

Users' Guide for the African Standard and Guidelines for Quality Assurance in Higher Education (ASG-QA)



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Introduction

Background of the African Standards and Guidelines for Quality Assurance in Higher Education

The African Standards and Guidelines for Quality Assurance in Higher Education (ASG-QA) were developed in 2018 as part of the Pan-African Quality Assurance and Accreditation Framework (PAQAF), which provides, a continental framework to harmonise higher education quality assurance systems and promote compatible methodologies, endorsed by the African Union.

The ASG-QA were developed following a mapping of existing standards at national and regional levels, a comparison with other existing international standards and guidelines as well as a broad stakeholder consultation. This was done with the support of the HAQAA Initiative – Harmonisation, Accreditation and Quality Assurance in African Higher Education, funded by the European Union in support of its partnership with the African Union.

As a tool of the PAQAF, the ASG-QA aim to support higher education institutions (HEIs) and quality assurance agencies (QAAs) in developing adequate internal and external quality assurance systems and practices that correspond to international good practice. Indeed, it provides a unified basic framework that is general enough to take into account the diversity of national contexts, while ensuring comparability.

The Standards are stated as common *minimum* standards or requirements. The Guidelines – which are more specific – describe how the standards might be achieved and allow for the provision of evidence to support the status of quality at HEIs and QAAs. They provide examples of good practice, and the list is not exhaustive.

The ASG-QA are neither prescriptive nor exhaustive, thus allowing it to be applied to all quality assurance processes and all types of HEIs in Africa, regardless of the mode of study or location, including transnational and cross-border education. The ASG-QA consequently allow an enhancement-led approach for the escalation of institutional and educational quality.

The ASG-QA are available in the four official languages of the African Union: English, French, Arabic and Portuguese, and have already been widely disseminated and utilised by national QA agencies and QA systems in Africa, as well as HEIs. The African Union Commission's Science and Technology Committee (STC) has repeatedly urged African member states to further the uptake and usage of the ASG-QA, in conjunction with national or regional standards, where they exist.

Regarding the latter, it is very important to stress that the ASG-QA, and subsequently this User's Guide, have been developed upon the principle of compatibility and added *continental* value for Africa. Prior to developing the ASG-QA in 2016, an extensive mapping was conducted that looked at existing standards, guidelines and references for quality assurance and accreditation at national and regional levels. Existing and well referenced standards like those of East Africa and of Conseil

Africain et Malgache pour l'Enseignement Supérieur (CAMES), for francophone Africa, were dissected, and it was ensured that the ASG-QA adopted their principles and complemented. Through the extensive promotion of the ASG-QA over the past 6 years, careful attention has been paid to the unique continental dimension that the ASG-QA offer, and how they must be seen as one of several instruments that can shape QA systems in Africa, depending on the policy dynamics and frameworks of the respective countries and regional economic communities in Africa. The ASG-QA and this User's Guide are unique African tools, embracing different types of HE systems and languages across the continent, in pursuit of a common African higher education space where mobility is a reality and where systems and regions become more porous and less siloed.

Purpose of the Users' Guide

The aim of this Users' Guide is to further support the implementation of the ASG-QA by providing practical guidance and explanation, including:

- clarifications to improve the understanding and interpretation of the ASG-QA, particularly related to aspects of individual standards that have proved challenging in the first years of their use;
- guidance on the implementation of the standards for HEIs and QAAs in the early stages of development;
- examples of how HEIs and QAAs can demonstrate that they are meeting the commitments of the ASG-QA when undergoing internal or external reviews.

Drafting and Consultation Process

In the framework of the HAQAA2 contract, the second phase of HAQAA, this Users' Guide was drafted by the ASG-QA Task Force, comprising quality assurance experts in higher education from Eastern, Western, Northern, Southern and Central Africa. An expert from the European Higher Education Area was also part of the team, to offer a reflection and some comparative experiences from Europe. The European Association for Quality Assurance in Higher Education, as part of the HAQAA2 Implementing Team, with support of OBREAL Global, coordinated the work of the Task Force. The ASG-QA essentially informed the development of the Users' Guide and, as such, are the main point of reference of the Guide. One activity that contributed further to the development of this document is a report that assessed the impact of the pilot QA agency reviews against the ASG-QA (tested in HAQAA1) and the fitness-for-purpose of the review methodology¹ used in the pilot agency reviews and consultancy visits conducted during the HAQAA1 period. The basis of this report was an analysis of the self-assessment reports produced by the agencies and ministries that participated in the pilot reviews and consultancy visits as well as the review panels' reports on the agency reviews and consultancy visits; collection of feedback from the agencies and ministries that participated in a review or consultancy visit; and collection of feedback from the experts that conducted the agency reviews and consultancy visits. The collection of feedback in all cases was done through virtual focus groups conducted between April and June 2020. The

1. During HAQAA1, a review methodology was developed to assess QAAs against the standards of parts B and C of the ASG-QA. In 2019, the methodology was tested through four pilot reviews of established QAAs in Africa. In addition, the methodology was used, in part, for four consultancy visits to newly established QAAs or ministries preparing to establish an agency.

key findings in this impact assessment report were discussed by the Task Force and informed the elaboration in the Users' Guide, where applicable. Several modalities were used to further develop the Users' Guide: Two groups were formed in the beginning of 2021, each group having worked respectively on Section 1 (internal quality assurance of HEIs) and Section 2 (external quality assurance). The initial draft sections were circulated for input amongst the members of the Task Force, followed by a critical discussion and reflection in a series of meetings for further comments, input and strengthening of the Users' Guide.

Additionally, the draft Users' Guide was shared with a group of 'HAQAA ambassadors' in quality assurance in higher education for further input regarding the appropriateness of the general structure and introduction of the document. The HAQAA ambassadors are graduates of training courses that HAQAA has conducted for both external and internal QA, nominated by the governments and institutions and competitively selected. They offered examples of good practice/evidence and overall feedback on the Guide as a whole. Lastly, the final draft Users' Guide was submitted to the African Union Commission for consideration and endorsement before proceeding to publication.

Target Groups

The Users' Guide is aimed at quality assurance practitioners in HEIs and QAAs as well as any organisation and experts that conduct external reviews of QAAs.

Scope and Applicability

The Users' Guide is not intended to set out any additional standards or requirements on top of the ASG-QA themselves. Furthermore, the examples given are illustrative, non-prescriptive, and non-exhaustive. It should be remembered that the ASG-QA are a set of baseline standards and the enhancement principle of quality assurance encourages HEIs and QAAs to go beyond these standards. However, the users of this Guide are encouraged to use it in support of the national and regulatory standards in their own countries, where these exist.

The Users' Guide is structured in the same way as the ASG-QA and should be read in conjunction with that document, which remains the agreed reference for standards for quality assurance. The interlinkage of the three parts of the ASG-QA should be borne in mind when using the Users' Guide. Hence, in addressing the standards and guidelines in Part A, HEIs should be mindful of the standards and guidelines in Part B that QAAs will apply when conducting external quality reviews at institutions so as to ensure that their internal quality assurance systems and processes are aligned with or satisfy external quality assurance criteria and processes. QAAs should also give due recognition to the existence of internal quality assurance standards (Part A) used by HEIs when they engage in self-assessments to see to it that their internal quality assurance is appropriate to external quality assurance activities they are involved in. Similarly, QAAs should consider the standards and guidelines in Part B when they engage in activities to assure their own quality (Part C), because there is a close connection between the two Parts. It is also important to mention that Section 1 of the Users' Guide is rather long, because HEIs have to take custodianship of nurturing and upholding their own quality and, in so doing, have to ensure that internal quality assurance is robust enough to prepare themselves for all types of external quality assurance activities such as programme accreditation, institutional accreditation, quality audits, reviews, etc. In addition, it includes standards and guidelines for open and distance learning (ODEL).

The implementation of the ASG-QA, complemented by the Users' Guide, should be seen as a combined effort between HEIs and QAAs at the institutional, national, regional and continental levels to strive for harmonisation and a common African higher education space, based on the generic principles of quality assurance and quality enhancement.

KEY CONCEPTS AND DEFINITIONS

KEY CONCEPTS

In recent years, and despite the fact that student massification is increasingly prevalent, African higher education institutions have identified the crucial and continuous need to assess the level of satisfaction of learners' and stakeholders' requirements in order to improve their competitiveness in terms of teaching, research and service to society. To this end, the implementation of quality tools and frameworks is a necessity for African higher education to meet the present and future challenges in an environment that is profoundly different from the one that has existed in recent decades. To accompany this change, the GSA-QA has been designed, and this follow-up document provides practical guidance and explanations to further support the implementation of the GSA-QA. To facilitate its use, a review of the key concepts that underpin this work is necessary.

What is quality then?

Although there is a wealth of definitions in the literature, our choice, which is very subjective, is the one given by Perellon² in 2003, namely “quality is the adequacy of practices to objectives identified by the actors at work, and not to abstract values”. Even if a definition is never neutral, this one, by the fact that it is centred on action, and not just on values and beliefs, seems to us to be well adapted to action. Having said that, in 2005, Burla³ thinks that quality could be defined as “a confrontation between the needs of students, the priorities of teachers, and the needs of the professional community”; because, in HE, at all stages of quality management, effectiveness depends on the active involvement of stakeholders and particularly the client (whether the student or the employer, or any other interested party). In fact, even if the word “quality” is unanimously accepted and the notion of quality is, in itself, a unifying concept, implementation requires a paradigm shift impacting on practices.

What about quality assurance, which refers to similar practices?

Originally, the aim of quality assurance is to enable the client to have the guarantee that all the means will be implemented to ensure that the service/product corresponds to his expectations. Even if the latter is very generic, the specific definition of Ekong⁴ (1998) which says that “a quality assurance system is a set of actions

2. Perellon, J.F. (2003), *«La qualité dans l'enseignement supérieur»*, Presses polytechniques et universitaires romandes, coll. «Le savoir suisse», Lausanne, (Switzerland).

3. Quoted in Dejean, J. (2007), *«Les démarches qualité dans l'enseignement supérieur, entre évaluation et contrôle»*, in «Les démarches qualité dans l'enseignement supérieur en Europe», edited by Heldenbergh A., published by L'Harmattan, pp. 15-49, Paris, France.

4. Ekong^{ème}, D. (1998), *“Higher Education in the 21st Century: Vision and Action”*, World Conference on Higher Education, UNESCO, Paris, 5-9 October 1998.

and means put in place by an institution with the aim of enabling it to confirm to itself and to others concerned that the necessary conditions have been put in place for students to achieve the standards the institution has set for itself” seems relevant. That said, it is worth supplementing it with the definition given by Woodhouse⁵ in 1999, namely “the term quality assurance refers to the strategies, procedures, actions and attitudes necessary to ensure that quality is maintained and improved”, while recalling that these definitions are carried by the following four main functions: accountability, control, compliance and improvement. From there, and because everything is intrinsically linked, the implementation of a systemic vision and a process approach will make it possible to obtain coherent and predictable results in a more effective and efficient way, while institutionalising the practice and culture of evaluation and continuous improvement.

Thus, whatever model is chosen or designed, it is necessary to be aware of the particularities of the higher education institution concerned and to integrate the model into its context and into the overall vision and mission of the institution in question. Successful implementation requires strong commitment from top management, ownership and empowerment, motivated involvement of staff, and the inclusion of all stakeholders, while adhering to ethical rules.

DEFINITIONS

Accreditation: The process of verification or approval of a higher education institution or quality assurance agency by an authorised external organisation, normally for a fixed period of time. Accreditation is a recognition of competence.

Corrective action: action to eliminate the cause of a non-conformity and prevent its recurrence.

Learner: a beneficiary acquiring knowledge and developing skills with the help of an educational service.

Improvement: activity carried out to improve the performance of the institution. When the activity carried out is recurrent, it is called continuous improvement.

Quality assurance: Part of quality management aiming to give confidence to stakeholders through compliance with the requirements expressed in a quality framework (policy, strategy, procedures, records, evaluation, etc.).

External quality assurance: systematic monitoring and evaluation of the activities of a higher education quality assurance agency and the underlying processes to ensure that the requirements set out in a standard are met.

Internal quality assurance: standardised systems within a higher education institution or quality assurance agency that ensure quality and adequacy in relation to the requirements of a standard and the objectives of the institution.

5. Woodhouse, D. (1999), “*Quality and Quality Assurance*”, Quality and Internationalisation in Higher Education, OECD, Paris.

Self-evaluation: evaluation of an institution or agency of its own performance by internal evaluators from within the institution or agency.

Customer: a person or organisation who is likely to receive or who receives a product or service intended for, or requested by, that person or organisation.

Evaluation committee: a group of individuals engaged to carry out an evaluation.

Competence: the ability to apply knowledge and skills to achieve desired results.

Conformity: satisfaction of a requirement. In contrast, non-conformity is the failure to meet a requirement.

Context of an institution: a combination of internal and external issues that may affect the institution's approach to setting and achieving its objectives.

Correction: action to eliminate a detected non-conformity.

Evaluation criteria: a set of policies, procedures, or requirements used as a reference against which objective evidence is compared.

Effectiveness: the level of achievement of planned activities and expected results. When an institution achieves its objectives, it is said to be effective.

Efficiency: the ratio of the result obtained to the resources used. The more the institution rationalises its expenditure and resources, while achieving its objectives, the more efficient it is.

Recording: A document that records the results achieved or provides evidence of the completion of a task or activity.

Evaluation: a methodical, independent and documented process of obtaining objective evidence and evaluating it objectively to determine the extent to which criteria are met.

External evaluation: an in-depth evaluation carried out in a quality assurance agency by a team of qualified persons who are not staff of the agency.

Higher education institution (HEI): university, college, institute or other organisation providing higher education.

External evaluator: an individual contracted for an assignment and attached to the team evaluating the higher education institution or agency. The evaluator must be external to the institution or agency, and have the necessary skills for the task.

Requirement: a stated need or expectation, usually implicit or mandatory.

Expert: a person who brings specific knowledge or expertise to the evaluation team.

Guideline: a general line of action and guidance to be followed, on the basis of which the benchmarks and requirements to be met will be set. Guidelines guide future decisions.

Quality management: coordinated activities to guide and direct an institution with regard to quality.

Mission: the purpose, mandate and scope of an institution's activities, as formulated by the regulatory framework and/or by management.

ISO 45001: Occupational health and safety management systems - Requirements and guidelines for their use.

ISO 17025: General requirements for the competence of testing and calibration laboratories.

Quality objective: the result to be achieved in relation to quality.

Organisation: a person or group of people with a role with the responsibilities, authority and relationships to achieve its objectives.

Interested party or stakeholder: a person or body that can either influence a decision or activity, or be influenced or feel influenced by a decision or activity.

Staff: People working for and within the institution. The staff of a higher education institution includes teachers, researchers, administrative and technical staff and those responsible for health and safety.

Evaluation plan: description of the activities and arrangements necessary to carry out the evaluation.

Quality policy: The intentions and orientations of an institution with regard to quality, as officially formulated by its management. The quality policy is translated into decisions.

Procedure: A specified way of carrying out an activity or process.

Process: A set of interrelated or interacting activities that uses inputs to produce an expected result. A process must add value.

Project: a single process consisting of a set of coordinated and controlled activities with start and finish dates, undertaken to achieve an objective in accordance with specific requirements, including time, cost and resource constraints.

External evaluation report: The main outcome of the evaluation of a higher education institution or agency in the form of a document written by the evaluation committee detailing the evaluation.

Reference: Refers to the specification of aspects, elements or principles with which a programme, higher education institution or quality assurance agency must comply and against which quality is assessed.

Risk: the effect of uncertainty on the achievement of objectives.

Strategy: a plan to achieve a long-term or overall goal. It is the plan for achieving the institution's vision. The strategy is broken down into actions.

Quality management system: A set of interrelated or interacting quality-related elements of an organisation used to establish policies, objectives and processes to achieve those objectives.

Validation: confirmation by evidence that the requirements for a specific use or intended application have been met.

Verification: confirmation by evidence that the specified requirements have been met.

Vision: an aspiration of what an institution wishes to become, as formulated by the management.

SECTION 1

QUALITY ASSURANCE FOR HIGHER EDUCATION INSTITUTIONS

(PART A OF ASG-QA)

Section 1 of the User's Guide is addressed to HEIs. In line with the principle that HEIs have the primary responsibility for the quality of their provision and quality assurance thereof, Part A presents standards and guidelines for IQA at the level of the institutions, and also incorporates standards and guidelines for ODeL modes.

The standards and guidelines cover aspects of the institution and of institutional activity that are essential to contribute to a high-quality education environment. Fulfilling these standards helps to ensure that an institution takes on its own responsibility for the quality assurance of its activities.

Part A of the ASG-QA covers a range of topics, including: institutional governance, policies and processes that promote quality higher education; teaching and learning environment; research and innovation; collaboration and community engagement.

The exact manner of implementation of the standards will depend on the context of the higher education institution. For examples, implementation will vary depending on: the type of institution (level and discipline of education offered, scope of activities, size and structure, legal format...), the modality of education (on-site, online or blended education; local or transnational...) and operating context (national higher education and quality assurance legal frameworks, existing national or regional standards).

The aim of Part A of the ASG-QA is to provide quality higher education in line with set course requirements, vision and mission of the institution and the overarching goal of higher education.

STANDARD 1. VISION, MISSION AND STRATEGIC OBJECTIVES

Standard	Examples of good practice / Evidence
<p>The institution shall have published vision and mission statements that reflect its commitment to continuous quality enhancement; strategic objectives and clear policies and procedures that are consistent with its vision and mission.</p> <p>Guidelines</p> <p>The institutional vision, mission and strategic objectives:</p> <p>a) are publicly disclosed; reflect the aspirations and needs of stakeholders, and indicate strategic development plans and targets.</p> <p>b) concerning QA, are translated into clear policies and strategic plans, which are operationalised into achievable goals.</p>	<ul style="list-style-type: none"> • Quality policy and commitment of the presidency drafted, posted and communicated to all stakeholders of the institution.
<p>The institution ensures that there is a robust and well-functioning QA system for its entire activities (academic, research and community engagement), and that facilitates the coordination of the approval of policies, procedures and mechanisms. The institution, therefore, ensures that:</p> <p>a) the vision and mission statements and strategic objectives reflect commitment to quality enhancement;</p>	<ul style="list-style-type: none"> • The institution has a strategic plan with its vision, missions and values, with a SWOT analysis and planning of the actions to be taken to implement a quality management system. • Internal audits are planned, implemented and maintained. • The scope, internal evaluation guidelines, areas and fields of evaluation are defined in advance.
<p>b) Various forms of planning (for example, strategic, institutional, academic, and financial) are coordinated to ensure the quality of academic outcomes;</p>	<ul style="list-style-type: none"> • Strategic planning is aligned with the institution's policy, and is visible in the institution's implementation plan. • The information system is available and accessible to all actors within the institution. • Minutes of meetings and briefings are documented, kept, distributed and made available for consultation. • Planning is updated in response to planned and unplanned change requirements; all resulting information is documented and retained.

<p>c) Medium and long-term plans reflect the programmes being offered, as well as its research focus to ensure sustainability and continuous improvement;</p>	<ul style="list-style-type: none"> • Operational activities are aligned with institutional plans and are visible in the Institution's implementation plan or in the strategic documents of the faculties. • Education programmes are developed and validated by the appropriate bodies as proof of their alignment with the strategic objectives. • Education and research programme are visible, accessible to all stakeholders in the institution digitally or in hard copy. • Education and research programme evaluations are planned and regularly carried out, documented and kept as evidence of monitoring results. • Following education and research programme evaluation, actions are implemented for improvement; the effectiveness of these actions is measured and analysed.
<p>d) The formulation of the plans is collegial, they promote a high degree of institutional integrity and responsiveness to change, and they are known to stakeholders; and</p>	<ul style="list-style-type: none"> • Decrees setting up scientific committees, scientific councils, faculty councils, university councils, boards of directors, etc. • Minutes and reports of meetings of scientific committees, scientific council, faculty council, university council, board of directors, etc. All the information derived from them is kept. • Updating of planning follows planned and unplanned change requirements; all resulting information is documented and retained. • Relevant information is communicated to all stakeholders through the various channels (email, mail, flyer, etc.).
<p>e) There is continuous and periodic monitoring, evaluation and benchmarking of processes, including self-assessment of academic programmes and institutional self-assessment for purposes of continual improvement.</p>	<ul style="list-style-type: none"> • Evaluation criteria and scope are defined; evaluators selected are qualified, impartial and objective. • Internal evaluations (institutional and programmatic) are regularly planned and implemented. • Indicators are put in place and analysed regularly to identify areas for improvement. • Results of evaluations are documented and communicated to managers and actions are planned and implemented. • Documented information is kept as evidence of programme implementation and evaluation results.

STANDARD 2. GOVERNANCE AND MANAGEMENT

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
The institution shall have clearly stated governance and management structures. This will ensure sound and ethical governance and management, including robust QA practices that support the achievement of its mission and legal mandate.		
<p>Guidelines</p> <p>The institution:</p> <p>a) has qualified, competent and experienced leadership to oversee the development and management of a quality culture within the institution;</p> <p>b) has relevant governance and management bodies, such as the University Council, Senate, Management Board, Student Body; and various committees, each with a clear mandate, duties, responsibilities, powers, privileges and tenure; and these bodies are properly coordinated to ensure efficiency, effectiveness and quality;</p>	<p>1. <i>How do your governance and management structures look like? Are they aligned with national and regulatory standards?</i></p> <p>2. <i>Do the relevant bodies have clearly defined mandates, functions and responsibilities? If so, describe the functions and responsibilities of the relevant bodies.</i></p> <p>3. <i>To what extent are students involved in these bodies?</i></p> <p>4. <i>Please provide information on the qualifications and experience of your institution's management. Also provide information on their age and gender and how inclusiveness and internationalization are taken in account in the recruitment process?</i></p>	<ul style="list-style-type: none"> • Refer to the organisation chart of your institution • Refer to the statutes of the institution • Authorities and responsibilities documented and communicated (job descriptions, employment contracts, etc.) • Job profiles for top management position • Selection process of top management position
c) Has a QA policy and structure, which flow down through all levels;	5. <i>If your institution has a quality assurance policy, what is the procedure for its operation?</i>	<ul style="list-style-type: none"> • Attach the relevant quality policy as evidence • Formal existence of a quality assurance unit (ministerial or internal decision) • Budgetary allocation to the QA unit

d) Has clear communication systems and networks for the promotion of internal and external information dissemination for public accountability;	6. <i>If your institution has a communication strategy, how does it work?</i>	<ul style="list-style-type: none"> • Attach the respective strategy as evidence
e) Makes responsible use of its autonomy;		
f) Has policies and procedures for the delegation of authority, whenever needed;		
g) Enables students to participate in decision-making in relevant governance bodies;	7. <i>To what extent are students involved in these bodies?</i>	<ul style="list-style-type: none"> • Composition and review of bodies; inclusion of students as permanent members or as guests • Duration of student mandate • Student Selection Process (nomination or election)
h) Ensures regular consultations with stakeholders, reports and follows up actions on key issues of policy and operations to promote quality, cohesion, harmony and identity within the institution;	8. <i>What are the topics of the regular consultations with key stakeholders?</i>	<ul style="list-style-type: none"> • Identify relevant stakeholders • Attach market survey/graduate exit satisfaction survey/tracer study reports as evidence of regular consultations with stakeholders
i) Emphasises ethics, transparency, and academic integrity throughout its teaching, learning and research activities;		
j) Promotes a high degree of institutional integrity and responsiveness by advocating and demonstrating honesty and non-discrimination in its treatment of staff, students and members of the public and in the management of institutional affairs;		

k) Publishes and disseminates on a regular basis, impartial and objective qualitative and quantitative information about courses offered, research undertaken and community services;	9. <i>Where is this information published?</i>	<ul style="list-style-type: none"> • Proposed programmes, research results, community engagement documented, and communicated (flyer, institution website, social networks, etc.)
l) Has developed and implemented effective processes for deterring, detecting and dealing with misconduct by students or staff;		
m) Has policies and activated procedures to manage conflict of interest; and	10. <i>What kind of procedures are in place to manage conflicts of interest and to deal with staff and student conduct?</i>	<ul style="list-style-type: none"> • Existence of a conflict resolution policy • Procedure in case of conflict of interest • Compliance with the legal and regulatory framework • Existence of a charter and an ethics (and conflict management) council • Existence of an anti-corruption policy • Existence of an equal-opportunity policy
n) Has effective, systematic, timely and fair processes for the investigation of complaints, grievances and appeals by students, staff and other stakeholders.		<ul style="list-style-type: none"> • Formalised complaints and appeals procedure, accessible and communicated to staff and students

STANDARD 3: HUMAN RESOURCES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The institution shall have policies on human resources that are inclusive, and that ensure recruitment and retention of adequate numbers of qualified and competent staff to achieve its mission and carry out its legal mandate.</p> <p>Guidelines</p> <p>The quality of staff is the key to the quality of the higher education institution and, therefore, it:</p>		
<p>a) Has `clear policies and procedures that ensure equal opportunities and actual gender equality in human resources for recruitment, retention, and promotion of staff that is based on qualification, competence and skills;</p>	<p>1. <i>How does the HEI demonstrate that its staff (academic, administrative and support/technical) has the required qualifications, experience and skills to support accomplishment of its mission, goals and objectives?</i></p>	<ul style="list-style-type: none"> • HR policy (recruitment, retention, career development, etc.) • Performance management system • Staff performance agreements and personal development plans • Written reports/records of staff performance appraisals, workload and qualification adherence • Staff employment contracts • Staff CVs • Staff structure • Examples of approved job specifications • Existence of a HR department • Existence of a full-time HR Officer
	<p>2. <i>How does institutional policies and strategies for human resource management ensure that sufficient numbers of qualified staff are deployed to meet human resource needs in the institution?</i></p>	

	3. What policies and procedures does the institution have in place to ensure fairness in staff employment, promotion and retention, including how are the aforementioned implemented?	<ul style="list-style-type: none"> • Staff promotion policy • Staff appraisal policy • Training and development policy and plan • Staff development activity reports; documented records of progress on staff development/career development opportunities • Promotion-staff satisfaction survey reports as well as audit reports against set guidelines on promotions, employment qualifications
	4. What systems are in place to manage recruitment, appointment, record-keeping (full-time and part-time staff numbers, staff qualifications, staff turnover rates, etc.), employment equity, compensation and benefits? 5. How are the various systems integrated to ensure a comprehensive human resource provision?	<ul style="list-style-type: none"> • Evidence of the use of a management information system for integration purposes
	6. How well do all systems operate?	<ul style="list-style-type: none"> • Regular reports on the operation of the systems
	7. What risks and challenges has the institution encountered in implementing these systems?	<ul style="list-style-type: none"> • Risk Management Reporting
	8. What steps has the institution taken to mitigate risk?	
b) Has a core of full-time staff and keeps up-to-date records of staff numbers, qualifications and employment turnover rates;	9. How many full-time and part-time academic and administrative staff are employed?	<ul style="list-style-type: none"> • Policy for recruitment of part-time academic staff, and provision in the policy for scarcity areas • Academic work-load policy
	10. What strategies are in place to retain staff in scarce fields?	
	11. What are the staff turnover rates/ ratios and what are the reasons for the status quo?	<ul style="list-style-type: none"> • Regular reports on staff retention/turnover
	12. What succession planning/strategy does the institution have in place to ensure that the institution continues to run smoothly or without interruption after staff in key positions left the institution?	<ul style="list-style-type: none"> • Succession planning/strategy • Minutes of management board meetings indicating discussion on staff retention/turnovers

c) Has clear policies and procedures for continuous staff development;	13. <i>How does the staff continuously engage in professional growth opportunities provided by the institution, and how does the institution promote staff development programmes and opportunities that are inclusive and fair?</i>	<ul style="list-style-type: none"> • Staff performance contracts should capture individualised plans on professional growth • Commitment to staff development should be indicated by a budgetary allocation for this • Training and development opportunities and selection of beneficiaries • Any benchmark for full-time faculty-student ratio and staff-full-time faculty ratio
	14. <i>What systems are in place to manage staff training and development?</i>	<ul style="list-style-type: none"> • Existence of a committee to manage staff training and development • Budget allocation for this purpose
d) Has clear contractual agreements with staff that outline the conditions of employment and are aligned with any legislative requirements of the country of the institution;	15. <i>How does the institution ensure that staff know their conditions of employment?</i>	<ul style="list-style-type: none"> • Staff handbooks/manuals
	16. <i>How does the institution ensure that staff contracts are in line with national labour laws?</i>	<ul style="list-style-type: none"> • Minutes of management board meetings indicating regular compliance reports discussed
	17. <i>How does the institution adhere to these legislative requirements?</i>	<ul style="list-style-type: none"> • Minutes of management board meetings indicating regular discussion on adherence/non adherence to legislative requirements
e) Provides adequate staff support facilities and services;	18. <i>How does the institution create a conducive work environment to support and meet the needs of staff, including the types of staff support services available, e.g., customer service, general administrative support, staff wellbeing, office space, meeting rooms, etc. to help staff achieve institutional goals and objectives?</i>	<ul style="list-style-type: none"> • Policies in place on conducive work environment • Maintenance policy for staff support
f) Undertakes periodic monitoring, evaluation, and appraisal of staff; and	19. What is the academic staff workload and what are the reasons for the status quo?	<ul style="list-style-type: none"> • Academic staff workload policy • Regular audit reports on academic staff workload
	20. What mechanisms are in place to manage staff performance and do staff appraisals? How regularly are these conducted?	<ul style="list-style-type: none"> • Records of staff performance appraisal reports

g) Adheres to (local/regional) norms for student-faculty ratios that promote student-centered learning.	21. <i>What are the student-faculty ratios and what are the reasons for the status quo?</i>	<ul style="list-style-type: none"> • Regular audit reports on student-faculty ratios
	22. <i>Why are the particular ratios used and how do they support student-centered learning?</i>	<ul style="list-style-type: none"> • Audit reports indicating compliance to policies/set standards and guidelines on student-faculty ratios

STANDARD 4: FINANCIAL RESOURCE MANAGEMENT

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
<p>The institution shall have adequate financial resources and prudent financial management that are aligned to its mission, objectives and mandate to ensure quality education.</p>		
<p>Guidelines</p> <p>Financial sustainability is the backbone of any institution, and adequate financial resources and prudent financial management should be conducted within an approved framework of institutional strategies, policies and procedures, which enable the institution to meet its financial needs to ensure quality academic outcomes. The institution has:</p>	<p><i>1. How does the institution ensure that the resource base is prudently managed based on sound financial planning and drafting of clear budgets for all the activities that the institution undertakes, in compliance with its vision, mission and goals?</i></p>	<ul style="list-style-type: none"> • Financial and Accounting Procedures Manual
<p>a) Adequate financial resources to carry out its mandate and objectives effectively and efficiently;</p>	<p><i>2. Does the institution have an appropriate and reliable financial resource base to deliver sustainable quality education?</i></p>	
<p>b) A diversified financial and sustainable resource base, and ensures a balanced allocation of resources to core functions of teaching and learning, research, and community engagement;</p>		<ul style="list-style-type: none"> • Sources of funding; public / government, private, student fees, grants, non-core income generated from other activities • Accounts held by the institution, segregated by type and purpose

c) A prudent financial management system, which includes strategies, policies and procedures for budgeting, resource allocation, repairs and maintenance of infrastructure, asset management, debt management and financial reporting;		<ul style="list-style-type: none"> • Risk and debt management strategies • Financial allocation policies and procedures • Financial planning policies and procedures • Budget preparation policies and procedures • Policies and procedures regarding the revenues and expenses (and investment, if any) • Budget/funds allocation for research programmes • Budget allocation for improvement plans arising from programme evaluations
d) A system to address the risks, gaps and challenges identified for continuous improvement; and	<i>3. Do the laid down plans incorporate potential risk management strategies?</i>	<ul style="list-style-type: none"> • Financial risk management analysis reports
e) Monitoring, evaluation (through financial audits) and benchmarking processes for the financial management system using international best practices or some other basis of accounting appropriate for the institution.	<i>4. Can the institution provide evidence of accountable and transparent financial management that follows established financial procedures?</i>	<ul style="list-style-type: none"> • External financial audit reports • Audit and risk committee • Existence of an internal control system • Internal audit reports (should include financial matters)

STANDARD 5. INFRASTRUCTURE AND FACILITIES

Standard	Examples of good practice / Evidence
<p>The institution shall have adequate and appropriate infrastructure, facilities and resources to support teaching, learning and research.</p> <p>Guidelines</p> <p>For a good higher education experience, institutions provide a range of resources to assist students' learning. Infrastructure and facilities are in line with the goals and aims of the higher education institution, the programmes on offer, the teaching and learning strategy, as well as research. The institution has:</p> <p>a) Academic, administrative and recreational facilities (lecture theatres, seminar rooms, staff offices, laboratories, studios, workshops, etc.) adequate for the number of students and staff;</p>	<ul style="list-style-type: none"> • Number of offices, number of rooms, number of lecture theatres, number of laboratories, number of meeting rooms, etc. (in relation to the number of teachers and students) • Existence and size of recreation areas, car parking lots, etc. • Existence of ramps or lifts to facilitate access to facilities • Existence circulation plan made visible and available to all • The premises are equipped to increase the effectiveness of teaching activities (comfortable and recent furniture, video projector, computer, etc.). • The preventive maintenance of the secondary trades of the premises and teaching areas (electricity, heating, air conditioning, humidity, etc.) must be strategically planned and implemented. • The architecture and layout of the premises must be compatible with the type of training and facilitate exchanges. • The infrastructure must be designed in such a way that the spaces promote creativity, communication and conviviality. • Teachers must have a work space and student reception areas that are optimal and meet ergonomic requirements. • The organisation and layout of the premises must take into account the specificity of each field of training. • The environmental conditions of the premises and teaching areas (electricity, heating, air conditioning, humidity, etc.) must be controlled so as not to disrupt either the smooth running of lessons and assessments or the socialisation of learners. • Laboratory testing facilities, including but not limited to power sources, lighting and environmental conditions, must be adequate to facilitate the adequate execution of tests. • The laboratory shall monitor, control and record environmental conditions in accordance with the requirements of relevant specifications, methods and procedures, or where they influence the quality of results. • In laboratories, adjacent areas where there are incompatible activities should be separated. • Existence of a permanent unit, fully equipped and fully manned for the maintenance and repairs of equipment and facilities • Availability of maintenance contract, system audit of infrastructure • Location plan and directional signs of classes and labs and other facilities are available • Provision of IT equipment and software to staff and students. • Availability of policy for the renewal of IT equipment for staff

b) A properly organised library equipped with facilities and resources (physical and/or electronic); adequate for the number of students and staff;	<ul style="list-style-type: none"> • Existence of a library which is accessible and open throughout the day, adapted to the number of students and which respects the rules and requirements in terms of comfort, hygiene and ergonomics • Existence of a system for managing and facilitating searches of the documentary resources • Existence of soundproofed work rooms in the library.
c) Adequate Information and Communication Technology (ICT) infrastructure, including affordable, high speed and dedicated connectivity.	<ul style="list-style-type: none"> • Provision of a distance learning platform. • The infrastructure dedicated to distance learning meets the normative requirements in terms of safety, hygiene and comfort • The planning of activities and its updating follows a strategy and planned and unplanned needs for change; all resulting information is documented and kept. • Reliable, high-speed internet access • Dedicated policy and procedures for the design and implementation of distance learning • Sufficient and appropriate infrastructure to ensure technical support in terms of server space, redundancy or load balancing • IT plan to ensure maintenance and upgrading of ICT • Competent and reliable technical services in terms of backup and remote services • Resources to develop teachers' knowledge and skills in ICT • Rules of procedure to ensure privacy, security and safety of data and any relevant confidential information • Access to training for off-campus or virtual students • Budget for IT infrastructure and related services
d) d'installations conformes aux dispositions nationales pertinentes en matière de santé et de sécurité ; et	<ul style="list-style-type: none"> • Existence of a safety register of facilities and equipment (approved by the authorities) • Reports of technical visits to the facilities • Health, Safety and Environment Unit • Compliance with safety standards in terms of fire-fighting (fire extinguishers, fire hydrants, rescue teams, etc.) • Compliance with health and safety rules in accordance with ISO 45001 • Specific maintenance procedures for laboratories and workshops • Measures are taken, communicated and implemented in the event of a pandemic or any risk of contamination • Compliance with the requirements of ISO 17025 for testing laboratories (educational and research) • The location of buildings and various areas (car parks, storage areas, etc.) is linked to the traffic plan and to the major risks identified (fire, explosion, toxicity, etc.) • The physical environments (noise, lighting, air quality, etc.) in the practical laboratories require particular attention and care to guarantee health and safety conditions for students, teachers and staff
e) Facilities accessible for persons with disabilities.	<ul style="list-style-type: none"> • Physical existence of access ramps (with slope respecting the standards) to all spaces (educational, research, administration, library, etc.) • Physical existence of lifts for all high spaces (educational, research, administration, library, etc.). • Essential information must be accessible to people with disabilities (for the hearing impaired, blind, mobility impaired, etc.). • The institution must limit the number of pedestrian routes with a difference in level to facilitate access for the disabled. • Maintenance policy for all these infrastructure/facilities • Master plans

In the case of E-learning, the institution ensures:

a) Sufficient infrastructure to address technical support in terms of:

- i. Server space,
- ii. Redundancy or load balancing,
- iii. Technical help desk,
- iv. Reliable internet access, and
- v. Reliable technical services in terms of back-up and remote services; and
- vi. Resources to develop the knowledge and skills of their ICT practitioners.

b) That it has an ICT plan for purposes of:

- i. Maintaining and upgrading of technologies; and
- ii. Ensuring reliability, privacy, safety and security.

c) That there is consistency and coherency of the technical framework for students and academic staff, which ensures that any change in technology is introduced in a way that minimises its impact on students and academic staff.

Therefore, the institution has:

- i. A clear structure for communicating changes in software programmes, hardware or technical system / procedure when a student or staff proceeds from one course to another,
- ii. A training programme / process for both staff and students when new software or a new system is adopted,
- iii. Access to training by off-campus or virtual students, and
- iv. Learning policy on new software when a student or tutor proceeds from one course to another.

d) That hardware, software and technical support are an important element of e-learning and, therefore, the institution has the following in place:

- i. A help desk that operates 24 hours and 7 days a week,
- ii. A system for monitoring and supporting a range of hardware / software,

Clearly stated technical expectations, iv. A system for Frequently Asked Questions (FAQs), which should be assessed and feedback given to students.

- Existence of a permanent unit, fully equipped and fully manned for the maintenance and repairs of equipment and facilities
- Availability of maintenance contract, system audit of infrastructure
- Location plan and directional signs of classes and labs and other facilities are available
- Provision of IT equipment and software to staff and students
- Availability of policy for the renewal of IT equipment for staff

STANDARD 6. STUDENT RECRUITMENT, ADMISSION, CERTIFICATION AND SUPPORT SERVICES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The institution shall have pre-defined, published and consistently applied policies and procedures that ensure fair and equitable recruitment and admission, progression, certification and support services through all phases of the student's lifecycle, and in issues concerning students' future employability.</p> <p>The institution shall have documented policies and strategies that promote students' welfare and guidance in curricular, vocational and personal areas.</p> <p>Guidelines</p> <p>Providing conditions and support that are necessary for students to make progress in their academic career is in the best interests of the individual students, programmes and institutions. It is vital to have fit-for-purpose admission, recognition and completion procedures.</p> <p>Therefore, the institution has clear guidelines and strategies:</p>		
<p>(a) For marketing/promoting the institution and its programmes, recruitment, admission, selection and registration;</p> <p>(b) That promote diversity in admission, including gender mainstreaming and consideration of disadvantaged groups and persons with disabilities, where applicable;</p> <p>(c) That ensure that students admitted meet minimum general and programme-specific entry requirements;</p> <p>(d) That ensure monitoring, evaluation and benchmarking for improvement of enrolment management;</p> <p>(e) That guarantee continual collection and compilation of data on students' admission, progress and performance, and graduation rates;</p>	<p>a) Student Recruitment and Admission</p> <ol style="list-style-type: none"> 1. Does the institution have clearly formulated admission criteria for undergraduate and postgraduate programmes? 2. Where selection is done, are the procedures and criteria clear, adequate and transparent? What are the requirements? How do prospective students acquire the information on the said selection mode? 3. Are the planned study load for the programmes on offer in line with the actual study load that students undertake? 4. How do you analyse the development of the student admission? 5. What mechanisms are in place to effect the quality and size / capacity of the admissions, and how effective are these mechanisms? Can an average student complete the study programme in the planned time? 6. Is admission criteria in line with local requirements and/or legislations, if any? 7. Is there any appeal mechanism regarding admission? 	<ul style="list-style-type: none"> • Admission, equivalence and transfer policies • Policies and procedures on the transfer of students and equivalence of courses • Documentation on student admission, graduation, transfer and equivalence of courses • The role of councils and their responsibility for implementing, and following up teaching and learning policies.

<p>(f) That promote student retention and progression, and address issues concerning drop-out rates;</p>	<p><i>8. Does the institution have a structured monitoring system for collecting information on drop out and success rates among students in the institutional programmes offered?</i></p> <p><i>9. Is the average time for graduation in line with the planned time for finishing the programmes in the institution?</i></p> <p><i>10. How are the final qualifications achieved by the graduates aligned to the formulated expected learning outcomes of the study programmes in the institution, and are they recognized by professional bodies and employers?</i></p> <p><i>11. How does the institution take cognizance of national policies and legislation regarding the recognition of qualifications gained by students locally, regionally and internationally?</i></p> <p><i>12. What percentage of graduates get employed within two years after graduation?</i></p> <p><i>13. Are the content and level of the graduation projects in line with the degree awarded (Bachelors / Masters / Doctorate)?</i></p> <p><i>14. How does the institution assure that the graduates are able to operate adequately in the field for which they have been trained?</i></p>	<p>b) Certification</p> <ul style="list-style-type: none"> • Regulations and procedures for testing and grading • Analysis of students' admission against annual dropout rates and graduation statistics • Policies and procedures of graduation requirements for undergraduate programmes • Policies and procedures of graduation requirements for the higher diploma and the Master's and Doctoral programmes, such as the proficiency examination for the doctoral programmes, the comprehensive examination for the master's programmes, and any other requirements • Regulations and procedures for the preparation of dissertations and theses • Adherence to the time limits specified for the offered programmes • Annual statistics of graduation records for all levels of programmes offered in the institution • Percentage of graduates being employed in the profession within six months upon graduation for the last five years. • Graduates monitoring policy
<p>(g) That ensure rigorous processes for issuance and storage of certificates; and</p>		

<p>(h) That ensure storage of detailed records and transcripts, indicating the list of courses, units and grades. The needs of a diverse student population (such as mature, part-time, employed and international students as well as students with disabilities) and the shift towards student-centred learning and flexible modes of learning and teaching, are taken into account when allocating, planning and providing learning resources and student support. Support services may be organized in a variety of ways depending on the institutional context. However, the internal quality assurance ensures that all resources are fit-for-purpose, accessible, and that students are informed about the services available to them.</p> <p>Students need guidance, and appropriate provision is made to advise and assist them in curricular, vocational and personal domains. Adequate provision is made for information and advice to potential students during the application and enrolment phases.</p>		
<p>The institution has guidelines for the promotion of students' learning by:</p> <p>(a) Advising them on academic issues;</p>	<p>Guidance and counselling:</p> <p>15. <i>How are students made aware of their rights and responsibilities while undertaking their study programmes?</i></p> <p>16. <i>What policies, regulations and procedures are in place for psychological and social counselling? How are these implemented?</i></p> <p>17. <i>Does the institution have specific units / centres set for student counselling and guidance, and what entails counselling and guidance in your institution?</i></p> <p>18. <i>What mechanisms are in place for support and follow-up of learners with specific learning difficulties?</i></p> <p>19. <i>How does the institution ensure development of independent skills of learners?</i></p> <p>20. <i>How does the institution ensure successful student progression from one level of education to the next higher level, and how are learners assured of gainful employment thereafter?</i></p>	<p>c) Student Services</p> <ul style="list-style-type: none"> • Policies, regulations and procedures of raising student awareness • Policies and regulations concerning the rights and responsibilities of students • Psychological and social counselling procedures • Vocational guidance procedures • Provision of organizational units or offices concerned with student guidance and counselling • Student guidance and counselling activities and periodic students' evaluation of the same • Training courses directed toward students development of independent skills • Clearly specified roles and responsibility for academic and personal counselling • Provision of orientation to learners on the desired learning skills for pursuing the study programmes • The role of committees and councils in student guidance and counselling • Plans for development and follow-up of student guidance and counselling • Provision of opportunities for learners to progress both vertically and horizontally • Career guidance advice provided for learners

	<p>Communication with Students / Graduates</p> <p>21. <i>How is the information flow to potential students organized? Is sufficient attention paid to the requirements of their educational backgrounds?</i></p> <p>22. <i>What are the mechanisms of identifying student problems in the study programmes and what action is taken to remedy and / or prevent them for affected students or in the programme development?</i></p> <p>23. <i>How are students advised on problems concerning course options, change of options, interruption or termination of studies, practical training or final project work?</i></p> <p>24. <i>Is information provided on career prospects? Do students have the opportunity to familiarize themselves with the labour market by means of practical training, application courses and such like options?</i></p> <p>25. <i>What role do staff members play in informing and coaching students, and integrating students into the study programmes?</i></p> <p>26. <i>To what extent do the structure and organization of the study programmes contribute to students taking an active study approach?</i></p>	<ul style="list-style-type: none"> • Procedures for strengthening the institution's relationship with the graduate • The graduates' representation on governance boards and committees • Coordination and cooperation with employers and employing bodies • Statistics of the participation of graduates in educational activities of the institution • Exit surveys of graduates upon completion of the programmes offered • Opinion polls oriented toward graduates and employers • Statistics of alumni activities and number of their participants
(b) Advising them on financial matters;		
(c) Providing health and personal counselling services; and	<p>27. <i>What policies, regulations and procedures are in place for psychological and social counseling? How are they implemented?</i></p>	<ul style="list-style-type: none"> • Psychological and social counseling procedures

<p>(d) Providing career guidance.</p> <p>The institution supports and develops appropriate strategies for the creation and functioning of cultural, artistic and sports facilities and associations.</p>	<p>28. <i>What procedures are there to assure the quality of the student support activities, such as: tutoring system, student advice and or counselling, student accommodation, health services, and sporting facilities?</i></p>	<ul style="list-style-type: none"> • Regulation of student elections and procedures • Regulation of student grants and loans and procedures, and number of students benefitting from these • Regulation followed in the provision of support services, and their procedures • The institution's policy adopted for extra-curricular activities, and statistics of the activities and number of their participants • The role of student clubs in supporting services, the number of clubs and their objectives and quality • Following up support services' performance and development • Surveys of student views toward services such as accommodation, sports, health, restaurants, banks and bookshops • Mechanisms for looking into student complaints and how the students benefit from these
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STANDARD 7. DESIGN, APPROVAL, MONITORING AND EVALUATION OF STUDY PROGRAMMES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The institution shall have policies and systems that ensure the design and development, monitoring and evaluation of quality, relevant study programmes that are learning outcomes-based and aligned with the needs of stakeholders; and that contribute to the achievement of its mission, and are commensurate with national, regional and international standards.</p> <p>In the case of ODL, the provider shall have in place mechanisms for pre-testing or piloting the learning materials to ensure that they are at the learners' level and that the learners will be able to use them without difficulty.</p> <p>Guidelines</p> <p>The institution:</p>	<p>Design of study programmes is based on sound educational principles and provides a coherent and interactive series of learning experiences that develop knowledge, skills and competencies aligned to learning outcomes appropriate to the qualification level. The qualification resulting from a study programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications at regional and international levels. The approval process follows laid down policies and procedures of the institution, regulatory agency and professional bodies.</p> <p>An institution should have a monitoring and evaluation system to collect information about the quality of its study programmes. The monitoring and evaluation system should at least include: student evaluations, staff course / module / programme reviews, a student progress system, dropout and pass rates, structured feedback from the labour market, and structured feedback from the alumni.</p>	
<p>(a) Has policies, procedures and processes for introducing new programmes with learning outcomes and that are competence-based, and for amending or phasing out standing programmes and programmes are subject to continuous monitoring and evaluation (including periodic external review) and development to ensure currency, quality and relevance;</p>	<p>Design and Approval of Study Programmes</p> <ol style="list-style-type: none"> 1. Does the institution have clear standards for curriculum, module, or course design and development? 2. Who initiates the introduction of new programmes? What procedures are in place, and are they clearly documented and followed? 3. Who is involved in the designing, approval and implementation of the quality assurance procedures and what does this entail? 4. Why and when does the institution decide to launch a new programme? 5. Is each course unit or module designed with the learning outcomes of the programme and qualification level in mind? 6. Are innovative, interactive and engaging features embedded in the online, blended and face-to-face curricula? 7. Is the curriculum design coherent? Does it develop disciplinary and generic skills progressively over the duration of the study programme? 	<ul style="list-style-type: none"> • Policies and procedures on introducing, developing, revising and terminating study programmes • Admission and graduation policies and procedures • Policies and procedures on the transfer of students and equivalence of courses • On-going improvement of the learning and teaching methods • Integrated relationship between faculty members and the staff working at the library and databases • The role of councils and their responsibility for implementing, and following up teaching and learning policies • Publishing all expected intended learning outcomes of all study programmes • Clarity and integration of the study plans of offered programmes • Degree of compatibility of programs with the vision, mission, and goals of the institution • Student orientation and academic advising programs

	<p>Monitoring and Evaluation of Study Programmes</p> <p><i>8. How is continuous improvement of programmes assured?</i></p> <p><i>9. How do you build the system of monitoring to enhance your internal quality assurance system (IQAS)?</i></p> <p><i>10. What kind of relevant data feed the process of periodic reviews?</i></p> <p><i>11. How often are courses, modules or programmes reviewed? Do the reviews evaluate support services, resources and staffing? Why have you decided for these monitoring and review intervals, no longer or not shorter?</i></p> <p><i>12. How are periodic reviews organized?</i></p> <p><i>13. How do you ensure transparent structure of responsibilities and tasks?</i></p> <p><i>14. Is the workload of periodic reviews an issue?</i></p> <p><i>15. Have programme changes introduced on the basis of periodic reviews affected its original purpose? Its resources?</i></p> <p><i>16. Do programme aims, intended learning outcomes, assessment strategy and teaching methods need to change as a result of the reviews?</i></p> <p><i>17. How do you check the appropriateness of learning environment and support services for the purpose of programme delivery?</i></p> <p><i>18. How do you communicate the results of monitoring and periodic reviews?</i></p> <p><i>19. Is anything done with the results, and how transparent is the implementation of the reviewed results?</i></p>	<ul style="list-style-type: none"> • Continuous improvement plans • Policies and procedures for evaluating and developing curricula on a regular basis • Policies and procedures for monitoring the quality assurance of inputs, processes and outputs of proposed programs • Policy for evaluation of teaching/learning • Policies on the process and procedures for evaluating the performance of students and faculty members • Documented changes and implementation in courses/modules and programs based on feedback from IQA committees, student-staff committees, and software results analyzed by external stakeholders
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<p>(b) Has academic programmes that are in line with its mission and objectives and address the expectations and needs of stakeholders; therefore, the programmes show range, depth, coherence, quality and relevance; are up to date and adequate in content and scope, promoting core content, ideas, values and the acquisition of employability skills, such as work-related learning/attachment/ internship/ traineeship;</p>	<p>20. <i>How are the programmes linked to the labour market needs, social needs, and development of different disciplines nationally, and regionally?</i></p> <p>21. <i>Do the courses / modules / programmes reflect pedagogical approaches to curriculum design, and not just technical approaches?</i></p> <p>22. <i>How are the needs of society identified and included in the programmes? Are there any other changes such as in research, technology, students' needs or employers' expectations, that affect the programme?</i></p>	
<p>(c) Ensures that programme structures and credit hours/units are in accord with international norms for the amount of study required for each qualification it offers (or for the level of the qualifications awarded); and that programmes are approved by the relevant national QAA and professional bodies, where applicable;</p>	<p>23. <i>How many of your programmes are accredited by your Quality Assurance Body?</i></p>	
<p>(d) Has effective mechanisms for stakeholder participation in curriculum design, review and validation, including feedback from students, alumni and employers;</p>	<p>24. <i>Does your institution involve external stakeholders in the design of new programmes? If so, how are they involved in the design of the study programmes? Any examples in the last five years?</i></p> <p>25. <i>How are the various internal (including students) and external stakeholders involved in periodic monitoring and evaluation?</i></p> <p>26. <i>Do you conduct and analyze surveys of students, employers, and alumni?</i></p> <p>27. <i>Are these surveys statistically representative?</i></p>	<ul style="list-style-type: none"> • Results of surveys of students' opinions concerning the programme learning outcomes • Results of surveys of the teaching staff opinions concerning the learning outcomes of study programmes • Studies on the labour market and the satisfaction of graduates and employers • Structured feedback mechanisms from the labour market and alumni • Use of developed software for programme evaluation by external stakeholders such as alumni and employers • Compatibility and consistency between programme learning outcomes and the labour market requirements

<p>(e) Has policies requiring formulated learning outcomes to be defined and documented for all programmes and courses, and ensures that the programme specifications are accessible to learners (or stakeholders);</p>	<p><i>28. Are the learning outcomes for all types of programme delivery clear, accessible and realistic?</i></p> <p><i>29. Are the learning outcomes communicated to prospective students, current students and staff?</i></p> <p><i>30. Is the development of learning outcomes evident in the curriculum and stated assessment modes?</i></p> <p><i>31. Are assessment tasks mapped to each learning outcome? What is the system of identification of achieved learning outcomes? How are the learning outcomes validated?</i></p> <p><i>32. Do the learning outcomes for the different modes of curriculum delivery of the study programmes encompass specific subject matter knowledge as well as generic skills such as problem-solving, collaborative, communication, analytical and ICT skills?</i></p>	
<p>(f) Has structures and procedures for the approval of programmes by relevant bodies, such as the Senate, and authorities such as professional bodies, if applicable;</p>		
<p>(g) Has programmes that are delivered by adequate, qualified and competent staff with pedagogical skills;</p>	<p><i>33. What are the qualifications and experience of your teaching staff?</i></p>	<ul style="list-style-type: none"> • The extent of consistency of the qualifications of the faculty members with areas of specialization • Provision of a table with information on the number of teaching staff with Bachelor's degree, Masters and Doctorate degree, including pedagogical training, age and gender.
<p>(h) Has appropriate formal agreements for all programmes offered in partnership with other institutions, specifying in detail the roles and responsibilities of both partners, including teaching commitments and QA arrangements; and</p>		<ul style="list-style-type: none"> • Samples of agreements and partnerships.
<p>(i) Ensures that the formulated learning outcomes are benchmarked against level descriptors of national or regional Qualifications Frameworks, as applicable.</p>	<p><i>34. Are the learning outcomes aligned to the national / regional qualifications framework, relevant standards, national / professional accreditation requirements and workforce needs?</i></p>	

<p>In the case of ODL, the pre-testing of learning materials is essential for ensuring that the learners will be able to achieve the objectives or intended learning outcomes.</p> <p>The broad requirement of pretesting should be made available, for example:</p> <ul style="list-style-type: none"> (a) students' understanding of the objectives; (b) Language of presentation; (c) Explanation of concepts, ideas and theories; (d) Use of examples for illustration; (e) Activities and practice exercises given, and feedback provided; (f) Use of symbols or icons; (g) Navigational devices for online materials; (h) Motivate and sustain learners' interests; and (i) Use didactic concepts in writing modules. 	<p>35. <i>Does your institution offer ODeL Programmes?</i></p> <p>36. <i>Does the institution have in place standard formats for instructional design and development such programmes? How are these implemented?</i></p> <p>37. <i>Do the instructional designs recognize diversity of learners' learning contexts and learning styles, and ensure realistic scheduling of activities? Do the designs include assessment of learning against stated learning outcomes?</i></p> <p>38. <i>What technologies are in place (multimedia learning resources) to engage and support learners and to provide them with communication facilities? How is the appropriateness of these technologies measured?</i></p> <p>39. <i>What types of learning activities are provided in the study programmes to encourage active learning, collaborative learning, and self-assessment?</i></p> <p>40. <i>How does the institution ensure there is appropriate personnel for quality production of course materials? What procedures are in place for the quality production processes?</i></p>	<ul style="list-style-type: none"> • Policy for the implementation of ODeL programmes • Templates are designed and developed for effective instructional design and efficient course development • The institution provides prior training and necessary inputs to the staff involved in instructional design and development • The institution adheres to the agreed formalities and templates to be used for instructional design and development • The instructional design template requires the use of inclusive language and provides a variety of activities that accommodate different learning styles, circumstances and preferences • Scheduling of activities addresses the needs of distance learners and their access to technology and other facilities • Learning outcomes are clearly stated. Assessment is designed to measure achievement of learning outcomes in terms of defined criteria • Appropriate technology is used to engage and support learners • Communication with learners uses the technologies that are most accessible to the learners such as the internet, mobile phone, telephone, television and radio • The institution analyses the ease of use and level of technology available to the learners • Appropriate learning strategies such as experiential learning, collaborative learning and personal learning are designed into the courses • The institution systematically records and assesses the effectiveness and impact of learning strategies • Roles and responsibilities for quality assurance in course materials design, development and production are clearly specified • The institution has mechanisms to ensure the relevant competence of the content developers, technical and support staff and others involved in course design, development and production • Technical and production standards in course design, development and production are clearly specified • The course materials developed are pilot-tested and quality assured with reference to the aims and objectives of the study programmes and learners' needs prior to their release for extensive use • The institution receives regular feedback from tutors on the course materials, with reference to their user friendliness, appropriateness and effectiveness • The feedback is used in improving the course materials and assuring their quality
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STANDARD 8. TEACHING, LEARNING AND ASSESSMENT

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The institution shall put in place, in a way that is consistent with its vision and mission, policies and procedures that promote learning and acquisition of appropriate knowledge, competencies and skills; and assure fair and transparent assessment based on student-centered assessment.</p> <p>The assessment principles, standards and procedures are explicit and made available publicly to both students and staff.</p> <p>Guidelines</p> <p>Teaching and learning is one of the core activities of a higher education institution, and it is important that the academic staff and facilitators ensure quality student experience to enable the students to acquire appropriate knowledge, competences and skills.</p> <p>The institution ensures that:</p>		
a) The teaching, learning and assessment strategies are student-centered and flexible; motivate students' self-reflection and engagement in the learning process;	<p>Teaching and Learning</p> <ol style="list-style-type: none"> 1. How does the institution ensure that the teaching and learning strategies are suitable for the mode of delivery or offering type? 2. How does the institution ensure that the teaching and learning methods are appropriate for the achievement of the intended learning outcomes? 3. Describe what mechanisms are in place to ensure that teaching staff have the required skills and experience to facilitate effective learning? 4. Explain what mechanisms are in place for staff continuous professional development? 5. What collaborative teaching practices are applied to encourage students to build and hone critical and independent thinking skills, and engage them actively in the learning process that would enable them to master required competencies (participative learning, experiential learning, collaborative learning approaches, etc.)? 	<ul style="list-style-type: none"> • Teaching, learning and assessment framework/ policy • Written reports on analyses of different types of evaluations, including challenges/weaknesses identified and recommended corrective measures to improve the quality of teaching, learning and assessment • Written records of reports on student evaluations shared with students • Records of student performance and achievement of learning outcomes

<p>b) The environment and resources are appropriate and adequate to support each student;</p>	<p>6. <i>How does the institution ensure that a conducive teaching and learning environment is provided to support students' active learning and enable them to achieve learning outcomes?</i></p> <p>7. <i>How does the institution support students of different backgrounds and with diverse needs?</i></p>	<ul style="list-style-type: none"> • Strategies used to cater to student diversity • Written records of accommodating student diversity
<p>c) There are systems in place for periodic monitoring, assessment and evaluation of the teaching and learning approaches for quality improvement; and</p>	<p>8. <i>What systems are in place to monitor and evaluate teaching and learning methods? How regularly is this done and who are involved in these activities?</i></p> <p>9. <i>What mechanisms are in place to ensure feedback about student satisfaction on the teaching, learning and assessment methods and processes?</i></p> <p>10. <i>What monitoring and evaluation systems does the institution have in place to ensure continuous enhancement of learning and facilitation?</i></p> <p>11. <i>How does the institution ensure that quality of teaching and learning approaches are upheld?</i></p>	<ul style="list-style-type: none"> • Written records of training interventions in response to corrective actions to improve pedagogical and assessment methods and skills of lecturers/ efficiency of tools and methods used to evaluate performance of lecturers • Tool (questionnaire) for head of department-lecturer evaluations • Tool for peer evaluations
<p>d) There are mechanisms for students to provide feedback on their learning experience.</p>	<p>12. <i>What mechanisms and processes are in place to solicit students' views on their learning experience? How often is this done, if students in fact participate in these feedback activities?</i></p> <p>13. <i>Should students not participate in the feedback activities, what strategies are used to motivate them to provide feedback?</i></p>	<ul style="list-style-type: none"> • Student satisfaction surveys (tool for student-lecturer evaluations, tool for student-course evaluations)

In the case of ODL:	Open and Distance Learning	
<p>a) The decision on the medium or media of delivery should take into account the following:</p> <p>i. Accessibility to the learners,</p> <p>ii. Cost of using it, both by the institution at installation and maintenance, as well as learner cost,</p> <p>iii. Teaching strengths in relation to specific content,</p> <p>iv. Its capacity in creating inter-activity,</p> <p>v. Organisational requirements for development,</p> <p>vi. Its novelty, and</p> <p>vii. Speed within which it can be set up.</p> <p>b) There are face-to-face sessions to provide general orientation and introduction to the course materials at the commencement of the course;</p> <p>c) There are special face-to-face sessions for difficult aspects of the course during the programme/course; and</p> <p>d) There are face-to-face sessions to provide some revision work to learners before examinations.</p>	<p>14. <i>What mechanisms does the institution have in place for the effective implementation of ODL?</i></p> <p>15. <i>How does the institution ensure adequate and suitable infrastructure, information and communication technology (ICT) resources, library and information resources, etc. for ODL students to support their teaching, learning and academic needs?</i></p> <p>16. <i>What fee structure does the institution have in place to specify various costs (to students and the institution) associated with ODL offering?</i></p> <p>17. <i>What plans and procedures are in place to ensure ODL offerings are not inferior to face-to-face teaching, learning and assessment (e.g., supporting DE students with difficult aspects of the curriculum, examination revision and preparation, amongst other)?</i></p> <p>18. <i>What arrangements are in place to teach ODL students and how does the institution ensure that all students have equal access to teaching?</i></p> <p>19. <i>How does the institution cater for orientation of distance education (DE) students?</i></p> <p>20. <i>What arrangements are in place to assist distance education students with difficult aspects of the curriculum?</i></p> <p>21. <i>What arrangements are in place to cater for examination revision sessions for distance education students?</i></p>	<ul style="list-style-type: none"> • ODL policy and guidelines • Fee structure for ODL • Reports detailing costs of offering ODL • Continuous training and professional development interventions for lecturers • Reports on training interventions for lecturers teaching in the DE mode • Timetables and attendance lists for student orientation sessions, contact sessions and examination preparation sessions

Student assessment	Student assessment
<p>Student assessment is one of the most important elements of higher education because the outcomes of such assessment have a profound effect on students' progression and future careers. It is, therefore, important that assessment is carried out professionally at all times. This implies that:</p> <p>a) The assessment and procedures are published and consistently applied, and include:</p> <p>i. A range of assessment methods (e.g., coursework, projects, research, dissertation and examinations to serve formative and summative assessment purposes),</p> <p>ii. Internal and external moderation,</p> <p>iii. Invigilation procedures,</p> <p>iv. Monitoring of student progress,</p> <p>v. Validity and reliability of assessment practices,</p> <p>vi. Recording of assessment results and settling of disputes, and</p> <p>vii. Rigour and security of assessment system.</p>	<p>22. <i>How are staff and students informed about assessment principles, standards and procedures (what platforms/ methods are used to convey this information)?</i></p> <p>23. <i>Does the institution have an assessment and moderation policy? What processes are in place to ensure effective implementation thereof?</i></p> <p>24. <i>What mechanisms are in place to ensure that formative and summative assessment methods are appropriate for their purpose?</i></p> <p>25. <i>What is the level of competency of academic staff to develop assessment strategies fit to effectively measure students' progress towards achieving learning outcomes?</i></p> <p>26. <i>What mechanisms are in place to ensure that the assessment methods will effectively measure the students' progress towards achieving the learning outcomes for the programme?</i></p> <p>27. <i>How are assessment results and decisions recorded and documented in a secure, accurate and systematic way?</i></p> <p>28. <i>What mechanisms and procedures are in place for data capture and management? What control procedures and security measures are in place for the storage of assessment results?</i></p> <p>29. <i>How is internal and external moderation conducted? Does the assessment system make provision for internal and external moderation, and at which levels?</i></p> <p>30. <i>Are there effective invigilation procedures in place? How are examinations, including invigilation, dealt with in an accurate and secure manner?</i></p> <p>31. <i>Does the assessment system make provision for work-based learning?</i></p> <ul style="list-style-type: none"> • Assessment and moderation policy • Examination procedures guidelines/ manual • Guidelines for assessors/examiners and moderators • System for capturing students' examination grades/results • Students' progression records

(b) Assessment standards are spelled out for each programme and are competence- or outcomes-based, where applicable;		
(c) Assessment is carried out by competent and impartial examiners;	<p>32. <i>What measures are in place to ensure that students are assessed by well-qualified and experienced staff?</i></p> <p>33. <i>What staff development opportunities does the institution have in place to enhance assessment practices and skills of academics?</i></p> <p>34. <i>What mechanisms are in place to ensure that staff, including examiners and moderators, who conduct assessments understand the principles and functions of assessment?</i></p> <p>35. <i>How does the institution ensure that assessment is conducted securely and with rigour and fairness?</i></p>	<ul style="list-style-type: none"> • Appointment procedures for moderators • Reports on staff development and training interventions and effectiveness thereof
(d) Integrity of examinations and award of degrees are ensured to guard against examination malpractice;	36. <i>What mechanisms are in place to ensure the integrity and accuracy of examinations and the issuing of certificates?</i>	<ul style="list-style-type: none"> • Assessors/examiners and moderators' reports
(e) There are regular objective feedback to students on their strengths and weaknesses, and appropriate counselling support for improvement;	37. <i>Does the institution have systems in place to identify poor performing students and how does the institution deal with such students?</i>	
(f) There is a disciplinary and appeals process for students who may feel aggrieved; and	38. <i>How does the institution deal with student appeals and disciplinary cases? Which systems and procedures are in place?</i>	
(g) There is a QA handbook, which is known to staff and students.	39. <i>Does the institution have a handbook/guide/manual that details internal quality assurance activities and procedures? Through what means is it accessible to staff and students?</i>	<ul style="list-style-type: none"> • Reports on internal QA activities and effectiveness thereof

STANDARD 9. RESEARCH AND INNOVATION

Standard	Examples of good practice – Evidence
<p>The institution shall encourage, promote, and engage in innovative research consistent with its policies and strategic plans, and address national, regional, continental, and international needs. The institution shall encourage innovation in its teaching, learning and research.</p> <p>The institution shall ensure that the management of postgraduate studies is conducted within an approved framework of institutional policies and plans that ensure quality ethical research.</p> <p>Guidelines</p> <p>Research is one of the core activities of a higher education institution, and the institution therefore requires an institution-wide research policy that sets the direction of its research. The policy is at both institutional and research-programme level (postgraduate studies) to ensure proper engagement in research.</p>	
<p>The institution ensures that:</p> <p>a) There is a shared understanding of the nature, role and goals of research;</p>	<ul style="list-style-type: none"> • The research policy and objectives are formalized in the institution's implementation plan, in accordance with national and regional policy and its priorities. They are disseminated and shared. • The research objectives are relevant to the context and needs of the territories. • The nature of the research is consistent with the institution's missions and values.
<p>b) There are standards, procedures and processes for the approval of research proposals, and theses, and the conduct and supervision of research studies;</p>	<ul style="list-style-type: none"> • The institution's organisational chart makes the structure, hierarchy and the entire organisation of research (tasks, functions, responsibilities) visible. • The requirements for the approval of theses and research topics are decided in the bodies provided for this purpose (scientific committee and council), documented in the minutes and kept. They are visible and communicated to all interested parties • Consultation of the research-specific procedures manual, which includes the procedure for selecting a research topic (ensuring ethics, transparency and fairness). • Research master plans following the country's priority themes are developed and made available to doctoral students, doctoral schools and all interested parties.

<p>c) There are policies, research management systems and strategies, adequate infrastructure and resources that facilitate all staff to undertake innovative research, and publish research results;</p>	<ul style="list-style-type: none"> • There is a research strategy plan validated by the relevant bodies (scientific committee and council). • Measuring equipment must be regularly checked and calibrated (existence of calibration certificate). • Compliance with the requirements of ISO 17025 for testing laboratories (research) • Compliance with health and safety rules in accordance with the requirements of ISO 45001 • The human resources within the laboratories (researchers and support staff) are sufficient, both qualitatively and quantitatively. • The laboratory should monitor, control and record environmental conditions in accordance with the requirements of relevant specifications, methods and procedures, or where they affect the quality of results. • In laboratories, adjacent areas where there are incompatible activities should be separated. • The environmental conditions of teaching rooms and areas (electricity, heating, air conditioning, humidity, etc.) must be controlled so as not to disrupt either the proper conduct of teaching and assessment or the socialisation of learners. Records of these conditions exist for verification. • Planning of scientific visits is documented and implemented to enable researchers to communicate their results. • Instructions for testing should be documented and posted in the vicinity of the equipment concerned.
<p>d) There are standards and processes for the approval of research proposals and theses, in line with the research needs of the national or regional context, and capacity building possibilities for researchers, management of research partnerships and research contracts, handling of intellectual property and commercialisation of research, and effective and trustworthy management of research information;</p>	<ul style="list-style-type: none"> • Training and awareness-raising activities on intellectual property are regularly organised. Information about these activities is documented and kept. • There is an incubator in the institution. • Research promotion activities are documented and kept. • A specific structure for the relationship with the socio-economic sector, for applied research, exists (verification of an internal or ministerial order). • Research projects are financed by various public and private sources. • Verification of the number, quality and relevance of contracts with external partners for applied research that meets societal needs (public companies, private companies, administration, NGOs, etc.).
<p>e) There is adequate academic integrity through the establishment and use of appropriate research committees and boards to ensure academic integrity;</p>	<ul style="list-style-type: none"> • Existence of an internal or ministerial decree creating a body responsible for the respect and monitoring of ethics and deontology. • The code of ethics and deontology (specific to research, or including a specific part for research) is documented, available and communicated. It should include all requirements regarding non-discrimination of researchers. • Documented information on the researcher's formal commitment to ethics and professional conduct is maintained and accessible. • Awareness-raising and outreach activities are regularly organised for researchers (document verification of these activities). • Documented evidence that training on plagiarism is regularly organised is kept and available.

<p>f) The research undertaken is relevant and responsive to the needs for academic advancement and community development expectations; and</p>	<ul style="list-style-type: none"> • Existence of a procedure to facilitate scientific and technological monitoring; this is disseminated to all researchers. • The research themes developed are in line with the planned research policy and strategy. • Have a policy of cooperation and partnership agreements in order to meet the needs of the socio-economic environment (public or private). • Ensure, internally, the pooling of research resources and activities. • Encourage transdisciplinary and multidisciplinary research themes. • Identify the areas of expertise in order to seize partnership and funding opportunities in its environment. • The development plans of the research laboratories integrate the forecasted development of human resources. • Have procedures for the promotion of researchers with predefined criteria. • The career development of researchers is documented and visible in the research-specific procedure book (or other document); it is transparent, fair and based on merit; for this purpose, the criteria are predefined and communicated to researchers. • The institution plans and implements training and coaching for young researchers to acquire the necessary skills, and evaluates the effectiveness of these activities; this information is documented and maintained. • The institution has a policy for making organisational knowledge available to young researchers, as necessary, through training and awareness-raising activities; this information is documented and maintained.
<p>g) There is effective monitoring and evaluation of the research system.</p>	<ul style="list-style-type: none"> • Internal and external evaluations of research (projects, laboratories, etc.) are regularly planned and carried out. Evaluations are carried out taking into account the specificity of the disciplines and using different criteria depending on the objectives pursued. • The evaluators must be qualified and selected from outside the scope of the evaluation; they must respect the principles of evaluation according to the ISO 19011 standard, which must be documented and signed by them (registration). • The recommendations of internal evaluations are implemented and monitored to measure their effectiveness. The results of the assessment shall be communicated to the relevant management, with a view to undertaking the necessary corrective actions and evaluating their effectiveness. These should be documented and retained. • The institution has research steering and monitoring bodies. • The analysis of the assessment and the comparison with the quality objectives allow for the implementation of improvement actions that must be documented in the report; the report is kept and the effectiveness of the actions is measured. • Performance indicators are set up and analysed on a regular basis to identify areas for improvement. • Continuous improvement actions, other than those due to self-assessment, are regularly implemented and monitored to measure their effectiveness. • Budgetary allocation for the research activities as per set standards.

STANDARD 10. COMMUNITY ENGAGEMENT

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The institution shall encourage engagement in community outreach programmes as part of its social responsibility.</p> <p>Guidelines</p> <p>A higher education institution is not only responsible for teaching, learning and research, but also for serving society. The institution ensures that community engagement activities are conducted within institutional policies and strategies that facilitate collaboration between the institution and its larger communities (local, national, regional, continental and global) for the mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity.</p>	<p>1. <i>How does the institution organise its relationship between itself and other various bodies such as communities, individuals and other institutions within an institutional framework that promotes the exchange of scientific, knowledge, humanitarian and other fields?</i></p>	<ul style="list-style-type: none"> • Policies and plans related to the nature of the relationship with the community • Financial and physical support for meeting the needs of the local community development
<p>For the benefit of the students, institution, and society, the institution incorporates community engagement in its activities, with the objective of:</p> <p>(a) Enriching scholarship, research, and creative activities;</p> <p>(b) Enhancing teaching and learning;</p> <p>(c) Facilitating preparation of educated and engaged citizens;</p> <p>(d) Strengthening democratic values and civic responsibility in students;</p> <p>(e) Addressing critical societal issues and contribute to public good.</p>	<p>2. <i>How does the institution preserve the natural resources and environment of the community that it is located in?</i></p> <p>3. <i>In what ways does the institution contribute to the economy and upgrading of the social well-being (physical and cognitive support) of the local community?</i></p> <p>4. <i>How do the staff and graduates of the institution assist in the development of the local community?</i></p>	<ul style="list-style-type: none"> • Studies and research related to sustainable development • Training courses and developmental and awareness-raising lectures • Joint initiatives and development projects • Health services / Medical Fair day events • Contributions of faculty members and students to the local community service and development • The institution's contribution to the preservation of the environment and natural resources • Statistics of the actual annual expenditure on all activities of community service • Statistics of faculty members / administrative staff / students who participated in local community service activities • Statistics of local community members benefiting annually from the health services and medical events.
<p>(f) The institution should ensure that there are mechanisms for partnering with other stakeholders in the community for sustainable development.</p>	<p>5. <i>Does the institution include representation of community members in its governance boards within the decision-making groups?</i></p>	<ul style="list-style-type: none"> • Selection and representation of the local community on the governance boards and committees

STANDARD 11. INFORMATION MANAGEMENT SYSTEM

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
<p>The institution shall ensure that it collects, analyses, and makes use of relevant information for the effective management of its programmes of study and other activities.</p>	<p>Accurate, timely and trustworthy data is vital to allow HEIs to plan and manage their programmes in the most efficient ways, and to make strategic, academic and other decisions based on evidence.</p>	
<p>Guidelines</p> <p>Reliable data is crucial for informed decision-making and for understanding what is working and what challenges need to be addressed. Effective processes for collecting and analysing information about academic programmes and other activities of the institution feed into the internal QA system.</p>	<ol style="list-style-type: none"> 1. Does the institution have a secure and reliable information management system (IMS)? 2. What mechanisms are in place to ensure that the IMS is monitored and reviewed regularly? 3. How is the IMS benchmarked to keep up with international good practice? 4. What types of data are generated through the IMS? 5. In what ways are students and staff involved in mitigating strategies to address shortcomings in the data generated through the IMS? 6. What mechanisms are in place to deal with risks, gaps and challenges in the IMS? 7. How is information from the IMS used to inform planning processes at the institution? 	<ul style="list-style-type: none"> • IMS policy and guidelines • Required IT infrastructure to support the effective use of an IMS <ul style="list-style-type: none"> • Qualified staff to operate the IMS • Qualifications of IMS staff • Regular data audits • ICT policy and guidelines • Risk Management policy and guidelines • Data audit plan and reports • Proof of NQF registration • Programme review reports

<p>The information gathered will depend on the vision and mission of the institution.</p> <p>However, the following points are important to address:</p> <p>(a) Key performance indicators;</p>		<p>The IMS covers the following aspects:</p> <ul style="list-style-type: none"> • Key performance indicators, e.g., student-lecturer ratio, student-supervisor ratio, student retention rates, staff satisfaction rates, etc. • Learning resources and student services provided • Data on academic programmes, e.g., NQF level and credits, NQF registration status, programme accreditation status, offering type, duration of programme, etc. • Staff data, e.g., staff qualifications, years of experience, etc. • Research data, e.g., academic staff research output, registered research patents; and • Financial data, e.g., income from tuition fees, research, and third-stream income activities; student debts, etc.
<p>(b) Profile of student population (including gender);</p>	<p>8. Does your institution have accessible information about students' profiles, progression rates, dropouts and throughput rates? Where is this information stored?</p>	<ul style="list-style-type: none"> • Student data, e.g., student population profile; student enrolment numbers; student progression, drop-out and graduation rates
<p>(c) Learning resources and available student services;</p>		
<p>(d) Student progression, drop-out rates, and graduation rates;</p>		
<p>(e) Satisfaction of students and alumni with programmes and teaching provided; and</p>	<p>9. Does your institution carry out student and alumni satisfaction surveys? If yes, how are the results of these surveys used to improve the quality of teaching and learning?</p>	<ul style="list-style-type: none"> • Students and alumni satisfaction with programmes • Student-lecturer, student-course evaluations
<p>(f) Career paths for students.</p> <p>It is important that both students and staff are involved in analysis and follow-up activities to address the shortcomings.</p>		<ul style="list-style-type: none"> • Student career paths

STANDARD 12. PUBLIC COMMUNICATION

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The institution shall publish information about its activities, including programmes, in a clear, accurate and objective manner; and ensure that the information is up-to-date and accessible.</p> <p>The institution shall ensure that promotion of its programmes is carried out in a fair and ethical manner, following acceptable best practices, and comply with all relevant legislation.</p>		
<p>Guidelines</p> <p>Information about the institution's activities is useful for prospective and current students, alumni and other stakeholders, and the public. The information includes programmes offered, selection criteria, expected learning outcomes, qualifications they award, teaching and learning procedures, graduation rates, learning opportunities, and information about the employment of its graduates. The institution and departments ensure that:</p> <p>a) Promotional materials give a clear and accurate view of the programme, its provision, objectives and outcomes, including:</p> <ol style="list-style-type: none"> Identification of the programme, The body awarding the qualification and its accreditation status; Mode of delivery, Level of the programme on the National Qualifications Framework (NQF), where applicable, Charges involved, Terms and conditions relevant to the programme, Conditions for withdrawal from the programme, Financial agreements with the provider; and Rights, obligations and commitments expected of the student. 	<ol style="list-style-type: none"> <i>What type of documentation and procedures are in place to avail information about the institution's activities/ undertakings to current and prospective students, alumni, other stakeholders and the general public?</i> <i>In what ways are the following details conveyed to current and prospective students, and other stakeholders:</i> <ul style="list-style-type: none"> - types of programmes offered - expected learning outcomes - how students are selected into various programmes - completion rates - types of qualifications awarded - graduate employability rates <i>How does the institution ensure that promotional materials meet ethical standards and national legislative requirements?</i> <i>How are details about programmes made known to current and prospective students (e.g., mode of provision and duration, NQF level and accreditation status, qualification awarding body, student charges/fees, terms and conditions, situations in which students can withdraw from programme, financial agreements between students and the institution, and students' rights and responsibilities)?</i> 	<ul style="list-style-type: none"> ● Public communication policy ● General information and regulations yearbook ● Faculty yearbooks ● Institution's website ● Prove of information about its activities/ undertakings made known to all stakeholders, e.g. print, electronic, social media, etc. ● Promotional materials, e.g., brochures, circulars, newsletters, newspaper adverts, etc. ● Customer service charter ● Service quality surveys/ questionnaires ● Outcomes/reports of service quality surveys which include recommendations for improvement ● Improvement plans and progress reports ● Graduate and employer tracer studies surveys ● Reports of graduate and employer tracer studies surveys

<p>b) Students are fully informed of the issues that affect them with respect to the management of the programme, such as:</p> <ul style="list-style-type: none"> i. Language of communication, ii. Required access to technologies, in the case of ODL, iii. Technical competencies of students required to enrol in the programme, in the case of ODL, iv. Timeframe in which the programmes are offered and nature of learning outcomes, v. Required texts and access to reference materials, vi. Understanding of independent learning expectations, vii. Schedule for face-to-face interactions, in the case of ODL, viii. Schedule for examinations, ix. Schedule for submission of assignments, and x. Collection of certificates. 	<p><i>5. How does the institution ensure that students are informed about issues that affect them with respect to the management of the programme?</i></p> <p><i>6. What mechanisms are in place to ensure that information on programmes is advertised and promoted in a fair and ethical manner?</i></p> <p><i>7. What mechanisms are in place to ensure that information published about the institution, including programme information, is clear, accurate, objective, recent and easily accessible to current and prospective students, alumni, other stakeholders and the general public?</i></p> <p><i>8. How does the institution ensure that accurate records of graduate employability are kept?</i></p>
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STANDARD 13. COLLABORATION, STAFF AND STUDENT MOBILITY

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
The institution shall have mechanisms that promote collaboration with other HEIs, professional bodies, research institutions and relevant social actors at national, regional, continental and international levels and to facilitate mobility of students and staff.	<i>1. Has the institution developed teaching partnerships and collaborations with other national and international institutions to promote student exchange, staff exchange, programme enrichment, scholarship opportunities, research and knowledge transfers, and pedagogy?</i>	<ul style="list-style-type: none"> • Policies governing the establishment of collaborations at all levels • Procedures and mechanisms of cooperation at local, regional and international levels • Grants and assistance offered by national, regional and international institutions and organizations
<p>Guidelines</p> <p>The institution has policies that promote the mobility of academic staff, researchers and students in the programme, internationally. The degree-awarding institution ensures appropriate and high quality delivery of programmes at the partner institution.</p>	<p><i>2. Does the institution follow well-articulated principles on the selection criteria for collaborations, which include:</i></p> <ul style="list-style-type: none"> • <i>a shared institutional mission, commonality to learner-centred learning, open, mutually-respectful and accountable culture, and</i> • <i>alignment and benchmarking with best practice globally?</i> • <i>How do the policies on collaborations provide details on related policies and processes that guide the development and extension of teaching collaborations?</i> 	
<p>The collaborating institutions:</p> <p>(a) Ensure that programmes under collaboration are of the required standard and rigour as those of the parent institution;</p> <p>(b) Ensure that students benefit from the same standard of resources as those for the regular students of the awarding institution;</p> <p>(c) Take the responsibility to assure the quality of the educational provision under collaboration;</p> <p>(d) Ensure that the collaborating institutions are approved by the relevant QAA/professional body and are subject to periodic quality audits; and</p> <p>(e) Ensure that students are fully informed of the nature of the collaboration between the institutions concerned.</p>	<p><i>3. How are programmes and research activities internationalised in order to attract international students, and build international presence and reputation?</i></p>	<ul style="list-style-type: none"> • Joint projects, training courses and study programmes • Joint workshops, convocations and conferences • Mechanisms and activities related to attracting students locally and internationally • Mechanisms and activities related to staff exchange programmes locally and internationally • Availability of offices / units within the relevant organizational structures concerned with international cooperation.

<p>If the programme is offered via collaborative arrangements, the provider clearly defines the rights and responsibilities of parties, legal ownership, accreditation status of the programme, and resources available for the programme.</p>		<ul style="list-style-type: none">• Concluded Memorandum of Understanding and Memorandum of Agreement and the mechanisms for approving and signing them• Mechanisms of following up MoUs and MoAs and their evaluation and implementation
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SECTION 2

Section 2 of the User's Guide is addressed to QAAs and contains references to parts B and C of the ASG-QA. Part B deals with the objectives of external QA, while Part C concerns the internal QA of quality assurance agencies.

The exact manner of implementation of the standards will depend on the context of the agency. For example, implementation will vary depending on: the type and scope of external quality assurance carried out (institutional or programme level, accreditation or audit/review...), the role and status of the agency within the education system (e.g. division of responsibilities between different organisations, funding arrangements...), and the national legal framework for higher education and quality assurance.

STANDARDS AND GUIDELINES FOR EXTERNAL QUALITY ASSURANCE (PART B OF ASG-QA)

Introduction

It is important, and in some countries mandatory, for HEIs to undergo a periodic external evaluation for accountability purposes and to improve the quality of their provision. Part B describes the methodologies (or references) that QAAs have in place for external quality assurance (EQA) of HEIs in order to support HEIs in the effective implementation of their institutional and/or programme self-evaluation.

Part B of the ASG-QA covers the objectives of EQA: development of contextually appropriate mechanisms, independence, decisions and reports, periodic evaluation, and complaints and appeals. It takes into account the references and guidelines in Part A (IQA) for HEIs and ensures that the IQA reviewed is relevant and effective for the HEI concerned and that there is consistency between the internal quality assurance carried out by the institutions themselves and the external quality assurance.

STANDARD 1. OBJECTIVES OF EXTERNAL QUALITY ASSURANCE AND CONSIDERATION FOR INTERNAL QUALITY ASSURANCE

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>External quality assurance shall ensure that the higher education institution has clearly articulated vision and mission statements, and it shall help the institution ensure the effectiveness of its internal QA mechanisms, providing an additional instrument for assessing institutional quality.</p> <p>Guidelines</p> <p>External quality assurance is based on the institution's responsibility for the quality of their academic programmes and other provisions and, therefore, it is important that external quality assurance recognises and supports the institutional responsibility for its QA. EQA complements an effective IQA system and, therefore, assists the higher education institution to:</p>	<p>1. <i>How does the Agency ensure that the higher education institution has a clearly defined, articulated and publicly available vision, mission and objectives?</i></p>	<ul style="list-style-type: none"> To show with which criteria the Agency succeeds in ensuring that an HEI develops or has a vision, missions and objectives (analysis of the frames of reference and documents taken into account in the external evaluation process).

a) Appreciate the link between IQA and EQA;	2. <i>How does the Agency take into account the quality policy and procedures developed by the evaluated institution?</i>	<ul style="list-style-type: none"> • Explain the place of IQA in the Agency's criteria and standards. • The HEI undergoing external evaluation describes and analyses its quality assurance mechanisms (to ensure the quality of its activities). These QA mechanisms are aligned with the vision and mission of the institution.
b) Adhere to established QA principles, standards and guidelines in the higher education sector;		
c) Develop and entrench an institutional quality culture by establishing mechanisms for continuous quality improvement / enhancement;	3. <i>How does the Quality Agency contribute to strengthening the internal QA mechanisms of the institutions it evaluates?</i>	<ul style="list-style-type: none"> • Show monitoring mechanisms and, if possible, results to document the impact of the Agency's methodology (report on the implementation of recommendations, cross-sectional studies, etc.).
d) Provide a basis to benchmark inputs, processes and outputs with other HEIs nationally, regionally and internationally;		
e) Determine the institution's capacity to offer academic programmes;		
f) Assess institutional compliance with legal and other requirements;		
g) Provide independent evidentiary information to its stakeholders, the general public and international community that it is offering quality higher education; and	4. <i>How does it ensure that its evaluations serve to improve the performance of the HEI evaluated?</i>	<ul style="list-style-type: none"> • Follow-up strategies outlined
h) Be recognised and accepted nationally, regionally, continentally and internationally	<p>5. <i>How does the Agency contextualise its evaluations?</i></p> <p>6. <i>How do the experts it mandates take into account the specificities of the field and respect the autonomy of HEIs and the academic freedom of community members?</i></p>	<ul style="list-style-type: none"> • Explain how the Agency contextualises its evaluations. Show the documentation provided to HEIs prior to the evaluation • analysis methodology: the experts commissioned for the external evaluation start from the self-analysis of the HEI to develop working hypotheses, and through exchanges with the participants in the visit interviews, they corroborate their initial hypotheses and refine their analysis. • In the section describing and analysing the education system within the Agency's scope, explain the purposes of the schemes and the outcomes observed. For example: a pedagogical and development purpose (a, c and d - benchmarking); a compliance purpose (b, e, f); a recognition, accreditation purpose (g and h)

STANDARD 2. DESIGNING EXTERNAL QUALITY ASSURANCE MECHANISMS FIT FOR PURPOSE

There is no single continental method to be duplicated everywhere - a method will be relevant and gain support if it is developed in consultation with CPs and if it aims to improve the performance of HEIs.

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
Standards, guidelines and processes for external quality assurance shall be designed to be fit for purpose, defined to achieve the intended aims and objectives of EQA, and to strengthen IQA systems at institutions.	<p>1. <i>What are the purposes of the Agency's EQA mechanisms (licensing, accreditation, audit, evaluation)? How are they relevant to the context? What are the implications of EQA for the education system in the country or region? For the HEIs involved?</i></p> <p>2. <i>How can the agency verify that its EQA mechanisms (and outcomes) meet the intended goals and objectives?</i></p>	<ul style="list-style-type: none"> Describe the purposes and mechanisms of EQA (text establishing the agency, policy documents, etc.). Give the periods of validity of evaluation results of HEIs, training programmes and research. Show how the results of surveys of stakeholders provide evidence of the achievement of objectives. Explain how the national/regional context has shaped/guided the development of the external quality system.
<p>Guidelines</p> <p>It is necessary that standards, guidelines, and processes developed and implemented by QAAs and the institutions are created in consultation with stakeholders in order to address all academic activities of the higher education system and for acceptability.</p>	<p>3. <i>How has the agency consulted its stakeholders on the methodology?</i></p> <p>4. <i>Is the Agency satisfied with its collaboration with stakeholders?</i></p> <p>5. <i>Does it perceive ownership?</i></p> <p>6. <i>What are the means taken to improve it?</i></p>	<ul style="list-style-type: none"> Document activities that have enabled or are enabling stakeholder consultation and feedback. <p>Some examples:</p> <ul style="list-style-type: none"> - National stakeholder conference - stakeholder surveys and consultations - debriefing or dissemination of results of surveys and consultations - publication of results, or other 'state of play' document - implementation of a pilot phase and its evaluation
<p>The standards include:</p> <p>a) Standards and guidelines for periodic / cyclical programme accreditation / evaluation / assessment / audit; and/or</p> <p>b) Standards and guidelines for periodic / cyclical institutional accreditation / evaluation / assessment / audit.</p>	<p>7. <i>Are clear references and guidelines defined and applied for the evaluation of the different types of institutions and courses in the higher education system, taking into account the modalities of HEI provision (face-to-face, online, hybrid, dual mode, etc.)?</i></p>	<ul style="list-style-type: none"> Present and analyse the catalogue of methodologies and reference systems used for the various types of evaluation implemented by the external quality assurance agency

STANDARD 3. IMPLEMENTATION PROCESSES OF EXTERNAL QUALITY ASSURANCE

For the concrete implementation, and in order to develop a reflective approach, the HEI first builds a self-evaluation, in a collective and participative way, which will serve as a basis for the external evaluation.

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
The standards, processes, and procedures for EQA shall be pre-defined, reliable, published, and consistently implemented for purposes of accountability.	<p>1. What means has the Agency taken to ensure that tools and processes are reliable in line with good quality assurance practice, including publication to stakeholders?</p> <p>2. What is the degree of alignment of the quality assurance agency with good practice in terms of procedures and assessment?</p>	
<p>Guidelines</p> <p>External quality assurance is carried out professionally, consistently and transparently to ensure that it is acceptable to the higher education institution. EQA is carried out on the basis of the self-assessment prepared by the institution. The processes for EQA include the following activities:</p> <p>a) Self-assessment by the institution and production of the SAR/SER;</p> <p>b) External assessment of the institution through the SAR/SER, site visit to the institution and interviews with stakeholders of the institution, and documentary evidence to support institutional claims;</p> <p>c) Oral report to the management of the institution before the review panel leaves the institution;</p> <p>d) Preliminary report provided to the institution before the final report is produced;</p> <p>e) Final report of the external review; and</p> <p>f) Follow-up activity to ensure that recommendations raised in the final report are addressed.</p>	<p>3. What are the steps/phases in the external evaluation process based on self-evaluation?</p> <p>4. How are HEIs informed about the objectives and purposes of the EQA processes?</p> <p>5. Have clear guidelines for drafting the SAR, the EER and the follow-up of recommendations been defined and communicated to HEIs and expert evaluators?</p>	<ul style="list-style-type: none"> Show the existence and accessibility of reference documents: <ul style="list-style-type: none"> Manual/management documents for external evaluation procedures Accessibility and readability of Agency documents (website, brochures, written and oral communications, etc.) Documents describing the main stages of the external evaluation and follow-up of recommendations Documents for monitoring the implementation of procedures. Demonstrate consistency between the visit schedules (which participants for which interviews?) and the guidelines used. Use feedback, results of HEI and expert surveys to demonstrate the implementation of processes and the resulting satisfaction of stakeholders.

STANDARD 4. INDEPENDENCE OF EVALUATION

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>EQA shall be carried out by panels of external experts drawn from a wide range of expertise and experience.</p> <p>Guidelines</p> <p>The principle of best practices of external quality assurance is based on the consistent use of a wide range of expertise and experiences:</p>		
<p>a) Experts are drawn from academics, employers or professional practitioners, and students;</p>	<p>1. <i>What criteria are developed for the composition of panels?</i></p> <p>2. <i>Is the composition of the teams sufficiently diverse? Does it include academic peers, socio-economic professionals, students and other relevant members?</i></p> <p>3. <i>What are the criteria developed by the agency that serve as a basis for the selection of experts?</i></p>	<ul style="list-style-type: none"> • Show the existence and accessibility of reference documents: <ul style="list-style-type: none"> - Selection criteria - Terms of reference on the composition of committees - Charter of ethics and deontology for experts - Procedures manual/documents for the selection and management of experts. • Use feedback, results of HEI and expert surveys to demonstrate the implementation of processes and the resulting satisfaction of stakeholders. • Provide statistics on the diversity of the experts' profiles (academics, researchers, students, professionals, QA specialists, etc.) but also diversity (gender, age, geographical origin, etc.).
<p>b) To ensure professionalism, consistency and transparency of output of experts, it is necessary that they:</p> <p>i. Are carefully selected,</p> <p>ii. Have appropriate skills and are competent to perform tasks assigned to them,</p>		
<p>iii. Are adequately inducted into EQA principles and procedures before undertaking the external review,</p>	<p>4. <i>Is training for experts organised and adjusted according to the development of practices taking into account the context of the higher education system and the EQA principles?</i></p>	<ul style="list-style-type: none"> • Provide documentation on the training of experts

iv. Are independent in their judgements about the quality of the programme or institutions,	<i>5. What means are taken by the agency to ensure transparency and independence of judgements through their engagement and practice?</i>	<ul style="list-style-type: none"> • Provide documentation on transparency
v. Have no conflict of interest with the institution or programme they are evaluating, and vi. Sign a Declaration of Independence and No Conflict of Interest Form		<ul style="list-style-type: none"> • Declarations of conflict of interests
c) In the case of possible conflicts of interest, the institution is given the opportunity to object to any member of the proposed review panel; and	<i>6. Are there clear rules for institutions and for external experts to object to team building?</i>	<ul style="list-style-type: none"> • Indicate where information for HEIs and experts can be found • Indicate the possibilities given to the HEI to give an opinion on the nominated experts (no-objection opinion)
d) Involvement of international experts is considered a good practice in EQA.		

STANDARD 5. DECISION AND REPORTING OF EXTERNAL QUALITY ASSUARANCE OUTCOMES

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
<p>Reports and decisions made as a result of external quality assurance shall be clear, based on published standards, processes and procedures, and made accessible, for purposes of accountability.</p> <p>Guidelines</p> <p>The decisions of external quality assurance have a significant impact on institutions and programmes that are evaluated, assessed or judged. It is critical that:</p> <p>a) External quality assessment decisions are published without undermining the integrity of the review process;</p>	<p>1. <i>How does the Agency ensure that its references, processes, procedures and decisions are clear and known?</i></p>	<ul style="list-style-type: none"> • Make public documents relating to references, processes and procedures (guides, quality manual, etc.) • Making QAA's reports and decisions public and accessible
<p>b) The EQA reports are the basis for follow-up actions, hence they are clear, precise and include:</p> <p>i. Purpose of the review,</p> <p>ii. Context description (of higher education institution),</p> <p>iii. Description of procedures, including experts involved,</p> <p>iv. Evidence, analysis and findings,</p> <p>v. Commendations/examples of good practice of the institution,</p> <p>vi. Conclusions,</p> <p>vii. Recommendations for follow-up actions;</p>	<p>2. <i>How does the Agency ensure that it has the means to produce documented and coherent reports to enable objective and fair decision-making?</i></p>	<ul style="list-style-type: none"> • Conduct a critical analysis of published reports
<p>c) The institution is given an opportunity to point out factual errors to ensure the accuracy of the report;</p>		<ul style="list-style-type: none"> • Demonstrate the existence and proven functioning of right of reply mechanisms

d) The institution is the first to receive the EQA report in the interest of transparency and fairness, prior to distribution to other parties;		
e) The decisions taken by the responsible body are not subject to external influences; and	3. How does the Agency ensure the consistency and fairness of decisions taken?	<ul style="list-style-type: none"> • Demonstrate the existence of codes of ethics (to prevent the risk of conflict of interest) • Explain how final decision-making committees are formed for decision-making processes and on the basis of which principles (e.g. transparency, objectivity, consistency, reliability). • Explain and analyse how experts are trained for all stages of their assignments (including report writing).
f) The decisions are in a format that has been made known to the institution concerned (for example, commendations, recommendations, and formal decisions).		

STANDARD 6. PERIODIC REVIEW OF INSTITUTIONS AND PROGRAMMES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>External quality assurance of institutions and programmes shall be undertaken on a cyclical basis.</p> <p>Guidelines</p> <p>The length of the review cycle is clearly defined and published:</p> <p>a) For academic programmes, the review cycle is consistent with the duration of the programme, or it reflects the defined validity of the accreditation period;</p> <p>b) Depending on the context of the QA system, for institutions, the cyclical institutional review is carried out preferably every five years; and</p> <p>c) Every cyclical review results in a report of general findings of the review.</p>	<p>1. <i>How does the Agency ensure that programmes and institutions in its jurisdiction are evaluated on a cyclical basis?</i></p> <p>2. <i>How does the Agency use the results of evaluations in a cycle?</i></p>	<ul style="list-style-type: none"> • Demonstrate the existence and accessibility of <ul style="list-style-type: none"> - Clearly defined and published cycle lengths - Public information on the planning of evaluations (e.g. on the Agency's website)

STANDARD 7. COMPLAINTS AND APPEALS

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
The procedure for lodging complaints and appeals shall be clearly defined and communicated to the institution concerned.		
<p>Guidelines</p> <p>In order to safeguard the rights of the institution and ensure fairness in the decisionmaking process, it is important that the institution has access to the processes that allow it to raise issues of concern with the agencies if it can demonstrate that the outcome of the external review is not based on sound evidence. It is, therefore, critical that:</p> <p>a) There is an established appeals system;</p> <p>b) The institution is allowed to raise issues of concern consistent with the appeals system; c) There is a procedure for addressing complaints raised by the general public;</p> <p>d) There are clearly defined complaints and appeals processes and procedures, which are consistently applied; and</p> <p>e) Appeals and complaints are handled professionally, within an agreed period of time.</p>	<p>1. <i>How does the Agency ensure HEIs that it is assessing the fairness of decisions made as a result of evaluations?</i></p> <p>2. <i>How does the Agency use the results of the evaluations in a cycle?</i></p>	<ul style="list-style-type: none"> • Documents explaining the appeal process (introduction and processing) • Link to the adhoc procedure(s) • Accessibility and readability of procedures • Analysis of cases handled (case law?) If necessary, improvements to the procedure

STANDARDS AND GUIDELINES FOR EXTERNAL QUALITY ASSURANCE (PART C OF ASG-QA)

Introduction:

Part C of the ASG-QA is for the purpose of internal quality assurance of QAAs.

IQA of QAAs is implemented through a self-assessment of their policies, practices, procedures and activities and/or for external assessment/evaluation by another body/peer organisation.

It is important that QAAs undergo a self-assessment of their own processes to ensure that they are in line with international standards, and that they address shortcomings that they would have normally identified during the external reviews of HEIs.

Part C of the ASG-QA covers policies, processes and activities of the QAA, as well as its legal status, vision and mission, financial and human resources, and independence.

STANDARD 1. LEGAL STATUS

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall be an autonomous legal entity with clearly defined mandate, scope and powers. It will be recognised as a quality assurance agency at a national/regional level.</p> <p>Guidelines</p> <p>When external quality assurance is carried out for regulatory purposes, institutions have the security that the outcomes of the process are accepted within the higher education system, the stakeholders and the public. The QAA is established by a competent authority.</p> <p>The QAA's legal mandate specifies, among others, its:</p> <p>(a) Establishment by an appropriate legal instrument such as an Act or Statutes;</p> <p>(b) Functions and responsibilities, including the scope of quality assurance activities</p>	<p>1. <i>Comment on the legal status of your QAA, i.e. if it is established by law, decree or any other.</i></p> <p>2. <i>Do you consider your QAA to be recognised in your country and region? Explain why.</i></p>	<ul style="list-style-type: none"> • Act/ decree that established the QAA • Statutes that defines mandate, scope and powers • QAA activity report validated and passed on to the hierarchy

STANDARD 2. VISION AND MISSION STATEMENT

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall have a written vision and mission statement or set of objectives taking cognisance of the higher education context.</p> <p>Guidelines</p> <p>The vision, mission and objectives show that:</p> <p>(a) Quality assurance is a major activity of the agency;</p> <p>(b) There is a systematic approach to achieving the vision, mission and objectives of the QAA;</p> <p>(c) The objectives are implemented in line with a practical management plan that is linked to the agency's resources; and</p> <p>(d) The custodianship and oversight of vision and mission are appropriate for the mandate and objectives of the agency.</p>	<p>1. <i>Comment on the vision and mission of your QAA</i></p> <p>2. <i>What activities do you have in place to achieve the QAA's vision, mission and strategic objectives?</i></p>	<ul style="list-style-type: none"> • QAA's strategic plan • Annual plans • Annual reports

STANDARD 3. GOVERNANCE AND MANAGEMENT

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
<p>The QAA shall have clearly defined structures that ensure sound and ethical governance and management, including good practices of quality assurance that support its mission and legal mandate.</p>		
<p>Guidelines</p> <p>The QAA:</p> <p>(a) Has qualified and experienced leadership to oversee the development and management of best practices in quality assurance in higher education;</p> <p>(b) Has relevant governance bodies, such as the governing board and various committees, each with a clear mandate, powers, responsibilities and tenure; which are well coordinated to ensure efficiency and effectiveness of its vision, mission and strategic objectives;</p> <p>(c) Has procedures for the appointment of the governing board and the Chief Executive;</p> <p>(d) Has policies and procedures for financial and management decisions;</p> <p>(e) Has clear communication system of its activities for disseminating information for public accountability;</p> <p>(f) Ensures regular consultation with stakeholders, and follow-up actions on key issues of policy and operations;</p> <p>(g) Promotes a high degree of institutional integrity and responsiveness in the management of institutional affairs by advocating and demonstrating honesty and non-discrimination in the treatment of its staff and members of the public;</p> <p>(h) Has effective processes for deterring, detecting and dealing with misconduct by staff; and</p> <p>(i) Has effective, systematic, timely and fair processes for the investigation of complaints, grievances and appeals by staff.</p>	<p>1. <i>Comment and reflect on the governance structure of your organization, including but not limited to: leadership, governance bodies and policies that are in place to ensure the proper functioning of your QAA according to the guidelines indicated.</i></p> <p>2. <i>Provide information in a tabular form showing the number of employees in your QAA in relation to age, gender and academic and professional qualifications.</i></p>	<ul style="list-style-type: none"> • QAA's organisation chart • Staff recruitment policy • Communication Strategy • Feedback mechanisms in place

STANDARD 4. INDEPENDENCE OF QAA

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall be independent and autonomous in its operations, outcomes, judgements and decisions.</p>		
<p>Guidelines</p> <p>The QAA makes independent decisions and judgements that are not subject to change by third parties. Independence of an agency includes the following:</p> <p>(a) Organisational independence demonstrated by official documentation, such as legislative acts or statutes and instruments of governance that stipulate the independence of the agency's work from third parties (e.g. HEIs, governments, other stakeholders);</p> <p>(b) Operational independence: the definitions and operations of the agency's procedures and methods, nomination and appointment of qualified external experts (including the provision of no objection); and</p> <p>(c) Independence of formal outcomes: the final decision of quality assurance activities remains the responsibility of the QAA.</p>	<p>1. <i>Comment on the independence of your QAA in terms of as described in the guidelines:</i></p> <ul style="list-style-type: none"> - <i>organisational</i> - <i>operational</i> - <i>independence of formal outcomes</i> <p>2. <i>Consider in greater detail how operational and organisational independence is safeguarded in practice.</i></p> <p>3. <i>How does the Agency operate independently de facto, especially in terms of defining procedures and methods as well as nomination and appointment of experts?</i></p> <p>4. <i>How does the Agency ensure that the outcomes of its quality assurance processes are its independent responsibility?</i></p>	<ul style="list-style-type: none"> • Policy documents on independence • Procedures for nomination of staff • Procedures for the development and validation of QA standards • Procedures for the approval of expert proposals • Appeals and complaints

STANDARD 5. POLICIES, PROCESSES AND ACTIVITIES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall undertake its quality assurance activities in accordance with the standards and guidelines articulated in Part B of the ASG-QA.</p> <p>Guidelines</p> <p>It is important that HEIs trust QAAs; the agencies are transparent, and describe and publish their objectives and activities, scope of work, expertise; and interaction with HEIs and other stakeholders.</p>		
<p>The external quality assurance standards and processes are appropriate for the core activities of an institution or programme. These include:</p> <p>(a) Teaching and learning, research and community work/engagement;</p> <p>(b) Resources such as finances, staff, and learning resources;</p> <p>(c) Specific areas such as levels of achievement, relative benchmarking and types of measures, and general guidelines; and</p> <p>(d) Specific learning outcomes.</p>	<p>1. <i>Describe the standards your QAA applies when carrying out institutional audits/accreditation and programme accreditation/reviews.</i></p> <p>2. <i>Were HEIs in your country involved in the design of these standards?</i></p>	<ul style="list-style-type: none"> • QAA's standards booklet
<p>In order to carry out its core function of external quality assurance, the QAA conducts institutional audits/accreditation and programme accreditation/reviews on a regular basis, and provides in advance the framework to the concerned institution.</p>	<p>3. <i>Describe and comment on the stages your QAA takes when carrying out institutional evaluation/accreditation and programme accreditation/reviews.</i></p>	<ul style="list-style-type: none"> • Manual for carrying out institutional and programme evaluation/accreditation

<p>To ensure transparency, the QAA's review/assessment processes include:</p> <p>(a) Validation of the institution's self-assessment against the agency's standards and processes;</p> <p>(b) Appointment of an external peer review panel comprising subject matter specialists and experts in higher education QA matters;</p> <p>(c) Site visit by the review panel and interviews with various staff members and stakeholders of the institution;</p> <p>(d) Oral report before the review panel leaves the institution;</p> <p>(e) Preliminary report presented to the institution for factual corrections;</p> <p>(f) Final report of external review to the institution; and</p> <p>(g) Follow-up activity of recommendations raised in the final report.</p>		<ul style="list-style-type: none"> • Database for peer reviewers • Peer Reviewer Manual with Standard operating procedures
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STANDARD 6. INTERNAL QUALITY ASSURANCE CRITERIA AND PROCESSES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall have in place policies and processes for its own internal quality assurance related to defining, assuring and enhancing the quality and integrity of its activities.</p> <p>Guidelines</p> <p>The QAA is accountable to its stakeholders and observes high professional standards and integrity by adhering to its guiding and ethical principles, and makes available internal quality assurance policies, standards, processes and procedures on its website. The QAA's decisions are impartial, rigorous, thorough, fair and consistent, even if the judgements are made by different panels. The policies, therefore, ensure:</p> <p>(a) Objectivity and fairness in all its judgements, decisions and conclusions;</p> <p>(b) Standards and guidelines for external quality assurance for HEIs are of a general nature, not prescriptive and do not interfere with institutions' autonomy but help to guarantee all stakeholders and the international community of overall professionalism, visibility, transparency, credibility, integrity, and public accountability in the higher education sub-sector;</p> <p>(c) Contribution to established national, regional, continental and international mechanisms for integrity, transparency and public accountability; and</p> <p>(d) Professionalism and public acceptance:</p> <p>i. All persons involved in its activities are competent and act professionally and ethically,</p> <p>ii. Timely internal and external feedback mechanisms lead to continuous improvement within the agency,</p> <p>iii. Guards against intolerance of any kind or discrimination,</p> <p>iv. Outlines the appropriate communication with relevant authorities in those jurisdictions in which they operate, and</p> <p>v. Any activity carried out and materials produced by consultants are in line with its standards and guidelines and those of the ASG-QA.</p>	<p><i>1. Describe and comment on the steps your QAA has put in place to ensure the quality of its activities. These steps will include, but not limited to: the establishment of the QAA's internal quality assurance policy, its aims and objectives; the professionalism of all persons involved in its activities; feedback mechanisms in place; the participation of higher education institutions in design of the standards for external quality assurance and the production of summary reports which describe and analyse the general trends in the findings of external reviews</i></p>	<ul style="list-style-type: none"> • Internal Quality Assurance Policy • Feedback mechanisms in place • Summary reports

<p>The QAA ensures that standards and processes used for external quality assurance are pre-determined, pre-defined, published and made available to institutions ahead of external quality assurance procedures. The QAA ensures that:</p> <p>(a) The standards and processes used to ensure quality and relevance of HEIs, such as institutional or programme self-assessment and quality assurance procedures, have appropriate follow-up mechanisms for recommendations and actions for further improvement.</p> <p>(b) There is thematic analysis (production of a summary of reports), carried out from time to time, which describes and analyses the general trends in the findings of external reviews, assessments as well as evaluations of institutions and their programmes for possible policy direction.</p>	<p><i>2. How does your Agency make sure the standards of EQA are user-friendly and more accessible to all HEI, including the ones operating in remote areas, where internet access remains a challenge?</i></p>	
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STANDARD 7. FINANCIAL AND HUMAN RESOURCES

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall have adequate and appropriate human, financial and material resources to carry out its quality assurance mandate effectively and efficiently.</p> <p>Guidelines</p> <p>The QAA is adequately funded to realise its vision, mission and objectives to:</p> <p>(a) Ensure it has adequate facilities commensurate with its QA activities;</p> <p>(b) Recruit adequate and qualified human resources, to carry out its QA activities; cognisant of gender, disadvantaged groups and persons with disabilities;</p> <p>(c) Carry out its external QA mandate professionally, effectively and efficiently;</p> <p>(d) Ensure improvement of its practices and development; and</p> <p>(e) Inform the public about its activities and results/outcomes.</p>	<p>1. <i>Describe and analyze the human, financial and material resources your QAA has to effectively carry out its functions.</i></p> <p>2. <i>Demonstrate how the Agency's financial and human arrangements ensure the sustainability of its activities within the scope and in line with the ASG-QA.</i></p>	<ul style="list-style-type: none"> • QAA's annual budget and unaudited financial statements • Strategic plan • Assessment of activities • Assets reports • A table showing the number of staff according to qualification, gender and age

STANDARD 8. BENCHMARKING, NETWORKING AND COLLABORATION

Standard	Focus Points – Guiding Questions	Examples of good practice / Evidence
<p>The QAA shall promote and participate in international initiatives, workshops and conferences on quality assurance to exchange and share experiences and best practices.</p> <p>Guidelines</p> <p>It is important that the QAA remains relevant in its activities. The QAA:</p> <p>(a) Collaborates with all relevant bodies, such as professional bodies, for QA and accreditation;</p> <p>(b) Shares accurate, reliable and easily accessible information about standards for registration/licensing and QA of all modes of education delivery;</p> <p>(c) Contributes to the development and/or updating of the appropriate regional, continental and other international conventions on the recognition of courses and qualifications, and serves as national or regional information centre as appropriate;</p> <p>(d) Participates in bilateral or multilateral agreements for facilitating the recognition or determination of equivalences of each country's qualifications based on the procedures and standards included in established international agreements for recognition of courses and qualifications; and</p> <p>(e) Contributes to regional, continental and international efforts to improve the accessibility of up-to-date, accurate and comprehensive information about recognised HEIs or providers.</p>	<p>1. Describe and analyze the QAA's internationalization policy, its aims, objectives and the activities actually carried out within the scope of the policy.</p>	<ul style="list-style-type: none"> • Internationalisation policy • Internationalisation structures and reports from HEIs • Examples of activities carried out as per guidelines • Benchmarking report

STANDARD 9. PERIODIC REVIEW OF QAAs

Standard	Focus Points – Guiding Questions	Examples of good practice – Evidence
<p>The QAA shall undergo periodic internal and external reviews in order to demonstrate its compliance with the ASG-QA.</p> <p>Guidelines</p> <p>The QAA has a system for continuous QA of its own practices and activities that emphasises flexibility in response to the changing nature of higher education, effectiveness of its operations, and its contribution towards the achievement of its objectives. The QAA, therefore:</p>	<p>1. <i>How often does your Agency undergo internal and external review?</i></p>	
<p>(a) Conducts a comprehensive internal self-assessment of its processes, practices and activities periodically, including data analysis;</p> <p>(b) Subjects itself to periodic external review on the basis of self-assessment by regional, continental or international QA bodies; and</p> <p>(c) Ensures that required recommendations are disclosed and implemented for improvement; and</p> <p>(d) Depending on the context of the QA system, for QAAs, the cyclical review is carried out preferably every five years.</p>	<p>2. <i>Consider in greater detail how the QAA carries out its internal self-assessment of activities.</i></p>	<ul style="list-style-type: none"> • Internal and External Review reports • Evaluation procedures