policy development and decision-making. {Meaning}

- Governance structure includes an active governing body with sufficient autonomy to assure institutional integrity and to fulfill its responsibilities of policy and resource development. {Meaning}

- Institution has a system of governance that facilitates the accomplishment of its mission and purposes and supports institutional effectiveness and integrity. {Meaning}

- Through its governance structure, the institution creates and sustains an environment that encourages teaching, learning, service, scholarship, and where appropriate research and creative activity. {Meaning}

Note 1: More details available on governance in the NEASC document page 5

Note 2: More details in SACS document on following topics:

- o *CEO Evaluation/Selection*

- o *Governing board control*

- o *Board conflict of interest*

- o *External influence*

- o *Board dismissal*

- o *Board/Administration distinction*

7. Standard Topic: INTEGRITY

MSCHE include it under Standard #6: "Integrity"; NEASC Standard #11: "Integrity"; NCA under "Mission and Integrity"; WASC mention it under the Standard #1: "Defining institutional purposes and ensuring educational objectives".

- The institution upholds and protects its integrity. {Meaning}

- Institution demonstrates adherence to ethical standards and its own stated policies in the management of its affairs and in all of its dealings with students, prospective students, faculty staff, its governing board, external agencies and organizations, and the general public. {Meaning}

- Institution provides support for academic and intellectual freedom. {Meaning}

- The institution functions with integrity and autonomy. {Meaning}

- Through its policies and practices, the institution endeavors to exemplify the values it articulates in its mission and related statements. {Link to another standard}

8. Standard Topic: INSTITUTIONAL EVALUATION/ASSESSMENT

MSCHE include it under Standard #7: "Institutional Assessment"; NEASC under Standard #2: "Planning and Evaluation"; NCA under Criterion #2: "Preparing for the Future"; SACS under Standard #3: "Institutional Effectiveness"

- Institution has developed and implemented an assessment process to evaluate overall effectiveness in {Meaning}:

  - o Achieving its mission and goals

- o Its compliance with accreditation standards

- Evaluation is systematic, comprehensive, broad-based, integrated, and appropriate to the institution. {Condition}

- Evaluation involves the participation of individuals and groups responsible for the achievement of institutional purposes. {Condition}

- Results of evaluation regularly communicated to appropriate constituencies. {Condition}

- Institution allocates sufficient resources for its evaluation efforts. {Condition}

- Institution regularly and systematically evaluates the achievement of its **mission** and purposes, focusing on realization of educational objectives. {Condition}

- System of evaluation designed to provide relevant and trustworthy information to support institutional improvement. {Meaning}

- Evaluation efforts use both quantitative and qualitative methods. {Meaning}

- Institution has a system of periodic review of academic and other programs that includes the use of external perspectives. {Meaning}

- Institution's ongoing evaluation and assessment processes provide reliable evidence of institutional effectiveness that clearly informs strategies for continuous improvement. {Meaning}

- Institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in {Meaning}:

    - o Educational programs, including learning outcomes

    - o Administrative support services

    - o Academic and student support services

    - o Research within its **mission**

    - o Community/public service within its **mission**

9. Standard Topic: RESOURCES - INSTITUTIONAL

MSCHE include it under Standard #3: "Institutional Resources"; NCA under Criterion #2: "Preparing for the Future"

Resource Allocation

- Resource base supports educational programs {Meaning}

- Resources include: human, financial, technical, facilities, and other necessary {Meaning} to achieve institution's mission and goals. {Link to another standard}

- Resources are available and accessible. {Meaning}

- Effective and efficient use of institution's resources analyzed as part of ongoing outcomes assessment. {Condition}

- Institution prepares for a future shaped by multiple societal and economic trends. {Condition}

10. Standard Topic: RESOURCES – LIBRARY

NEASC under Standard #7: "Library and Other Information Resources"; SACS Standard #8: "Library and Other Learning Resources"; WASC Standard #3: Developing and Applying Resources and Organizational Structures to Ensure Sustainability"

- Institution provides sufficient and appropriate library and information resources. {Meaning}

- Institution provides adequate access to these resources and {Meaning} demonstrates their effectiveness in fulfilling its mission. {Link to another standard}

- Institution provides instructional and information technology sufficient to support its teaching and learning environment. {Meaning}

11. Standard Topic: RESOURCES – FINANCIAL/FISCAL

NEASC under Standard #9: "Financial Resources"; SACS under Standard #10: "Financial Resources"; WASC Standard #3: Developing and Applying Resources and Organizational Structures to Ensure Sustainability"

- Institution's financial resources are sufficient to sustain the quality of its educational program and to support institutional improvement now and in the future. {Meaning}

- Institution demonstrates, through verifiable internal and external evidence, its financial capacity to graduate its entering class. {Meaning}

- Institution administers its financial resources with integrity. {Meaning}

- SACS topics:

    o Financial stability

    o Financial aid audits

    o Control of finances

    o Control of sponsored research/external funds

12. Standard Topic: RESOURCES – PHYSICAL & TECHNOLOGICAL

NEASC under Standard #8: "Physical and Technological Resources"; SACS under Standard #11: "Physical Resources"; WASC Standard #3: Developing and Applying Resources and Organizational Structures to Ensure Sustainability"

- Institution has sufficient and appropriate physical and technological resources necessary for the achievement of its purposes. {Meaning}

- Institution manages and maintains these resources in a manner to sustain and enhance the realization of institutional purposes. {Meaning}

- Institution provides a healthy, safe, and secure environment for all members of the campus community. {Meaning}

13. Standard Topic: ACADEMIC PROGRAMS

MSCHE includes it under Standard #11: "Educational Offerings" and Standard #12: "General Education"; NEASC includes it under Standard #4: "The Academic Program"; SACS under three standards: Standard #4: "All Educational Programs", Standard #5: "Undergraduate Programs", Standard #6: "Graduate and Post-Baccalaureate Professional Programs"

- Educational offerings display academic content, rigor, and coherence appropriate to mission. {Meaning}

- Institution identifies student learning goals and objectives, including knowledge and skills, for its educational offerings. {Meaning}

- Curricula designed so that students acquire and demonstrate college-level proficiency in {Meaning}:

    o General education

    o Essential skills: oral and written communication, scientific and quantitative reasoning, critical analysis and reasoning, and technological competency.

- Academic programs are consistent with and serve to fulfill mission and purposes. {Link to another standard}

- Institution works systematically and effectively to plan, provide, oversee, evaluate, improve, and assure the academic quality and integrity of its academic programs and the credits and degrees awarded. {Condition}

- Institution sets a standard of student achievement appropriate to the degree awarded and develops means to understand how and what students are learning ad to use the evidence obtained to improve the academic program. {Condition}

- SACS have several topics:

    o Academic program approval

    o Program/curricular requirements

    o Continuing education/service programs

    o Admission and academic policies

    o Acceptance of academic credit

- o Practices for awarding credit

- o Consortial relationships/contractual agreements

- o Academic support services

- o Technology use

14. Standard Topic: FACULTY

MSCHE includes it under Standard #10: "Faculty"; NEASC under Standard #5: Faculty; NCA under Criterion #3: "Student Learning and Effective Teaching"; SACS Standard #7: "Faculty"; WASC Standard #3: Developing and Applying Resources and Organizational Structures to Ensure Sustainability"

- Institution's instructional, research, and service programs are devised, developed, monitored and supported by qualified professionals. {Meaning}

- Faculty competency offer the institution's academic programs and fulfill those tasks appropriately assigned them. {Meaning}

- Institution values and supports effective teaching. {Meaning}

- Institution develops a faculty that is suited to the fulfillment of the mission. {Link to another standard}

- Faculty qualifications, numbers, and performance are sufficient to accomplish the institution's mission and purposes. {Link to another standard}

- Institution's learning resources support effective teaching. {Link to another standard}

- SACS topics:
  - o Faculty evaluation
  - o Faculty development
  - o Academic freedom
  - o Faculty role in governance

15. Standard Topic: TEACHING AND LEARNING

NCA under Criterion #3: "Student Learning and Effective Teaching" and Criterion #4: "Acquisition, Discovery, and Application of Knowledge"; WASC Standard #2: "Achieving Educational Objectives Though Core Functions"

- Institution provides evidence of student learning and teaching effectiveness that demonstrates it is fulfilling its educational mission. {Meaning}

- The institution promotes a life of learning for its faculty, administration, staff, and students by fostering and supporting inquiry, creativity, practice, and social responsibility in ways consistent with its mission: {Meaning}

    o Values a life of learning

    o Acquisition of a breadth of knowledge and skills

    o Exercise of intellectual integrity

    o Assesses usefulness of curricula to students living and working in a global, diverse, and technological society

    o Provides support to ensure that faculty, students, and staff acquire, discover, and apply knowledge responsibly.

Assessment of Student Learning

MSCHE includes it under Standard #14: "Assessment of Student Learning"; NEASC under Standard #2: "Planning and Evaluation"

- Assessment of student learning demonstrates that, at graduation or other appropriate points: {Meaning}

    o Students have knowledge, skills and competencies consistent with institutional and appropriate higher education goals.

- Institution understands what its students have gained as a result of their education and has useful evidence about the success of its recent graduates. This information is used for planning and resource allocation and to inform the public about the institution. {Meaning}

- Institution's goals for student learning outcomes are clearly stated for each educational program and make effective assessment possible. {Condition}

- Institution creates effective learning environments. {Meaning}

- Institution's learning resources support student learning. {Link to another standard}

16. Standard Topic: STUDENTS

MSCHE includes it under Standard #8: "Student Admissions and Retention" and Standard #9: "Student Support Services"; SACS under Standard #9: "Student Affairs and Services"; WASC Standard #2: "Achieving Educational Objectives Though Core Functions"

▪ **Student Admissions and Retention:**

- Admit students whose interests, goals, and abilities congruent with institution's mission**.** {Meaning}

- Institution seeks to retain students through the pursuit of the students' educational goals. {Meaning}

- Consistent with its mission, the institution defines the characteristics of the students it seeks to serve and provides an environment that fosters the intellectual and personal development of its students. {Meaning}

- Institution recruits, admits, enrolls, and endeavors to ensure the success of its students, offering the resources and services that provide them the opportunity to achieve the goals of their program as specified in institutional publications. {Meaning}

- The institution's interactions with students and prospective students are characterized by integrity. {Meaning}

▪ **Student Support Services:**

- Institution provides student support services necessary to enable each student to achieve the institution's goals for students

▪ **Scholarship and Creative Activity**

17. Standard Topic: OTHER

A few standards remained behind after the general grouping was done, and these are the following:

MSCHE Standard #13: "**Related Educational Activities**" {these include basic skills or developmental courses, certificate programs, experiential learning, non-credit offerings, distance education}

- Institution's programs or activities that are characterized by particular content, focus, location, mode of delivery, or sponsorship meet appropriate standards.

NEASC Standard #10: "**Public Disclosure**"

- In presenting itself to students, prospective students, and other public members, the institution provides information that is complete, accurate, timely, accessible, clear, and sufficient for intended audiences to make informed decisions about the institution.

NCA Criterion #5: "**Engagement and Service**"

- Institution learns from the constituencies it serves and analyzes its capacity to serve their needs and expectations.

- Institution has capacity and commitment to engage with its identified constituencies and communities

SACS Standard #12: "**Substantive Change Procedures and Policy**"

SACS Standard #13: "**Compliance with Other Commission Policies**"

SACS Standard #14: "**Representation of Status**"

C. CONCLUSION AND DISCUSSION

A. Grouping of Standards

Investigating the standards of US accrediting agencies shows that standards could be grouped into few very broad 4 categories or into a more detailed list of fourteen items. Yet, in both cases, standards are about a long list of topics. These refer either to the components of any higher education institution or to conceptual approaches of the quality of higher education.

The list of topics covering the components is long, and these topics are found directly in the standards' titles or disseminated in the body texts. The list includes the following:

1. Mission
2. Goals, Objectives, and purposes
3. Planning
4. Organization, Decision-Making Processes
5. Administration
6. Governance, board
7. Evaluation/ assessment-institutional
8. Evaluation/ assessment-students
9. Resources- Institutional, Resource Allocation
10. Resources – Library
11. Resources - Financial/fiscal
12. Resources - Physical & technological
13. Academic Programs (undergraduate, graduate, postgraduate)
14. Faculty (profile, evaluation, development),
15. Staff, personnel
16. Teaching & Learning
17. Students-achievement

18. Students-Admission and retention
19. Students- Support services
20. Students- financial aid
21. Fund-raising activities
22. Distance learning

Surprisingly **research** is not found in any of accrediting agencies standards in the USA. Also **community service** is not highlighted in most of them, with the exception of NCA. Worthy to note as well is the fact that the surveyed standards do not request the existence of a **quality assurance structure** in the institution itself. Instead, the institutional assessment is highlighted since it may play a similar role of that of quality assurance structure in European models.

As for the conceptual approaches, they are sometimes highlighted as specific standards and sometimes are found in the folds of the text, as bottom line criteria. Every accrediting agency has its own approach(es) and focus. The total list extracted is as follows:

1. Integrity
2. Effectiveness
3. Sustainability
4. Leadership
5. Public disclosure
6. Engagement
7. Institutional Renewal
8. Preparing for the Future
9. Autonomy
10. Accountability
11. Ethics
12. Intellectual/academic freedom
13. Participation
14. Partnership
15. Other

Put together, these two lists of standards and their related concepts raise the number of topics that could be taken into consideration to more than 36 topics. Again any given number is, for each accrediting agency, the result of an art of grouping and of a philosophy of higher education, tailored for its own style and to meet its own needs. No single standard is found replicated or duplicated as such in the five American accrediting agencies (see Table 2 below). This does not mean that students are totally absent in NCA standards, nor that mission is totally absent from WASC standards, etc., but rather that the terminology or format used is different.

B. Elements of Standards

The second major observation related to US standards is that each standard statement, in all five agencies, includes usually three major elements: (1) the meaning, (2) the conditions, and (3) the links with other standards.

<u>Meaning</u> defines the scope of the term expressing the standard. The standard on Planning, for instance, "involves realistic analysis of internal and external opportunities and constraints" and "planning for and responding to financial and other contingencies, establishing feasible priorities, and developing a realistic course of action to achieve objectives".

<u>Condition(s)</u> refer to the state in which things ought to be or to the form they ought to take. For example the mission statement of the institution should be: stated in concise manner and appears in appropriate institutional publication, current and comprehensive, etc. Planning, on the other hand, should be systematic, comprehensive, broad-based, integrated, and appropriate to institution. It should involve participation of individuals and groups responsible for the achievement of institutional purposes, and results of planning are regularly communicated to appropriate constituencies, etc.

<u>Link(s)</u> to other standards refer to the specific interdependencies of the standards, and reflect their integrality. These are few examples (standards' titles are in bold): **Institutional decision-making**, particularly the allocation of resources, is consistent with **planning** priorities; the institution's **organizational structure**, decision-making processes, and policies are clear and consistent with its **mission** and support institutional **effectiveness**; **administrative structure** and services facilitate **learning** and research/scholarship, foster quality improvement, and support **institution's organization** and **governance**. Mission is the most frequent standard that other standards are referred or linked to.

The topics analyzed present several considerations to be determined for the Lebanese context. With the diversity of the higher institutions in Lebanon in mind, and the public versus private sector implications on administration, governance, student enrolment, and fields of study, the following questions need be answered in order to develop our own framework for accreditation:

- Is the list of elements exhaustive and does it cover all topics necessary for the Lebanese HEIs?

- Are the topics of the same importance/priority in the Lebanese context?

- Since the Lebanese HEIs have different models, would it be easier to state fewer standards with more general titles or a longer list of standards with more specific titles?

Table 1. Listing of Headings and Standards by U.S. Accrediting Agency

Agency	Terminology	Pub. & date	Areas / Headings	Criteria/Standards
1. MSCHE	Standards for Accreditation	✓ (68p) 2006	14 total; standards listed under 2 areas	***Institutional Context*** Standard 1: Mission and Goals Standard 2: Planning, Resource Allocation, and Institutional Renewal Standard 3: Institutional Resources Standard 4: Leadership and Governance Standard 5: Administration Standard 6: Integrity Standard 7: Institutional Assessment ***Educational Effectiveness*** Standard 8: Student Admissions and Retention Standard 9: Student Support Services Standard 10: Faculty Standard 11: Educational Offerings Standard 12: General Education Standard 13: Related Educational Activities Standard 14: Assessment of Student Learning
2. NEASC	Standards for Accreditation	✓ (27p) Adopted 2005, last revision 2011	11 total; no grouping; standards just listed	Standards: 1) Mission and Purposes 2) Planning and Evaluation 3) Organization and Governance 4) The Academic Program 5) Faculty 6) Students 7) Library and Other Information Resources 8) Physical and Technological Resources 9) Financial Resources 10) Public Disclosure 11) Integrity

Agency	Terminology	Pub. & date	Areas / Headings	Criteria/Standards
3. NCA	The Criteria for Accreditation	✓(15p) 2010	5 general headings, 21 core components, each with examples of evidence	Criteria: 1) Mission and Integrity 2) Preparing for the Future 3) Student Learning and Effective Teaching 4) Acquisition, Discovery, and Application of Knowledge 5) Engagement and Service
4. SACS	The Comprehensive Standards	✓ (44p) Approved 2001, last revision 2011	4 general areas, 14 standards, 58 statements	Standards: 1) Institutional Mission 2) Governance and Administration 3) Institutional Effectiveness 4) All Educational Programs 5) Undergraduate Educational Programs 6) Graduate and Post-Baccalaureate Professional Programs 7) Faculty 8) Library and Other Learning Resources 9) Student Affairs and Services 10) Financial Resources 11) Physical Resources 12) Responsibility for compliance with the Commission's substantive change procedures and policy 13) Responsibility for compliance with other Commission policies 14) Representation of status with the Commission
5. WASC	The Core Commitments and Standards for Accreditation	✓ (25p) 2008	2 core commitments, 4 general standards with 10 sub-categories, 42 criteria for review and guidelines	Core Commitments: 1) Institutional Capacity 2) Educational Effectiveness Standards: 1) Defining institutional purposes and ensuring educational objectives 2) Achieving educational objectives through core functions 3) Developing and applying resources and organizational structures to ensure sustainability 4) Creating an organization committed to learning and improvement

TABLE 2. STANDARDS MAPPING MATRIX BY U.S. AGENCY

#	Standard	Accrediting Agencies				
		MSCHE	**NEASC**	**NCA**	**SACS**	**WASC**
1.	**Mission**	✓ S1: Mission and Goals, under "Institutional Context"	✓ S1: Mission and Purposes	✓ C1: Mission and Integrity	✓ S1: Institutional Mission under "Institutional Mission, Governance and Effectiveness"	
2.	**Goals and Objectives**	✓ S1: Mission and Goals, under "Institutional Context"				✓ Institutional Purposes under S1: "Defining institutional purposes and ensuring educational objectives"
3.	**Planning**	✓ S2: Planning, Resource Allocation, and Institutional Renewal, under "Institutional Context"	✓ S2: Planning and Evaluation	✓ C2: Preparing for the Future	✓ S3: Institutional Effectiveness under "Institutional Mission, Governance and Effectiveness"	✓ Strategic Thinking and Planning under S4: "Creating an organization committed to learning and improvement"
4.	**Organization**		✓ S3: Organization and Governance			✓ Organizational Structures and Decision-Making Processes under S3: "Developing and Applying Resources and organizational structures to ensure sustainability"
5.	**Administration**	✓ S5: Administration under "Institutional Context"			✓ S2: Governance and Administration under "Institutional Mission, Governance and Effectiveness"	
6.	**Governance**	✓ S4: Leadership and Governance under "Institutional Context"	✓ S3: Organization and Governance	✓ C1: Mission and Integrity	✓ S2: Governance and Administration under "Institutional Mission, Governance and Effectiveness"	
7.	**Integrity**	✓ S6: Integrity under "Institutional	✓ S11: Integrity	✓ C1: Mission and Integrity		✓ Integrity under S1: "Defining institutional purposes and

#	Standard	Accrediting Agencies				
		MSCHE	NEASC	NCA	SACS	WASC
		Context"				ensuring educational objectives"
8.	**Institutional evaluation/ assessment**	✓ S7: Institutional Assessment under "Institutional Context"	✓ S2: Planning and Evaluation	✓ C2: Preparing for the Future	✓ S3: Institutional Effectiveness under "Institutional Mission, Governance and Effectiveness"	
9.	**Resources-Institutional**	✓ S3: Institutional Resources, under "Institutional Context"		✓ C2: Preparing for the Future		
	a. Resources-Library		✓ S7: Library and Other Information Resources		✓ S8: Library and Other Learning Resources under "Programs"	✓ Fiscal, Physical and Information Resources under S3: "Developing and Applying Resources and organizational structures to ensure sustainability"
	b. Resources-financial / fiscal		✓ S9: Financial Resources		✓ S10: Financial Resources under "Resources"	✓ Fiscal, Physical and Information Resources under S3: "Developing and Applying Resources and organizational structures to ensure sustainability"
	c. Resources-physical & technological		✓ S8: Physical and Technological Resources		✓ S11: Physical Resources under "Resources"	✓ Fiscal, Physical and Information Resources under S3: "Developing and Applying Resources and organizational structures to ensure sustainability"
10.	**Academic Programs**	✓ S11: Educational Offerings under "Educational Effectiveness" ✓ S12: General Education under "Educational Effectiveness"	✓ S4: The Academic Program		✓ S4: All Educational Programs; ✓ S5: Undergraduate Educational Programs; ✓ S6: Graduate and Post-Baccalaureate Professional Programs all under "Programs"	✓ Teaching and Learning under S2: "Achieving educational objectives through core functions" ✓ Support for Student Learning and Success under S2: "Achieving educational objectives through core functions"
11.	**Faculty**	✓ S10: Faculty under "Educational Effectiveness"	✓ S5: Faculty		✓ S7: Faculty under "Programs"	✓ Teaching and Learning under S2: "Achieving educational objectives through core

#	Standard	Accrediting Agencies				
		MSCHE	NEASC	NCA	SACS	WASC
						functions" ✓ Faculty and Staff under S3: "Developing and Applying Resources and organizational structures to ensure sustainability"
12.	**Teaching & Learning**			✓ C3: Student Learning and Effective Teaching		✓ Teaching and Learning under S2: "Achieving educational objectives through core functions"
13.	**Students**	✓ S8: Student Admissions and Retention under "Educational Effectiveness" ✓ S9: Student Support Services under "Educational Effectiveness" ✓ S14: Assessment of Student Learning under "Educational Effectiveness"	✓ S6: Students		✓ S9: Student Affairs and Services under "Programs"	✓ Teaching and Learning ; ✓ Support for Student Learning and Success both under S2: "Achieving educational objectives through core functions" ✓ Scholarship and Creative Activity under S2: "Achieving educational objectives through core functions"
14.	**Other**	✓ S13: Related Educational Activities under "Educational Effectiveness"	✓ S10: Public Disclosure	✓ C4: Acquisition, Discovery, and Application of Knowledge ✓ C5: Engagement and Service	✓ S12: Responsibility for compliance with the Commission's substantive change procedures; and ✓ S13: Responsibility for compliance with other Commission policies and policy; and ✓ S14: Representation of status with the Commission under "Institutional Responsibility for Commission Policies"	✓ Commitment to Learning and Improvement under S4: "Creating an organization committed to learning and improvement"

II. SURVEY OF STANDARDS OF EUROPEAN HIGHER EDUCATION QUALITY ASSURANCE AGENCIES

The first part of the survey of standards and procedures focused on the experience of the U.S. higher education accreditation agencies in this field. This report forms the second part of the survey which focused on the European experiences in this domain. Following a general introduction to the European Standards and Guidelines, four countries are presented as case studies: France, French community of Belgium, Spain, and the U.K.

A. EUROPEAN STANDARDS

In 2003 the Ministers of the Bologna Process signatory states invited the European Network for Quality Assurance in Higher Education (ENQA) to develop an agreed set of standards, procedures and guidelines on quality assurance, in cooperation with the member organizations involved. ENQA was requested to report back in 2005 at the Bologna Follow-Up Group to Ministers. As a result, ENQA drafted a report on "Standards and Guidelines for Quality Assurance in the European Higher Education Area", directed at the European Ministers of Education. The report lists a set of proposed standards and guidelines for quality assurance in the European Higher Education Area (EHEA), designed to be applicable to all HEIs and quality assurance agencies in Europe. Detailed procedures are left to be determined by the institutions and agencies themselves as those are integral parts of their autonomy.

The standards and guidelines

> "recognize the primacy of national systems of higher education, the importance of institutional and agency autonomy within those national systems, and the particular requirements of different academic subjects"[1].

To accommodate the variety of the higher education systems in Europe, the generic principle is applied rather than specific requirements for standards and guidelines. Generic standards are expected to be more easily and broadly accepted. As a result, the standards and guidelines set forth in the report focus more on what should be done than how they should be achieved.

The purpose of the standards and guidelines for internal and external quality assurance

> "is to provide a source of assistance and guidance to both higher education institutions in developing their own quality assurance systems and agencies undertaking external quality assurance, as well as to contribute to a common frame of reference, which can be used by institutions and agencies alike. It is not the intention that these standards and guidelines should dictate practice or be interpreted as prescriptive or unchangeable"[2].

[1,2] ENQA. 2009. "Standards and Guidelines for Quality Assurance in the European Higher Education Area", p.13

The standards and guidelines are based on 10 basic principles about quality assurance (see p. 14 of report). They serve 4 basic purposes related to:

1. Improving education available to students in HEIs in the EHEA;

2. Assisting HEIs in managing and enhancing their quality;

3. Forming a background for quality assurance agencies in their work; and

4. Making external QA more transparent and simpler to understand.

The standards and guidelines have 4 objectives related to:

1. Encouraging the development of HEIs which foster vibrant intellectual and educational achievement;

2. Providing a source of assistance and guidance to HEIs and other agencies in developing their own culture of QA;

3. Informing and raising the expectations of HEIs, students, employers, and other stakeholders about the processes and outcomes of higher education; and
4. Contributing to a common frame of reference for the provision of higher education and the assurance of quality within the EHEA.

The European standards for quality assurance are in three parts:

- Part 1: European standards and guidelines for internal quality assurance within HEIs

- Part 2: European standards for the external quality assurance of higher education

- Part 3: European standards for external quality assurance agencies

The first part includes 7 standards, and the second and third parts each include 8 standards. Under each standard title there are two sections: the Standard itself, with a paragraph serving as the statement of the standard, and the Guidelines, with a paragraph listing expectations of what the policy statement is expected to include. Table 3 below lists the standards under each part, and Table 4 lists the content of each standard covered in Part 1 only (as this is the part that is directly related to our current exploration).

Table 3: Summary list of European standards for quality assurance

Part 1	Part 2	Part 3
Internal quality assurance of HEI	**External quality assurance of HEI**	**Quality Assurance of external quality assurance agencies**
1.1 Policy and procedures for quality assurance	2.1 Use of internal quality assurance procedures	3.1 Use of external quality assurance procedures for higher education
1.2 Approval, monitoring and periodic review of programmes and awards	2.2 Development of external quality assurance processes	3.2 Official status
1.3 Assessment of students		3.3 Activities
		3.4 Resources

1.4 Quality assurance of teaching staff	**2.3** Criteria for decisions	**3.5** Mission statement
1.5 Learning resources and student support	**2.4** Processes fit for purpose	**3.6** Independence
1.6 Information systems	**2.5** Reporting	**3.7** External quality assurance criteria and processes used by the agencies
1.7 Public information	**2.6** Follow-up procedures	
	2.7 Periodic reviews	
	2.8 System-wide analyses	**3.8** Accountability procedures

Table 4: European standards and guidelines for internal quality assurance within HEIs

Standards for internal QA	Standard statement content

1.1 Policy and procedures for quality assurance	- HEI should have a policy and procedures for assurance of quality and standards of programmes and awards
	 - HEI should commit explicitly to development of a culture which recognizes importance of quality and QA in their work
	 - HEI should develop and implement strategy for continuous enhancement of quality
	 - Strategy, policy and procedures should:
	    o Have formal status
	    o Be publicly available
	    o Include a role for students and other stakeholders

1.2 Approval, monitoring and periodic review of programmes and awards	- HEI should have formal mechanisms for approval, periodic review and monitoring of programmes and awards
1.3 Assessment of students	- Students should be assessed using published criteria, regulations and procedures which are applied consistently
1.4 Quality assurance of teaching staff	- HEI should show that teaching staff is qualified and competent - This should be available to external reviewers and commented upon in reports
1.5 Learning resources and student support	- HEIs should ensure that resources available for support of student learning are adequate and appropriate for each programme
1.6 Information systems	- HEI should ensure that it collects, analyses and uses relevant information for effective management of programmes and activities
1.7 Public information	- HEI should regularly publish both qualitative and quantitative information that is up to date, impartial and objective, about the programmes and awards

Procedural guidance gives more detailed information about how the policy could be implemented and provides reference points that could be useful in carrying out the procedures.

As an example of the guidelines, standard 1.1 titled "Policy and procedures for quality assurance" states that the policy statement for this section is expected to include the following:

- The relationship between teaching and research in the institution;

- The institution's strategy for quality and standards;

- The organization of the quality assurance system;

- The responsibilities of departments, schools, faculties and other organizational units and individuals for the assurance of quality;

- The involvement of students in quality assurance;

- The ways in which the policy is implemented, monitored and revised.

It can be observed from the above that few of the elements of HEIs are explicitly mentioned in the list. Those which are mentioned are: programmes, students, teaching staff, and student learning. Among these, programs are mentioned in 4 out of the 7 standards; thus they seem to be the main concern of the list of standards.

In fact the main focus of the standards seems not to be the elements, or about any principle which should govern the HEI. The main focus is the internal quality assurance itself in its procedural or structural form: HEI has to show that it has procedures, culture, strategy, mechanisms, periodic review and monitoring, assessment, and reporting…on quality and quality assurance.

Also one may interpret a part of this orientation by "disclosure" (in the American glossary): Strategy, policy and procedures should have formal status and be publicly available, students' assessment criteria should be published, available to external reviewers, and HEI should regularly publish both qualitative and quantitative information.

As for the "meaning" of the standards one may find only the following: teaching staff is qualified and competent, resources available for support of student learning are adequate and appropriate for each programme.

The focus on procedural forms and the avoidance of dealing with the meanings, along with the absence of many elements (such as governance, financial resources, administration, planning, etc) and principles could be interpreted by the status of the European standards. Being placed at the continental level, and being proposed as framework for a diversity of HEI and quality assurance systems, they avoid imposing specific orientation of the meaning of quality. Second, many of HEIs in the European countries are public, where MOHEs are the main providers of financial and human resources, plans and strategies, and where HEIs are similar in their bylaws, etc, which makes difficult to elaborate "European" standards raising these issues.

This explains as well the elaboration of the second list of *European standards and guidelines for the external quality assurance of higher education* (see Table 5 below). These are to be used more as guidelines, addressed to national agencies of quality assurance and as criteria to judge about their procedures towards HEIs.

As for the third list it is consecrated to assure the quality of quality assurance agency, thus not of our interest in this report.

Table 5: European standards and guidelines for the external quality assurance of higher education

	Standard
2.1 Use of internal quality assurance procedures	External quality assurance procedures should take into account the effectiveness of the internal quality assurance processes described in Part 1 of the European Standards and Guidelines.
2.2 Development of external quality	The processes themselves are developed, by all those responsible (including

Standard	
assurance processes	higher education institutions) and should be published with a description of the procedures to be used.
2.3 Criteria for decisions	Any formal decisions made as a result of an external quality assurance activity should be based on explicit published criteria that are applied consistently.
2.4 Processes fit for purpose	All external quality assurance processes should be designed specifically to ensure their fitness to achieve the aims and objectives set for them.
2.5 Reporting	Reports should be published and should be written in a style which is clear and readily accessible to its intended readership. Any decisions, commendations or recommendations contained in reports should be easy for a reader to find.
2.6 Follow-up procedures	Quality assurance processes which contain recommendations for action or which require a subsequent action plan, should have a predetermined follow-up procedure which is implemented consistently.
2.7 Periodic reviews	External quality assurance of institutions and/or programmes should be undertaken on a cyclical basis. The length of the cycle and the review procedures to be used should be clearly defined and published in advance.
2.8 System-wide analyses	Quality assurance agencies should produce from time to time summary reports describing and analyzing the general findings of their reviews, evaluations, assessments etc.

B. STANDARDS IN FRANCE

a. Introduction

The Evaluation Agency for Research and Higher Education (L'agence d'évaluation de la recherche et de l'enseignement supérieur - AERES)[3] in France obtained its official status in 2007, after merging within its structure the "Comité national d'évaluation des établissements publics à caractère scientifique, culturel et professionnel (CNE)" which had been created in 1984. The AERES was recognized by ENQA in 2010.

b. Model and Procedures

AERES has the following missions:

1) Evaluation of research organizations and institutions, research and higher education institutions and scientific cooperation foundations and institutions as regards all of their missions and activities,
2) Evaluation of the research activities conducted by the research units of the aforementioned institutions and organizations,
3) Evaluation of the programmes and degrees of higher education institutions, and
4) Validation of the procedures for evaluating the staff of the aforementioned institutions and organizations and giving an opinion on the conditions under which said procedures are carried out.

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[3] http://www.aeres-evaluation.fr/

Hence, and unlike other quality assurance agencies in Europe, research is at the front of the evaluation process undertaken by the agency and has its independent and special place in the process and the product.

As stated in its Quality handbook, the AERES applies the "Standards and Guidelines for Quality Assurance in the European Higher Education Area" adopted in Bergen in 2005 by the Ministers of Higher Education in the member countries of the Bologna process. In this framework, the AERES undertakes to implement quality assurance according to a process-based approach.

In this French model, the evaluation of HEIs deals with the relationship between the HEIs, being autonomous, and the state, having the regulator role (the accrediting authority). Within this frame the HEIs (universities, schools, and organizations) are evaluated based on periodical negotiated contracts. This includes two major dimensions: auto-evaluation and external integrated evaluation.

The auto-evaluation is conducted under the complete responsibility of the institution, according to its quality policy. The central objective of it is to allow the institution to locate itself within its environment at the local, regional, national and international levels. It shall undertake a critical analysis of the quality improvement mechanisms. The AERES does not impose any prior plan for the auto-evaluation report. The institution is free to define its own references for quality[4].

The external evaluation is the responsibility of AERES, where the institution only submits its documents (see figure 1) including its auto-evaluation report[5]. It is an integrated evaluation since it covers all institutions' activities related to teaching and research, within a global strategic analysis, articulating missions, governance and management (pilotage).

Four general levels of analysis are considered in this evaluation:

1) The identification of the issues at stake facing the institutions;

2) The relevance, the coherence and the realism of the operational strategies as defined by the institution;

3) The modes of strategies elaboration. This covers the lines of decision making, the forms of consultation, the channels of information dissemination, the forms of implementation, and the collection of the feedback emerging from experiences; and

4) The efficacy and the adaptability of the institution's management. In particular the exploitation of the conclusion set in the previous evaluation and the actions taken accordingly at the later stages.

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[4] AERES, Vague D, Guide de l'évaluation, p 6

[5] The following documents constitute the institutional dossier to be submitted to the experts committee before the site visit:
- Déclaration des axes stratégiques de développement (5 pages)
- Document de politique en matière de formation (5 pages) joint à la **liste actualisée** des formations préalablement transmise à titre déclaratif au 1er juin, y compris les formations délocalisées.
- Document de politique en matière de recherche (5 pages),
- Rapport d'auto-évaluation incluant un bilan synthétique des résultats du contrat précédent (60 pages maximum)
- CPER, investissements d'avenir, opération Campus

A committee of experts is commissioned to make the site visit for 2-3 days, where it collects information, undertakes interviews, observation, meetings, etc. a process which leads to the publication of the report on AERES website (see figure 1).

Figure 1: French model of external evaluation
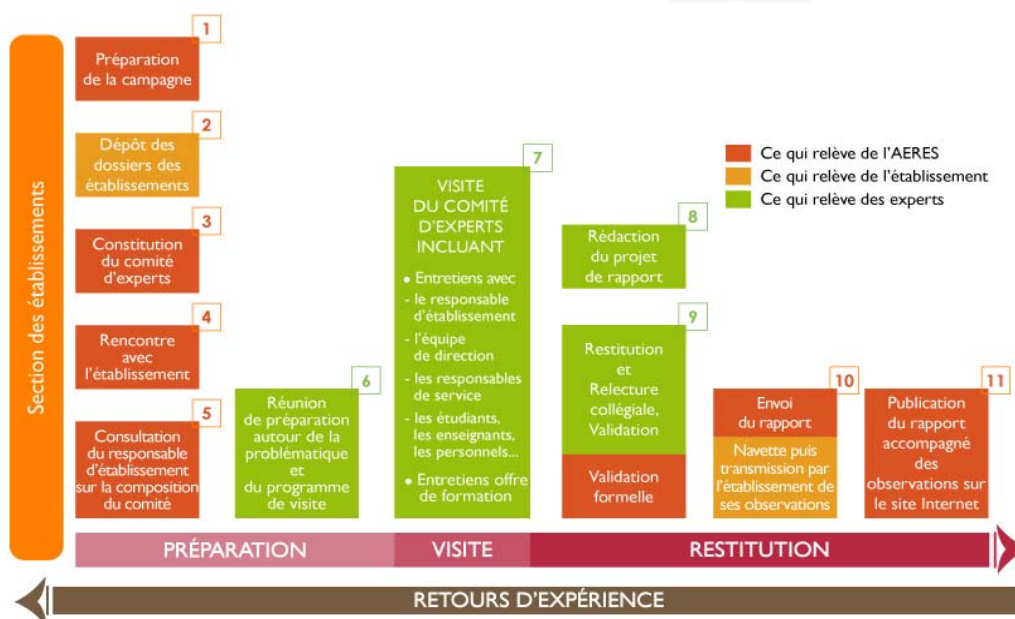
c. The "Standards"

The Evaluation Guide does not use the term "standards". Instead, it calls on the expert committees to write their report according to a plan that includes the "fields of activities", the objectives within each field, the interpretation systems and the criteria[6].

There are nine fields, related mostly to the institution's strategies regarding selective list of elements of the higher education institution. These are:

1. Research Strategy

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[6] « C'est dans cet esprit que le présent guide :
-énonce les différents champs d'activité qui pourront, en fonction des missions et des caractéristiques de l'établissement évalué, faire l'objet d'une évaluation ;
-pour chacun de ces champs, présente les objectifs de l'évaluation et décrit le système d'interprétation des données et des faits, ainsi que les critères d'évaluation associés ;
-précise, pour chaque objectif, les différents aspects de l'activité de l'établissement qui sont susceptibles d'être pris en compte, en fonction de l'établissement évalué ». AERES, Vague D, Guide de l'évaluation, p 5

2. Research Valorization Strategy
3. Teaching Strategy
4. Students Life Strategy
5. Partnership Strategy
6. International Relations Strategy
7. Governance
8. Relations with Health and Hospitals Structures
9. Affirmation of the Institution Identity and its Communication Policy.

These fields cover the institution as a whole and not limited to programs. There is no report by programme, unlike those models of the French Community of Belgium and Spain.

Each field is defined by a serial of objectives. The first field, for instance, has three objectives:

Objective 1: The potential of institution's research

Objective 2: The strategy of institutions research

Objective 3: The implementation and the follow up of the research strategy.

The number of objectives by field varies between 1 and 8. The total stands at 27 objectives (see Table 6).

However each objective has a statement, similar to standards statement in the American system. The objective one states for example the following: "The institution has the knowledge of its research potential. The institution is capable to describe it, to characterize it and to place it in its regional, national and international environment. The institution is able to provide a precise map of its research activities and to identify its strengths and weaknesses in this domain". The statement incorporates the "interpretation system and the evaluation criteria" of the objective.

The unique objective of the strategy of international relations has the following "interpretation system and the evaluation criteria": "the institution is effectively involved in international cooperation in research and teaching".

Moreover, each objective criterion is followed by a list of indicators, which help the experts to provide evidences on the presence/absence of the capacities and activities related to the concerned objective. This allows the experts to summarize, at the end of the report, the strengths and the weaknesses of the institution and to propose recommendations.

d. Conclusions from France:

As for other European models the French system of quality assurance is a central one, where the Agency is in charge of the process of evaluation, through its experts who prepare the reports based on many documents and information provided by the higher education institution. Among the latter the "auto-evaluation" report is a free report prepared by the institution according to its own approach. {We don't know the extent to which these auto-evaluations are comprehensive and useful to the experts, they are rarely mentioned in the evaluation reports}

"Evaluation" is the key word in this system as the means to assure quality. This should be understood as being undertaken by external evaluators, called experts.

The French model has three major specific features compared to other European system:

a) There is no "internal" versus "external" duality of quality assurance. The term "internal" quality assurance is not found in the French documents.

b) The inclusion of research as a major part in the quality assurance endeavor.

c) Although the term "standards" is not common in the French documents, the fields, according to which the evaluation is conducted, contain explicit "objectives" with clear normative statements called "interpretation system and the evaluation criteria". Each of these criteria is moreover followed by a series of items that play the role of indicators.

The French standards (evaluation criteria), cover a wide variety of institutional elements: research, teaching, students' services, student life, governance (organization, management, budget policy, employment, physical resources etc), international relation, partnership, communication. They include explicitly or implicitly, a variety of principles or approaches, such as: visibility, strategic approach, effectiveness, belonging feeling, regionalization and internationalization, attractiveness (of teaching), transparency, documentation, digitalization, participation, cooperation, etc.

{We don't know the impact of the evaluation report on the institution}

Table 6: Fields and Objectives of the Evaluation in AERES-France

Field	Objective
1. Research Strategy	Objectif 1. Le potentiel de recherche de l'établissement
	Objectif 2. La stratégie recherche de l'établissement
	Objectif 3. La mise en œuvre et le suivi de la stratégie recherche
2. Research Valorization Strategy	Objectif. Le développement d'une stratégie de valorisation
3. Teaching Strategy	Objectif 1. caractérisation de l'offre de formation
	Objectif 2. Le pilotage de l'offre de formation
	Objectif 3. La démarche qualité pédagogique
	Objectif 4. La visibilité de l'offre de formation
	Objectif 5. Les dispositifs d'accompagnement de l'étudiant : de l'accueil dans l'établissement à l'aide à l'insertion professionnelle
	Objectif 6. L'établissement fournit à l'étudiant un environnement de travail adapté aux exigences d'une formation supérieure
4. Students Life Strategy	Objectif 1. L'étudiant est impliqué dans la vie de l'établissement
	Objectif 2. Les dispositifs et pratiques permettant aux étudiants de bénéficier d'une réelle qualité de vie
5. Partnership Strategy	Objectif 1. Le développement des relations inter-établissements d'enseignement supérieur
	Objectif 2. Relations avec les EPST et les EPIC
	Objectif 3. Les relations avec les collectivités territoriales
	Objectif 4. Les relations avec les milieux socio-économiques

Field	Objective
6. International Relations Strategy	Objectif. L'activité internationale en matière de recherche et de formation
7. Governance	Objectif 1. L'organisation, le pilotage stratégique et opérationnel de l'établissement
	Objectif 2. Le pilotage, le développement du système d'information de l'établissement
	Objectif 3. La politique en matière d'emploi, de masse salariale et de gestion des ressources humaines
	Objectif 4. L'organisation et le pilotage de la politique budgétaire et financière au service de la stratégie de l'établissement
	Objectif 5. La politique immobilière : gestion, maintenance et développement de l'ensemble du patrimoine
	Objectif 6. Le management de la qualité
	Objectif 7. Le développement de la capacité d'auto-évaluation au service d'une meilleure efficacité de l'action
	Objectif 8. Hygiène, sécurité
8. Relations with Health and Hospitals Structures	Objectif. Développer les relations entre l'université, les composantes santé et les structures hospitalières
9. Affirmation of the Institution Identity and its Communication Policy	Objectif. Développer un sentiment d'appartenance

C. STANDARDS IN THE FRENCH COMMUNITY OF BELGIUM

a. Introduction

The agency in charge of quality assurance of HEIs in French community of Belgium is L'Agence pour l'Evaluation de la Qualité de l'Enseignement Supérieur (AEQES) (see http://www.aeqes.be)

AEQES is an <u>independent public sector agency</u> responsible for evaluating the quality of higher education in the French Community of French community of Belgium and working for its continuous improvement. AEQES was established in 2002 and restructured in 2008. In 2011 it was reviewed by ENQA and subsequently was granted full membership. The Agency bases all its working procedures on the European Standards and Guidelines (ESG). AEQES is financed by the French community government and not by the institutions themselves.

Higher Education Councils (HECs) act as interfaces between the Agency and the HEIs. They are involved in modifying the programme-related lists of indicators.

b. Model and Procedures

The Agency is responsible for the following tasks[7]:

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[7] http://www.aeqes.be/documents/Triptyque%20EN.pdf

- conducting evaluations of higher education study programmes, highlighting best practice, deficits and problems needing to be resolved
- carrying out evaluations on the basis of the 10-year plan it is responsible for compiling
- promoting cooperation between all higher education stakeholders with a view to enhancing quality in each institution
- making proposals to policymakers on how to enhance the quality of higher education in general
- determining and planning on a multi-year basis the evaluations to be conducted
- representing the French Community in national and international bodies in matters concerning quality assurance in higher education

The agency assesses the quality of teaching in bachelor and masters programmes in the institutions authorized by the French Community. The HEIs that are evaluated by AEQES are universities, *Hautes Écoles,* Higher arts colleges, and Social Advancement Education institutions.

The Agency evaluation process takes place in three phases: the internal evaluation, the external evaluation and the follow up. The internal evaluation or the preparation phase culminates in the writing of a ***self-evaluation report*** by the department/institution evaluated, which remains confidential. The framework of this report is defined in a reference list of indicators, fixed by government decree (see Table 7 below). The self-evaluation report includes six chapters, each following a category of questions. There are no statements on how things should be; the list rather looks like a table of content of the report, implying its descriptive character. Yet the chapter 6 of the list is entitled *SWOT Analysis* with the following question to be answered: *Are we achieving our goals? What next?* This is the part where the writers of the self-evaluation are invited to provide a "full critical" self-evaluation (SWOT) as well as an action plan for future improvement.

c. The "Standards"

Self-evaluation deals with governance of the institution, student participation, quality assurance, and aims of the study programme(s), students, physical and human resources, research, community service, national and international relations, mobility, and partnerships. These are the six chapters' titles, which constitute the "standards" of the Belgian system of quality evaluation:

CHAP 1: Structure and governance of the institution, student participation, quality assurance {Who are we?}
CHAP 2: Structure and aims of the study programme(s) to be evaluated {What do we want?}
CHAP 3: Students of this study programme/these study programmes {For whom?}
CHAP 4: Resources available: Staff and facilities {With which means?}
CHAP 5: External relations: research, community service, national and international relations, mobility, partnerships {Related activities and their impact on teaching}

CHAP 6: SWOT Analysis, results, and strategic action plan {Are we achieving our goals? What next?}[8]

The external evaluation is composed of an external review (site visit) and a reporting phase. The panel of experts appointed by the Agency goes on site visit in the HEIs involved on the basis of the self-evaluation report. For each evaluated department/institution, the review report deals with SWOT analysis (of strengths, weaknesses, opportunities and threats), along with recommendations published on the website of the Agency. The panel also compiles a status report consisting of a contextualized presentation of the programme(s) under evaluation and their prospects in the French Community, within the European Higher Education Area (EHEA). This report is also published on the website of the Agency.

Since evaluation is "planned" by the public Belgian agency, logically the agency works by specific program where it undertakes evaluation of it throughout one or several institutions. This allows the agency to conduct "transversal" evaluative analysis, to make recommendations at the national level.

To explore this type of evaluation we take the example of political sciences[9], which is a programme that concerns only universities:

- It was initiated by AEQES according to the decree 22 of February 2008,
- It covers all BA and MA programs in political sciences and related fields (such as European studies)
- Concerned institutions prepared written self-evaluation reports based on information given by the agency. It is about the same reference list of indicators (yet entitled *Guide à destination du coordinateur-Notice methodologique*[10]).
- The agency nominated its experts team members and president. These experts were chosen from outside French community of Belgium (France , Canada, Switzerland) and independent professionals,
- Site visits were undertaken to the institutions for 2-4 days each, where experts conducted observations and interviews, at the end of which is a spoken report done by the president of the jury which gives a good preview of the preliminary report.
- Every visit lead to a preliminary report where the experts undertook SWOT analysis and proposed recommendations aiming at assisting the institution in building its improvement plan,
- Institutions were given the opportunity to comment on the reports and to correct eventual factual mistakes. Accordingly, the reports were finalized and posted on the agency website (note that before this stage there is no published document),

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[8] This is going to change soon. Enclosed to my email, you will find, in French, the set of standards that is going to be tested with the next evaluations.

[9] http://www.aeqes.be/documents/Analyse%20transversale%20sciences%20po%20-%20VF%20-%20MEP.pdf
[10] http://www.aeqes.be/documents/Guide%20coordonnateur%20version%20finale1.pdf

- The experts team prepared in addition an "état des lieux" (general overview), including a global synthesis on the situation of the evaluated programs in the French Community of Belgium. It includes as well the main challenges, the god practices, the opportunities and the risks, in addition to a general list of recommendations addressed to different partners in HE,
- The transversal analysis was submitted to the Minister of Higher Education, to the *Conseil Interuniversitaire Francophone* (CIUF) , to the evaluated institutions and posted on the agency website on October 6, 2010, exactly 2 years after the launching of the evaluation process (October 2008).

The follow-up phase has the objective to anchor the quality assurance process and make sure that it remains a top priority in the long term. In the six months following the publication of the review reports on the Agency's website, each institution provides the Agency with a follow-up action plan according to a predefined template. These plans are published on the Agency's website, directly linked to the relevant review report. At the request of the institution involved, an update of the follow-up action plan might be published every three years on the Agency's website.

AEQES has developed its own internal quality assurance system (IQA) that is system based on procedures, routine functions, and dialogue with all the stakeholders and feedback. This helps ensure a consistent approach in applying the methodology and in treating all institutions with equity. The IQA system is explained in the "Quality Handbook" which targets AEQES' Executive Unit staff, experts and stakeholders. Its quality assurance process is applied in accordance with the "*Plan - do - check - act*" (PDCA) principle.

d. Conclusions from French community of Belgium:

The following features can be revealed from the Belgian model of quality assurance:

The AEQES model is a program model. "Institutions" in the model refer to the three different types of "schools" which operate in the higher education system. Yet, while the American programmatic accreditation is targeting only professional programmes, the Belgian evaluation covers all types of programs.

The term "standards" is not used; instead there is a list of items with no statements - that is with no formative orientation. These items cover many elements of the institutions, such as: governance, student, quality assurance, aims of the study programme(s), physical and human resources, research, community service, national and international relations, mobility, and partnerships. Examples of terms used in the American system which are absent here: mission, organization, planning, evaluation, assessment, etc. and more important is the absence of concepts such as: integrity, effectiveness, leadership, etc.

The absence of explicit normative orientation in the standards could be due to public approach toward public HEIs. But technical issues matter in this context. With the programmatic approach it becomes very difficult to elaborate normative standards for each of the existing programs, professionals and not professional. The use of generic indicators applicable to all programs and presented as outline template becomes in this case more practical.

Taking this road, the Belgian model chooses a methodology based on descriptive self study (following the items order, or the template), including one of different nature: SWOT analysis. In this analysis the evaluation takes place, while the external evaluation re-examine this analysis, and builds its recommendations. By this the term "peer review" is replaced here by the term "experts" and the term "review" is replaced by the term "evaluation", like in the French model. The term "experts" is used because the panel includes peers (teachers for other universities), an expert coming from the professional area of the program and an expert in pedagogy.

The Belgian Agency for Evaluation of Higher Education Quality (AEQES) works in accordance with European Standards. The reference list of indicators is aligned with the ESG, but is more elaborate. The general focus in all the documents reviewed is on setting up and maintaining a proper internal quality assurance system, whether in the case of the HEI itself or the Agency. The Agency plays the role of monitor to ensure that this QA system is appropriate to the needs and is implemented well.

It is obvious that, as public agency, AEQES does not only have an evaluator role. It has, in addition, an "actor" role through promoting cooperation and synergies between HEIs, disseminating good practices and advocating before the policymakers to enhance the system, and "monitoring an appropriate group of programmes with the aim of fostering the alignment of programme profiles and objectives with the missions of the institutions involved". Hence the evaluation it conducts is qualified as: "formative quality evaluation". In the Belgian model the Agency submit its reports to the Minister of HE, and has an active role throughout the whole higher education system. It does not only undertake formative quality evaluation at the institutional level and monitor the improvement plans, it contributes as well in shaping the programs by the transversal reports it undertakes regularly each time on a group of programs.

Table 7. Reference list of indicators

Indicators:
CHAP 1: Structure and governance of the institution, student participation, quality assurance *{Who are we?}*
1.1. Presentation of the institution
1.2. Organisation and situation of the department to be evaluated
1.3. Description of the department's internal organisation (role of the consultation and decision-making bodies and how they function)
1.4. Terms and conditions for student participation in decision-making and advisory bodies
1.5. Institutional partnerships
1.6. Organisation of quality assurance in the institution and department: bodies and their responsibilities
1.7. Support from the institution's administrative department for the quality assurance process
CHAP 2: Structure and aims of the study programme(s) to be evaluated *{What do we want?}*
2.1. Overall and specific objectives
2.1.1. Definition and evaluation of the overall and specific objectives of the study programme(s) concerned, in relation to the institution's mission and overall objectives
2.1.2. Verification of the procedures for disseminating information to interested parties (staff and students)
2.2. Programme(s)

Indicators:
2.2.1. Procedure for designing a study programme according to the objectives listed under 2.1.1.
2.2.2. Interaction and compatibility, contingent on the programmes, between research and teaching on the one hand and the professional world and teaching on the other hand
2.2.3. Overall compatibility of the programme in terms of core knowledge, specialized knowledge and transferable personal skills
2.2.4. Teaching approach and encouragement of independent and continuous learning (students autonomy)
2.2.5. Attitude of the department in respect of student assessment: methods and frequency of assessments (oral or written exams, MCQ, continuous assessment, etc), relevance of the assessment system to programme objectives
2.2.6. Educational objectives and how they are taken into account in projects, reports, end-of-course dissertations; organisation, monitoring and evaluation
2.2.7. In the departments concerned: educational objectives and how they are taken into account in work placement(s) (compulsory or recommended) or study periods abroad; organisation, monitoring and evaluation)
2.2.8. For universities: PhDs and PhD training organisation, monitoring and evaluation
2.2.9. Quality measurement: evaluation of study programmes and teaching by students; evaluation of study programmes by graduates and employers
2.2.10 Effects of quality measurement on the compilation and adaptation of course programmes
2.3. Teacher information and monitoring
2.3.1. Information for students on eligibility and enrolment criteria
2.3.2. Preparatory courses for the first year and participation rates
2.3.3. Information for students, at the different stages of their courses, on available choices, options and specializations, optional courses, their dissertation, exams, etc.
2.3.4. Measurement of the effective workload of courses, practical work, tutorials, exercises, projects, dissertations, etc. for students
2.3.5. Information on the assessment of students' knowledge and competences
2.3.6. Promoting success: coaching, individual monitoring, remedial help, switching programmes and participation rates
CHAP 3: Students of this study programme/these study programmes *{For whom?}*
3.1. Overall context: student population of the French Community of French community of Belgium, in the institution and in the programme
3.2. Qualitative and quantitative information on the recruitment, eligibility conditions, socio-demographic characteristics of student intake
3.3. Student numbers (overall, first-time students, repeating students) per academic year or study unit, and per subject, option or specialization
3.4. Quantitative analysis of study careers: "bridges" between different types of institution, switching programmes, etc.
3.5. Exam success rate per academic year or department and per subject, option or specialization
3.6. Average study duration
3.7. Graduation rate
3.8. Career opportunities for graduates, by type of training (sectors, job quality, career paths, etc.)
3.9. Information on unemployment and under-employment (if available)
3.10. Job placement assistance provided by the institution
3.11. Reception and integration of students, new students, foreign students, handicapped students, students with children, etc.
3.12. Living and studying conditions for students: facilities available, quality of life, etc.
CHAP 4: Resources available: Staff and facilities *{With which means?}*
4.1. Staff and human resource management (HRM)

Indicators:
4.1.1. Qualitative and quantitative data by discipline, subject, etc.: Appropriate allocation of available scientific and technical skills; staff : full-time, part-time, external; collaboration between institutions, faculties, departments, sections, categories, etc.
4.1.2. Age and gender structure
4.1.3. Recruitment policy
4.1.4. Staff management (in the department, within the institution) teacher training, further training, assessment and promotion policy, workload assessment, etc.
4.1.5. Effects of teaching quality assessments on staff policy
4.2. Resources and facilities
4.2.1. Operating and investment budgets
4.2.2. Lecture theatres, labs, libraries, IT infrastructure, etc.
4.2.3. Teaching tools
4.2.4. Appropriateness of resources and facilities to needs
CHAP 5: External relations: research, community service, national and international relations, mobility, partnerships *{Related activities and their impact on teaching}*
5.1. Research
5.1.1. Department's research policy, main research topics, benefits for teaching
5.1.2. Participation in conferences
5.1.3. Research contracts, partners and donors with: - Belgian public authorities (federal, Community, regional), EU, others   - the business sector and society
5.2. Community service
5.2.1. "Service to society" policy priorities, benefits for teaching
5.2.2. Appraisals, popularization of science, education and life-long learning schemes, etc.
5.3. National and international relations (not listed under other headings)
5.3.1. Student mobility: participation in exchange programmes, work placements, etc.
5.3.2. Mobility of academic and research staff: exchange agreements for teachers and researchers, invitations from abroad, participation in conferences and symposiums
5.3.3. Relations with various partners (collaboration projects, bilateral relations, cooperation projects with developing countries, companies, other private and public agencies, etc.)
CHAP 6: SWOT Analysis, results, and strategic action plan *{Are we achieving our goals? What next?}*
6.1. SWOT analysis (Analysis of strengths and weaknesses, opportunities and threats)
6.2. Summary diagnosis on the basis of the above
6.3. Solutions (planned or in the process of being drafted) for remedying identified weaknesses and threats
ANNEXES
a. Statistical information
b. Analysis of teaching content, covering all course components. For each one, the number of hours per year or credits (including lectures, practical work, tutorials, personal work), the educational objective, the content, the manner of assessing and the teaching aids used
c. List of members of staff, with their functions, their teaching tasks and other internal work
d. List of projects and end-of-course dissertations for the last three years, and of PhD theses for the last five years
e. Departmental rules of procedure (including examination regulations)
f. Any documents liable to help clarify the content of the report
g. Activity report or other strategic documents specific to the institution

D. STANDARDS IN SPAIN

a. Introduction

The main quality assurance agency in Spain is the National Agency for Quality Assessment and Accreditation of Spain (ANECA), which was created in 2002 and aims to "provide external quality assurance for the Higher Education Institutions in Spain, thereby contributing to the continuous development of the higher education system through evaluation, certification and accreditation" (see www.aneca.es/eng)[11].

b. Model and Procedures

ANECA's mission is elaborated in the following four functions:

1. To strengthen the enhancement of teaching, research and university management activities;
2. To contribute to performance appraisal of higher education according to objective, procedures and transparent processes;
3. To provide public administrations with appropriate information for decision making; and
4. To keep society informed about target achievements of university activities.

ANECA has three main programmes:

1). Evaluation is about academic candidates being hired by universities as teaching staff, of services provided by the universities: library service, plan of training the academic staff, of the international relations, etc.

2). Accreditation refers to the process of evaluation of studies leading to official degrees (bachelor, master's and doctoral degrees), "in order to fulfil the criteria and standards previously established for each type of degree" . The methodology of the evaluation for accreditation includes the following: self-assessment, external assessment, draft report on accreditation, and a final report by the Ministry leading to acceptance or cancellation of the programme.

3). Certification relates to "quality labels" and awards to be given by of doctoral programs and university libraries. In the case of doctoral programs ANECA evaluates the programme. Once awarded the programme receives financial grant from the Ministry, the following year the program has to pass an audit designed by ANECA. The third year the programme receives automatically the award.

The Evaluation programmes:

To perform its three main activities (evaluation, certification and accreditation) ANECA, unlike other European models, developed a number of evaluation Programmes, with the purpose of

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[11] See as well: Statutes of ANECA

integrating the Spanish system into the European Higher Education Area (EHEA). These stand at seven programmes, which could be grouped into 2 groups, the first group deals with the staff, while the second group deals with institutions and programmes:

a) Academic staff evaluation:

- **PEP Programme:** (non-civil servant academic staff hiring) Evaluation of the teaching and research activities as well as the academic backgrounds of future applicants to positions of non-civil servant academic staff (PhD Lecturer, PhD assistant Lecturer, and Non PhD assistant Lecturer and private universities Lecturer) as defined by the LOMLOU.

- **ACADEMIA Programme:** (national accreditation for civil servant academic staff): Evaluation of the applicants' qualification to access the civil-service positions as University academic staff (Senior Lecturer and Professor).

- **DOCENTIA Programme**: Support for Universities wishing to establish their own mechanisms to evaluate the quality of the teaching activity of their academic staff.

b) Institutional and programme evaluation:

- **VERIFICA Programme:** Evaluation of degree proposals designed according to the aims set for building the EHEA. "Once a university has decided to offer a degree before admitting students, the university must present a degree project for verification by the Universities Council which requests an assessment report from the Quality Assurance Agency in charge". (ANECA or one of the regional Quality Assurance Agencies with such a competence). The <u>VERIFICA program</u> was created by ANECA in order to perform this report. This is the Ex-ante accreditation.

- **MONITOR Programme**: Follow-up of an ex-ante accredited programme until it has to be submitted again in order to renew its accreditation: "ANECA (and other regional agencies) are developing the so-called follow-up procedures where to check, by non-intrusive means, that the institution is implementing the study programme according to the approved design. The MONITOR program was created by ANECA in order to perform this follow-up".

- **AUDIT Programme**: Guidance for Higher Education Institutions to establish their own internal quality assurance systems. "ANECA, in cooperation with two other regional agencies, AQU and ACSUG, have developed the 'Assessment of Internal Quality Assurance Systems in Higher Education' (AUDIT programme). The purpose of this initiative, which is addressed to all the university colleges and faculties that offer university education, is to provide guidance in designing internal quality assurance systems integrating all the activities implemented up until the present time related to degree programmes quality assurance".

- **MENCION Programme**: (Quality Label recognition of PhD programmes) Acknowledgement of the scientific, technical and educational high standards of Doctoral studies.

Among all the above-mentioned programmes, the AUDIT Programme is the one which concerns us for this survey and will be the focus of the remainder of this section of our report.

The AUDIT Programme

The "Assessment of Internal Quality Assurance Systems in Higher Education", AUDIT, serves to guide and facilitate all higher education institutions in the process of defining their internal quality assurance system (IQAS), which should involve a combination of internal and external actions by both universities and agencies. The IQAS should integrate all the activities implemented up until the present time related to degree programmes quality assurance. The orientations are mainly addressed to university colleges and faculties, but include some elements that are transversal in nature and are relevant to the institution at large (such as the topics of hiring staff, resources, services, etc.).

The AUDIT programme provides guidance at the design stage and also becomes a tool to be used for the recognition of the IQAS designed by the university institutions. The programme includes a **verification** process of the HEI's IQAS, and in its last stage, concludes with the **certification** process of the implemented IQAS.

The AUDIT programme has two basic aims:
1) To provide HEIs with guidance for the design of IQAS for their degree programmes, and
2) To implement a procedure that leads to recognition of the design of these systems by QA agencies.

Four main documents were developed for the AUDIT programme:

Doc 1. Guide to the design of internal quality assurance systems in higher education[12]

Doc 2. Guidelines, definition and documentation for the design of internal quality assurance systems in higher education[13]

Doc 3. Tools/Diagnosis in implementing internal quality assurance systems in higher education[14]

Doc 4. Guide to evaluating the internal quality assurance systems' design for university education[15]

The instructions contained in the Guide (document 1) deal with two basic issues:

a) How HEIs use their units, regulations, standards, procedures, etc. to enhance the quality of the design and development of their programmes, the selection and promotion of teaching staff, classroom activities and learning outcomes.

b) How HEIs involve different interest groups in the design, development, evaluation and dissemination of teaching activities.

The design of the HEI's IQAS takes place in four stages: (1) Commitment, (2) Planning, (3) Diagnosis, and (4) Definition and documentation. The Diagnosis phase serves as the starting

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[12] http://www.aneca.es/eng/content/download/12371/153501/file/audit_guia_eng_080221.pdf
[13] http://www.aneca.es/eng/content/download/12370/153491/file/audit_directrices_eng_080221.pdf
[14] http://www.aneca.es/eng/content/download/12372/153511/file/audit_tools_eng_080221.pdf
[15] http://www.aneca.es/eng/content/download/12373/153521/file/audit_guide%20to%20evaluation_120123.pdf

point for designing the IQAS by having the HEI identify the laws, regulations, rules standards, organizational structure, procedures and mechanisms of the HEI, establish the data collection procedure, identify responsible units and teams, and identify and prioritize requirement. This diagnosis stage helps the HEI establish the direction in which the work actions should be directed.

The document on "Tools for the diagnosis" is to be used by the HEI to carry out the analysis of the **benchmarks** given in the document, along with the information obtained from the preliminary diagnosis of the situation.

c. The "Standards"

The internal quality assurance systems take into consideration two sources: the *Guidelines for designing undergraduate and Master's degrees* set by the Ministry of Education and Science, and ENQA's *Standards and guidelines for quality assurance in the European Higher Education Area*. The internal quality assurance mechanisms already existing in the universities are also taken into consideration.

To facilitate the development of a common framework of reference to be used by both HEIs and agencies, the following seven criteria are taken into consideration (see table 8):

1) Quality policy and goals
2) Programme design
3) Classroom activities and other student-orientated actions
4) Academic staff and auxiliary teaching staff
5) Physical resources and services
6) Outcomes
7) Public information

Examples of each guideline are provided to help the HEIs in designing their IQAS. For the first general guideline, for example, on 'How the HEI defines its quality policy and goals', the HEI must:

- Make a public statement in writing that sets out its quality policy, together with its scope and goals.
- State the interest groups involved in defining the quality policy.
- Integrate different elements (bodies, procedures, processes, etc.) to establish a system whereby this quality policy can be implemented.
- Establish actions to define, approve, review and improve the quality policy and goals.
- Determine the accountability procedure (how, who, when) with the interest groups in relation to compliance with the quality policy and fulfillment of the quality goals.

For the remaining 6 criteria on quality of programmes, orientation of programmes towards students, quality of academic staff, physical resources and services, outcomes, and public information, the Guide lists specific guidelines for each. A flow diagram provides examples of the main activities that can be developed within each guidelines, along with a series of questionnaires adapted to demonstrate whether the main stages shown in the diagram are complied with, and/or the degree of compliance.

The aspects included in the AUDIT programme are then used as a base of prerequisites for the forthcoming VERIFICA programme, which deals with the authorization and registering of undergraduate and Master's degrees.

At the end of the overall evaluation the evaluator judges the programme according to the following three categories: Positive, Positive with conditions and Negative. The latter occurs when the IQAS "is not considered to be suitable for implementation and because of the importance of the deficiencies found" (doc. 4, p. 15)

d. Conclusions from Spain:

The quality assurance system in Spain has many folds and is composed of several segmented programs, which makes it difficult to an outsider to comprehend the system fully.

In accordance with *Standards and guidelines for quality assurance in the European Higher Education Area* , the Spanish model is an Internal-based quality assurance system which focuses on the mechanisms and the procedures that show that the institution is able to "maintain and update its programmes and develop methodologies to approve, control, evaluate and periodically enhance (its) quality", that "the purpose of any action that it undertakes, including outside work experience and mobility, is to encourage learning by the student", and that the institution is able to "design, manage and improve its services and physical resources in order for student learning to develop appropriately", etc.

Through the AUDIT (Assessment of Internal Quality Assurance Systems in Higher Education) programmme ANECA exercises an external assessment of this internal quality assurance system at the university. Both universities and agencies are required to establish their own IQAS and undergo external evaluation in accordance with the European Standards and Guidelines (ESGs).

AUDIT uses a list of **criteria** covering selective "elements" of the higher education system (such as policy and goals, programme design, classroom activities and other student-orientated actions, etc). The statements here deal with procedures and mechanisms of internal quality assurance system (IQAS), that is, with the "conditions" as observed in the American model. There are no "standards" in the American sense of the word (with normative statement especially regarding the "meaning").

Like the Belgian model the Spanish model is a programme-oriented one. Where the institution is concerned, the focus is on its programmes; institutional accreditation is not mentioned. This is probably due to the public nature of the higher education institutions in Spain, and the central role played by the Ministry of Higher Education, the Science and Technology (MEC)[16]. The quality assurance agency ANECA is a review body that performs external assessment processes to ensure that activities of the HEIs are oriented in a manner most conducive to attaining the goals associated with the degree programs.

In addition, the agency proceeds in its work as an "external evaluator". This can be concluded since (a) this is the term used by the agency documents; (b) the concerned programme provides

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[16] Ministerio de Educacion y Ciencia of (MEC)

documents and questionnaires responses in the self assessment data, while the agency is concerned with the evaluation, and (c) because the accreditation report judges the evaluated programme (positive to negative), and leads to the acceptance or the cancellation of the programme.

Unlike other quality assurance modes in the US and Europe, ANECA plays certain roles which are, in other systems, pertaining to the universities, the ministry or the local governmental bodies. This appears through its functions of evaluation (of university teaching staff and of services provided by the universities: library service, plan of training the academic staff, of the international relations, etc.) and of certification (by awarding "quality labels" to doctoral programs and university libraries). It appears as well through its programmes: non-civil servant academic staff hiring (PEP Programme), national accreditation for civil servant academic staff (ACADEMIA Programme), and support for universities wishing to establish their own mechanisms to evaluate the quality of the teaching activity of their academic staff (DOCENTIA Programme).

Table 8: Criteria of the AUDIT Programme - Spain

1. Quality policy and goals:	The institution shall consolidate a quality culture based on a known and publicly available quality policy and goals and those in charge of the study programme's internal quality assurance system.
2. Programme design:	The institution shall have mechanisms to maintain and update its programmes and develop methodologies to approve, control, evaluate and periodically enhance their quality. In addition, these mechanisms shall provide for the eventual suspension of the qualification, and also the ways that suggestions and appeals are dealt with.
3. Classroom activities and other student-orientated actions:	The institution shall have procedures whereby it can check that the purpose of any action that it undertakes, including outside work experience and mobility, is to encourage learning by the student.
4. Academic staff and auxiliary teaching staff:	The institution must have mechanisms to ensure that the hiring, administration and training of its teaching and auxiliary teaching staff is carried out with the necessary guarantees to ensure they can fulfill their corresponding functions.
5. Physical resources and services:	The institution shall have mechanisms that enable it to design, manage and improve its services and physical resources in order for student learning to develop appropriately.
6. Outcomes:	The institution must develop procedures to ensure that outcomes (of learning, employment and the satisfaction of the different interest groups) can be measured, analyzed and used for decision-making and the enhancement of the quality of degree programmes.
7. Public information:	The institution shall have mechanisms to ensure the periodic publication of updated information on programmes of study.

Source: document 1

E. STANDARDS IN THE U.K.

a. Introduction

The **Quality Assurance Agency for Higher Education (QAA)**, a not-for-profit organization established in 1997, has the task of ensuring that higher education qualifications in the United

Kingdom are of a sound standard, which it does by checking how universities and colleges maintain their academic standards and quality.

b. Model and Procedures

One of QAA's functions is to carry out reviews of how universities and other HE providers maintain the quality of all the learning opportunities provided for students, along with the academic standards of their degrees.

QAA offers "advice, guidance and support to help UK universities, colleges and other institutions provide the best possible student experience of higher education". It conducts reviews of institutions and publishes reports detailing the findings. Its reports "highlight good practice and contain recommendations to help improve quality". All QAA's review reports are available on its website.

The *UK Quality Code for Higher Education* (the Quality Code), a document produced recently by the QAA, sets out the expectations that HEIs in the UK are required to meet, and thus serves as a shared starting point. The Quality Code will be officially in use in the coming academic year 2012-13. It reflects the diversity of QAA's roles and the degree to which quality assurance in the UK is developed and elaborated so far as compared to all European countries. The Quality Code provides the following[17]:

1) The Quality Code defines the **framework for higher education qualifications** (FHEQ) in England, Wales and Northern Ireland. The FHEQ primarily provide important points of reference for setting and assessing academic standards to higher education providers and their external examiners. As a result, the FHEQ should enable higher education providers to communicate to employers; schools; parents; prospective students; professional, statutory and regulatory bodies; and other stakeholders for the achievements and attributes represented by the typical higher education qualification titles.

   QAA auditors and reviewers use the FHEQ as a reference point when auditing or reviewing the establishment and management of academic standards by higher education providers. In particular, auditors and reviewers look at how institutions align the academic standards of their awards with the levels referred to in the FHEQ.

   The Quality Code sets out the following *Expectation* about the use of qualification frameworks which higher education institutions are required to meet: *Each qualification (including those awarded under collaborative arrangements) is allocated to the appropriate level in the FHEQ.*

2) The Quality Code defines the subject **benchmark statements** which have been developed by QAA in consultation with the sector, and which set out guidance about standards of degrees in a range of subject areas. They provide general guidance for articulating the learning outcomes associated with the programme but are not a specification of a detailed curriculum in the subject. Subject benchmark statements also provide support to HEIs in pursuit of internal quality assurance. They enable the learning outcomes specified for a

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[17] The points following are quoted from the Quality Code.

particular programme to be reviewed and evaluated against agreed general expectations about standards.

The Quality Code sets out the following *Expectation* about the subject and qualification level which higher education institutions are required to meet: *All higher education programmes of study take account of relevant subject and qualification benchmark statements.*

3) The Quality Code deals with the **design of programmes**, specifically the design of programme specifications. It also provides a series of prompts for institutions to consider when determining their own guidance on programme design and for providers to use when working with institutional processes in this area.
The Quality Code sets out the following *Expectation* about the programme level, which higher education institutions are required to meet: *Higher education providers make available definitive information on the aims, intended learning outcomes and expected learner achievements for a programme of study.*

4) The Quality Code provides expectations about **programme approval and review** which higher education institutions are required to meet: *Higher education providers have in place effective processes to approve and periodically review the validity and relevance of programmes.*

5) The Quality Code sets out the following *Expectation* about the **assessment of intended learning outcomes** which higher education institutions are required to meet: *Higher education providers ensure the assessment of students is robust, valid and reliable and that the award of qualifications and credit are based on the achievement of the intended learning outcomes.*

The review involves a thorough evaluation of the institution's educational provision, and the results are documented in a published report that makes judgments and recommendations about academic standards and quality, as well as highlights the good practices followed by the HEI.

This method of institutional review is very recent and was launched in the academic year 2011-12, replacing the previously used method of Institutional Audit. The core aim of the Institutional Review is to examine whether universities and higher education institutions:

- provide higher education qualifications of an appropriate academic standard and a student experience of acceptable quality; and
- exercise their legal powers to award degrees (where relevant) in a proper manner.

The review team makes judgments on how the institution:

- sets and maintains threshold academic standards[18]
- manages the quality of students' learning opportunities

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[18] **Threshold academic standard**: the minimum standard that a student should reach in order to gain a particular qualification or award, as set out in the subject benchmark statements and national qualifications frameworks. Threshold standards are distinct from the standards of performance that students need to achieve in order to gain any particular class of award, for example a first-class bachelor's degree.

- enhances its educational provision
- manages the quality of its public information .

These judgments have four grades that can be awarded: 'is commended', 'meets UK expectations', 'requires improvement to meet UK expectations', and 'does not meet UK expectations'.

Each higher education institution in England and Northern Ireland should undergo an Institutional Review once in approximately every six years. Reports for each institution would then be published on the QAA website.

QAA schedules the review, deals with all administrative aspects, and appoints the review team. The number of review team members may vary, but typically is around five members. One of the reviewers should be a student, and all the members should have experience of, or professional expertise in, UK higher education. There is also an institutional facilitator who, with a lead student representative, liaises between the review team and the institution. QAA appoints an officer who is responsible for managing the review, collating the findings and writing a report.

Institutions should submit evidence electronically to QAA in advance, including a self-evaluation document and a statement from the students - the student written submission. QAA reviewers make a preliminary visit to the institution (that lasts for a day and a half). The review visit itself takes three to five days, during which the team gathers all the evidence it needs for the report on the HEI[19].

According to the Handbook of Institutional Review of Higher Education[20], the self-evaluation document (SED) should indicate how the institution's policies, processes and structures relate to all levels of its provision: undergraduate, taught postgraduate and research postgraduate. It should include the following six sections:

- Section 1: Brief description of the institution (2 pages)
- Section 2: How the institution has addressed the recommendations of its last audits/review(s) (2 pages)
- Section 3: The institution's threshold academic standards
- Section 4: The quality of students' learning opportunities (teaching and academic support)
- Section 5: The quality of information about the learning opportunities offered, including that produced for prospective and current students
- Section 6: The institution's enhancement of students' learning opportunities

c. The "Standards"

The QAA uses the term "expectations". Each expectation is stated in the following manner: "The Quality Code sets out the following Expectation about (…), which higher education

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[19] http://www.qaa.ac.uk/InstitutionReports/types-of-review/Pages/default.aspx

[20] QAA, Institutional Review of Higher Education Institutions in England and Northern Ireland A handbook for higher education providers March 2012, Second edition

providers are required to meet", and is then followed by a statement. There are 12 basic expectations, each with its own statement, as seen in the box below:

Expectation about:	Statement:
1. Programme design and approval	Higher education providers have effective processes for the design and approval of programmes.
2. Student Admissions	Policies and procedures used to admit students are clear, fair, explicit and consistently applied.
3. Learning and teaching	Higher education providers implement appropriate strategies for learning and teaching.
4. Student support, learning resources and careers education, information, advice and guidance	Higher education providers have effective arrangements in place to support students in their learning.
5. Student engagement	Higher education providers take deliberate steps to engage all students, individually and collectively, as partners in the assurance and enhancement of their educational experience.
6. Assessment of students and accreditation of prior learning	Higher education providers ensure that students have appropriate opportunities to show they have achieved the intended learning outcomes for the award of a qualification or credit.
7. External examining	Higher education providers make scrupulous use of external examiners.
8. Programme monitoring and review	Higher education providers have effective procedures in place to routinely monitor and periodically review programmes.
9. Complaints and appeals	Higher education providers have fair, effective and timely procedures for handling students' complaints and academic appeals.
10. Management of collaborative arrangements	Higher education providers have effective processes for the management of collaborative provision.
11. Research degrees	Research degrees are awarded in a research environment that provides secure academic standards for doing research and learning about research approaches, methods, procedures and protocols. This environment offers students quality of opportunities and the support they need to achieve successful academic, personal and professional outcomes from their research degrees.
12. Information about higher education provision	Higher education providers produce information for their intended audiences about the learning opportunities they offer that is fit for purpose, accessible and trustworthy.

Source: The Quality Code, part B, chapters: B1, B2, B3, B4, B5, B6, B7, B8, B9, B10, B11 and part C See http://www.qaa.ac.uk/AssuringStandardsAndQuality/quality-code/Pages/default.aspx

For each expectation there are a number of indicators (see table 9). For example there are 12 indicators for Expectation number 2 about Student admissions. Six of the indicators are provided in the box below as a sample:

Expectation on:

Student Admissions: Policies and procedures used to admit students are clear, fair, explicit and consistently applied.

Indicator 1: Institutions have policies and procedures for the recruitment and admission of students to higher education that are fair, clear and explicit and are implemented consistently.

Indicator 2: Institutions' decisions regarding admissions to higher education are made by those equipped to make the required judgments and competent to undertake their roles and responsibilities.
Indicator 3: Institutions' promotional materials and activities are accurate, relevant, current, accessible and provide information that will enable applicants to make informed decisions about their options.
Indicator 4: Institutions' selection policies and procedures are clear and are followed fairly, courteously, consistently and expeditiously. Transparent entry requirements, both academic and non-academic, are used to underpin judgments made during the selection process for entry.
Indicator 5: Institutions conduct their admissions processes efficiently, effectively and courteously according to fully documented operational procedures that are readily accessible to all those involved in the admissions process, both within and without the institution, applicants and their advisers.
Indicator 6: Institutions inform applicants of the obligations placed on prospective students at the time the offer of a place is made.
(…)

In general the Expectation statements (and indicators) are about conditions, procedures and policies rather than about pre-established norms.

d. Conclusions from the UK

Although QAA is not a public body, it plays central roles in assuring and enhancing the quality of higher education institutions in the UK. These roles include the production of the framework for higher education qualifications (FHEQ), the development of subject benchmark statements which set out guidance about standards of degrees in a wide range of subject areas, the conditions of programmes' design, approval and review, and of assessment of intended learning outcomes, in addition to the Handbook of Institutional Review of Higher Education including the self-evaluation document (SED). QAA undertakes the institutional reviews, reports the results, identifies good practice and makes recommendations for improvement.

The UK model has the following features:

a) There is no bipolarization between "internal" and "external" quality assurance.

b) Research has a place among the Expectations

c) The term "standards" is used to mean academic standard of the institution, in connection with a specific terminology including benchmarks, qualifications, intended learning outcomes, etc

d) There is focus in the institutional review on students (admissions, learning, support, etc), pedagogical and managerial aspects of teaching.

Although the UK standards (expectations) are institutional in nature, they in fact deal with quality of programs and degrees rather than with institutional aspects such as governance, resources (physical, financial and human), environment, partnership and the like. In other terms the emphasis is put on pedagogical aspects more than on managerial ones. When compared with the French system for example, the UK standards deal less with principles and approaches.

Table 9: Expectations and Indicators in the UK system

Expectations and Indicators

1. Programme design and approval:
Higher education providers have effective processes for the design and approval of programmes.

Indicator 1: Institutions ensure that their responsibilities for standards and quality are discharged effectively through their procedures for the design and approval of programmes.

Indicator 2: Institutions ensure that the overriding responsibility of the academic authority (for example senate or academic board) to set, maintain and assure standards is respected and that any delegation of power by the academic authority to approve programmes is properly defined and exercised.

Indicator 3: Institutions make use of external participation at key stages for the approval of programmes, as independence and objectivity are essential to provide confidence that the standards and quality of the programmes are appropriate.

Indicator 4: Approval processes are clearly described and communicated to those who are involved in them.

Indicator 5: Institutions publish, or make available, the principles to be considered when programmes are designed and developed, the fulfillment of which will be tested at the approval stage.

Indicator 6: Institutions ensure that programme approval decisions are informed by full consideration of academic standards and of the appropriateness of the learning opportunities which will be offered to students, and that:
- The final decision to approve a programme is taken by the academic authority, or a body acting on its behalf that is independent of the academic department, or other unit that offers the programme, and has access to any necessary specialist advice
- There is a confirmation process, which demonstrates that a programme has fulfilled any conditions set out during the approval process and that due consideration has been given to any recommendations.

Indicator 7: Institutions have a means of assessing the effectiveness of their programme design, approval, monitoring and review practices.

2. Student Admissions:
Policies and procedures used to admit students are clear, fair, explicit and consistently applied.

Indicator 1: Institutions have policies and procedures for the recruitment and admission of students to higher education that are fair, clear and explicit and are implemented consistently.

Indicator 2: Institutions' decisions regarding admissions to higher education are made by those equipped to make the required judgments and competent to undertake their roles and responsibilities.

Indicator 3: Institutions' promotional materials and activities are accurate, relevant, current, accessible and provide information that will enable applicants to make informed decisions about their options.

Indicator 4: Institutions' selection policies and procedures are clear and are followed fairly, courteously, consistently and expeditiously. Transparent entry requirements, both academic and non-academic, are used to underpin judgments made during the selection process for entry.

Indicator 5: Institutions conduct their admissions processes efficiently, effectively and courteously according to fully documented operational procedures that are readily accessible to all those involved in the admissions process, both within and without the institution, applicants and their advisers.

Indicator 6: Institutions inform applicants of the obligations placed on prospective students at the time the offer of a place is made.

Indicator 7: Institutions inform prospective students, at the earliest opportunity, of any significant changes to a programme made between the time the offer of a place is made and registration is completed, and that they are advised of the options available in the circumstances.

Indicator 8: Institutions explain to applicants who have accepted a place arrangement for the enrolment, registration, induction and orientation of new students and ensure that these arrangements promote efficient and effective integration of entrants fully as students.

Indicator 9: Institutions consider the most effective and efficient arrangements for providing feedback to applicants who have not been offered a place.

Indicator 10: Institutions have policies and procedures in place for responding to applicants' complaints about the operation of their admissions process and ensure that all staff involved with admissions are familiar with the

Expectations and Indicators
policies and procedures.
Indicator 11: Institutions have policies in place for responding to applicants' appeals against the outcome of a selection decision that make clear to all staff and applicants whether, and if so, on what grounds, any such appeals may be considered.
Indicator 12: Institutions regularly review their policies and procedures related to student admissions to higher education to ensure that they continue to support the mission and strategic objectives of the institution, and that they remain current and valid in the light of changing circumstances.

3. Learning and teaching:
Higher education providers implement appropriate strategies for learning and teaching.

Flexible and distributed Learning (FDL)

Indicator 1: The academic standards of all awards made under a FDL arrangement should meet the Expectations of the Quality Code.
Indicator 2: The awarding institution should inform any professional, statutory and regulatory body (PSRB), which has approved or recognized a programme that is the subject of a possible or actual FDL arrangement, of its proposals and of any final agreements which involve the programme. The status of the programme in respect of PSRB recognition should be made clear to prospective students.
Indicator 3: FDL arrangements should be fully costed and should be accounted for accurately and fully.
Indicator 4: The scope, coverage and assessment strategy of a FDL programme should be described in a programme specification that refers to relevant subject benchmark statements and the level of award, and that is readily available and comprehensible to stakeholders.
Indicator 5: The awarding institution should ensure that arrangements for admission to the FDL programme take into account the Expectations and Indicators of *Chapter B2: Admissions* of the Quality Code.
Indicator 6: The awarding institution is responsible for ensuring that the outcomes of assessment for a programme provided under a FDL arrangement meet the specified academic level of the award as defined in the FHEQ (or SCQF in Scotland), in the context of the relevant subject benchmark statement(s).
Indicator 7: External examining procedures for programmes offered through FDL arrangements should be consistent with the awarding institution's normal practices.
Indicator 8: External examiners of FDL programmes must receive briefing and guidance approved by the awarding institution sufficient for them to fulfill their role effectively.
Indicator 9: The minimum level of information that prospective and registered students should have about a FDL programme is the programme specification approved by the awarding institution.
Indicator 10: The information made available to prospective students and those registered on a FDL programme should include information to students about the appropriate channels for particular concerns, complaints and appeals, making clear the channels through which they can contact the awarding institution directly.
Indicator 11: The awarding institution should monitor regularly the information given by the partner organization or agent to prospective students and those registered on a FDL programme.
Indicator 12: The awarding institution should ensure that it has effective control over the accuracy of all public information, publicity and promotional activity relating to its provision offered through FDL arrangements.
Indicator 13: Students should have access to: • documents that set out the respective responsibilities of the awarding institution and the programme presenter for the delivery of an FDL programme or element of study • descriptions of the component units or modules of an FDL programme or element of study, to show the intended learning outcomes and teaching, learning and assessment methods of the unit or module • a clear schedule for the delivery of their study materials and for assessment of their work.
Indicator 14: The awarding institution, whether or not working through a programme presenter, should ensure that students can be confident that: • any FDL programme or element offered for study has had the reliability of its delivery system tested, and that contingency plans would come into operation in the event of the failure of the designed modes of delivery • the delivery system of an FDL programme or element of study delivered through e-learning methods is fit for

Expectations and Indicators

its purpose, and has an appropriate availability and life expectancy
- the delivery of any study materials direct to students remotely through, for example, e-learning methods or correspondence, is secure and reliable, and that there is a means of confirming its safe receipt
- study materials, whether delivered through staff of a programme presenter or through web-based or other distribution channels, meet specified expectations of the awarding institution in respect of the quality of teaching and learning support material for a programme or element of study leading to one of its awards
- the educational aims and intended learning outcomes of a programme delivered through FDL arrangements are reviewed periodically for their continuing validity and relevance, making reference to the Indicators of *Chapter B8: Programme monitoring and review* of the Quality Code.

Indicator 15: Prospective students should receive a clear and realistic explanation of the expectations placed upon them for study of the FDL programme or elements of study, and for the nature and extent of autonomous, collaborative and supported aspects of learning.

Indicator 16: Students should have access to:
- a schedule for any learner support available to them through timetabled activities, for example tutorial sessions or web-based conferences
- clear and up to date information about the learning support available to them locally and remotely for their FDL programme or elements of study
- documents that set out their own responsibilities as learners, and the commitments of the awarding institution and the support provider (if appropriate) for the support of an FDL programme or element of study.

Indicator 17: Students should have:
- from the outset of their study, an identified contact, either local or remote through email, telephone, fax or post, who can give them constructive feedback on academic performance and authoritative guidance on their academic progression
- where appropriate, regular opportunities for inter-learner discussions about the programme, both to facilitate collaborative learning and to provide a basis for facilitating their participation in the quality assurance of the programme
- appropriate opportunities to give formal feedback on their experience of the programme.

Indicator 18: The awarding institution, whether or not working through a support provider, should be able to ensure that students can be confident that:
- staff who provide support to learners on FDL programmes have appropriate skills, and receive appropriate training and development
- support for learners, whether delivered through staff of a support provider or through web-based or other distribution channels, meets specified expectations of the awarding institution for the quality of learner support for a programme of study leading to one of its awards.

Indicator 19: Students should have access to:
- information on the ways in which their achievements will be judged, and the relative weighting of units, modules or elements of the programme in respect of assessment overall
- timely formative assessment on their academic performance to provide a basis for individual constructive feedback and guidance, and to illustrate the awarding institution's expectations for summative assessment.

Indicator 20: The awarding institution, whether or not working through a programme presenter or support provider, should ensure that students can be confident that:
- their assessed work is properly attributed to them, particularly in cases where the assessment is conducted through remote methods that might be vulnerable to interception or other interference
- those with responsibility for assessment are capable of confirming that a student's assessed work is the original work of that student only, particularly in cases where the assessment is conducted through remote methods
- any mechanisms, such as web-based methods or correspondence, for the transfer of their work directly to assessors, are secure and reliable, and that there is a means of proving or confirming the safe receipt of their work.

Work-based and placement learning

Expectations and Indicators

Indicator 1: Where work-based or placement learning is part of a programme of study, awarding institutions ensure that its learning outcomes are:
- clearly identified
- contribute to the overall and coherent aims of their programme,
- assessed appropriately.

Indicator 2: Awarding institutions are responsible for the academic standards of their awards and the quality of provision leading to them, and have in place policies and procedures to ensure that their responsibilities, and those of their partners involved in work-based and placement learning, are clearly identified and met.

Indicator 3: Awarding institutions ensure that all partners providing work-based and placement learning opportunities are fully aware of their related and specific responsibilities, and that the learning opportunities provided by them are appropriate.

Indicator 4: Awarding institutions inform students of their specific responsibilities and entitlements relating to their work-based and placement learning.

Indicator 5: Awarding institutions provide students with appropriate and timely information, support and guidance prior to, throughout and following their work-based and placement learning.

Indicator 6: Awarding institutions ensure that work-based and placement learning partners are provided with appropriate and timely information prior to, throughout and following the students' work-based and placement learning.

Indicator 7: Awarding institutions ensure that:
- their staff involved in work-based and placement learning are appropriately qualified, resourced and competent to fulfill their role(s)
- where applicable, other educational providers, work-based and placement learning partners have effective measures in place to monitor and assure the proficiency of their staff involved in the support of the relevant work-based and placement learning.

Indicator 8: Awarding institutions have policies and procedures for securing, monitoring, administering and reviewing work-based and placement learning that are effective and reviewed regularly.

4. Student support, learning resources and careers education, information, advice and guidance:
Higher education providers have effective arrangements in place to support students in their learning.

Section 1

Indicator 1: Institutions ensure that career education, information, advice and guidance (CEIAG) interests contribute to their approaches to strategic planning.

Indicator 2: Institutions are responsible for ensuring that CEIAG is provided and have in place policies and procedures where their responsibilities are clearly defined and met.

Indicator 3: CEIAG provision is guided by a commitment to impartiality and the needs of individual students.

Indicator 4: Where career education is embedded in the curriculum, awarding institutions ensure that intended learning outcomes:
- contribute to the aims and objectives of the programme
- clearly identify knowledge, understanding and skills
- are assessed appropriately.

Indicator 5: Institutions promote internal collaboration and understanding of individual responsibilities in order to encourage student engagement in CEIAG.

Indicator 6: Institutions provide students with information about the extent and range of CEIAG services available to them before, during and after their time registered at the institution.

Indicator 7: Institutions make it clear to prospective and current students how the knowledge, understanding and skills acquired during study are intended to be of use to them in the development of their future academic or career progression routes.

Indicator 8: Institutions promote and practice close collaboration between a range of external bodies and CEIAG providers to improve the academic and career development of students.

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Indicator 9: CEIAG provision is responsive to and guided by developments and trends in the UK and global employment market.
Indicator 10: Institutions ensure that all members of staff across the institution involved with providing CEIAG are appropriately supported and resourced to fulfill the CEIAG elements of their roles.
Indicator 11: Awarding institutions ensure that CEIAG provision forms part of the institution's quality assurance and enhancement processes.
Indicator 12: Providers of CEIAG account formally and regularly for the quality and standards of their services with the objective of promoting continuous improvement.
Indicator 13: Awarding institutions use relevant data and information to inform its CEIAG provision.
Section 2
Indicator 1: The educational disadvantage and exclusion faced by many disabled people is not an inevitable result of their impairments or health conditions, but arises from social, attitudinal and environmental barriers. Institutions ensure that in all their policies, procedures and activities, including strategic planning and resource allocation, consideration is given to the removal of such barriers in order to enable disabled students to participate in all aspects of the academic and social life of the institution.
Indicator 2: Senior managers, including those at the highest levels, lead their institution's development of inclusive policy and practice in relation to the enhancement of disabled students' experience across the institution.
Indicator 3: Information is collected by institutions on disclosure of impairments and is used appropriately to monitor the applications, admissions and academic progress of disabled students.
Indicator 4: Institutions operate systems to monitor the effectiveness of provision for disabled students, evaluate progress and identify opportunities for enhancement.
Indicator 5: Institutions enable staff to participate in a range of continuing professional development activities in order to enhance their knowledge, reflect upon and develop their practice, and contribute towards a fully inclusive institutional culture.
Indicator 6: The institution's publicity, programme details and general information are accessible and include explanations of how the entitlements of disabled students are met.
Indicator 7: The operation of admissions processes and application of entry criteria include consideration of the duty to promote disability equality.
Indicator 8: Disabled applicants' requirements are identified and assessed in an effective and timely way, taking into account the applicants' views.
Indicator 9: Arrangements for enrolment, registration and induction of new entrants meet the entitlements of disabled students.
Indicator 10: The design of new programmes and the review and/or revalidation of existing programmes include assessment of the extent to which the programme is inclusive of disabled students.
Indicator 11: Both the design and implementation of learning and teaching strategies and related activities, as well as the learning environment, recognize the entitlement of disabled students to participate in all activities provided as part of their programme of study.
Indicator 12: Academic assessment practices ensure that disabled students are given the opportunity to demonstrate the achievement of learning outcomes and competence standards.
Indicator 13: Academic support and guidance are accessible and appropriate for disabled students.
Indicator 14: Institutions have in place the capacity to investigate the range of ways in which disabled students can be aided by ICT and to provide students and staff with the information to enable them to make the best use of assistive technologies.
Indicator 15: Disabled students have access to the full range of student services that are provided by the institution.
Indicator 16: Institutions ensure that there are sufficient designated members of staff with appropriate skills and experience to provide specialist advice and support to disabled applicants and students and to the staff who work with them.
Indicator 17: Disabled students have access to careers education, information and guidance that supports their

Expectations and Indicators
progression to employment or further study.
Indicator 18: All students are able to access the physical environment in which they will study, learn, live and take part in the social life of their institution.
Indicator 19: Institutions ensure that facilities and equipment are as accessible as possible to disabled students.
Indicator 20: Institutions ensure that information about all policies and procedures that affect students' ability to complete their studies and assessments is available in accessible formats and communicated to students.
Indicator 21: Institutions ensure that policies and procedures are operated in a way which does not lead to disadvantages to disabled students that arise from the nature of an impairment.

5. Student engagement:

Higher education providers take deliberate steps to engage all students, individually and collectively, as partners in the assurance and enhancement of their educational experience.

Indicator 1: Higher education providers, in partnership with their student body, define and promote the range of opportunities for any student to engage in educational enhancement and quality assurance.
Indicator 2: Higher education providers create and maintain an environment within which students and staff engage in discussions that aim to bring about demonstrable enhancement of the educational experience.
Indicator 3: Arrangements exist for the effective representation of the collective student voice at all organizational levels, and these arrangements provide opportunities for all students to be heard.
Indicator 4: Higher education providers ensure that student representatives and staff have access to training and ongoing support to equip them to fulfill their roles in educational enhancement and quality assurance effectively.
Indicator 5: Students and staff engage in evidence-based discussions based on the mutual sharing of information.
Indicator 6: Staff and students to disseminate and jointly recognize the enhancements made to the student educational experience, and the efforts of students in achieving these successes.
Indicator 7: The effectiveness of student engagement is monitored and reviewed at least annually, using pre-defined key performance indicators, and policies and processes enhanced where required.

6. Assessment of students and accreditation of prior learning:

Higher education providers ensure that students have appropriate opportunities to show they have achieved the intended learning outcomes for the award of a qualification or credit.

Indicator 1: As bodies responsible for the academic standards of awards made in their name, institutions have effective procedures for:
   i. designing, approving, monitoring and reviewing the assessment strategies for programmes and awards
  ii. implementing rigorous assessment policies and practices that ensure the standard for each award and award element is set and maintained at the appropriate level, and that student performance is properly judged against this
 iii. evaluating how academic standards are maintained through assessment practice that also encourages effective learning.

Indicator 2: Institutions publicize and implement principles and procedures for, and processes of, assessment that are explicit, valid and reliable.
Indicator 3: Institutions encourage assessment practice that promotes effective learning
Indicator 4: Institutions publicize and implement effective, clear and consistent policies for the membership, procedures, powers and accountability of assessment panels and boards of examiners.
Indicator 5: Institutions ensure that assessment is conducted with rigour, probity and fairness and with due regard for security.
Indicator 6: Institutions ensure that the amount and timing of assessment enables effective and appropriate measurement of students' achievement of intended learning outcomes.
Indicator 7: Institutions have transparent and fair mechanisms for marking and for moderating marks.
Indicator 8: Institutions publicize and implement clear rules and regulations for progressing from one stage of a programme to another and for qualifying for an award.
Indicator 9: Institutions provide appropriate and timely feedback to students on assessed work in a way that

Expectations and Indicators
promotes learning and facilitates improvement but does not increase the burden of assessment.
Indicator 10: Institutions ensure that everyone involved in the assessment of students is competent to undertake their roles and responsibilities.
Indicator 11: The languages used in teaching and assessment are normally the same. If, for any reason, this is not possible, institutions ensure that their academic standards are not consequently put at risk.
Indicator 12: Institutions provide clear information to staff and students about specific assessment outcomes or other criteria that must be met to fulfill the requirements of PSRBs.
Indicator 13: Institutions review and amend assessment regulations periodically, as appropriate, to assure themselves that the regulations remain fit for purpose.
Indicator 14: Institutions encourage students to adopt good academic conduct in respect of assessment and seek to ensure they are aware of their responsibilities.
Indicator 15: Institutions ensure that assessment decisions are recorded and documented accurately and systematically and that the decisions of relevant assessment panels and examination boards are communicated as quickly as possible.
7. External examining: Higher education providers make scrupulous use of external examiners.
Indicator 1: Awarding institutions appoint one or more external examiner(s) to carry out the role(s) defined in this Chapter for all provision that leads to a higher education award of the institution.
Indicator 2: Awarding institutions expect their external examiners to provide informative comment and recommendations upon whether or not: • an institution is maintaining the threshold academic standards set for its awards   in accordance with the frameworks for higher education qualifications and applicable subject benchmark statements   • the assessment process measures student achievement rigorously and fairly against the intended outcomes of the programme(s) and is conducted in line with the institution's policies and regulations   • the academic standards and the achievements of students are comparable with those in other UK higher education institutions of which the external examiners have experience.
Indicator 3: Awarding institutions expect their external examiners to provide informative comment and recommendations on: • good practice and innovation relating to learning, teaching and assessment observed by the external examiners   • opportunities to enhance the quality of the learning opportunities provided to students.
Indicator 4: Institutions have explicit policies and regulations governing the nomination and appointment of external examiners. Institutions can terminate an external examiner's appointment at any time, subject to approved institutional procedures, for failure by the external examiner to fulfill his/her obligations or if a conflict of interest arises which cannot be satisfactorily resolved.
Indicator 5: Institutions apply the following UK-wide set of criteria for appointing external examiners and make every effort to ensure that their external examiners are competent to undertake the responsibilities defined by the institution.   Institutions use the criteria to ensure that potential conflicts of interest are identified and resolved prior to appointing external examiners or as soon as they arise.
Indicator 6: Institutions ensure that all external examiners they appoint are informed about organizational procedures, practices, and academic regulations, and the crucial value of external examiners' feedback to the institution as part of the broader system of quality assurance and enhancement.
Indicator 7: Institutions communicate clearly in writing to all concerned the: • modules, programmes and/or award(s) to which each external examiner is appointed   • various roles, powers and responsibilities assigned to their external examiners, including the extent of their authority in examination boards.
Indicator 8: Institutions include the name, position and institution of their external examiners in module or

Expectations and Indicators
programme information provided to students.
Indicator 9: Prior to the confirmation of mark lists, pass lists or similar documents, institutions expect external examiners to endorse the outcomes of the assessment processes they have been appointed to scrutinize.
Indicator 10: Institutions provide external examiners with sufficient evidence to enable them to discharge their responsibilities.
Indicator 11: Institutions recognize the importance, and mutual benefit, of the work undertaken by many of their staff as external examiners for other institutions and agree with staff the time they need to fulfill these duties.
Indicator 12: External examiners submit a report annually, at a time determined by the institution, to the head of the institution or to one or more named individuals that he/she designates.

Indicator 13: External examiners' annual reports provide clear and informative feedback to the institution on those areas defined for the role in Indicators 2 and 3 (the core content).
In addition, their reports:
  • confirm that sufficient evidence was received to enable the role to be fulfilled (where evidence was insufficient, they give details)
  • state whether issues raised in the previous report(s) have been, or are being, addressed to their satisfaction
  • address any issues as specifically required by any relevant professional body
  • give an overview of their term of office (when concluded).

Indicator 14: Institutions make external examiners' annual reports available in full to students, with the sole exception of any confidential report made directly, and separately, to the head of the institution.
Indicator 15: At both institutional and subject/programme level, institutions give full and serious consideration to the comments and recommendations contained in external examiners' reports. The actions taken as a result of reports, or the reasons for not taking action, are formally recorded and circulated to those concerned. Institutions ensure that student representatives are given the opportunity to be fully involved in this process, enabling them to understand all the issues raised and the institution's response. At institutional level the general issues and themes arising from the reports are reviewed.
Indicator 16: Institutions provide external examiners with a considered and timely response to their comments and recommendations, outlining any actions they will be taking as a result of the reasons for not taking action.
Indicator 17: Institutions inform external examiners, in writing at the beginning of their term of office, that they have a right to raise any matter of serious concern with the head of the institution, if necessary by means of a separate confidential written report. Institutions provide a considered and timely response to any confidential report received, outlining any actions they will be taking as a result.
Indicator 18: Where an external examiner has a serious concern relating to systemic failings with the academic standards of a programme or programmes and has exhausted all published applicable internal procedures, including the submission of a confidential report to the head of the institution, he/she may invoke QAA's concerns scheme or inform the relevant professional, statutory or regulatory body.
8. Programme monitoring and review: Higher education providers have effective procedures in place to routinely monitor and periodically review programmes.
Indicator 1: Institutions ensure that their responsibilities for standards and quality are discharged effectively through their procedures for the monitoring and review of programmes.
Indicator 2: Institutions ensure that the overriding responsibility of the academic authority (for example senate or academic board) to set, maintain and assure standards is respected and that any delegation of power by the academic authority to review programmes is properly defined and exercised.
Indicator 3: Institutions make use of external participation at key stages for the review of programmes, as independence and objectivity are essential to provide confidence that the standards and quality of the programmes are appropriate.
Indicator 4: Monitoring and review processes are clearly described and communicated to those who are involved in them.
Indicator 5: Institutions routinely monitor (in an agreed cycle) the effectiveness of their programmes:

Expectations and Indicators

- to ensure that programmes remain current and valid in light of developing knowledge in the discipline, and practice in its application
- to evaluate the extent to which the intended learning outcomes are being attained by students
- to evaluate the continuing effectiveness of the curriculum and of assessment in relation to the intended learning outcomes
- to ensure that recommendations for appropriate actions are followed up to remedy any identified shortcomings.

Indicator 6: Institutions periodically undertake a broader review of the continuing validity and relevance of programmes offered.

Indicator 7: In the event of a decision to discontinue a programme, measures are taken to notify and protect the interests of students registered for, or accepted for admission to, the programme.

Indicator 8: Institutions have a means of assessing the effectiveness of their programme monitoring and review practices.

9. Complaints and appeals:

Higher education providers have fair, effective and timely procedures for handling students' complaints and academic appeals.

Indicator 1: Institutions have fair, effective and timely procedures for handling students' complaints and academic appeals.

Indicator 2: Institutions' complaints and appeals procedures are approved and overseen at the highest level.

Indicator 3: Institutions ensure that those studying at all levels have the opportunity to raise matters of concern without risk of disadvantage.

Indicator 4: Institutions make publicly available easily comprehensible information on their complaints and appeals procedures.

Indicator 5: Clear design of institutions' complaints and appeals procedures enables them to be conducted in a timely, fair and reasonable manner, and having regard to any applicable law.

Indicator 6: Institutions ensure that appropriate action is taken following a complaint or an appeal.

Indicator 7: Institutions satisfy themselves that appropriate guidance and support is available for persons making a complaint or an appeal, including those taking advantage of learning opportunities provided away from institutions and/or through flexible and distributed learning.

Indicator 8: Institutions make provision in their procedures for those making a complaint or an appeal to be accompanied at any stage, including formal hearings.

Indicator 9: Institutions have effective arrangements to monitor, evaluate and improve the effectiveness of their complaints and appeals procedures and to reflect on their outcomes for enhancement purposes.

Indicator 10: Institutions ensure that suitable briefing and support is provided for all staff and students involved in handling or supporting complaints and appeals.

10. Management of collaborative arrangements:

Higher education providers have effective processes for the management of collaborative provision.

Indicator 1: The awarding institution is responsible for the academic standards of all awards granted in its name.

Indicator 2: The academic standards of all awards made under a collaborative arrangement should meet the Expectations of the Quality Code.

Indicator 3: Collaborative arrangements should be negotiated, agreed and managed in accordance with the formally stated policies and procedures of the awarding institution.

Indicator 4: An up-to-date and authoritative record of the awarding institution's collaborative partnerships and agents, and a listing of its collaborative programmes operated through those partnerships or agencies should form part of the institution's publicly available information.

Indicator 5: The awarding institution should inform any professional, statutory and regulatory body (PSRB), which has approved or recognized a programme that is the subject of a possible or actual collaborative arrangement, of

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its proposals and of any final agreements which involve the programme. The status of the programme in respect of PSRB recognition should be made clear to prospective students.
Indicator 6: The awarding institution's policies and procedures should ensure that there are adequate safeguards against financial or other temptations that might compromise academic standards or the quality of learning opportunities.
Indicator 7: Collaborative arrangements should be fully costed and should be accounted for accurately and fully.
Indicator 8: The educational objectives of a partner organization should be compatible with those of the awarding institution.
Indicator 9: An awarding institution should undertake, with due diligence, an investigation to satisfy itself about the good standing of a prospective partner or agent, and of their capacity to fulfill their designated role in the arrangement. This investigation should include the legal status of the prospective partner or agent, and its capacity in law to contract with the awarding institution.
Indicator 10: There should be a written and legally binding agreement or contract setting out the rights and obligations of the parties and signed by the authorized representatives of the awarding institution and the partner organization or agent.
Indicator 11: The agreement or contract should make clear that any serial arrangement whereby the partner organization offers approved collaborative provision elsewhere or assigns, through an arrangement of its own, powers delegated to it by the awarding institution, may be undertaken only with the express written permission of the awarding institution in each instance. The awarding institution is responsible for ensuring that it retains proper control of the academic standards of awards offered through any such arrangements.
Indicator 12: The awarding institution is ultimately responsible for ensuring that the quality of learning opportunities offered through a collaborative arrangement is adequate to enable a student to achieve the academic standard required for its award.
Indicator 13: An awarding institution that engages with another authorized awarding body jointly to provide a programme of study leading to a dual or joint academic award should be able to satisfy itself that it has the legal capacity to do so, and that the academic standard of the award, referenced to the FHEQ (the SCQF in Scotland), meets its own expectations, irrespective of the expectations of the partner awarding body.
Indicator 14: The scope, coverage and assessment strategy of a collaborative programme should be described in a programme specification that refers to relevant subject benchmark statements and the level of award and that is readily available and comprehensible to stakeholders.
Indicator 15: The awarding institution should make appropriate use of the Quality Code to ensure that all aspects of the Quality Code relevant to the collaborative arrangement are The UK Quality Code for Higher Education addressed by itself and/or the partner organization, and should make clear respective responsibilities of the awarding institution and a partner organization in terms of addressing the Indicators of the Quality Code.
Indicator 16: In the case of a collaborative arrangement with a partner organization, or engagement with an agent, the awarding institution should be able to satisfy itself that the terms and conditions that were originally approved have been, and continue to be, met.
Indicator 17: The awarding institution should be able to satisfy itself that staff engaged in delivering or supporting a collaborative programme are appropriately qualified for their role, and that a partner organization has effective measures to monitor and assure the proficiency of such staff.
Indicator 18: The awarding institution should ensure that arrangements for admission to the collaborative programme take into account the Expectations and Indicators of *Chapter B2: Admissions* of the Quality Code.
Indicator 19: The awarding institution is responsible for ensuring that the outcomes of assessment for a programme provided under a collaborative arrangement meet the specified academic level of the award as defined in the FHEQ (or SCQF in Scotland), in the context of the relevant subject benchmark statement(s).
Indicator 20: The awarding institution should ensure that a partner organization involved in the assessment of students understands and follows the requirements approved by the awarding institution for the conduct of assessments, which themselves should be referenced to *Chapter A6: Assessment of achievement of learning outcomes*, and *Chapter B6: Assessment of students and accreditation of prior learning* of the Quality Code.

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Indicator 21: External examining procedures for programmes offered through collaborative arrangements should be consistent with the awarding institution's normal practices.

Indicator 22: The awarding institution must retain ultimate responsibility for the appointment and functions of external examiners. The recruitment and selection of external examiners should be referenced to *Chapter B7: External examining* of the Quality Code.

Indicator 23: External examiners of collaborative programmes must receive briefing and guidance approved by the awarding institution sufficient for them to fulfill their role effectively.

Indicator 24: An awarding institution should ensure that:
- it has sole authority for awarding certificates and transcripts relating to the programmes of study delivered through collaborative arrangements
- the certificate and/or transcript records (a) the principal language of instruction where this was not English, and (b) the language of assessment if that was not English (except for awards for programmes or their elements relating to the study of a foreign language where the principal language of assessment is also the language of study). Where this information is recorded on the transcript only, the certificate should refer to the existence of the transcript. References here to 'a foreign language' and 'a language that is not English' do not include programmes provided and assessed by Welsh institutions in the Welsh language
- subject to any overriding statutory or other legal provision in any relevant jurisdiction, the certificate and/or the transcript should record the name and location of any partner organization engaged in delivery of the programme of study.

Indicator 25: The minimum level of information that prospective and registered students should have about a collaborative programme is the programme specification approved by the awarding institution.

Indicator 26: The information made available to prospective students and those registered on a collaborative programme should include information to students about the appropriate channels for particular concerns, complaints and appeals, making clear the channels through which they can contact the awarding institution directly.

Indicator 27: The awarding institution should monitor regularly the information given by the partner organization or agent to prospective students and those registered on a collaborative programme.

Indicator 28: The awarding institution should ensure that it has effective control over the accuracy of all public information, publicity and promotional activity relating to its collaborative provision.

11. Research degrees:

Research degrees are awarded in a research environment that provides secure academic standards for doing research and learning about research approaches, methods, procedures and protocols. This environment offers students quality of opportunities and the support they need to achieve successful academic, personal and professional outcomes from their research degrees.

Indicator 1: Higher education providers that are research degree awarding bodies have regulations for research degrees that are clear and readily available to research students and staff, including examiners. Where appropriate, regulations are supplemented by similarly accessible, subject-specific guidance at the level of the faculty, school, department, and research centre or research institute.

Indicator 2: Higher education providers develop, implement and keep under review codes of practice for research degrees, which are widely applicable and help enable the higher education provider meet the Expectation of this Chapter. The codes are readily available to all students and staff involved in research degrees, and written in clear language understood by all users.

Indicator 3: Higher education providers monitor their research degree provision against internal and external indicators and targets that reflect the context in which research degrees are being offered.

Indicator 4: Higher education providers accept research students only into an environment that provides support for doing and learning about research, and where excellent research, recognized by the relevant subject community, is occurring.

Indicator 5: Higher education providers' admissions procedures for research degrees are clear, consistently applied and demonstrate equality of opportunity.

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Indicator 6: Only appropriately qualified and prepared applicants are admitted to research degree programmes. Admissions decisions involve at least two members of the higher education provider's staff who have received training and guidance for the selection and admission of research degree students. The decision-making process enables the higher education provider to assure itself that balanced and independent admissions decisions have been made in accordance with its admissions policy.

Indicator 7: Higher education providers define and communicate clearly the responsibilities and entitlements of students undertaking research degree programmes.

Indicator 8: Research students are provided with sufficient information to enable them to begin their studies with an understanding of the environment in which they will be working.

Indicator 9: Higher education providers appoint supervisors with the appropriate skills and subject knowledge to support and encourage research students, and to monitor their progress effectively.

Indicator 10: Each research student has a supervisory team containing a main supervisor who is the clearly identified point of contact.

Indicator 11: Higher education providers ensure that the responsibilities of research student supervisors are readily available and clearly communicated to supervisors and students.

Indicator 12: Higher education providers ensure that individual supervisors have sufficient time to carry out their responsibilities effectively.

Indicator 13: Higher education providers put in place clearly defined mechanisms for monitoring and supporting research student progress, including formal and explicit reviews of progress at different stages. Research students, supervisors and other relevant staff are made aware of progress monitoring mechanisms, including the importance of keeping appropriate records of the outcomes of meetings and related activities.

Indicator 14: Research students have appropriate opportunities for developing research, personal and professional skills. Each research student's development needs are identified and agreed jointly by the student and appropriate staff at the start of the degree; these are regularly reviewed and updated as appropriate.

Indicator 15: Higher education providers put in place mechanisms to collect, review and respond as appropriate to evaluations from those concerned with research degrees, including individual research students and groups of research students or their representatives. Evaluations are considered openly and constructively and the results are communicated appropriately.

Indicator 16: Higher education providers that are research degree awarding bodies use criteria for assessing research degrees that enable them to define their academic standards and the achievements of their graduates. The criteria used to assess research degrees are clear and readily available to research students, staff and examiners.

Indicator 17: Research degree final assessment procedures are clear and are operated rigorously, fairly and consistently. They include input from an external examiner and are carried out to a reasonable timescale. Assessment procedures are communicated clearly to research students, supervisors and examiners.

Indicator 18: Higher education providers put in place and promote independent and formal procedures for dealing with complaints and appeals that are fair, clear to all concerned, robust, and applied consistently. The acceptable grounds for complaints and appeals are clearly defined.

12. Information about higher education provision:

Higher education providers produce information for their intended audiences about the learning opportunities they offer that is fit for purpose, accessible and trustworthy.

Indicator 1: Higher education providers publish information that describes their mission, values and overall strategy.

Indicator 2: Higher education providers describe the process for application and admission to the programme of study.

Indicator 3: Higher education providers make available to prospective students information to help them select their programme with an understanding of the academic environment in which they will be studying and the support that will be made available to them.

Indicator 4: Information on the programme of study is made available to current students at the start of their

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programme and throughout their studies.
Indicator 5: Higher education providers set out what they expect of current students and what current students can expect of the higher education provider.
Indicator 6: When students leave their programme of study, higher education providers issue to them a detailed record of their studies, which gives evidence to others of the students' achievement in their academic programme.
Indicator 7: Higher education providers: • set out their framework for managing academic standards and quality assurance and enhancement and describe the data and information used to support its implementation • maintain records (by type and category) of all collaborative activity that is subject to a formal agreement.

PART 2: OPTIONS FOR LEBANON AND PROPOSED STANDARDS

III. OPTIONS FOR LEBANON

A. SUMMARY OF MAJOR TRENDS AND OPTIONS IN THE USA AND EUROPE

The USA and the four European countries (French Community of Belgium, France, Spain, and UK) deal with quality assurance in higher education in different manners. Each country developed its own model, based upon the country context and policy choices. It is not the role of this report to judge these models; rather we are attempting to understand the models with their peculiarities, to learn from the experience of each country, and to construe what options could be available for Lebanon from the survey of these international experiences.

We summarize these options into two groups – Model and procedures, and Standards:

1. MODEL AND PROCEDURES

Note first that in all the surveyed international experiences there is no mention of difference between public and non-public sectors.

In terms of **QA Orientation,** distinction is possible between two options:

1) *Program-oriented QA* (such as in Spain and the French Community of Belgium). Here program refers to major, department, and/or faculty; and QA includes all programs, professional and non-professional. In some cases transversal evaluation of programs is possible to undertake (French Community of Belgium), i.e. a field of study is chosen, individual program are evaluated, then a global synthesis of the situation of the evaluated programs and recommendations are submitted at the national level.

2) *Institution-oriented QA* (USA, France, UK).

In terms of **the role of the QA agency,** two major options are available**:**

1) *Formative quality evaluation:* QA agency role goes beyond the evaluation and might interfere with some of the MOHE functions; it shapes directly the HEIs/ the QA agency as an actor (French Community of Belgium, Spain, UK).

2) *Informative quality evaluation* (USA, France): QA agency role is limited to evaluation-reporting-recommendation; it has no authority on HEIs.

In terms of **Self-Study**, we have several appellations, such as self-study (USA), self-evaluation (UK), auto-evaluation (France). Options are for the **approach** of the self-study report, and these are as follows:

1) *Free report* (France),

2) *Descriptive information* (Spain),

3) *Descriptive and SWOT analysis* (French Community of Belgium),

4) *Standard-based report* (UK, USA).

5) In one case (UK) there is, in addition, a statement from the students - the *student written submission*.

In terms of **Site Visit**,

- The visitors are called:

1) *External examiners* (UK)

2) *Experts* (France, French Community of Belgium)

3) *Evaluators* (Spain)

4) *Reviewers* (UK) or *peer reviewers* (USA)

- The visitors do:

1) *Peer review* (USA)

2) *Evaluation* (all other countries)

In terms of **Final Report approach**, three alternatives are found:

1) *Diagnosis and recommendations* (French Community of Belgium, France)

2) *Analysis, recommendations and judgments* (UK, USA)

3) *Diagnosis and judgments leading to acceptance or cancellation of the programme* (Spain).

2. STANDARDS

In terms of **appellation** four options are found:

1) *Standards* (USA)

2) *Criteria* (France, Spain, USA)

3) *Indicators* (French Community of Belgium)

4) *Expectations* (UK)

In terms of **standards content,** the list deals with:

1) *Internal quality assurance* (IQA) procedures and conditions (Spain), or

2) *Elements* of the HEI (all countries), or

3) *Principles* (USA, France)

In terms of **standards statements,** we find the following options:

1) *List* of themes-outline, with no statements, including SWOT standard (French Community of Belgium)

2) *Normative statements* (France, Spain, USA)

Table 10. Summary of major trends and options in the U.S. and Europe

QA Options		U.S.A.	France	French Community of Belgium	Spain	U.K.
				Country		
Model and procedures	**QA Orientation**	Institution-oriented	Institution-oriented	Program-oriented	Program-oriented	Institution-oriented
	QAA role	Informative quality evaluation	Informative quality evaluation	Formative quality evaluation	Formative quality evaluation	Formative quality evaluation
	Self-Study	Standard-based report	Free report	Descriptive and SWOT analysis	Descriptive info	Standard-based report + student written submission
	Site Visit:					
	visitors called	peer reviewers	Experts	Experts	Evaluators	External examiners
	visitors do	Peer review	Evaluation	Evaluation	Evaluation	Evaluation
	Final Report approach	Analysis, recommendations & judgments	Diagnosis & recommendations	Diagnosis & recommendations	Diagnosis & judgments leading to acceptance or cancellation of programme	Analysis, recommendations & judgments
Standards	**Appellation**	Standards & Criteria	Criteria	Indicators	Criteria	Expectations
	Content	Elements of HEI; Principles	Elements of HEI; Principles	Elements of HEI	Internal quality assurance (IQA) procedures and conditions; Elements of HEI	Elements of HEI
	Statements	Normative statements	Normative statements	List of themes-outline/template, with no statements, including SWOT standard	Normative statements	Combination statements

B. LEBANESE CONTEXT-MAJOR FEATURES

1. QA AGENCY IS A PUBLIC INSTITUTION WHILE HEIS ARE MAINLY NON-PUBLIC

The QA agency in Lebanon will be a public body. The law to establish the Lebanese Quality Assurance Agency (LQAA) is at present in its long process to be approved by the Parliament.

The Lebanese higher education institutions, on the other hand, are mainly non-public ones. The Lebanese higher education system included 42 HEIs in 2011-2012, according to the Higher Education Directorate website[21]. There is only one public HEI, established in 1951. It is the oldest modern system in the region: 9 HEIs (22%) were established before 1960, including one in 1866 (AUB) and one in 1875 (USJ).

The system of non-public higher education is working under an old law that was issued in 1961. Two decrees were then issued in 1966 regulating the conditions under which new HEIs or faculties are licensed[22]. Efforts to issue a law taking into consideration the national and international evolvements in higher education were launched a decade ago, but failed to come out with real results. The latest attempt goes back to the year 2011, when the law was re-drafted, then approved by the council of ministers and transferred to parliament. At this date, almost eighteen months later, there is nothing to indicate that the law will be released anytime in the near future.

As for the Lebanese University (LU), it is run as well by an old law dating back to 1967, with some few amendments that took place some years later[23].

2. NON-PUBLIC SECTOR IS EXTREMELY DIVERSE

Out of the 41 non-public institutions in Lebanon there is only one Open University which is a branch of the regional Arab Open University that is based in Kuwait. There is no international cross-border institution, and there are only three small religious institutes. All other aspects mark the diversity of the system extreme.

In terms of **type**, 31 institutions have the status of University, and 10 have the status of University Institute of Technology or University College.

In terms of **affiliation**, the majority of the non-public HEIs (45%) are owned by religious associations and 14 (35%) are owned by non-religious associations. Lebanon is unique among the Arab countries in that non-profit HEIs are the rule and for-profit ones are the exception[24].

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[21] http://www.higher-edu.gov.lb/arabic/default.html
[22] Decree 8864 (1966) regarding the conditions for establishing Technological University Institute and the decree 9274 (1966) regarding the conditions, specification and norms requested to provide license to establish a private higher education institution or to create a faculty or an institute within an established HEI.
[23] Especially the law 66 of 2009 regulating the "representative councils".
[24] The Higher Education Law of 1961, which is still the base for establishing private HEIs, stipulates that the founder of an HEI should be a "moral personality" (i.e. an association) or a foreign institution qualified to establish an HEI in its country of origin. In practice, some associations and societies are used as cover-up for profit enterprises.

Although "private institution" is the term used officially and publically in Lebanon, and that these institutions are by law non-profit, we use here the term non-public, because "private" may vehicle for-profit meaning in the regional and international literature.

In terms of **size**, out of 37 HEIs analyzed by a recent IIE report, there are two HEIs in Lebanon that have less than 100 students (these are religious institutes), 9 have less than 500 (24%), 18 are "small" (less than 5,000), 8 have medium size (5,000-15,000), and one is considered to be "large" (15,000-30,000). The public university is the largest HEI in Lebanon with 72,323 students enrolled (2009-2010). [25]

In terms of **curriculum organization,** although the LMD system was adopted recently by French oriented HEIs, and thus the semester and credit systems are largely adopted by the HEIs in Lebanon, there are still some HEIs which follow the old annual system (6 HEIs), or which use a mixture of semester and annual system (5 HEIs).

Along the same vein teaching courses are organized differently. While the American credit system (ACS) is used by 58% of HEIs, and the European system (ETCS) is used by 10%, there are in addition those HEIs which still use the subject matter system (Old European system) (12%) and some which use a combination of systems (20%).

The combined situation in curricular organization (both semester/annual and courses/subject matter) could be a transitory situation, yet there are no national rules which impose the conversion to either ACS or ETCS. The conversion may take many years depending on the market, the public policy and the resistance to change.

This type of curricular organization, which is prevalent within a considerable number of HEIs, is basically a complex of historical and ideological factors. In Lebanon, like in any other country in the South, new structures and old patterns may intermarry, as an expression of welcoming the flow of globalization and the resistance against change. In other terms diversity does not only imply a horizontal variation of models but rather a superposition and interrelation of models, within the same institutions.

In this context **governance** could be considered as one of the most significant indicators of diversity. While one university has its board in the USA, a second has its board formed every year by a decree from the Egyptian minister of higher education, a third has the church as board, a fourth has a public confessional council as board, a fifth has the council of ministers as board, a sixth has no board or a formal one while authority is centralized in the hand of president/the owner, and the list runs on. This is only one element of the governance; its consequences on the whole decision-making process and the other elements of the organization are too multi-sided and complicated to be presented here.

In terms of **language**, Lebanon appears to be a micro-region, where all linguistic settings are found. The language adopted for administrative use varies: 24.4% of the HEIs use Arabic only, 24.5% use English only, 12.2% French only, and 39.0% use a combination of Arabic and one or more foreign language(s). Lebanon is linguistically diverse as well in the language used for

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[25] Bhandira, R. and ELAmine, A., (2012), **Higher Education Classification in the middle East and North Africa**, New York, Institute of International Education

teaching humanities and/or for teaching sciences[26]. Taken all settings together**,** administration, humanities and sciences, out of 41 HEIs, 13 are mono-lingual (2 Arabic, 8 English, 3 French), 17 are bi-lingual (2 Arabic-French, 13 Arabic-English, 2 French-English) and 11 are tri-lingual (26.8%).

In terms of **faculty ranking and promotion**, diversity takes many dimensions. Some HEIs have no published rules, or have no clear rules (the president may decide to give rank to a professor; the institution may rely only on "imported ranked professors", etc). Where ranks are known, they are differently defined. In some universities there are 4 ranks, in others there only 2 ranks (LU)[27]. The criteria of faculty publication evaluation are also different, in terms of language, place of publication, type of publication, and process of dossier evaluation, etc.

In terms of **student admissions,** holding a general secondary degree (given by the MOE upon national examination) is the rule to be eligible for access to any HEI. Yet legislations gave equivalence with this degree to the French Baccalaureate (FB), the International Baccalaureate (IB) and to the American High School degree (AHS) as equivalent to the 11th grade. At the beginning the equivalences were conditioned by residence and studying abroad, and gradually conditions were alleviated and some Lebanese schools were given the right to provide such degrees, always "conditioned". In fact thousands of Lebanese students apply every year to the FB, which is not conditioned.

In addition to the secondary degree (or its equivalence) as general requirement, HEIs may impose their own additional selective procedures (like entrance exams, specific grades, secondary school profile, etc). Among these there are international tests, such as the SAT and TOFEL.

Thus the students' input to the higher education institutions is diversified as well.

All the above mentioned forms, features and indicators of diversity in the system of higher education in Lebanon impose a paradox equation: the diversity of higher education in Lebanon is based on non-diversity within each HEI.

3. NON-DIVERSITY AND DISINTEGRATION RISKS

Before 1975, HEIs were located mainly in the capital, Beirut, the most socially mixed city in Lebanon. This exposed HEIs to a certain degree of social mix, especially in the Lebanese University. Because of the events of the 1975 war, HEIs started to open branches according to the geopolitical map inside and outside Beirut.

During the seventies-eighties-nineties period new HEIs started to open as well according to the same geographical map. According to a survey undertaken in 1998, only AUB was socially mixed

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[26] Ibid

[27] They are by law three ranks, but the lower one is based on the French *third cycle* doctorate, which disappeared more than 20 years ago. At LU any new PhD holder is directly ranked as associate professor; s/he has only one step to become full professor. Actually there is an evaluation procedure of the applicant doctorate where the reviewers classify it as "first category" or "second category", the holders of the formers got assistant rank, while the holders of the latter got associate rank.

(Muslim and Christian communities) after closing (in 1991) of its OCP[28] that was opened in Jbeil during the war (as a branch for AUB). The Lebanese University opened during that same period five geographical branches for most of its faculties, where the first two branches had mainly a geopolitical orientation (West-Beirut, East-Beirut) while the three other have mainly a geographical orientation (North, South and Bekaa). Although social mix increased in a limited number of universities, the general result of these developments was that each local branch or local institution could be considered as a homogeneous institution, where students, faculty and administrative staff relate to the same community.

The late nineties and the last decade witnessed a significant expansion in higher education which raised the number of students from 61,844 in 1990-91 to 119,463 (193.4%) in 2000-01 to 192,138 in 2010-11 (310.7 %). This expansion had three main features: 1) commercialization of higher education (market rules, globalization), 2) prevalence of the Anglo-American model, 3) more geographical involvement.

The geographical involvement contributed significantly to expanding the population of higher education and to including more students from remote areas and more female students in general. LU has now more than 70 geographical locations in different areas around Lebanon, middle and small cities included. In the same time this expansion contributed significantly to the homogenization trend of each institution. In sum the geographical expansion has raised questions about quality and social integration in higher education.

4. ANGLO-AMERICAN SYSTEM IS WIDENING

Most of the HEIs that were established after 1998 adopted the American model, and some even used the label "American" in their names. The prevalence of the American model, apparent in language of instruction, administration and curriculum organization, and even the openness of the French-oriented institutions to the English language and vocabulary may have created a certain common ground for quality assurance in the country.

5. MARKET RULES

The market rules imply addressing to "clients", in providing incentives and facilities, offering "suitable" provisions, targeting different social groups with acceptable fees, attracting especially those students coming from middle and lower classes, and targeting "clients" in different settings and areas. Market rules may have two different consequences: diversity of the institution population, and laisser-faire assumingly raising quality questions.

6. LU IS A PUBLIC INSTITUTION

As a public HEI, LU is run according to laws and decrees which define its structure, governance, programs, nomination of its president, deans, and faculty members, its yearly budget, its buildings and facilities, branches, etc. Moreover it is primarily defined as "autonomous, academically, administratively, and financially". The university is placed under the minister's tutelage: the minister of higher education is the mediator between the university and the

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[28] Off Campus Programme

council of ministers, and not a head of the university[29]. Accordingly the Directorate of Higher Education has no administrative relationship with or any authority on LU. Two consequences emerge from this status:

First, the actions of the QA agency, based on its standards, would be challenged by the LU laws and decrees in action. This is because of the fact that QA assumes that the HEI should be aware of its problems and be able to plan and implement the necessary improvements. In fact laws and decrees put the approval of major changes in LU on the shoulders of political structures (Council of Ministers and Parliament). So the President of the university and the University Council cannot guarantee any change requested by the LQAA on those matters beyond their power. In fact ideas on how to reform LU have been raised and deliberated from inside and outside the university, yet none found their way to be approved in more than twenty years of public discussion. What, in this case, would then be the action or the input of the national QA agency?

Second, during the process of elaboration of the draft law on national QA, the whole concept of QA seemed to be commonly understood as if it is dealing with the non-public sector only. This was attested by the relative absence of representatives from LU in the related activities. Public discourse insinuated that quality problems are found in the "commercial" and "ideological" non-public sector, and therefore QA is needed essentially in this sector. As for LU, that institution has separate problems which require "reform". The discourse pattern looks like the following: the State has to play a certain role in controlling the non-public sector, while it has to revise its own policy regarding LU, which is already under control.

All this means that: 1) The QA culture has to be re-elaborated if the national QA agency has to deal with both sectors while LU has to be involved in this re-elaboration: Should the QA agency use two sets of standards, one for the non-public and one for the public sector? Or should it have to adopt "light" standards to be contextualized for each HEI taking into consideration the diversity facts? 2) The national QA agency status should take into consideration the difference in status of LU and non-public sectors, as far as LU status in relation to the Directorate of Higher Education and the Minister of Higher Education is concerned.

7. PUBLIC UNIVERSITY IS POLITICALLY EXPOSED

Lebanese newspapers do usually issue special editions (or annexes) about higher education in the country; for marketing reasons these are always about non-public HEIs. The last such edition is quite recent, dated July 20, 2012. No single similar special edition was issued concerning LU. In fact, this university has a daily place in the newspapers, but only to highlight one or more of its "problems". This image duality on the public scene has its reason-d'être. One reason is that non-public HEIs have public relations (PR) and marketing agendas and allocate resources for this purpose, while the LU has none of that.

On the other hand, as a private domain, "internal" non-public HEI matters are kept at home and any public disclosure may be considered as violation of the institutions' privacy, and faculty

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[29] In the absence of University Council the LU president and the Minister take jointly the decisions, given by law to University president and University Council.

from inside would be reluctant to publish information and raise issues in the newspapers for risk of being fired. In the case of LU the behavior is completely different: the public at large can criticize the university because it is a public domain, like any other public institution, project or activity (public interest), whilst those from inside are protected by the professors' league, and their acts are considered as freedom of expression or academic freedom. No one during sixty years of LU life has been convicted for a communiqué or an article or a book that criticized something about the LU, even when articles were about corruption claims against the university.

Indeed it is a matter of difference in public exposure between non-public and public HEIs, which lies behind the public image duality. This implies that images do not reflect necessarily the quality status in both sectors and thus has critical consequences on QA work: non public HEIs may exercise pressure on the national QA agency to protect their privacy when producing their final evaluation reports, while LU could not do that and will have to risk being publicly criticized. Public evaluation reports produced by LQAA on LU may bring, according to LU authorities, the "water to the mills" for those who are ready to criticize LU, regardless of their "constructive or destructive" intentions. Therefore LU authorities are reluctant towards involving their public institution in this QA endeavor.

8. QUALITY CONCERNS AND CHALLENGES

It goes without saying that serious quality concerns and challenges in higher education in Lebanon were behind the idea of the establishment of the LQAA, which was expressed officially in the ministerial declaration in 2009. The arguments were presented and discussed many times elsewhere.

C. PROPOSED OPTIONS FOR LEBANON

Compared to the models of QA in the five countries we described above, Lebanon seems similar to the European countries in the sense that the QA agency is a public body, while it seems similar to the USA in the sense that HEIs are highly diverse. This imposes a careful selection of the options to be adopted in the light of the Lebanese context.

Some of the options regarding the Lebanese model have been already been clearly taken in the draft law of the Lebanese Quality Assurance Agency (LQAA), some have not been elaborated enough and some others have been left by the law to be elaborated later. The purpose of this section is to substantiate, to elaborate further on the choices made by the draft law, and to propose more detailed options for the work of LQAA, namely regarding standards and procedures. This is a necessary step before going into the details of the standards to be proposed.

Taking into consideration the five international models and the Lebanese context and specific features presented and discussed above, the following options are proposed:

MODEL AND PROCEDURES

1. **The LQAA should be institution-oriented** (like the USA, France and the UK).

   None of the reviewed international experiences deals with both programs and institutions at the same time, while those which target programmes have no standards (the evaluation in these cases is based on an outline and/or on SWOT analysis). If standards do exist they should be clearly defined as targeting one thing (institutions or programs).

2. The role of LQAA should be limited to **informative quality evaluation**; it has no formative role and it has no authority on HEIs (like in the USA and France) (diversity factor).

3. The site visitors would be called **reviewers** (like the USA and the UK) and would do **peer review** (like the USA) (diversity factor).

4. The **Reviewers'** team should be composed of peers who pertain to or are very familiar with the same higher educational model, in addition to meeting other criteria related to institution type, or to conflict of interest, etc. (diversity factor).

5. Each HEI should undertake its own self evaluation and the evaluation would thus be called "**self study**" (like the USA) (diversity factor).

6. **Self study report should be standards-based** (like in the USA and the UK)

   The free report or the descriptive or SWOT ones like in France, Spain and French Community of Belgium, have the advantages of inviting the institution to elaborate freely in its report, but create the problem of making the LQAA appear to be an external evaluator, which is irrelevant to a context of diversity. The option of standards-based report (like in the UK and the USA) poses the problem of having common standards to be applied in a variety of institutions. Yet there several reason to adopt the option of standards-based self study:

   - There are already some, even few, elements of coherence in the HE system, due to the market rules, and to the widening of the Anglo-American culture in HE, and to the formal acceptance of quality and QA cultures;

   - Some coherence in the system is requested as far as quality is concerned, as it is risky that non-diversity in each HEI is leading to a sort of division of the system into geopolitical islands, and

   - Because LQAA is a public institution. Any national policy elaborated and implemented by LQAA should contribute to the improvement of the whole system of HE. Such a policy would be deeply concerned with the competitiveness of the national HE potentials (human capital) and with social integration. This goes without saying in close relation with the new law of higher education. Among the Lebanese higher education objectives as stipulated in the draft law currently under discussion in the Lebanese parliament, one may read the following, where issues of insuring quality and social integration are clearly addressed (underlines added):

"1. *Providing all those who would like to pursue their education and have the <u>capacity</u> to continue learning at this level of education, including people with special needs.*

2. *Providing students with academic, personal, and professional competences and promoting their <u>capabilities</u>.*

3. *Preparing specialized intellectual leaders to run the various institutions of society and cater for needs in development and <u>work market</u>.*

4. *Developing the spiritual, intellectual, and physical dimensions of all men and women and providing them with a supporting academic environment that fosters their creativity and innovation and nourishes their <u>talents</u>. (...)*

6. *Preserving, spreading, and developing <u>knowledge</u>.*

7. *Fostering <u>critical thinking</u> methodology.*

8. *Accompanying <u>international</u> developments and advancements in the fields of <u>knowledge production and transfer</u>.*

9. *Promoting <u>social integration</u> and the advancement of the society and committing to fundamental human rights (…)".*

7. **Final evaluation report includes analysis, recommendations and judgment**

In all international experiences the self study and the final report include analysis (of strengths, weaknesses, factors, capacities, etc) and recommendations for improvement. Including judgments, however, is debatable: judgments are absent in the French case and they are present in the USA, UK and Belgian cases (in the latter judgments lead to acceptance or cancellation of the programme).

Assuming that judgments made by the QA agency in the Lebanese case will not lead to "acceptance or cancellation" because the agency has no such an authority, and because the agency role is institution-oriented, what could be the function and the form of such "judgments"?

Judgment is needed to summarize the results of the evaluation in a clear and concise manner. Such a summary would allow those who have the authority (at the ministry of education) to make decision, or to act in certain direction, or at least to allow the HEI itself to work towards overcoming low judgment or to sustain high judgment. The terminology used in the UK is meaningful in this regard, as it has four levels: 'is commended', 'meets UK expectations', 'requires improvement to meet UK expectations', and 'does not meet UK expectations'. This 4-level judgment system could be adopted in the Lebanese case.

The possible problem of the judgment lies in its largely global character. In any HEI there would usually be parts that could be judged as being "very high" and others judged as "very low". The average of the results would then be in the middle (such as "meets the expectations") which would ultimately hide the actual detailed results. Yet this will not be a real problem when QA codes and documents are produced to clarify on how to deal with this formal detail, among many other things.

8. **Final evaluation report better to be confidential**, otherwise this should be in agreement with the concerned HEI.

In the Lebanese case sensitivity about disclosure is considered high, only when the results are negative, because of lack of transparency and accountability. When results are positive transparency is sought, especially for marketing purposes. The QA agency should better work in line with this culture and be strictly confidential if it has to succeed in its work. This applies primarily to working with the LU, in order to remove some of the barriers that might prevent the university from participating in the QA process.

STANDARDS

9. **The term "Standards" should better be kept, as mentioned in the draft law.**

The term "criteria" is used in the USA as being equivalent to "standards". In Lebanon, it may lead to mean external evaluation, which is the case in France. "Indicators" should be kept for the intermediate level between standards and evidences. "Expectation" could be a good term to use to reflect attenuated norms, but it is better to keep the term "standards" because of its wide use and because it is already used by the draft law.

10. **Standards should have normative statements.**

This is a logic consequence of the options made under "model and procedures", especially regarding the existence of a self study, the absence of "external evaluators", the presence of "reviewers" and "peer review", and option number 5 stating that the "Self study report is standards-based". To undertake the latter, standards should include normative statements. In this choice the Lebanese option is similar to that of the USA, France and the UK.

11. **Standards should include elements and principles and should provide meaning, conditions and interlinks.**

Elements and principles are unequally found in the European and American QA agencies, but they are there one way or another. The list we extracted from the US lists is rich and comprehensive. Elements allow for covering the different sides of the HEI (administration, resources, students, governance, etc). They apply to any HEI in the world, except for those terms that are unique to specific systems, such as "mission", "board", "institutional assessment", "internal quality assurance". On the other hand, the "principles" have the role of framing the process within basic values, such as: "integrity", "effectiveness", public disclosure" etc. Most of these values are closely related to each model and even to each country's culture. Some of these models coexist in Lebanon; therefore some of these values are not applicable to all HEIs in the country.

When standards are normative they logically include some meaning, the conditions under which things ought to appear, and their interrelations.

Hence a selection and grouping should be made for the Lebanese case among each list of elements and principles.

12. **Standards for Lebanon should have a core of standards that applies to all HEIs.**

Any core is meant to apply to all HEIs and to be meaningful for each of them.

Some elements which would not apply to French oriented HEIs and to LU include "mission", "board", while some which would not apply to American oriented institutions include "research" and "internal quality assurance". As for principles, only a few items are found common between European and American models' lists: Public disclosure/visibility/transparency, Effectiveness, and integrity (or ethics).

The suggested core includes the following:

1) Mission/Goals/Objectives

2) Governance (organization, administration, decision-making, institutional research, planning)

3) Human resources (faculty and staff)

4) General resources (library, buildings and facilities, technology, financial resources)

5) Teaching and learning (teaching models, learning outcomes, student engagement, evaluation, students achievement, graduates employability and competitiveness)

6) Academic programs

7) Students (admission and retention, services and support)

8) Public disclosure (visibility, transparency, documentation)

9) Integrity

While the first seven deal with elements, the last two deal with principles.

13. There could be one key or central standard to which all others are relatively linked such as: Teaching and Learning

In the American model the "mission" constitutes the key standard, in light of which the whole institution is examined and to which most of the other standards are linked. This is because "accreditation preserves institutional diversity" and because "accreditation is centered on how effectively each institution is fulfilling its own mission"[30]. Respect of the diversity and the institutions' autonomy led to this central role of mission.

"Mission" is not a common concept among all HEIs in Lebanon on the one hand, and on the other side it witnesses a problem of reliability in our countries wherever used outside typical American institutions. Mission statements could be unclear, or written just as a discourse, independently of any other factor and with no intended implication. It will be risky to rely on a text that has no functional orientation and to exert efforts and spend time just to show the gap between texts and facts[31]. Goals and objectives could be taken as substitutes for mission, but they show the same problem of functionality.

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[30] American Council on Education, **Assuring Academic Quality in the 21st Century: Self-regulation in a new Era**, p 12.

[31] See this: "Out of 300 HEIs 207 HEIs said they have a mission statement, and only 179 provided the text of it (…). One may observe however that Arab oriented expressions in the mission statements are sometimes meaningless, in the sense that they are just part of phrase logical pattern where "local", "Regional", "Arab" and "international" are there to complete a sentence (…). There is no relation between this Arab discourse (in the mission statement)

Therefore it would be plausible to agree on some other central standard which could be applied in all types of institutions in Lebanon. The standard suggested here is that of "teaching and learning".

The reason for this choice is simple: at the end of the day the quality of any institution of higher education is centered on the quality of its teaching and learning processes: What do students learn? What are their acquisitions (achievements)? How they are taught and how are they evaluated? The whole process of higher education is assumingly serving student learning, and all inputs are there to serve this purpose.

In fact the core of any mission statement is about the profile of the graduate as "formed" by the institution, about what it is that he/she will learn at the institution and what he/she is expected to become as result of this learning.[32]

"Teaching and learning" is a general standard, in the sense that it could be judged regardless of the model adopted. It is so general that international achievements tests are nowadays applicable in many fields of study in higher education. It is also general in that it applies to both graduate and undergraduate programmes.

This centrality of the "pedagogical" aspect is not unique. The UK standards have taken this option, where academic programmes constitute the other face of the medal.

In this option it will be possible to view the other standards as playing the role of "factors" explaining the weaknesses and the strengths of teaching and learning at the institution. This is the way links between standards will be then studied and assured.

14. Standards should be endorsed by HEIs in Lebanon.

Before finalizing the standards by the agency, a careful review of the standards should be made for the purpose of endorsing them by the HE community in Lebanon, including representatives of LU, and for avoiding incompatibility between any of them with any existing model of HEI. If necessary, a list of additional standards (such as mission) could be added around the core for specific types of higher education institutions.

15. Standards should provide statements that are: short, broad, with sub-categories.

Short and broad statements allow for flexibility in interpretation, while subcategories provide precisions about what aspects and dimensions are to be covered by each statement, and clarify the conditions under which the object under examination should exist and the interlinks between standards.

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and the facts (regarding students and faculty). On other terms, mission statements are likely to make an Arab discourse than to make them a framework for action

[32] For example the AUB mission statement states the following (bold is added): "The American University of Beirut (AUB) is an institution of higher learning founded to provide **excellence in education**, to participate in the advancement of knowledge through research, and to serve the peoples of the Middle East and beyond. Chartered in New York State in 1863, the university bases its educational philosophy, standards, and practices on the American liberal arts model of higher education. The university believes deeply in and encourages **freedom of thought and expression and seeks to foster tolerance and respect for diversity and dialogue. Graduates will be individuals committed to creative and critical thinking, life-long learning, personal integrity, civic responsibility, and leadership."**

16. A standards guideline document should be prepared including indicators and evidences to be collected and analyzed for each standard

Indicators are about tangible aspects of the standards. In the human resources for instance, indicators for faculty members include data on their numbers, degrees, majors, and research production, etc.

Evidences are about type of documents and information to be collected and analyzed for each indicator, such as bylaws, regulation, statistical data, interviews, studies, observations, students' reports and testimonies, etc.

IV. Proposed Standard Titles and Statements

The following is a synthesis of the standards reviewed in the American and European experiences and adopted for the Lebanese case, taking into consideration the Lebanese context and based on the previously discussed options available for Lebanon.

The core standards are nine in total, the first seven relate to various elements of the institution, and the last two relate to principles. Each standard has a title, followed by a standard statement (in bold). For each of the nine standards, a set of sub-standards are listed.

#	CORE STANDARD
Elements	
1.	Goals and Objectives
2.	Governance (organization, administration, decision-making, institutional assessment, planning)
3.	Teaching and Learning (teaching models, learning outcomes, evaluation, students achievement, graduates employability and competitiveness)
4.	Academic Programs
5.	General Resources (library and information, physical , technological, financial resources)
6.	Human Resources (faculty and staff)
7.	Students (admission and retention, services and support)
Principles	
8.	Public Disclosure (visibility, transparency, documentation)
9.	Integrity

1. Mission/Goals and Objectives:

The institution should have educational mission and/or goals and/or objectives which reflect its distinctive character, articulate the institutional values, and define the institutional purpose and place in the Lebanese higher education community.

1.1 The objectives are stated in a concise and clear manner.

1.2 The objectives are used to develop and shape the institution's programs, activities and practices and to evaluate the overall institutional effectiveness.

1.3 The objectives are recognized by the institution and developed with the participation of its members and its governing body.

2. Governance:

The institution's system of governance should ensure an environment that encourages teaching, learning, scholarship, overall quality improvement, and where appropriate research and creative activity.

2.1 The institution's governance system ensures the institution's autonomy, effectiveness, integrity and partnership.

2.2 The institution's system of governance clearly defines the roles of institutional constituencies in decision-making and policy development, and strengthens the participation of faculty staff in decision-making at all levels.

2.3 The governance structure includes an active governing body with sufficient autonomy to assure institutional integrity and to fulfill its responsibilities of policy and resource development, consistent with the objectives (or mission) of the institution.

2.4 The institution has developed procedures to ensure that outcomes (of learning and employment) are analyzed and used for decision-making and for the enhancement of the quality of teaching and learning.

2.5 The institution undertakes strategic planning that involves realistic analysis of constraints and opportunities, develops plans and implements them for continuous enhancement of quality, in line with teaching and learning goals.

2.6 The institution has a research strategy, described, justified, monitored, reviewed, and developed regularly. The institution allocates adequate resources to implement the strategy.

2.7 The institution organizes and manages its financial and budget policy based on the institutional strategic plans.

2.8 The institution includes institutional assessment or institutional research or similar forms of auto-evaluation which assesses its resources, weaknesses and strengths, provides trustful information, and undertakes periodic review of its programmes, in light of its goals and objectives, and the quality of teaching and learning.

2.9 The institution shall consolidate a quality culture based on a known and publicly available quality policy, and shall ensure a continuous improvement of the quality.

2.10 The institution should have a policy and procedures for assurance of quality.

2.11 The institution uses the results from quality assurance processes to revise and improve structures, processes, curricula.

2.12 The institution takes deliberate steps to engage faculty and students as partners in the assurance and enhancement of their educational experience.

2.13 The institution has fair, effective and timely procedures for handling faculty and students' complaints and academic appeals.

2.14 The institution demonstrates that it ensures the governance of all of its campuses and branches according to the same rules and academic standards

2.15 The institution should make its decision making "impersonal" supported by written rules and regulation,

2.16 The institution encourages the community service activities within all its faculties and units.

2.17 The institution has an efficient and productive administrative system that supports the governance system.

3. Teaching and Learning

The institution should provide and implement appropriate strategies for teaching and learning.

3.1 The institution provides evidence for effective teaching in line with academic requests and learning outcomes.

3.2 The institution provides evidences on the impact of faculty staff research and their teaching content and methodology,

3.3 The institution provides evidence of student learning opportunities and demonstrates it is achieving its objectives and reaching a good quality of learning.

3.4 Assessment of student learning demonstrates that, at graduation, or other appropriate points, the students have knowledge, skills, and competencies consistent with institutional and appropriate higher education objectives.

3.5 Study materials meet specified expectations of the awarding institution in respect of the quality of teaching and learning support material for a programme or courses.

3.6 The institution shall have procedures whereby it can check that the purpose of any action that it undertakes, including outside work experience, community service, and mobility, is to encourage learning by the student.

3.7 The institution sets a standard of student achievement appropriate to the degree awarded and develops the systematic means to understand how and what students are learning and to use the evidence obtained to improve the academic program.

3.8 The institution uses of the most appropriate assessment approach for each course and learning outcome.

4. Academic Programmes

The institution's academic programs should be consistent with and serve to fulfill the institutional goals and objectives.

4.1 The institution has effective processes for the design and approval of programmes. It works systematically and effectively to assure the academic quality and integrity of its academic programs and the credits and degrees awarded.

4.2 The institution's educational offerings display academic content, rigor, coherence appropriate to good quality of teaching and learning.

4.3 The knowledge content of programs reflect established curricula in peer institutions and that departments and academic units, through regular program review, engage in curricular innovation to reflect disciplinary change and innovation.

4.4 The institution identifies student learning goals and objectives, including knowledge and skills, for its educational offerings.

4.5 The institution has mechanisms to maintain, review and update its programmes and develop methodologies to approve, control, evaluate and periodically enhance their quality. These mechanisms should include the participation of concerned stakeholders.

4.6 The institution identifies expected outcomes (of learning and employment), assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results.

4.7 The institution ensures overall compatibility of the programme in terms of core knowledge, specialized knowledge and transferable personal skills.

4.8 The institution diversifies learning opportunities through forms such as: certificate programmes, non-credit offerings, distance learning, remedial courses, etc

4.9 Research degrees are awarded in a research environment that provides secure academic standards for doing research and learning about research approaches, methods, procedures and protocols.

4.10   The educational aims and intended learning outcomes of a programme are reviewed periodically for their continuing validity and relevance.

4.11 The institution makes sure that the same rigorous procedures are applied on their educational programmes in the different campuses and branches.

5. General Resources

The institution should sustain its operations and support the achievement of its educational objectives through its efficient investment in academic, fiscal, physical, technological and library and information resources.

5.1 The academic, financial, technical, facilities, and other resources necessary to achieve the institution's goals are available and accessible.

5.2 The general institutional resources promote the achievement of institutional purposes and educational objectives and create a high quality environment for learning.

5.3 The institution's allocation of resources and its processes for evaluation and planning demonstrate its capacity to improve the quality of its education, and respond to future challenges and opportunities.

5.4 The effective and efficient uses of the institution's resources are analyzed as part of ongoing outcomes assessment.

5.5 The institution's financial resources are sufficient to sustain the quality of its educational program and to support institutional improvement.

5.6 The institution demonstrates that its financial resources are managed with effectiveness and integrity.

5.7 The institution has sufficient and appropriate physical and technological resources necessary for the achievement of its purposes. The institution has mechanisms that enable it to design, manage and improve its services and physical resources in order for student learning to develop appropriately.

5.8 The institution provides appropriate library and information resources sufficient to support its teaching and learning environment. The institution provides adequate access to local, national, regional and international resources and demonstrates their effectiveness in fulfilling its goals.

6. Human Resources

Faculty and staff qualifications, numbers, and performance should be sufficient to accomplish the institution's and its faculties' goals and objectives and ensure good quality of teaching and learning.

6.1 The institution has policies and procedures for staff recruitment that are fair, clear, explicit and are implemented consistently.

6.2 The institution's instructional, research, and service programs are devised, developed, monitored, and supported by qualified professionals.

6.3 The institution should have mechanisms to ensure that the hiring, administration and training of its teaching and auxiliary teaching staff is carried out with the necessary guarantees to ensure they can fulfill their corresponding functions, and should clearly specify the working condition of faculty staff (such as working hours, teaching load, etc.)

6.4 The institution provides appropriate institutional support for the advancement and development of faculty, including teaching, research, scholarship, and service.

6.5 The institution demonstrates that faculty staffs are engaged in research, that it provides them with the necessary resources and support,

6.6 The institution provides adequate framework and resources to promote research and to involve faculty in research projects at the local, regional and international levels, and to support faculty exchange programs.

6.7 The institution shall demonstrate insurance of basic rights for staff, including academic freedom and work conditions, within the context of the good quality of teaching and learning.

6.8 The institution develops staff rules and regulation in collaboration with concerned staff (faculty members, assistants, administrators). These rules and regulation should be made public and reviewed regularly.

6.9 The faculty members are encouraged to get involved in community services.

6.10 When mobility and exchange of professors is applied, clear agreements and bylaws exist to regulate this mobility, within the context of equality and boosting the human resources of the institutions.

7. Students

The institution should recruit, admit, enroll, and endeavor to ensure the success of its students, offering the resources and services that provide them with the opportunity to achieve the goals of their program.

7.1 The institution's interactions with students and prospective students are characterized by integrity.

7.2 The institution has policies and procedures for the recruitment and admission of students to higher education that are fair, clear, explicit and are implemented consistently.

7.3 The institution provides student support services reasonably necessary to enable each student to achieve competitive results. The institution has effective arrangements in place to support students in their learning.

7.4 The institutions provides students with a quality life on campus, ensures them freedom of expression and organization, participation in decision-making, and establishes channels of information that would help enhance their educational and professional strategies.

7.5 The institution has put in place measures that strengthen student diversity (in terms of gender, social and geographical mix), to boost social integration,

7.6 The institution publishes accurate and updated guides and information addressed to students and prospective students to help them make informed decision about the institution and learning pathways.

7.7 Student assessment should use published criteria, regulations and procedures which are applied consistently.

7.8 The institution should demonstrate acceptable level of internal effectiveness regarding students' progress (recruitment, retention, promotion and graduation).

7.9 The institution provides structures of interaction between institutional offer and labor market demand, involving students.

7.10 The institution provides career education, information, advice and guidance to students and ensures that information regarding grants, scholarships, proposals and, mobility are fairly diffused among the students.

7.11 The institution maintains an active contact with the students after their graduation.

7.12 The institution ensures that in all its policies, procedures and activities consideration is given to enable disabled and disadvantaged students to participate in all aspects of the academic and social life of the institution.

7.13 The students provide input and participate to most of the institution committees including those in charge of the quality of education.

8. Public disclosure /Public information

The institution should have mechanisms to document and archive its procedures and activities and to ensure transparency.

8.1 The institution produces and provides regularly information that is complete, accurate, timely, accessible, clear and sufficient for intended audiences and to make informed decisions about the institution and its programmes and to ensure transparency.

8.2 The institution should document all activities, programmes, rules and regulations related to different institutional and programmes procedures, and archive them in a systematic matter.

8.3 The institution should enrich its website, feed it on all institutions aspects and update it continually.

8.4 Public disclosure and transparency should be stated clearly in the institutional documents.

8.5 The institution is responsible for the quality of its provisions, and has in place policies and procedures to ensure that its responsibilities, and those of its partners, are clearly identified and met.

9. Integrity

The institution should be committed to high ethical standards in all of its dealings with its governing board, students, prospective students, faculty, staff, external agencies and organizations, and the general public. The institution should promote democratic values, sense of dialogue, communication, respect of diversity, sense of belonging and social integration.

9.1 The institution has developed, with the participation of its constituencies (leadership, faculty, administrative staff, and students), code(s) of ethics and demonstrates commitment to it.

9.2 The institution recognizes the participatory nature of learning process and respects a wide range of opinions and ideas.

9.3 The institution upholds accountability at all levels.

9.4 The institution has active academic integrity assessment procedures.

9.5 The institution fosters to develop in all its educational programmes courses, modules or part of courses dedicated to democratic values, sense of dialogue, communication, respect of diversity, sense of belonging and social integration.

9.6 The institution demonstrates support for academic and intellectual freedom.