

ENQA AGENCY REVIEW

# SWISS AGENCY OF ACCREDITATION AND QUALITY ASSURANCE (AAQ)

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# CONTENTS

<b>EXECUTIVE SUMMARY</b> .....	3
<b>INTRODUCTION</b> .....	4
<b>BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS</b> .....	4
BACKGROUND OF THE REVIEW.....	4
<b>MAIN FINDINGS OF THE 2016 REVIEW</b> .....	4
<b>REVIEW PROCESS</b> .....	5
<b>HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY</b> .....	6
HIGHER EDUCATION SYSTEM.....	6
QUALITY ASSURANCE.....	7
<b>THE SWISS AGENCY OF ACCREDITATION AND QUALITY ASSURANCE AAQ</b> .....	9
AAQ'S ORGANISATION/STRUCTURE.....	9
AAQ'S FUNCTIONS, ACTIVITIES, PROCEDURES.....	10
AAQ'S FUNDING.....	13
<b>FINDINGS: COMPLIANCE OF [AGENCY] WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG)</b> .....	14
<b>ESG PART 3: QUALITY ASSURANCE AGENCIES</b> .....	14
ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE.....	14
ESG 3.2 OFFICIAL STATUS.....	16
ESG 3.3 INDEPENDENCE.....	17
ESG 3.4 THEMATIC ANALYSIS.....	20
ESG 3.5 RESOURCES.....	21
ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT.....	24
ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES.....	26
<b>ESG PART 2: EXTERNAL QUALITY ASSURANCE</b> .....	27
ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE.....	27
ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE.....	29
ESG 2.3 IMPLEMENTING PROCESSES.....	32
ESG 2.4 PEER-REVIEW EXPERTS.....	34
ESG 2.5 CRITERIA FOR OUTCOMES.....	37
ESG 2.6 REPORTING.....	39
ESG 2.7 COMPLAINTS AND APPEALS.....	41
<b>CONCLUSION</b> .....	43

<b>SUMMARY OF COMMENDATIONS</b> .....	43
<b>OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS</b> .....	43
<b>SUGGESTIONS FOR FURTHER DEVELOPMENT</b> .....	44
<b>ANNEXES</b> .....	46
<b>ANNEX 1: PROGRAMME OF THE SITE VISIT</b> .....	46
<b>ANNEX 2: TERMS OF REFERENCE OF THE REVIEW</b> .....	50
<b>ANNEX 3: GLOSSARY</b> .....	56
<b>ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW</b> .....	57
DOCUMENTS PROVIDED BY AAQ.....	57
OTHER SOURCES USED BY THE REVIEW PANEL .....	57

# EXECUTIVE SUMMARY

The present report is the result of the external review of the Swiss Agency of Accreditation and Quality Assurance, AAQ, undertaken in November 2020 for the renewal of the agency's membership of the European Association for Quality Assurance in Higher Education (ENQA) and renewal of registration in the European Quality Assurance Register for Higher Education (EQAR).

The process started with the production of a Self-assessment report by AAQ, followed by an online-visit of 3 full days by the experts' panel during which all the stakeholders involved in AAQ's processes were interviewed.

The following activities of AAQ were addressed during the external review:

- Institutional Accreditation
- Programme Accreditation
- System Accreditation
- Quality Audits
- Evaluation

AAQ is a well-established and recognized Agency in Switzerland where it operates its core activities and in Germany and Austria where it is an officially recognized Agency by the GAC and AQ Austria respectively. Its activity and criteria are legally established and the procedures are defined by the Agency. AAQ has a strong reputation and well-implemented quality assurance processes not only in Switzerland, country of its core activities, but also in Germany and Austria for many years on a sustainable model and relationship. All stakeholders and particularly HEIs have a good level of satisfaction with AAQ's work in general. Nevertheless, the Agency faces a number of issues of which several were already identified by the 2016 review panel and are still relevant. Therefore, it leads to a high number of substantially compliance (detailed as follows).

The purpose of this document is to advise the ENQA Board on the compliance of the Agency with each of the ESG standards, but also to provide recommendations to the AAQ in order to facilitate improvement of its activities in quality assurance in higher education.

The panel considers AAQ to be in full compliance with the following standards:

- 2.5 Criteria for Outcomes
- 2.7 Complaints and Appeals
- 3.2 Official status
- 3.3 Independence
- 3.4 Thematic analysis
- 3.7 Cyclical external review of agencies

In the light of all the information provided, the panel considers the Agency to be substantially compliant with the following standards:

- 2.1 Consideration of internal quality assurance
- 2.2 Designing methodologies fit for purpose
- 2.3 Implementing processes
- 2.4 Peer-review experts
- 2.6 Reporting
- 3.1 Activities, policy and processes for quality assurance
- 3.5 Resources
- 3.6 Internal quality assurance and professional conduct

The panel concludes that AAQ is in compliance with the ESG.

# INTRODUCTION

This report analyses the compliance of the Swiss Agency of Accreditation and Quality Assurance (Schweizerische Agentur für Akkreditierung und Qualitätssicherung, AAQ) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. It is based on an external review conducted between July 2020 and January 2021.

## BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

### BACKGROUND OF THE REVIEW

ENQA's regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in substantial compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015.

As this is a review renewal for AAQ (fourth ENQA review), the panel is expected to provide clear evidence of results in all areas and to acknowledge progress from the previous review. The panel has adopted a developmental approach, as the *Guidelines for ENQA Agency Reviews* aim at constant enhancement of the agencies.

The Agency is also applying for the renewal of its registration in EQAR.

### MAIN FINDINGS OF THE 2016 REVIEW

The last external review which AAQ underwent took place in 2016 and was coordinated by the German Accreditation Council. It resulted in AAQ being confirmed as full member of ENQA. AAQ's activity was judged positively with no partial or non-compliant standard; the panel of 2016 considered that the compliance of the ESG was as follows:

#### AAQ fully complied with ESG 2015:

2.1 Consideration of internal quality procedure

3.2 Official Status

3.7 Cyclical external review of Agencies

#### AAQ substantially complied with ESG 2015:

2.2 Designing methodologies fit for purpose

2.3 Implementing processes (EQAR: partially complaint)

2.4 Peer-review experts

2.5 Criteria for outcomes

2.6 Reporting (EQAR: partially compliant)

2.7 Complaints and Appeals (EQAR: partially compliant)

3.1 Activities, policy and processes for Quality Assurance

3.3 Independence

3.4 Thematic analysis

3.5 Resources

3.6 Internal quality assurance and professional conduct

## REVIEW PROCESS

The 2020 external review of AAQ was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of AAQ was appointed by ENQA; it was composed of the following members:

- Bernard Coulie (Chair), Full Professor and Honorary Rector, Université Catholique de Louvain, Belgium (EUA nominee)
- Vanessa Duclos (Secretary), Head of Accreditations at emlyon business school, France (ENQA nominee)
- Philipp Schulz (Member), Master's degree in Business Administration and Engineering student at RWTH Aachen University, Germany (European Students' Union nominee)
- Michèle Wera (Member), Policy advisor and former secretary to NVAO's Executive Board, the Netherlands (ENQA nominee)

Anaïs Gourdin, Senior Project Manager at ENQA, acted as coordinator of the entire process. Her support before, during and after the visit has been highly appreciated by the panel.

The review process has been carried out as established by the ENQA procedure comprising the nomination of the panel members, production of a Self-assessment report by the Agency, a site-visit (held online, but hereafter referred to as "site-visit") and finally an external review report sent to AAQ to comment on any factual error they may detect in the draft.

Thanks to the information given in the Self-assessment report (SAR) and the interviews, and based on the evidence provided before and during the site-visit, the panel could ultimately reach, for each of the ESG, consensus in judgements on compliance by the end of the visit, but by majority of votes for ESG 3.4.

Finally, the result of such process is the present external report drafted by the review Secretary in cooperation with the Chair and panel members. It is submitted to the ENQA Board to enable its members to make an assessment of the ESG compliance of AAQ.

### Self-assessment report

AAQ's self-assessment report, comprising 57 pages (plus Annexes) in length, was sent to the panel approximately 3 months before the site-visit, including documents intended to serve as more detailed information and as evidence in support of statements made in the self-assessment report.

The SAR was produced by a group of 3 AAQ staff members forming the working group responsible for the preparation of the self-assessment report (all 3 with an extended knowledge of the Agency's activities), except in the case of the SWOT which was written by the Agency's Director only. This group acted with the support of all AAQ's departments who could provide and review the information on their own activities. The implication of stakeholders has been limited to the creation of a steering committee composed of the AAQ's Director and a member of the Commission of AAQ (SAC). The other stakeholders the panel could meet during the visit: Higher Education Institutions (HEIs), experts, students, community representatives were not involved in the SAR, neither to provide suggestions for improvement, nor to confirm its validity as an accurate description of the Agency.

The report in itself was informative. The panel particularly appreciated the auto-criticism and auto-detection of areas for improvement highlighted throughout the document. To support all the information provided, 8 annexes were forwarded to the panel as evidence. However, and as usual in

an external review, a series of additional annexes had to be requested from the Agency. In some cases, due to the fact that a number of the necessary documents had to be requested at relatively short notice before the site-visit, some evidence was not provided in English. Some information and documents required some interpretation during the visit; nonetheless, full clarification was accomplished in the course of the evaluation process through further information given during the site visit and through analysis of the reality of AAQ's operations.

### **Site visit**

The visit for the external review of AAQ took place on November 17, 18 and 19 with a pre-visit meeting organized the day prior. Due to the COVID-19 pandemic, panel members were unable to travel to Bern in Switzerland and the visit took place online with the tool Zoom. ENQA provided the Agency and the panel a "Protocol for online visits due to force majeure" that allowed to preserve and guarantee the consistency of an ENQA Agency Review in the same way as it could be for onsite visit. The support of the ENQA coordinator during the whole visit was fundamental to supervise the technical and general aspects linked to this type of exercise.

The panel met the different stakeholders linked to the Agency's activities, namely:

- AAQ Management team
- AAQ staff
- AAQ governing and decision-making body
- Representatives of Ministries
- Experts involved in the different external quality assurance processes
- Higher Education Institutions' representatives (Heads of Institutions on the one hand and Quality persons on the other hand)
- Students' representatives
- Socio-economic stakeholders

The above-mentioned stakeholders represented all AAQ's activities under the scope of the present review. The panel appreciated their availability at the time to attend and to answer questions as well as the usefulness of all the interviews during the three full-day visit.

The support provided by AAQ's staff both before and throughout the site-visit is to be underlined. The logistical arrangements were perfectly adapted to the emergency situation and visit methodology. The information requested before and during the visit was provided quickly and clearly. The panel do confirm the predisposition of AAQ to provide an answer to all types of requests as well as their kindness and professionalism – as much as circumstances allowed – throughout the process. The panel was surprised to notice that few of the interviewees had read the SAR before meeting the panel.

## **HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY**

### **HIGHER EDUCATION SYSTEM**

The higher education system in Switzerland is a ternary system, with universities, universities of applied sciences, and universities of teacher education, with both public and private higher education institutions. In the federal system of Switzerland, cantons have the final responsibility for education, and, based on the Federal Constitution, the federal government and cantons are jointly responsible for ensuring that the higher education sector is of a high quality and able to compete.

The Swiss Higher education area is regulated, since January 2015, by the following framework:

- **The Higher Education Act, HEdA** - Federal Act on Funding and Coordination of the Swiss Higher Education Sector: regulates the entire Swiss higher education system that applies to the 3 abovementioned types of Higher Education Institutions;
- **The Higher Education Concordat**, Hochschulkoncordat: sets the cooperation both between the cantons themselves and with the federal government for the coordination of the Swiss higher education sector;
- **The ZSAV-HS** - Cooperation agreement between the Confederation and the Cantons: delegates the role on the financial and policy aspects to a series of joint bodies created under the Cooperation Agreement.

Three joint bodies were created under the HEdA and have the jurisdiction, at different levels, on all the public and private Higher Education Institutions:

- The Swiss Conference of Higher Education Institutions (SCHE)
- The Rectors' Conference of Swiss Higher Education Institutions (swissuniversities)
- Swiss Accreditation Council (SAC) and, consequently, the Swiss Agency of Accreditation and Quality Assurance (AAQ) placed under the supervision of the SAC.

**SCHE** is the education policy-maker that ensures the coordination of activities between the cantons and the confederation. This body adopts the legal framework on accreditation in Switzerland and therefore the HEdA Accreditation Ordinance.

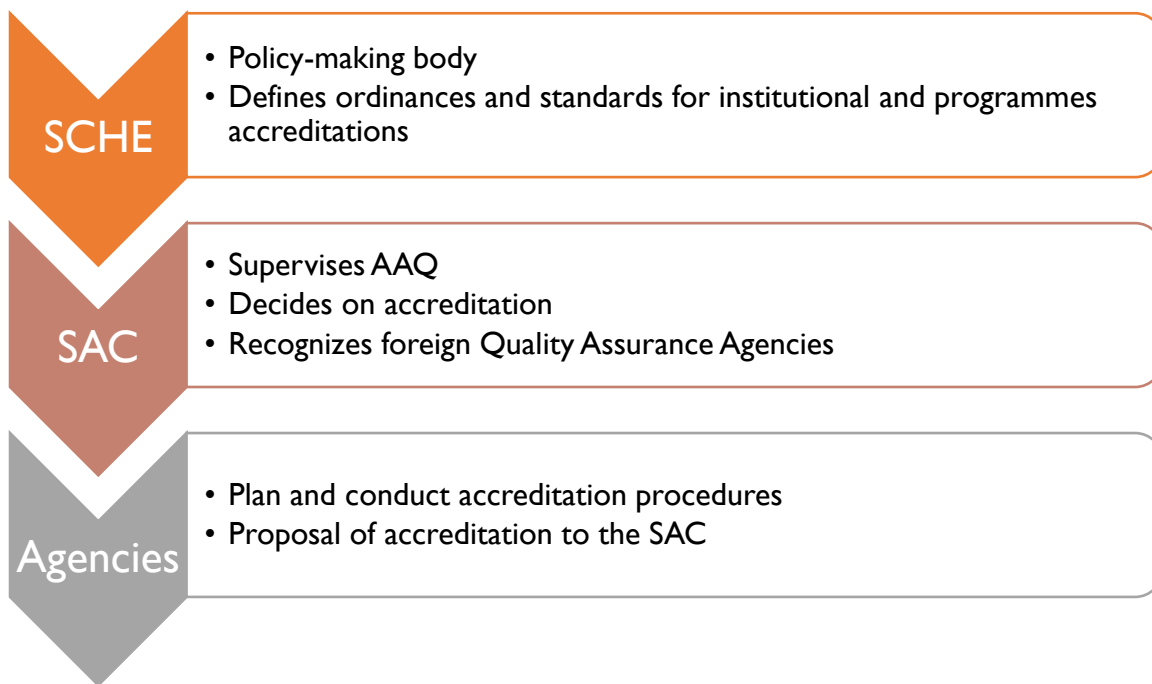
At a different level, **swissuniversities** is an association composed of the recognized Higher Education Institutions in Switzerland and represents their interests on the national and international arenas. They have a key role in submitting requests from the HEIs to the SCHE acting as the HEI's voice for legal frameworks considerations.

The third body created under the HEdA is the SAC which is the joint body of the cantons and the confederation for quality assurance, including accreditation for the Swiss higher education area. Its role is to ensure that all Swiss HEIs are accredited in accordance with HEdA (detailed in section "AAQ's organisation/structure" below).

## QUALITY ASSURANCE

Quality Assurance in Switzerland is well established since 2001, when OAQ, the predecessor of AAQ, was created. Since the last ENQA review the legal framework has remained the same with the HEdA and is organized in 3 levels:





AAQ has the legal mandate to conduct accreditation procedures under the HEdA for universities, universities of applied sciences, and universities of teacher education in Switzerland that must undergo institutional accreditation in order to hold the right of denomination (private and public higher education institutions). Moreover, public HEIs also have a financial stake as far as federal contributions are linked to accreditation results. While institutional accreditation is compulsory, programme accreditation is voluntary-based and conditional on the relevant university already having obtained institutional accreditation.

On the other hand, HEdA authorizes recognized foreign Agencies to run accreditation procedures in Switzerland. These Agencies have to fulfil a series of criteria defined by the SAC who has the sole responsibility to recognize their ability to operate in Switzerland. Currently, the following 5 Agencies are recognized and therefore meet the requirements according to the Guidelines of the Swiss Accreditation Council on the recognition of Agencies for the accreditation according to HEdA:

- In Germany: ACQUIN, AHPGS, EVALAG and FIBAA
- In Austria: AQ Austria

Alongside, AAQ is operating in these two foreign higher education systems:

### **Operations in Germany**

Germany has a long-standing tradition of a decentralised accreditation system (since 1998). Accreditation is a pre-requisite to operate as a Higher Education Institution and run programmes. It is based on the so-called system accreditation, introduced in 2007, that relies on demonstrating the quality of study programmes in accordance with HEI's internal quality assurance system.

The rules and criteria for system accreditation are determined by the Specimen Decree and the accreditation decision relies on the German Accreditation Council. This one authorizes Agencies (national or international) to run system accreditation of German HEIs. AAQ is allowed to carry out accreditations in Germany since 2009. In the last 5 years, 5 system accreditation procedures were run and 4 are underway.

## Operations in Austria

AAQ is running institutional quality audits in Austria since 2012. Being an EQAR-registered Agency is the only requirement to be a recognized Quality Assurance Agency in Austria.

The rules and criteria are defined in the Austrian Higher Education Quality Assurance Act (HS-QSG). Nevertheless, standards and procedures are under the responsibility of AAQ and decision-making is the Commission of AAQ's duty.

## THE SWISS AGENCY OF ACCREDITATION AND QUALITY ASSURANCE AAQ

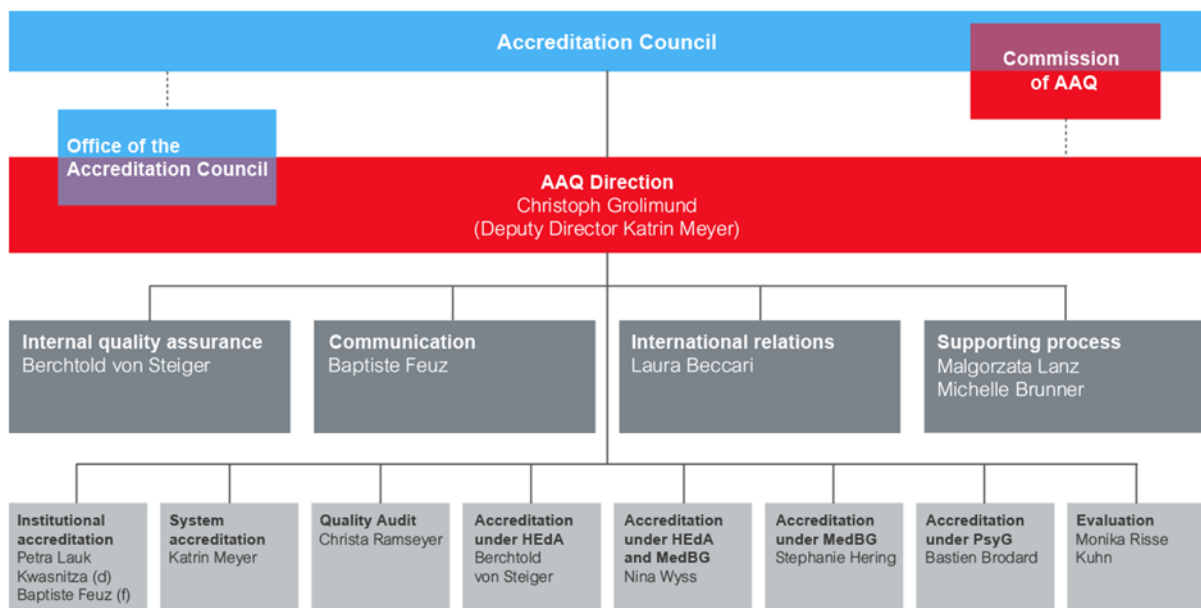
The Swiss Agency of Accreditation and Quality Assurance, AAQ, was established in 2015 by the Federal Act on Funding and Coordination of the Swiss Higher Education Sector (HEdA). It replaced the Swiss Center of Accreditation and Quality Assurance in Higher Education (OAQ), founded in 2001. The activities of OAQ were maintained but transferred under the HEdA legal framework. AAQ is a public law institution without legal entity.

HEdA is the legal framework that entrusts AAQ's activities including the implementation of institutional and programmes accreditation in Switzerland. Additionally, it allows the Agency to run evaluations, certifications and accreditations on behalf of third parties, as it does through its activities in Germany and Austria (see section "AAQ's Functions, Activities, Procedures" below).

### AAQ'S ORGANISATION/STRUCTURE

AAQ is a legally established institution and is operated under the auspices of two Bodies: the Swiss Accreditation Council, SAC (acting in two distinct operating roles: the Council and the Commission of AAQ, with the same members) and the Director. The latter has the full responsibility of the Agency's structure and organisation, including human resources, financial reporting and operational planning.

After the shift from OAQ to AAQ in 2015, the structure and staff of the Agency remained the same in the majority of cases and is organised as follows:



Source: AAQ's SAR

AAQ's has the mandate to manage the Secretariat of the SAC as stated by the Law and one of the 14 staff members of the Agency is dedicated to this role.

**The Swiss Accreditation Council (SAC)** is the joint body of the federal government and cantons for accreditation and quality assurance in the Swiss higher education sector and the accreditation authority for the procedures pursuant to HEdA. Its first duty is therefore to ensure that all Swiss HEIs are accredited against the HEdA requirements and in line with the European Standards and Guidelines.

It is composed of 20 members from different backgrounds of whom 14 are representatives of the academic sector, 2 students, 2 professionals and finally 2 international Quality Assurance experts. They are elected by the Swiss Higher Education Council (SCHE), body in charge of the adoption of the legal framework of accreditation in Switzerland. The 20 SAC members have two key roles in relation with AAQ:

1. SAC is AAQ's supervisory body, acting as its executive committee and supervisory board as defined in the Organisational Regulations of the Swiss Accreditation Council (OReg-SAC, March 2015). In this capacity, the SAC appoints AAQ's Director and approves the Agency's Strategic and financial planning and reporting. AAQ has the legal mandate to host and manage the SAC's Secretariat. It is also the decision-making body for all HEdA related accreditations and recognizes other Swiss or foreign accreditation agencies, if they meet the requirements detailed in the Guidelines of the SAC on the recognition of agencies for the accreditation according to HEdA (currently 4 German agencies and 1 Austrian agency are recognized in addition to AAQ).
2. The Commission of AAQ is the decision-making body that takes all decisions related to evaluation procedures as well as quality audits under the HS-QSG.

The SAC also has the responsibility to elect the members of the standing Appeals Committee (see standard 2.7).

## AAQ'S FUNCTIONS, ACTIVITIES, PROCEDURES

AAQ performs a series of procedures on external quality assurance, according to its legal framework and carries out the following processes:

### a) **Core activities in Switzerland (under HEdA)**

#### - Institutional accreditation:

AAQ is officially mandated, through the HEdA, to carry out institutional accreditation of Higher education institutions in Switzerland. This process grants the right to use the name of university, university of applied sciences or university of teacher education. Any HEI, public or private, must undergo an institutional accreditation in order to be able to use these denominations. On the other hand, public HEIs can apply for the financial contributions from the confederation only if the institution is accredited under HEdA.

The aim of this procedure is to evaluate if HEIs have a quality assurance system that allows them to guarantee and develop the quality of their teaching, research and services on a long-term basis. The requirements and quality standards are defined in the bylaw (Ordinance SR 414.205.3 of the HEdA).

In the last five years, AAQ has run 42 institutional accreditations, of which 27 are underway.

This process is a pre-requisite for HEIs to apply to the process of programme accreditation.

- Programme accreditation:

There are three different procedures for programme accreditation.

The first one is a voluntary process to which HEIs can apply if they previously obtain the institutional accreditation. The objective is to evaluate Bachelor, Master and postgraduate degrees against the HEdA programme accreditation standards. It can be conducted by any SAC's recognized Agency but there is no case till now as far as, at the time of the external review by the ENQA panel, no procedures were conducted under this format.

The second programme accreditation procedure concerns the basic medical degrees both at Bachelor and Master levels at Swiss universities for: human medicine, dentistry, veterinary medicine, pharmacy and chiropractics. This accreditation is regulated by the Medical Professions Act (MPA) and is compulsory. Indeed, only graduates of accredited medical degrees are allowed to access the federal examination for medical professions. If the legal framework is under MPA, the applied requirements and standards are those of the programme accreditation defined by the HEdA, complemented by specific requirements derived from the MPA. The accreditation must be carried out by AAQ every seven years and, during the third cycle (2018-20), 13 procedures were completed and one is in progress.

The third and last programme accreditation procedure is related to health professions. Like for the basic medical degrees, the legal framework of this procedure is defined in a specific Act: Health Professions Act (HPA), but responds to the HEdA requirements and standards in terms of programmes accreditation in addition to specific requirements from the HPA. The covered specialities are nursing, physiotherapy, ergotherapy, midwifery, nutrition & dietetics, optometry and finally osteopathy. This procedure might be carried out by AAQ or any of the SAC's recognized Agencies and this process is about to start soon.

**b) System accreditation in Germany (under the German Interstate Treaty)**

The system accreditation procedure aims at evaluating the internal quality assurance system in a German higher education institution. Since 2009, AAQ is one of the recognized Agencies by the German Accreditation Council (GAC) and is authorized to run this procedure that allows checking all the structures and processes of relevance to teaching and learning, meeting the GAC criteria. The rules, requirements and criteria are defined in the German Specimen Decree and a German HEI granted with the system accreditation will not anymore have to run programme accreditation on a compulsory basis. During the last five years, AAQ carried out five system accreditation procedures and 4 are in progress.

**c) Quality Audits in Austria (under the Act on Quality Assurance in Higher Education – HQ-QSG)**

AAQ started to implement this process in 2012 after an enquiry from an Austrian HEI. It consists in assessing the quality management system's efficiency in Austrian HEIs. As an EQAR-registered Agency, AAQ is allowed to carry out the audits in line with the rules and standards defined in the HS-QSG and defines its own procedures. The decision on accreditation is taken by the SAC in its role as Commission of AAQ. Six quality audits took place since 2012 and 1 is underway.

**d) Evaluation**

Evaluations are a voluntary process based on institutional and programme procedures under HEdA or Quality Audits under HS-QSG. The objective is purely one of quality improvement and does not lead to any formal decision but to a label. This label has no validity expiry and the certificate indicates the date when the evaluation was done. Sixteen evaluations were carried out in the last five years, in

Switzerland but also at international level in countries like Lebanon, Liechtenstein and Luxembourg for instance.

e) **Other activities out of the scope of the ESG:**

AAQ has the responsibility of running programme accreditation of 1) postgraduate medical training and 2) postgraduate training in psychology as required by the federal authorities. These activities are not linked to quality assurance in higher education as far as it leads to the licence to practice a specialty in medicine or therapy.

These procedures, even though some elements of the ESG are taken into account in their layout (expert panels, site-visit and publication of reports) are run by the Federal Office of Public Health (FOPH), with a mandate to AAQ for the external evaluation, and focus on concrete professional practice criteria.

Since 2015, AAQ completed 51 procedures for programme accreditation of postgraduate medical and psychology training.

f) **International activities:**

AAQ is an active Agency at international level, being a member of:

- INQAAHE (International Network for Quality Assurance Agencies in Higher Education)
- FrAQ-Sup (Réseau Francophone des agences qualité pour l'enseignement supérieur) – Founding member in 2016

At the European level in particular, AAQ is a member of:

- ENQA
- EQAR
- QAN (Quality Assurance Network) – Founding member in 2007
- ENAEE (European Network for Accreditation of Engineering Education)

Within these networks, AAQ participates in a number of Working Groups and Projects/Programmes (e.g. 3 staff members participated in the ENQA staff development programme) aiming at improving Quality Assurance in Switzerland. This has allowed the Agency to participate in several international events.

On the other hand, as far as AAQ's procedures comply with the standards of ENAEE (determined after an external evaluation process), it is entitled to award the EUR-ACE label to engineering degrees.

Regarding AAQ's cross-border activities, the Agency has a long-standing established activity in Germany and Austria with the existing system accreditation and quality audits procedures respectively. The Agency also runs evaluation processes abroad without direct legal consequences on a voluntary basis, between others the following examples:

- Evaluation of the Universität Liechtenstein in the corresponding country
- Evaluation of Université Antonine in Lebanon
- Evaluation of Luxembourg Medical School

As described above, evaluations are carried out under AAQ's criteria and methodology and lead to the publication of a report on the outcomes of the review and the award of a quality label.

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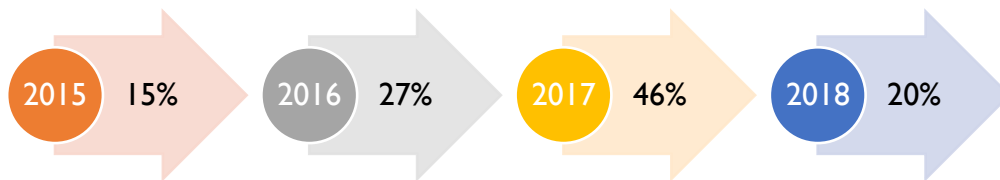
<sup>1</sup> These processes are not covered by this review. Please, see Annex 2: Terms of References of the Review.

AAQ has no financial advantage running processes abroad as described in the following section on Funding.

## AAQ'S FUNDING

The budget is largely public funded; AAQ charges the direct costs (e.g. fee for the experts group) to higher education institutions for external QA exercises under HEdA. The budget is fixed annually and amounts 2 million CHF a year. This money is provided by the cantons and the confederation, for half the total amount each. It covers all human and material resources necessary to run the core activities.

For assignments on behalf of third parties (system accreditation in Germany, Quality Audits in Austria, evaluations and any procedure not under HEdA), the Agency charges a fee that covers the involved costs. The incomes vary quite a lot from a year to another and represent the following amount of total earnings:



All budget surplus (extra income) is sent back to the cantons and confederation at the end of the year.

The budget allocation is defined as a result of the Director of AAQ's proposal to the Swiss Accreditation Council who approves the budget and financial statements.

# FINDINGS: COMPLIANCE OF [AGENCY] WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG)

## ESG PART 3: QUALITY ASSURANCE AGENCIES

### ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE

Standard:

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

#### 2016 review recommendation

See recommendations regarding Standards 2.1 – 2.7.

#### Evidence

AAQ undertakes, on a regular and cyclical basis, a series of external quality assurance procedures detailed in the section “AAQ’s functions, activities, procedures” above. The Agency runs institutional accreditation, programme accreditation (including basic medical programmes under HEdA plus MPA and HPA) under the HEdA legal framework, quality audits under the Austrian HS-QSG Act as well as system accreditation under the German Interstate Treaty legal framework. On the basis of institutional and programme accreditation, AAQ carries out evaluations that do not lead to any formal outcomes but aim at supporting HEIs for quality improvement. All these activities are law-based and regulated by Laws, Acts and Ordinances endorsed by the States (Switzerland, Austria and Germany).

The aforementioned basic external quality assurance activities are supported by AAQ that, in addition, adopts a supportive role in the Swiss Higher Education Area to help with a better understanding of national and international good practice in quality assurance in higher education, namely through the organization of the AAQ Institutional Accreditation Day on specific topics like the implication of stakeholders in quality process in 2018 or the institutional accreditation in 2020 and the regular newsletter that informs stakeholders on the current development, between others. The Agency also collects and processes information on the quality and efficiency of higher education activities through the analyses of data and publication of thematic analyses (detailed under ESG 3.4).

The mission, fundamental values, principles and objectives of AAQ, which underpin the aforesaid aims in matters of quality assurance, are publicly available on the Agency’s website and also presented in the 2016-2020 Strategic Plan. The current statement on mission, which is relevant for AAQ’s strategy, reads:

“As an external partner, the AAQ supports Swiss higher education institutions in the development of their quality assurance system, notably by means of institutional accreditation. In close partnership with the Swiss Accreditation Council, its supervisory body, it thereby contributes to the growth of a quality culture in the Swiss academic community and to the reinforcement of the Swiss higher education sector. The national and international engagement of the AAQ ensures the quality of the

services provided and underpins international trust in the Swiss higher education system. Through its quality assurance activities in neighbouring countries and beyond, AAQ supports the aims of the European Higher Education Area as well as the spread of its values in other countries.”

Based on this mission, AAQ has developed its four years Strategic plan translated into an action plan. That Strategic plan was not yet made public at the time of the visit, but a draft has been provided to the panel. The panel observed that the new Strategy developed for the period 2021-2024 equally defines the mission, principles and goals for the Agency, and does so more in line with the current activities it is running.

Regarding the stakeholders’ involvement in the governance and work of the Agency, the official documents, interviews, members of the supervisory and decision-making body, the experts’ panel members and students show that they are involved at different levels: SAC, panels selection and composition and, to some extent, the review or improvement of accreditation procedures. This is accomplished by participating in the meetings and conferences organized for example to elaborate new or revised procedures. For example, the experts and Higher Education Institutions were actively involved in 2018 in the development of the new Guide for quality audits in Austria. Beside of that, representatives of students and higher education institutions are full member of the supervisory and decision-making body: the SAC. And, as described under ESG 2.4, the involvement of students goes beyond that and is to be commended as far as they not only are active members of the different functions but act as a partner of AAQ.

The interviews with stakeholders show that they are convinced that AAQ’s work contributes to quality assurance at large, be it in Switzerland, Austria or Germany. HEIs were particularly satisfied and convinced with the level of professionalism of the Agency and the usefulness of its accreditation procedures for improving internal quality assurance systems. Nonetheless, some of them pointed that evaluation processes could be more quality oriented and less legally oriented, something the Agency might reflect on.

## **Analysis**

AAQ’s mission is defined, published and used as a founding principle to set the strategic plan which determines the objectives to be reached for a four-year period each, accompanied with an action plan.

The panel believes, in sight of evidence, that the different external quality assurance procedures are carried out on a regular basis, and that these activities are clear and understandable to the different stakeholders. The public bodies, Higher Education Institutions, experts, students and representatives of the professional world, with a high representation of international profiles, are actively represented in the different bodies of the Agency. However, at the governance and experts panels’ levels, the panel recommends extending the representation of the labour market representatives, even more with the increase of activities linked to health programmes and professions.

The relevant stakeholders are involved in the development or improvement of the accreditation procedures carried out by AAQ, be it through meetings or questionnaires. But the panel found that stakeholders were not involved and used of up to their potential at all levels. AAQ is finalising the draft of its strategic plan 2021-2024 and stakeholders should be, at some point, involved in this nearly concluded process. Another proof of the lack of external perspective for part of the work is that HEIs, experts, students and representatives of the professional world were not at all involved in the self-assessment report of the Agency for the present review. It is the fruit of the Agency’s reflection with inputs from one SAC’s member when the panel was expecting this to be the fruit of a larger consultation or at least a large communication.

It is worth noting that the interviews allowed the panel to confirm that AAQ’s work is highly appreciated and trusted, and that the Agency has a key role in quality assurance developments in the



country and in Germany and Austria where HEIs are particularly satisfied with AAQs professional work.

### **Panel recommendations**

- The panel recommends AAQ to extend the representation of the labour market representatives at the governance and expert panels' levels.
- AAQ should strengthen the stakeholders' involvement into its work and activities and take into account the external perspective at all levels.

### **Panel conclusion: substantially compliant**

## ESG 3.2 OFFICIAL STATUS

Standard:

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

### **Evidence**

The Swiss Agency of Accreditation and Quality Assurance, AAQ, is established, along with the Swiss Accreditation Council, by the Cooperation Agreement of the cantons and confederation as a legally dependent entity under public law in section 2, article 22 of the Federal Act on Funding and Coordination of the Swiss Higher Education Sector, HEdA. It says: "the Swiss Agency of Accreditation and Quality Assurance in Higher Education (Swiss Accreditation Agency) is a legally dependent entity. It is under the authority of the Swiss Accreditation Council".

HEdA entrusts the Swiss Accreditation Agency and any other accreditation agencies recognised by the Swiss Accreditation Council to carry out the accreditation procedure according to this Act and under the terms of the Cooperation Agreement for institutional and programme accreditations in Switzerland.

Programme accreditation according to the Medical Professions Act (MPA) and HEdA regulates the accreditation of basic medical degrees both at Bachelor and Master levels at Swiss universities and is compulsory. It must be carried out by AAQ every 7 years.

Programme accreditation according to the Health Professions Act (HPA) and HEdA, related to health professions covers a series of medical specialities of which accreditation might be carried out by AAQ or any of the SAC's recognized Agencies (ACQUIN, AHPGS, EVALAG and FIBAA in Germany and AQ Austria in Austria).

Finally, AAQ is granted the possibility to conduct accreditation procedures on behalf of third parties (under the terms of Article 7.2 of the Federal-Cantonal Agreement on Cooperation in Higher Education, FCA-CHE). The German Accreditation Council (GAC) and the Agency for Quality Assurance and Accreditation Austria (AQ Austria) respectively recognized AAQ as an authorized registered Agency to run system accreditation in Germany and quality audits in Austria.

The interviews reassured that AAQ is formally recognized by the different stakeholders, as the interlocutor and competent authority in charge of the procedures for external quality assurance in Switzerland and as a recognized and long-standing stakeholder for system accreditation in Germany and quality audits in Austria.

## Analysis

AAQ is the only Swiss national organization running external accreditation procedures of higher education institutions. HEdA officially introduces the Agency and its competencies. The criteria for the different procedures are defined in the Acts and Ordinances to which AAQ refers to in terms of accreditation: HEdA, MPA and HPA.

All the accreditation procedures of AAQ take into account and refer to the Law and Ordinances in its procedures for accreditation and make it public so that the principle of reciprocity between the Agency and the legislation which regulates it are completely covered.

AAQ is recognized by joint bodies that composes the Swiss higher education area: the Swiss Council of Higher Education (SCHE), the Rectors' Conference (swissuniversities) and the Swiss Accreditation Council (SAC) as a key stakeholder and is invited to propose the necessary changes to be introduced in the future updates of relevant laws in terms of quality assurance.

**Panel conclusion: fully compliant**

## ESG 3.3 INDEPENDENCE

Standard:

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

### 2016 review recommendation

- Selection procedures and criteria for the composition of SAR (renamed SAC since last ENQA Review) and its commissions should be specified in a binding document in order to further reinforce the organisational independence of SAR and AAQ.
- SAR is advised to set down the principles of conduct applicable to it in its own code of conduct or, for example, to adopt AAQ's existing code of conduct and ultimately publish this.

### Evidence

The Federal Act on Funding and Coordination of the Swiss Higher Education Sector, HEdA, states that AAQ is a legally dependent institution (Article 22), under public law and supervised by the Swiss Accreditation Council (SAC), independent body (Article 21) to which it is solely accountable. Article 21 of the HEdA also establishes that the SAC and AAQ organize themselves and issue their own Organisational Regulations (OReg-SAC and OReg-AAQ) that must be approved by the Higher Education Council. AAQ published its OReg on March 12, 2015 that aims at defining the following aspects:

- "These Regulations govern organisational aspects of the Swiss Agency of Accreditation and Quality Assurance (Accreditation Agency)."
- "In addition, they list the organisational arrangements and tasks that are already set forth in superordinate legislation."

Article 2 of the OReg-AAQ states that "the Accreditation Agency is professionally independent from the Federal Administration, from the cantons and from higher education institutions and other institutions within the higher education sector".

The organisational relationship between SAC and AAQ is defined under Article 22 of the OReg-SAC and says that SAC supervises AAQ and that this latter runs the Secretariat of the Accreditation Council and provides it with administrative support.

The Swiss Accreditation Council, composed of 20 members appointed by the Swiss Conference of Higher Education Institutions (SCHE), is legally and de facto, the supervisory body of the Agency. The SAC' tasks consist in appointing the AAQ's Director, approving the strategy and budget prepared and proposed by the Agency on the one hand, and, on the other hand, taking the decisions regarding accreditation results. There is representation of the different stakeholders involved in external quality assurance and members (list publicly available on SAC's website) are elected by the Swiss Higher Education Council for a 4-year term and may be re-elected once. There is no information available on the rules and conditions for dismissing the SAC's members. The Director of AAQ attends the SAC's meetings acting as an advisory and non-voting member. In response to the 2016 review panel recommendation, the SAC separated into two formal meetings its duty as a supervisory body and the one as a Commission of Accreditation, even though members are the same.

AAQ is responsible for procedures. Decision-making is ensured by the established process: the expert panel proposes a recommendation to AAQ, the Agency revises the consistency of reports and judgments with regards to criteria and formulates a statement and finally, the SAC takes the decision based on the panels report and AAQ's Director statement. The Organisationnal Regulations of the Swiss Accreditation Council (SAC) define, in its article 5, the decision-making procedure in place. In the case of programme accreditation of basic medical education, the decision-taking process is based on a consultation between the SAC and the Commission of Medical Professions as stated in the Medical Professions Act (MPA). For system accreditation in Germany, decisions are taken by the GAC as pre-defined by the 2018 Interstate Treaty that stipulates AAQ is responsible for conducting the procedure and issuing the experts' report and GAC is responsible for decision taking.

As for the selection and nomination of experts, a long list is established by AAQ itself after a formal discussion with HEIs on their expectations and particularities. Based on the information collected, AAQ establishes a profile form and AAQ selects experts from their pool or directly contact identified experts whose profiles are missing, to draft a list submitted to the HEI for detecting any conflict of interest with the proposed experts. Once finalized, AAQ submits the list to the Commission of AAQ (SAC) for approval. All experts selected for an accreditation procedure sign a contract that includes the declaration of no conflict of interest.

The Strategic Principles and Objectives, Annual reports, Procedures, Criteria, members of the panels are all published on the website and so, are accessible for society as a whole.

As regards funding and allocation of the budget, most funding comes from public funds and is fixed annually. The amount is of 2 million CHF a year provided by the cantons and confederetation (1 million each). The budget allocation is defined as a result of the Director of AAQ's proposal to the Swiss Accreditation Council who approves the budget and financial statements.

Regarding the independence of outcomes, the recommendations or conditions of the expert panels must be taken in a process which leads to a panel report endorsed by all panel members. Once the reports are finalized, they are forwarded to the AAQ's Director and finally to the SAC that issues a decision, always respecting – while not necessarily having to follow – the panel's judgements and proposals concerning the accreditation result. In effect, therefore, the SAC forms its opinion with the external review report provided by the expert panel, in due consideration of the findings based on the SAR, with the AAQ Director's proposal and with the HEI's statement. The SAC's findings are published in the final accreditation report jointly with the experts' report and the HEI statement.

In the German context, as regards system accreditation, AAQ proposes a recommendation to the GAC, which issues a formal decision based on the experts report and AAQ's statement.

The external review reports with recommendations, conditions and decisions are published on the website (excepting negative reports, see standard 2.6 Reporting for details).

## **Analysis**

The Swiss public law states, through the Federal Act on Funding and Coordination of the Swiss Higher Education Sector, HEdA, that SAC is an independent body and as a consequence is AAQ (supervised by SAC). It was evident to the panel that AAQ meets the standard both with regard to legal independence and equally for organisational independence. AAQ depends on SAC; SAC is independent and therefore protects the de facto independence of AAQ. This is related to the confederal organization in Switzerland: education responsibilities are mainly in the cantons; it is thus necessary to have a body protecting AAQ against any possible pressure exerted by stakeholders. This is the role of the SAC: SAC guarantees the independence of AAQ towards stakeholders and particularly the cantons and federation. Even though the SAC is not being evaluated in this Review, the panel considers that, for the previously mentioned reasons, it is important to devote some lines to the independence of the SAC.

The composition of the Swiss Accreditation Council is heterogeneous and the representation of stakeholders is large as far as the 20 members are from the different types of Institutions constituting the higher education system in Switzerland, the professional world, the students, the academic staff and the international quality assurance sector. The responsibilities to elect and name its members are public and transparent and ensure a representativity of the previously mentioned stakeholders, avoiding undue influence. In addition, the SAC's regulation clearly states that "members carry out their duties in person. Their duties may not be carried out by proxy", ensuring that members are not acting as representatives of any organisation. The panel considers it responds to the 2016 recommendation formulated by the panel and EQAR regarding the concrete organisation of the Council and the transparency on its composition and duties.

The members of the expert panels are selected and nominated by AAQ (developed in detail under ESG 2.4) thanks to a defined system of a long list that guarantees, selection and composition of panels is inclusive but independent. All stakeholders are involved in the process coordinated and led by AAQ, allowing the experts panel to be aligned with the needs of each accreditation procedure and, at the same time, guaranteeing the non-influence of HEIs and ensuring experts have no conflict of interest. Moreover, based on publicly available reports and interviews with stakeholders, the review panel found no evidence for any non-compliance with regards to the independence of the experts.

Accreditation procedures and minimum criteria for each procedure are defined by the Acts and Ordinances, and developed by the Agency itself, including the validation of the SAC in its duty as Commission of Accreditation. Moreover, it is worth noting that AAQ makes no decision on accreditation, the proposal for accreditation decision in a given individual procedure is entirely vested in the SAC or GAC based on the experts' report, AAQ's proposal and HEIs statement, safeguarding the independence of outcomes at different levels.

Concerning operational independence, the panel considers, at the sight of the law, regulations, SAR and meetings, that AAQ is fully independent. The Director of the Agency has full responsibility on the budget and strategic planning (both ratified by the SAC in its role as a supervisory body), on hiring the Agency's staff and on the procedures' planning and implementation.

## Panel suggestions for further improvement

The review panel suggests to

- 1) formalize the role and responsibilities of the SAC secretariat in its two functions in order to avoid any internal and external confusion and,
- 2) solve the one year and a half interim resource allocation of AAQ by accelerating the recruitment process (being inside the Agency or not).

Indeed, as identified by AAQ itself in the SAR and the information the panel could obtain during the interviews, there is a confusion of roles and duties of the SAC. An effort has been made to internally separate the meeting dealing with its decision-making role as an Accreditation body and the meeting dealing with the one as the Supervisory body of AAQ. Nevertheless, the fact that SAC secretariat is managed, for both roles, by AAQ should be processed with the concrete roles and responsibilities of each body.

## Panel conclusion: fully compliant

### ESG 3.4 THEMATIC ANALYSIS

Standard:

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

### 2016 review recommendation

The agency should further develop its thematic analyses and should, in future, deal with the follow-up processes for the individual procedure formats more intensively as part of this. International activities should be incorporated into the thematic analyses in a visible way, for example, through planned cross-sectional analyses.

### Evidence

AAQ publishes thematic analysis on a regular basis on its website and makes it available to the society at large. The Agency carries out a series of accreditation activities and analyses the results after a round has been completed, including international external quality assurance activities following the recommendation of the 2016 review panel. AAQ published a Report on the results of the last finished cycle for system accreditation in Germany and another on the postgraduate medical education programmes pursuant to HEaA (in the scope of the present review), both in 2019. The Agency also publishes reports on specific topics as can be the mapping of AAQ's criteria against AACSB's standards, specific to quality of management and accounting programmes, published in 2018 or the dynamic of the discussion between experts and HEIs during the site-visit published in 2017 in cooperation with Zurich University of Applied Sciences (ZHAW).

The objectives of all these reports are twofold, as indicated in the SAR (p. 27):

- Accountability for activities mandated by the governing bodies
- Improvement of the current methodologies as part of the internal quality assurance system of the Agency

Reports use several instruments for the analysis: questionnaires sent to HEIs after an accreditation procedure (75% response rate and therefore a reliable source of data), the accreditation results, the meetings with stakeholders, etc.

The number of thematic analyses is at least of one per year. They are coordinated and run by different staff members of the Agency, whose activity is directly linked to the Report's subject. There is therefore no department specifically dedicate to this activity and the process is based on a discussion of the Director with the team, based on opportunity on content that exists and sufficient to produce a useful report.

Finally, if the panel could confirm the publication of such thematic analysis, the interviews with stakeholders highlighted the fact that they were not well aware of the existence of these documents.

### **Analysis**

The panel believes that AAQ regularly publishes reports analyzing the general findings of their external quality assurance activities in parallel to specific research that appear to be useful for the Agency and its stakeholders.

Reports are clear and use reliable data as a basis for the analysis. All this contributes to the improvement of quality assurance.

AAQ is a small Agency and has no resources enough to have a dedicated position for thematic analysis. The panel does not see this as a barrier but thinks that the Agency would gain to have a systematic approach and a more standardized procedure for the selection of topics.

Also, the Agency could pay more attention and efforts to the dissemination of the results, as already identified among the 2016 recommendations. Indeed, the panel could confirm that HEIs and experts are not familiarized with this activity of the Agency. The panel concludes that stakeholders are not informed enough of the thematic analysis results and AAQ might improve its dissemination process.

### **Panel suggestions for further improvement**

- The panel encourages AAQ to have a systematic approach for selection of topics and therefore ensure that their regularity is safeguarded but also to improve the dissemination of thematic analysis results among stakeholders.
- The panel suggests AAQ to ensure that thematic analyses are carried out at the end of each accreditation cycle.

### **Panel conclusion: fully compliant**

## ESG 3.5 RESOURCES

Standard:

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

### **2016 review recommendation**

- Attention should be paid to ensuring that SAR's regulatory duties are fully financed. For this purpose, AAQ and SAR (now SAC) should endeavour to establish clearer separate costing and in future budget plans should report, for example, the material and operational costs for SAR head office separately, taking overhead costs into account (e.g. Assessment of the ESG Internal quality assurance, communication etc.).
- In order to ensure the greatest possible degree of planning security for AAQ and SAR (now SAC), the multi-year plan, which forms the basis for the budget for both institutions, and the strategic

planning should be continued. The agency should try to establish additional control options that allow AAQ's activities to be planned on a reliable basis.

- The path of organisational development taken by the agency should be continued consistently. The support and cross-departmental functions, including the various database solutions, should be better integrated into the working processes and, if necessary, further developed. In the human resources management plan, options for further education and for more flexible working conditions should be better structured.

## **Evidence**

AAQ's financial resources come from public funding (half from the cantons and half from the Federation) for carrying out its quality assurance activities under HEdA and amounts 2 million CHF per year, same amount every year and since last ENQA review. The Agency confirms that this budget always covers the staff and infrastructure costs (SAR, p. 29) and that the Director allocates the budget to the different items with a final validation by the SAC. For activities for third parties: system accreditation in Germany, quality audit in Austria and evaluations, the Agency charges a fee that must cover all the costs of such procedures. All extra income is sent back to the cantons and Federation as AAQ is considered a public funded body. All this is clearly defined in the HEdA.

The Agency has no real authority for the allocation of activities. HEIs decide on when to apply for accreditation and, as a public body, AAQ is not supposed to refuse any of these requests. It leads to peaks of workload that the Agency had to face, pushing other SAC recognized Agencies to run accreditation procedures. Hence, since July 2020, they are allowed to charge the same price for programme accreditation under HEdA, MPA and HPA.

Regarding human resources, the Agency counts 14 employees (10,5 FTE) with three different functions: direction, project managers, and administrative staff. The panel had the opportunity to meet all staff members except one person who could not attend the interview. Twelve people are exclusively or partly assigned to external quality assurance tasks linked to accreditation, audit, and evaluation. The interviews confirmed the quality of knowledge of the staff by their answers to the issues raised but also thanks to the HEIs and experts' feedback who have a particularly high level of satisfaction with their work and support. In addition, staff are regularly trained thanks to the events participation planning. The staff members confirmed that each of them participates in two national or international events a year. Nonetheless, as identified twice in the SAR (pages 28 and 53), there is a lack of comprehensive analysis of gaps in the team skills.

Staff hiring is AAQ's responsibility while staff salaries and HR regulations are managed at the federal level. Staff expressed their satisfaction with their purely HR conditions. Nevertheless, concerning the workload and planning, the SAR pointed that the workload is high and even if a planning is established, there is few flexibility in terms of HR and it makes it difficult to face peaks of activity. It is emphasised by the fact that the SAC secretariat, for its function as supervisory body and Commission of Accreditation, is assured by AAQ but the person who retired 18 months ago was not replaced. Its tasks were given to another staff member already employed with other functions assigned. This issue is also related to the scarcity of the back office inside the Agency.

Due to the online character of the site visit, the panel could not view by itself the quality of material resources, necessary to run external quality assurance activities. But the interviews with staff confirmed that the office where AAQ is based has the requirements to let the Agency's staff carry out their job in a suitable way and that IT material provided performs well and allows home office when needed.

## **Analysis**

The panel finds that AAQ has appropriate funding to organize and run its external quality assurance activities. The public budget and the fees charged to third parties have proven to be sufficient and adequate and to guarantee the sustainability of the model.

The working conditions are satisfactory and this is proven by a low number of turn over of staff members. They are flexible (as recommended by the 2016 review panel) including adapted working hours and home office. Staff is qualified in terms of professional competencies and language proficiency in a trilingual system, adequately trained and highly committed to their work. However, the panel identifies a risk in terms of sustainability of the staff members' workload. HEIs can apply for accreditation whenever they want without any possibility for AAQ to decline procedures if it does not match with the available resources. AAQ therefore cannot draw an anticipated planning, necessary in sight of the little flexibility existing for hiring and managing staff. In order to reduce the high workload during the peaks of activities and to face the eventuality of an increasing number of procedures, the Agency found the alternative solution to involve other SAC recognized QA Agencies who can now run programme accreditation with the same conditions as AAQ. If AAQ had sufficient human resources, that would not be the case. The panel therefore recommends the Agency to hire people, first to fill the existing gaps and second to make sure that AAQ will be able to carry out all the activities defined by law in the future. Additionally, the panel observed that the replacement of the SAC's secretary is pending for a year and a half and, as previously mentioned, a solid solution should be found.

With regard to staff development, an annual interview with the Director is organized for identifying the needs and learning and training opportunities. Nonetheless, based on this annual evaluation, a lack of comprehensive analysis of gaps in the team skills has been identified as a weakness by AAQ itself. The panel believes that staff is competent and trained in view of the stakeholders and staff comments during the online visit but that a comprehensive analysis should exist. The Management team has taken the point and has included a specific strategic goal in the draft strategy 2021-2024. The panel agrees that this issue should be addressed by AAQ's management with a plan to overcome this concern in line with the 2016 recommendation on the human resources management plan. The panel also encourages to clearly define how the further development of employees will be addressed in the new strategic plan and how it will be translated at operational level.

Finally, the panel believes that AAQ is providing the adequate material for the staff to carry out its activities in a satisfactory way. Personal computers are supplied as well as IT tools like ProKon, QM-Pilot or video conference facilities that allow staff to access data and documents in an efficient manner.

As a last point, and although this is not mentioned among the ESG's requirements, the panel noted the absence of a confidentiality position, this role being taken care of by the Director. A confidentiality position other than the Director could be a useful step to strengthen the HR organization of the Agency.

## **Panel recommendations**

The panel recommends the Agency to hire people, first to fill the existing skills gaps and second to make sure that AAQ will be able to carry out all the activities defined by Law in the future in order to guarantee its sustainability, independently of the number of HEIs' requests.

## **Panel suggestions for further improvement**

The panel encourages AAQ to clearly define how the further professional development of employees will be addressed in the new strategic plan.



## Panel conclusion: substantially compliant

### ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

Standard:

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

#### 2016 review recommendation

- With the involvement of all relevant interest groups, the internal quality assurance system should be further developed into a cross-format quality assurance system. The strategic planning and its implementation should form an integral part of the internal quality assurance system. The responsibility for the quality of decisions, including for follow-up processes, should be described in a more explicit way. Processes should be developed and serve to maintain the consistency of the decisions.
- SAR is advised to set down the applicable principles in its own code of conduct or, for example, to adopt AAQ's existing code of conduct and ultimately publish it.

#### Evidence

AAQ has published quality principles and a quality statement on its website. As indicated by the Agency in the SAR (p. 20), the Internal Quality Assurance system was developed on the basis of the exchange of good practices AAQ could gather in the former ENQA working Group on IQA, in 2015 when the current system was developed.

Several feedback systems have been adopted by the Agency in order to collect information oriented to the improvement of its activities, particularly of the accreditation processes. Surveys completed by the HEIs after an accreditation procedure are analysed and used to improve criteria and processes, mainly through the thematic analysis (detailed under ESG 3.4). In addition to this, AAQ organized three roundtables with stakeholders to get direct feedback: with experts in 2018 and 2020, and with HEIs in 2020, in parallel to informal feedback that experts confirmed they could give during or after a procedure.

Every year AAQ publishes its annual report on the website, which contains a very short summary of the different activities carried out by the Agency. At the time of the site visit, the 2019 Annual Report had not been published yet because of the will to include a new dedicated section for each external evaluation format's results. It takes time and the Agency also suffered from the pandemic's consequences that slowed down the process, as communicated by AAQ.

All the Agency's employees, experts and accredited HEIs subscribe to the Code of Conduct that includes a non conflict of interest statement, published jointly with the Accreditation Guides and included in contracts, as confirmed during the interviews. To avoid any conflict of interest between the panel members and the HEI to be evaluated, the panel composition, when elaborated, is sent to the HEI in question in order to give it the opportunity to comment on any possible conflict of interest. HEIs did confirm this practice during the interviews.

AAQ has defined and implemented an internal quality assurance process that defines all the sources that help the Agency enhancing quality. In order to support the process, a management tool, accessible to all the staff of the Agency, has been developed: QM-Pilot. The panel had a demonstration during the pre-visit interview and could confirm that it contains all the updated documents on a particular accreditation process, from the Guide to the flowcharts, from the procedures to the different types

of contracts and including the access to the long list of experts, to cite the main elements. It allows the Agency to guarantee that procedures are coordinated homogeneously on the basis of the latest improvements and ads brought to the methodologies. Nevertheless, the action and risk plans based on the Strategic plan are not yet integrated.

During the interviews, the panel could confirm that all stakeholders are convinced by AAQ's professional work.

### **Analysis**

The Internal Quality Assurance system of AAQ is based on 3 pillars: 1) the legal requirements; 2) the Agency's working instruments, and 3) the outcomes of external quality assurance activities. In addition, the ENQA review and self-assessment exercise it requires are embedded in the system. In sight of the abovementioned evidence, the panel is convinced that the agency has a well-developed system supported by an IT management tool: QM-Pilot. But, as far as QM-Pilot offers this possibility, the panel suggests AAQ to integrate a follow-up on the action plan and risks linked to its Strategic plan as already identified by the review panel in 2016 with regards to the implementation of the Strategy. In addition, the panel could confirm that an integration of the different IT systems would be an improvement for the Agency and therefore suggests to better link the existing databases (e.g. Prokon) with the QM-Pilot, in line with the 2016 recommendation under ESG 3.5.

The improvement of activities is regular and based on the different feedback mechanisms in place: internal meetings of the staff involved in accreditation procedures, questionnaires to HEIs and meetings organized by the Agency in parallel to informal ways to collect data useful to enhance the quality of AAQ's activities. However, as commented under several ESGs above, the panel considers that there is room for improvement in regard to stakeholders' involvement. In the last 5 years, experts have been consulted on methodologies twice during the cycle and some of them mentioned the fact that they sometimes did informally contact the project manager to discuss on a particular subject. HEIs answer a questionnaire after a procedure ends but they have no feedback on actions undertaken. It could be the case for accreditation procedures with existing meta-evaluations (system accreditation and quality audit) if they were aware of its existence but not for those not yet analysed in such a report. HEIs subject to institutional accreditation, that forms the core activity of the Agency, participated in one meeting in 2020, not sufficient for a key stakeholder on a 5 years' cycle. The panel therefore believes that the feedback mechanisms should be formalized and developed and that AAQ might embed them in its internal quality assurance system as a permanent feature.

Regarding professional standards, thanks to the interviews with stakeholders, the panel observed a very high satisfaction of HEIs and experts involved in accreditation procedures because of the exceptional professional conduct of the staff in charge of the processes. The panel commends the Agency for this positive perception of stakeholders on their professionalism, as it is also the case for experts (see detail under ESG 2.4).

### **Panel commendations**

The panel commends the Agency for the excellent professional conduct of staff members that leads to high satisfaction of Higher Education Institutions and experts.

### **Panel recommendations**

The panel recommends AAQ to formalise and develop the feedback mechanisms and to embed them in its internal quality assurance system as a permanent feature.

### **Panel suggestion for improvement**

- The panel suggests AAQ to develop the risk management tool available in QM-Pilot jointly with the launch of the new Strategic plan.
- AAQ would take advantage of integrating its different IT systems into QM-Pilot for a better data efficiency.

### **Panel conclusion: substantially compliant**

## ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Standard:

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

### **Evidence**

AAQ and previously OAQ, has undergone three external reviews against the ESG (2006, 2011, 2016) and two against the German Accreditation Council Criteria (2009 and 2016).

As described in the SAR and AAQ's webpage, ENQA external reviews are one of the key components of the internal quality assurance system.

### **Analysis**

AAQ ran its first ENQA review in 2006, shortly after the launch of the ESGs, and is undergoing external assessment, against the ESG and the German Accreditation Council criteria, every 5 years, despite the fact that no regulations explicitly require an external review by ENQA.

Nevertheless, in parallel to a clear intention to follow with continuous improvement and international recognition of the Agency, AAQ has other two main interests in undergoing external reviews and particularly with ENQA and GAC:

1. AAQ operates in Austria, a country that allows accreditations by third parties if the Agency is EQAR-registered
2. It also operates in Germany, where system accreditation can be carried out only by Agencies recognized by the GAC and evaluated against its criteria.

In its aim towards quality through continuous improvement, AAQ has demonstrated that they take seriously the outcomes of such reviews, first by including them as an integral part of the internal quality assurance system but also by publishing on their website the ENQA panel's recommendations and update on actions undertaken every two years.

### **Panel conclusion: fully compliant**

## ESG PART 2: EXTERNAL QUALITY ASSURANCE

### ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

Standard:

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

#### Evidence

AAQ's approach to quality assurance is historically based on the HEI's responsibility for quality assurance and therefore its institutional processes (including quality audits) focus on the internal quality assurance systems' effectiveness. Programme accreditation, possible only if a HEI has the institutional one, is a voluntary process (except for health and medical professions programmes) and focuses on the implementation of the HEI's quality assurance system at the level of a particular programme.

AAQ's accreditation procedures therefore provide a comprehensive approach for assessing internal quality assurance processes. All the standards are first legally established under the HEdA (with additional criteria for health and medical professions) and developed by AAQ in its accreditation procedures. They are included in the Accreditation Guides that give the necessary information on criteria interpretation and link with the European Standards and Guidelines to both the evaluated HEIs and the experts' panels.

The SAR (p. 34) includes the following table which demonstrates that the ESG Part I is addressed by AAQ for institutional and programme accreditations as well as quality audits, and by GAC in the case of the system accreditation in Germany. The table has been reviewed after the panel's revision of all the available evidence: SAR, Guides and interviews with the Governing bodies, Agency's management team and each interview sessions with the staff in charge of the different procedures and during which ESG Part I has been approached:

	<b>Institutional accreditation</b>	<b>Programme accreditation under HEdA</b>	<b>System accreditation in Germany under Interstate Treaty</b>	<b>Quality audit in Austria</b>
<b>ESG Part I</b>				
1.1 Policy for quality assurance	1.1, 1.2, 1.3, 2.3, 5.1	4.1, 4.4	17	1.1, 1.3, 5.1, 5.2
1.2 Design and approval of programmes	Partly in standard 3.1 and 5.2	1.1, 1.2, 2.1, 2.2	17	1.4, 2.1, 5.1, 5.3
1.3 Student-centered learning, teaching and assessment	None	2.3	17	Partly in standard 2.2
1.4 Student admission, progression, recognition and certification	3.4	2.3	17	5.1, 5.3

1.5 Teaching staff	4.2, 4.3	3.3	17	4.1, 4.2, 4.3
1.6 Learning resources and student support	4.1	3.2	17	1.4
1.7 Information management	2.2	4.2	18	1.4
1.8 Public information	5.2	5.2 (Institutional accreditation standard)*	18	5.3
1.9 On-going monitoring and periodic review of programmes	3.2, 5.1	2.2, 3.1, 4.1	18	2.1, 5.2
1.10 Cyclical external quality assurance	1.4	1.4 (Institutional accreditation standard)*	26	1.3

\* Programme accreditation can be carried out only if institutional accreditation has been obtained before.

Evaluations are not included as far as they are based on institutional or programme accreditation under HEdA or quality audits and because the aim of such procedures is a quality-oriented evaluation for a specific need of a HEI to be advised. This is of no consequence, but the standards applied are those of the 3 procedures beforementioned and thus comply to the same extent.

The table shows that ESG 1.2 is partially covered by the institutional accreditation procedure under HEdA. It also appears to the panel that ESG 1.3 is not covered by institutional accreditation under HEdA and quality audits in Austria.

For procedures in Austria and Germany, the compliance with ESG Part I is also ensured by AQ Austria and by the German Accreditation Council through the recognition of AAQ as a compliant Agency to run reviews in both countries.

All AAQ's guides for institutional and programme accreditation include in the explanations to which ESG each criterion refers and are made available to the public on the Agency's website. These Guides are known and used by HEIs as the interviews could confirm.

### **Analysis**

The panel confirms that AAQ aims at supporting institutions to meet internal quality assurance criteria through the accreditation procedures themselves with a focus on the HEI's quality assurance system efficiency and how it applies to a particular programme. The Guides provided as well as the regular organisation of events on topics linked to the different ESGs are a clear and efficient way to ensure that HEIs have the correct tools to develop their internal quality assurance system.

ESG Part I is well integrated into programme evaluation as well as system accreditation. Nevertheless, for institutional accreditation and quality audits, the panel could observe some irregularities with regards to ESG 1.2 and ESG 1.3. Indeed, for the institutional accreditation procedure, the criteria are defined under the HEdA legal framework and approved by the SCHE. These legal standards do not take explicitly into account the ESG 1.2 on the design and approval of programmes and no content is referring to ESG 1.3 on student-centered learning, teaching and assessment. The panel could confirm with the governance bodies that there is no legal barrier for AAQ to consider both criteria explicitly

in its procedure and the related Guide. For the ESG 1.3 the interpretation seems to be that it is related to programme accreditation and has no place within an institutional procedure as such. It is worth noting that there is therefore no guarantee that ESG 1.3 will be assessed, because programme accreditation is a voluntary process except for programmes linked to health professions. With regard to ESG 1.2, it is currently mentioned in the explanation of the standards that they have been identified as a guidance and not as standards to be applied. The panel recommends AAQ to include explicitly ESG 1.2 and ESG 1.3 into its institutional accreditation procedure as standards and thus ensure that both ESGs are systematically fully assessed. It might be addressed differently in the institutional accreditation procedure compared to the programme accreditation but addressed. The same applies to ESG 1.3 of the quality audit procedure run in Austria.

### **Panel recommendations**

The panel recommends AAQ to work in order to have ESG 1.2 and ESG 1.3 explicitly included into its institutional accreditation and quality audit standards and ensure that both ESGs are systematically assessed.

### **Panel conclusion: substantially compliant**

## **ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE**

Standard:

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

### **2016 review recommendation**

- It should be communicated with greater force both within the system and to the public that SAR (now SAC) is AAQ's decision-making body. For this, it should be clear from AAQ's guidelines that they are approved and backed by SAR. The same applies to the strategy, the quality paper and other policy documents and reports from AAQ
- With a view to international collaboration, the selection procedure and criteria used to appoint SAR members should be made more formalised. The aim should be to structurally, and therefore in a way that is not dependent on individual persons, guarantee the necessary skills of those involved in the procedure as well as the involvement of the relevant interest groups over the long term. The professional world/professional practice should be more strongly involved in the composition of subsequent accreditation councils. In order to achieve this, AAQ and SAR should, in general, strengthen their links with the professional world/professional practice.

### **Evidence**

The quality assurance processes run by AAQ are designed and defined on the basis of the different Laws that apply: HEdA for institutional, programme accreditation (in addition to MPA and HPA) and evaluations in Switzerland, the Interstate Treaty for system accreditation in Germany and the HS-QSG for quality audit in Austria. Thus, they are embedded within the legal framework (Law + Ordinances) that includes the general steps of the procedures and the minimum evaluation criteria. The procedures are then developed by the Agency in collaboration with different stakeholders.

After each modification or new legal framework, AAQ adapts its procedures based on the Law requirements and on the results of past procedures. In 2018 the Agency launched a revision process for quality audit in Austria following the publication of a revised version of the HS-QSG involving 5 of

the 6 audited HEIs and taking into account the feedbacks received when the audits took place. The same happened for system accreditation in Germany a year after the Interstate Treaty came into force in 2018.

In parallel to legal changes, AAQ continuously improves its accreditation documents thanks to the Internal Quality Assurance management tool in place (see detail under ESG 3.6) on the basis of the results of several data collections and feedback mechanisms, mainly based on HEIs' surveys which state their opinion on the impact of the processes (applicability of the criteria and guidelines, experts' panels, etc) and on internal meetings of project managers who exchange on practices and detect areas of improvement. It is accompanied by a series of meetings at different levels:

- HEIs: 75% answer the questionnaire sent by AAQ after each procedure in addition to a meeting organized in 2020 for feedback on institutional accreditation and a meeting for system accreditation in 2017
- Experts (including students): participation in two meetings in 2018 and 2020 in addition to informal feedback
- SAC: approves all AAQ's procedures (except for system accreditation) and takes decisions on accreditations and quality audits
- Political authorities: regular meetings (every month or two months) to discuss all QA-related topics, including criteria in the Law and the future second cycle of institutional accreditation
- GAC: meeting organized by the GAC once a year with all accredited Agencies and four meetings organized by QA Agencies active in Germany to exchange on practices and experiences on current procedures
- AQ Austria: events organized by AQ Austria and QAN meetings

All these instruments have been confirmed to the panel during the interviews, and are documented by the information available on the website and by the SAR as well as by agendas/minutes of meetings.

Employer representatives are represented in the SAC and in some experts' panels, but no specific action has been implemented on the basis of the 2016 review panel recommendation to increase the professional world/practice involvement.

As regards the aim of the Agency in line with its mission to contribute to the growth of a quality culture in the Swiss academic community and to the reinforcement of the Swiss higher education sector, AAQ has implemented processes in an improvement-led way and has included, in all its procedures, a system of strengths and recommendations, regardless of the accreditation result, on which the institutions have to report during the re-accreditation phase.

The interviews confirmed the fact that the processes run by AAQ has induced, for the Swiss Higher Education Area and more concretely for the higher education institutions, major improvement within the institutions and awareness on the importance of internal quality assurance. Institutions clearly expressed their satisfaction with the processes in place, nonetheless, several stakeholders miss a more quality-oriented approach in the case of the criteria for accreditation perceived as too legally-focused.

## **Analysis**

It is important to remind that general procedures and threshold criteria are defined by Law and Ordinances and that decisions are taken by the SAC. AAQ has the sole responsibility to implement the processes that they develop and document in the Accreditation Guides. The panel believes that the Guides reflect the legal framework requirements and clearly define the roles and methodologies

for institutional and programme accreditation, system accreditation and quality audit, following the recommendation of the panel in 2016.

AAQ develops its procedures on the legally-based criteria but, as confirmed during interviews, various stakeholders considered that including improvement-oriented aspects is a clear area of improvement. The panel agrees on this statement that is directly connected with the possibility for AAQ to complete the threshold criteria defined in Laws and Ordinances, at least for processes under the HEdA and HS-QSG (see detail under ESG 2.1). Accreditation is to some extent perceived as a control instrument and not always as a developmental tool. In order to reduce this type of perceptions, the panel recommends AAQ to reflect on the criteria applied and to include additional quality-oriented content when identified as necessary, jointly with stakeholders.

In regard to stakeholders' involvement, AAQ is making efforts, particularly in the last three years by organising meetings with experts and HEIs specific to the reflection on the methodologies applied for institutional accreditation. The Agency has maintained a stable and deep relationship with SAC as well as the dialogues with political authorities, GAC and AQ Austria. However, the panel thinks there is room for improvement. On the one hand, by involving more representatives from the professional world whose participation and feedback on procedures could be of high value, more specifically for programme accreditations linked to health degrees and professions (see suggestion for improvement under ESG 2.4), not only as experts but as key stakeholders for the continuous improvement of methodologies (including criteria). The panel also reiterates the 2016 review panel recommendation that says "AAQ and SAR should, in general, strengthen their links with the professional world/professional practice." (see detail under ESG 3.1). On the other hand, stakeholders' involvement in general should be reinforced to ensure that methodologies are fit for purpose. AAQ is organising meetings with experts and HEIs with good results as self-identified by the Agency. The panel believes it is an efficient tool to encourage an open dialogue that should be developed and extended to all the accreditation procedures.

To conclude, the panel believes that the external evaluation reports which always contain recommendations help the Higher Education Institutions to improve their internal processes and that the methodologies applied by AAQ therefore support HEIs to improve quality. AAQ is currently working on the methodology for the re-accreditation phase starting in 2023 and takes into account that, as far as institutions demonstrated the efficiency of their internal quality assurance process during the last cycle, this phase should be adapted in order not to overburden institutions in terms of workload and costs. This will be assessed during the next ENQA review.

### **Panel recommendations**

- The panel recommends AAQ to reflect on the criteria applied and include additional quality-oriented content when identified as necessary, jointly with stakeholders.
- The panel recommends to develop and extend the stakeholders involvement in the design of methodologies by bringing about more discussion opportunities.
- As already mentioned by the 2016 review panel AAQ and SAC should increase the professional world involvement at all levels.

### **Panel conclusion: substantially compliant**



## ESG 2.3 IMPLEMENTING PROCESSES

Standard:

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

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

### 2016 review recommendation

- The different roles that AAQ and SAR actually occupy during the individual decision-making process must be presented with greater transparency in the corresponding guidelines (see ESG 2.5 for detailed follow-up on this recommendation).
- AAQ and SAR are explicitly encouraged to work on the follow-up processes for all their procedures overall. As part of this, both organisations should also clarify whether experts are to be involved in the follow-up processes and, if so, at which point they should be involved. Finally, the follow-up processes should be described in greater detail in the guidelines in order to better inform higher education institutions about the overall outline of the procedures.

### Evidence

Each and every accreditation procedure run by AAQ implements elaborated and published Guides which are clearly described in terms of the legal framework, criteria, panels' composition and selection and the different phases of the process (self-evaluation, site-visit, external review report, decision-making process and appeal procedure). All this comes to reinforce the yet detailed legal framework that describes the process for accreditations under HEdA Ordinance of May 2015 (revised in January 2018).

The accreditation model applicable to all the procedures is the following:

- Self assessment report in which HEIs analyse their compliance against the standards established for each procedure
- Site visit by an experts' panel selected and trained for a particular procedure
- External evaluation report based on an AAQ template that contains a final judgment or proposal for accreditation and published on the website
- Decision taken by the SAC or GAC based on the external evaluation report, on AAQ's statement and the HEI's reponse.
- Follow-up procedure for the fulfilment of conditions

All AAQ procedures include a self-assessment report provided by the HEI to be evaluated. AAQ provides them with the template for drafting the report.

The site-visit is a common component of the different AAQ's procedures but run in a different way. For the institutional accreditation and system accreditation the site-visit lasts 3,5 days, including a first day for the preliminary visit. In the case of programme accreditation, there is a 1,5 day visit. Finally, for quality audits in Austria, the length of the visit is 2,5 days as detailed in the SAR (p. 39-40) and Guides.

After any site-visit, an external evaluation report is first drafted by the AAQ's staff coordinator and sent to the panel who revises and completes the draft. The content and structure of the external evaluation report differ from one procedure to the other in as much as this is due to differences in institutions or programmes, but all reports respond to the defined criteria of the corresponding procedure.

The follow-up procedure only applies to HEIs or programmes who obtained an accreditation with conditions. In the case of the system accreditation, the GAC in Germany carries it out nine months after the decision has been taken. The procedure is taken care of by GAC and AAQ has no role in it. For all the other procedures, the SAC in its role as Commission of Accreditation, decides on the deadline and format of the follow-up that is published jointly with the external evaluation report, AAQ's recommendation and the HEI's statement on the Agency's website. There is no follow-up on recommendations during the 7 years of validity of the accreditation, except when conditions are formulated.

With regard to decision-making and the allocation of duties, to be clarified as identified by the reviewers in 2016, the role and documents that support decisions are described in the Guide made available to HEIs, experts and society at large.

To ensure the consistency of the model, AAQ appoints a project manager who is a staff member whose role is to oversee procedures to guarantee that the process is being developed as defined by the Agency, and that the standard set of criteria is applied consistently. The project manager does not participate actively in the interviews or in judgements, both of which being the responsibility of the experts, but provides advisory and technical support to the experts along the whole process.

All stakeholders mentioned that they have a clear understanding of the model and are comfortable working with it, with a limit concerning the understanding of the decision-making process (detailed under ESG 2.5: confusion of the different roles).

## **Analysis**

The panel is of the opinion that AAQ complies with the usual procedural flow as envisaged by the ESG 2.3: a self-evaluation, an external assessment and a site visit, an external evaluation report and follow-up (if any conditions) are part of the Agency's procedures, published on the website and applied by all the stakeholders involved in the processes.

However, in the view of a series of evidence, the panel found that the process could be improved. The system includes a follow-up that only applies to accreditation decisions with conditions. It represents approximately 20% of HEIs for institutional and system accreditation as well as programme accreditation pursuant to HEdA, and 50% of quality audits. It means that a HEI or programme accredited without conditions will be awarded accreditation for a 8 years' period for system accreditation and 7 years' period for the other procedures without any follow-up by the Agency. Therefore, there is no follow-up procedure for HEIs and programmes with positive results based on the recommendations. It is clear that a follow-up should at least verify the implementation of conditions, what is already done, but the panel considers it is an important part of a full accreditation process as well as of the role of an Agency to support HEIs in the development of their internal quality assurance system, particularly in the context of AAQ. As a consequence, AAQ should include a procedure for regular follow-up, whatever the result of accreditation is, for all its accreditation processes. It will become more and more useful and important if, for the second cycle of accreditation to be started in 2023, AAQ lightens its re-accreditation process and focuses the assessment on the analysis of the first accreditation results, as considered by the Agency for further developments on this ESG.

In any case, and as identified by the review panel in 2016, the follow-up procedure should be detailed in the Accreditation Guides in order to clarify expectations and roles and improve the transparency towards HEIs. The follow-up is at SAC's discretion and, apart for the 24 months maximum deadline for follow-up on decisions with conditions, no information is available on the expected format and who (experts, AAQ, SAC) is in charge of the assessment. It would probably help institutions and experts to have a complete understanding of the external quality assurance processes run by AAQ.

### **Panel commendations**

The panel commends AAQ for the high level of satisfaction of Higher Education Institutions with the Agency's processes (as confirmed during the interviews with HEIs).

### **Panel recommendations**

- The panel recommends AAQ to include a regular follow-up procedure, not only for decisions of accreditation with conditions, considering the length of the accreditation validity and the lighter second cycle considered.
- AAQ should detail the follow-up procedures in the accreditation guides.

### **Panel conclusion: substantially compliant**

## **ESG 2.4 PEER-REVIEW EXPERTS**

Standard:

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

### **2016 review recommendation**

- The agency's internal standards for selecting and preparing experts should be made consistent across the various different procedure formats. There is potential for development in, for example, the involvement of non-academic perspectives in institutional procedures and of active participants in accreditation procedures in the field of medicine and psychology. AAQ should further invest in the basic preparatory briefing of experts. Editorial discrepancies regarding the selection criteria in the guidelines should be rectified at the next available opportunity.
- In order to increase transparency, both the impartiality and independence criteria for experts and the code of conduct should be published consistently. In addition, the "longlist procedure" should be described with the greatest degree of detail in all guidelines so there can be no doubts as to the – established – integrity of the selection of experts.

### **Evidence**

The criteria for the selection of experts are described in the legal framework (HEdA Ordinances) and included in the different guides of the Agency, published on the website.

For Institutional accreditation, the panel is composed of at least five experts including academics, quality assurance professionals and a student. The same applies to quality audits in Austria. For programme accreditation under HEdA and HPA/MPA, a minimum of three experts run the procedures of which one is a student. For programme evaluation procedures of continuing education programmes, the number of experts is the same but there is no representation of students in these panels (SAR, page 42). For the other evaluation procedures, the same composition applies depending on if it is an institutional accreditation or a quality audit. Finally, for system accreditation in Germany, the panel is

composed of five members: three HEI professors, one student and one representative of the professional world.

The profile required for each institutional accreditation, quality audit and system accreditation procedures is clearly defined. The academic members should have good knowledge of the field covered by the higher education institution, being recognized for their teaching and research experience at national and international levels, have experience in quality assurance and also speak the language of the procedure (German, French, or English). In addition to these qualifications, the chair must be actively exercising at management levels in a higher education institution. Finally, the students involved, when stated, are proposed by the national student union. It is also the panel's profile when evaluations are based on institutional accreditations and quality audits.

For programme accreditation (and evaluations when it applies), the profile of the three panel members (minimum) is determined on the basis of specific criteria applied depending on the field of study and type of institution to be evaluated, but the main characteristics are defined in the AAQ guide: experience in accreditation, in managing programmes as well as knowledge of the programme's area engaged in the procedure.

All panels are expected to have national and international knowledge as a whole, speak the language of the procedure and have sufficient knowledge of the national higher education system in which the procedure operates. As stated by the HEdA, the composition of the expert panel should be balanced with an international perspective as well as take into account gender and age.

The interviews during the online visit confirmed that the selected experts by AAQ have excellent skills and competencies for each of the profiles defined for the panels of each type of procedure. The composition of panels is the fruit of a well-established process with the long-list AAQ's drafts and sends to the SAC for approval (see independence of experts' selection under Standard 3.3 above).

In terms of training, it differs from a procedure to another:

- Institutional accreditation under HEdA: experts first receive a paper briefing for personal training and, a month before the site-visit, a pre-visit is organized with a dedicated time for training of the panel members.
- Programme accreditation under HEdA/MPA and under HEdA/HPA: panel members receive the accreditation guide and have a structured telephone briefing with the Agency's coordinator.
- Quality audit: the accreditation guide is sent to the experts and a briefing is organized on the first day of the site-visit.
- System accreditation; panel members receive the Accreditation Guide and, jointly with the HEI's self-assessment report, they are provided with a written briefing.

Twice a year, specific training sessions are organized jointly by the Swiss Student Union (VSS) and AAQ for student panel members for which AAQ bears the costs and takes part to.

All these elements, described in the SAR (page 43), have been confirmed by the interviews and additional evidence requested by the panel (e.g. Experts briefing documents sent to the experts).

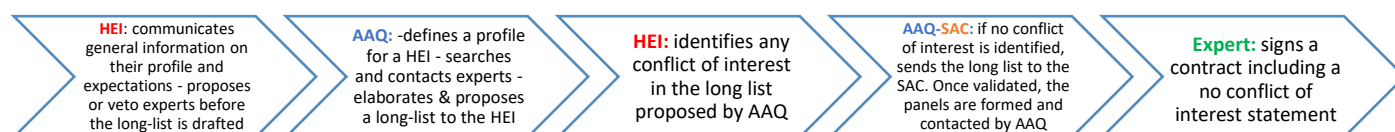
All experts who participate in AAQ's external evaluations sign a contract that includes a Conflict of Interest statement. This latter is also prevented earlier in the process thanks to the dialogue on the profile and long-list of experts between AAQ and the HEI. The Agency iterates its ethical standards in all its Accreditation Guides for the selection of expert panel members and sends the Code of Conduct early in the procedure.

It is also worth noting that the support provided by the Agency's staff all along the processes of the different accreditation procedures, in particular their availability and problem-solving capability, received praise from the experts whom the panel met.

## Analysis

The composition of the panel and the selection of experts are clear, published and, as a rule, appropriate.

For selection, AAQ works with a so-called "long list", process that meets the ESG expectations in terms of appropriateness of profiles for a particular process, of independence and of no conflict of interest. The main steps of the process are detailed as follows:



This long-list, now clearly detailed in the Accreditation Guides in response to the 2016 recommendation, prevents from any conflict of interest since the very beginning of an accreditation procedure by anticipating it thanks to the abovementioned process that includes a triple source of information and control: AAQ, HEIs and the SAC. The panel is convinced that this procedure is sound and appropriate to operate the Agency's selection of experts.

As regards the composition of panels, academics are represented in all the panels nominated by AAQ. Students also are represented in the panels, except in the programme evaluation procedure of continuing education programmes as it was already the case during the last ENQA review. The panel clearly identifies an issue as far as this evaluation procedure is not complying with ESG 2.4 that states 'include a student member'. If the panel understands the complexity of including a Bachelor or Master student in this process, it is therefore necessary that AAQ thinks about possible solutions, for instance by involving doctoral students, if doctoral students in this particular procedure are considered as students by the given HE system. As suggested in the SAR, alumni might also be recruited as experts. In addition, and in line with the 2016 Review panel's recommendations, the possibility to systematize the non-academic perspective, mainly represented by professionals, in panels would be an asset for programme accreditation as far as it would emphasise the evaluation of graduate competences and of learning outcomes, particularly for programmes linked to the health sector that is a more and more important activity of AAQ. Finally, the panel could confirm by checking the procedures that took place, that expert panels include international experts and expertise.

Regarding the training of experts, it is evident to the panel that experts are trained appropriately through different tools the Agency has put in place: Accreditation Guides, briefing documents, telephone briefing, pre-visit training a month before or the day prior to the visit, availability of staff members to answer any questions or organize a one to one or panel telephone meeting under request. However, the training or briefing differs quite a lot from one procedure to another. If not all training and briefing instruments need to apply the same way for every accreditation procedures, the panel would suggest AAQ to think about having a consistency in trainings/briefings of experts in order to ensure they all have the same degree of information and interpretation of the accreditation procedure and standards. The panel has gathered the impression that the paper briefing is more focused on an organizational objective on how to carry out the visit and report rather than on training in the context in which the experts are working or the criteria they are using. If this fact did not bring consequences on the interpretation and application of the criteria until now, it is because of the detailed explanations included in the criteria and the support of AAQ's staff to respond to any doubt. It nevertheless

represents a risk that might be captured as far as it depends on AAQ's staff availability to answer all the experts' questions with regards to criteria and facing at the same time a growing number of procedures.

AAQ is investing time and money in the training of students and the panel would like to commend the Agency for its long-standing collaboration with the Swiss Student Union, and encourages them to continue on this path.

### **Panel commendations**

- AAQ is to be commended for attracting and selecting well-qualified peers with an extensive international knowledge that leads to the high satisfaction of stakeholders and particularly HEIs.
- The panel commends the Agency for its collaboration on selection and training of student experts with the Swiss Student Union (VSS). This should be considered to be good practice and deserves to be highlighted and supported.

### **Panel recommendations**

The panel recommends AAQ to include a student member for all programme evaluation procedures, including for continuing education programmes. As mentioned by the panel in 2016, AAQ and SAC together with their partners should try to find ways and means by which the student perspective could be included in this procedure.

### **Panel suggestions for further improvement**

- The briefing and training of experts could be improved by having a more homogeneous approach in order to make it more consistent.
- Representatives from the professional world could be involved in more programme accreditation procedures, particularly those linked to health degrees and professions.

### **Panel conclusion: substantially compliant**

## ESG 2.5 CRITERIA FOR OUTCOMES

Standard:

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

### **2016 review recommendation**

- As part of their internal quality assurance systems, AAQ and SAR should devote more detailed attention to the question of consistency and should more explicitly represent the consistency requirements from Standard 2.3 in their internal quality assurance systems.
- Guidelines forming the basis for SAR's option to deviate from the expert-recommended decisions should be published.

### **Evidence**

The procedures and criteria on which decisions are based are publicly available on the Agency's website and sent to the Higher Education Institutions on the one hand and to the expert panels on the other hand before the accreditation procedures start. The criteria are defined by law, in the HEdA, and approved by the SCHE. AAQ uses these legally established standards for all the institutional and

programme accreditation as well as quality audits (and therefore for evaluations). Criteria for system accreditation in Germany are established in the Interstate Treaty and included in the GAC's Accreditation Guide, publicly available.

Criteria are specific to each accreditation procedure and, if the competency to define them is not the one of AAQ, the Agency is consulted and participates in the discussions to set the standards at national level.

AAQ has put in place several instruments in order to guarantee the consistency of accreditations that apply to all its procedures:

- **Role of AAQ:** as mentioned under ESG 2.3, a project manager of the Agency plays the role of the “standard-keeper” during the whole process, meaning before, during and after the site-visit and until the report is finalized. They write the first draft of the evaluation report based on the results of the accreditation procedure they coordinated and ensure that the final report is consistent in terms of analysis of the criteria and judgements. The Agency also provides, in all its Accreditation Guides, an explanation for each standard that could be compared to the ESGs Guidelines that helps the HEI, the experts, the Agency and the SAC to have a similar interpretation of standards (published on the website in the Accreditation Guides and sent to HEIs and experts at the launch of an accreditation process). Moreover, these explanations make a clear reference to the ESGs they are referring to.
- **Experts:** they all are briefed (and trained for institutional accreditation and quality audit) on the specific set of criteria to be applied. It includes information on the 4 levels of compliance for each standard and in which cases a recommendation or condition should be formulated. They also have to provide a grid to the other panel members before the visit takes place and it allows the AAQ's coordinator detecting any misinterpretation in the criteria assessment.
- **Higher Education Institutions:** HEIs have the opportunity to evaluate to what extent the standards were clear and understandable and comment on this thanks to the questionnaire sent to the HEIs after each accreditation procedure and thanks also to documents the panel could access and check. It is an additional tool for the Agency to ensure that HEIs are conform to the standard interpretation from their side during the self-assessment phase but also with regards to the external evaluation report.
- **Decision-making:** the multiple steps for decision-making ensures the consistency of outcomes and judgments as the panel could confirm during the interviews and through the analysis of Laws and Accreditation Guides. The external evaluation report is written by the AAQ's coordinator and the experts' panel and sent to the HEI for comments. Once this process is finalised, both productions are sent to the AAQ's Director who formulates a proposal of accreditation and checks the coherence of conditions with other reports. Finally, the expert evaluation report, the HEI's statement and AAQ's proposal for accreditation are sent to the SAC who takes the decision on accreditation and ensures that criteria are comparably applied.

## Analysis

The panel considers that the procedures and criteria used by AAQ for its different accreditation processes are clearly defined and publicly available in the legal framework and on the Agency's website. They therefore are accessible to all stakeholders and particularly HEIs and experts who also receive the document at the kick-off of each accreditation procedure. Experts are prepared through an efficient briefing and feel comfortable with the level of knowledge and interpretation of criteria they have before starting an accreditation procedure (including students). HEIs are informed well in advance of the criteria and guidelines to be used for their process during the launch of the accreditation procedure. To conclude, Accreditation Guides, containing the process and criteria, are pre-defined and publicly available as expected in the ESG 2.5.

With regard to consistency, the various instruments that AAQ has in place are adequate as confirmed by experts but also by Higher Education Institutions who went through an accreditation procedure, being in Switzerland, Germany or Austria. In order to improve consistency and the criteria on decision-making, the panel suggests AAQ to get even more transparent on the different roles played by the experts, the Agency and the SAC. As identified by the panel in 2016 (see ESG 2.3), self-detected by AAQ and confirmed by stakeholders, it is not that clear that AAQ does not take accreditation decisions but proposals of accreditation and that SAC is the final decision-making body. Despite the fact that accreditation guides include a clear explanation of the process and therefore the different roles and responsibilities, communication towards stakeholders should be reinforced. On the other hand, the decision taken by the SAC can slightly vary from the Experts and Agency's proposal and, based on the review panel's recommendation in 2016, it should be better explained to stakeholders by the Agency in its published protocols.

### **Panel suggestions for further improvement**

The panel suggests AAQ to improve the communication on the different roles for the decision-making process. In addition, the agency might be clearer in its accreditation guides on the fact that the SAC has the possibility to deviate from the experts and agency proposal for accreditation.

### **Panel conclusion: fully compliant**

## ESG 2.6 REPORTING

Standard:

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

### **2016 review recommendation**

- AAQ and SAR should work together with their clients and partners towards cross-procedure systematisation of their publication practice and therefore towards greater transparency. Above all in procedures that are solely AAQ's and SAR's responsibility, the relevant documents and information, including the decisions concerning the follow-up, should be published in a suitable way, e.g. as updates to the existing accreditation reports, through hyperlinks or similar.
- The agency is recommended to publish all reports and negative decisions.

### **Evidence**

#### **Publication of reports:**

Reports produced by the expert panels involved in concluded AAQ's procedures are all published on the website in full, along with AAQ's proposal, the HEI's statement and the final decision issued at the end of the process by SAC. However, this does not apply to the negative reports that are not published for Institutional and Programme accreditations under HEdA as it was already the case in 2016.

In addition, for Institutional and Programme accreditations under HEdA, the publication of reports is the fruit of a "negotiation" of AAQ with each HEI when drawing the contract for accreditation. It means that AAQ's process includes the publication of reports in its Accreditation Guides but depends on the HEI's agreement and signature to do so. Indeed, in Switzerland, the Law on personal privacy takes priority over AAQ's procedure and if the Law does not state a compulsory publication of reports, the HEI is likely to refuse publishing it. Publication of reports is compulsory by law in Germany and Austria.



### **Content, consistency and purpose of reports:**

All the reports are elaborated based on a template provided by AAQ to the experts' panels. The AAQ's project manager who coordinates the process supervises that reports follow the required structure in order to ensure linearity of format within the same type of process. The panel could confirm that reports follow the given format for all the accreditation procedures run by AAQ.

The full reports contain a presentation of the unit under accreditation, an assessment of formal requirements (against the pre-defined criteria), commendations, recommendations and/or conditions and a formal conclusion in the form of a proposal for accreditation.

As mentioned under ESG 2.5, consistency is safeguarded thanks to a multiple verification first by the project manager who coordinates the procedure, then by the AAQ's Director, and finally by the SAC. The panel found that reports were complete, clear and aligned with expectations and this was confirmed by HEIs during the interviews.

Finally, regarding the purpose of reports and their quality, HEIs were unanimous: it is a useful document, mostly for internal quality assurance follow-up. Recommendations normally come as a confirmation of the self-assessment exercise, they are detailed but not surprisingly - in the logic of a good self-assessment phase - they come to reinforce the action planning and analysis needed by the HEIs for the detected areas of improvement.

### **Analysis**

#### **Publication of reports:**

AAQ does not take any decision on accreditation, it is the role of the SAC. Nonetheless, the Agency publishes the full external evaluation reports jointly with AAQ's proposals for accreditation, the HEI's statements and finally the formal detailed decisions taken by the SAC. Follow-up reports are published as well on the website as recommended in the last ENQA review report. All this is the result of a huge effort that AAQ has to do in order to guarantee that all reports will be published because of an absence of mention to this in the Law, necessary to make it compulsory. This is due to a political decision that intervened a long time ago and was interpreted as a breach of autonomy of the HEIs. Due to that, AAQ, in addition to include it in its Accreditation Guides, had to put in place a system that includes an agreement on the publication of reports in the contracts signed for accreditation, making it therefore totally dependent on the will of the HEIs to accept it or not. Even if it never happened till now that a HEI did not accept the publication of the report, the panel sees a clear risk that it could happen at anytime. This matter has not been identified as a critical point to add to the political agenda and the panel recommends AAQ first to alert insistently the regulatory bodies on this risk and second to anticipate this with a process to apply in case a HEI does not want to authorize the publication of its report. It is even more important in the case of negative reports that are not published because of political traditions and of the law, as already highlighted by the review panel in the 2016 ENQA Review and also underlined by EQAR.

With regard to accessibility, reports are easily localizable as far as there is a dedicated section in the main menu of the Agency's website and well-organized by accreditation procedure.

#### **Content and purpose of reports:**

It is clear to the panel that reports are structured, detailed and contain all the necessary elements to provide HEIs and programmes with useful recommendations to improve their internal quality assurance system. Both the reports themselves and the feedback from stakeholders confirmed that the design, content and objectives are fit for purpose. The quality of reports is therefore perceived positively by stakeholders and the panel.

But reports are long and not always easy to read because of the level of details they contain. The panel could hear during the interviews that a summary report would be useful and might improve the interest of all stakeholders in the published reports. The panel encourages AAQ to study this possibility if a clear need is identified. Also the EU law on data protection and privacy needs further attention in the AAQ reporting on peer reviews.

### **Panel recommendations**

- As already mentioned by the review panel in 2016, the present panel also recommends AAQ to publish negative reports.
- The panel recommends AAQ to alert the regulatory bodies on the existing risk that HEIs can decide not to authorise the publication of the external evaluation report because of no legal notice for this. In the meantime, the Agency should anticipate this risk with a process to apply if a HEI takes this type of decision.

### **Panel suggestions for further improvement**

The panel suggests AAQ to investigate if a summary of the external evaluation reports would be useful and would improve the readability and therefore the interest by the larger community in the published reports.

### **Panel conclusion: substantially compliant**

## **ESG 2.7 COMPLAINTS AND APPEALS**

Standard:

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

### **2016 review recommendation**

AAQ and SAR should further develop their complaints procedure. In terms of content, formalised complaints procedures should be established for possible errors in the implementation of procedures and the student perspective should be included in the Appeals Commission. In addition, higher education institutions should receive more transparent information about the options for raising complaints and the criteria for the composition of the Appeals Commission should be made more formalised, in order to guarantee in the long term through structural measures and therefore independently of individual persons, that those involved in the procedure possess the necessary competencies and that the relevant interest groups are involved.

### **Evidence**

The Appeal Procedure is established in the OReg-SAC and detailed in the Organisational Regulations of the Appeals Commission (OReg-AC) dated June 2016 and published on the Agency's website. It describes its duties and modus operandi as well as its composition (following the 2016 review panel recommendation). It is composed of three members elected and appointed by the SAC. These members have to be external to the SAC and AAQ. It has competencies on the appeals on SAC decisions and therefore for institutional and programme accreditation as well as quality audits. The system accreditation in Germany has its own appeal procedure managed by the German Accreditation Council ("Informationen zu Möglichkeiten von Stellungnahmen, Einsprüchen, Beschwerden und Klagewegen"), publicly available on the GAC's website. In the last 5 years, the Appeals Commission had to deal with 3 procedures within the institutional accreditation format. For one procedure the

HEI decided to start a new accreditation and thus not to pursue with the appeal, another one ended in a revision of the accreditation decision and finally obtained the accreditation. The last one asked for clarifications but was not considered as an appeal as such.

Possibility of appeals to a court of law is in process: it has been approved by the Parliament and will be in force in March 2021. It is uncertain yet if this process will replace the SAC's procedure or if it is an additional step.

Regarding complaints, AAQ uses different tools. The first one is the formal information published on the website; it indicates that complaints against the conduct of an AAQ's procedure can be submitted to the Commission of AAQ as authority of internal quality assurance in all procedures of the agency, including the contact. A complaint has no prescribed form and is not subject to any deadlines. The other one is the informal process that consists of a direct contact of HEIs with the Director and the staff. Finally, the questionnaires sent to HEIs after any accreditation procedure that contains free text boxes for HEIs to formalize any complaint on the procedure, the experts, the organization, etc. as stated in the SAR and confirmed with the HEIs during the visit.

### **Analysis**

As regards the Appeal procedure, it is clear, defined and communicated to the institutions through the ORegs and Guides. The Appeal Commission is formed on a long-term basis (not an ad-hoc approach) and is composed of a former Rector of a Swiss University, a former Secretary General of a University of Applied Sciences, and of the Head of the Austrian Quality Assurance Agency. There is therefore no link with the SAC and AAQ. This process is going to be reinforced with the appeal to court that has been approved and will be implemented in 2021, if used as a second resort and not as a replacement of the agency process. The panel believes that the Appeal procedure is consistent, well communicated and in an improvement process. But, as previously mentioned, the panel would like to suggest the Agency to ensure that the new appeal to court will not replace the Appeal Commission of the SAC and, in the case this latter disappears, to create its own Appeal Commission. The Appeal to court should not replace the internal appeal procedure, being at the SAC's level or the Agency's one, both should co-exist.

Considering formal complaints, the current process is communicated on AAQ's website but could be improved with a clearer definition of the format, deadlines and feedback that HEIs could expect from such a procedure. Nevertheless, the panel could confirm during the visit that AAQ has a strong direct relation with HEIs who can communicate all along and after the accreditation procedure on any dissatisfaction. On the other hand, the survey sent after each accreditation procedure that contains qualitative feedback on the conduct of the process is an effective tool to identify HEIs discontents.

### **Panel suggestions for further improvement**

- The panel suggest AAQ to ensure that the SAC Appeal Committee or if necessary, a new Appeal procedure under AAQ's responsibility will co-exist with the appeal to court and therefore to maintain the internal appeals procedure in order to continue fulfilling the requirements of this standard.
- Regarding complaints, the panel suggests to better detail the process with information on deadlines, format and feedback.

### **Panel conclusion: fully compliant**

# CONCLUSION

## SUMMARY OF COMMENDATIONS

### ESG 2.3

The panel commends AAQ for the high level of satisfaction of Higher Education Institutions with the Agency's processes (as confirmed during the interviews with HEIs).

### ESG 2.4

- AAQ is to be commended for attracting and selecting well-qualified peers with an extensive international knowledge that leads to the high satisfaction of stakeholders and particularly HEIs.
- The panel commends the Agency for its collaboration on selection and training of student experts with the Swiss Student Union (VSS). This should be considered to be good practice and deserves to be highlighted and supported.

### ESG 3.6

The panel commends the Agency for the excellent professional conduct of staff member that leads to high satisfaction of Higher Education Institutions and experts.

## OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

### ESG 3.1

- The panel recommends AAQ to extend the representation of the labour market representatives at the governance and expert panels' levels.
- AAQ should strengthen the stakeholders' involvement into its work and activities and take into account the external perspective at all levels.

### ESG 3.5

The panel recommends the Agency to hire people, first to fill the existing gaps and second to make sure that AAQ will be able to carry out all the activities defined by Law in the future in order to guarantee its sustainability, independently of the number of HEIs' requests.

### ESG 3.6

The panel recommends AAQ to formalise and develop the feedback mechanisms and to embed them in its internal quality assurance system as a permanent feature.

### ESG 2.1

The panel recommends AAQ to work in order to have ESG 1.2 and ESG 1.3 explicitly included into its institutional accreditation and quality audit standards and ensure that both ESGs are systematically assessed.

### ESG 2.2

- The panel recommends AAQ to reflect on the criteria applied and include additional quality-oriented content when identified as necessary, jointly with stakeholders.
- The panel recommends to develop and extend the stakeholders involvement in the design of methodologies by bringing about more discussion opportunities.

- As already mentioned by the 2016 review panel AAQ and SAC should increase the professional world involvement at all levels.

### ESG 2.3

- The panel recommends AAQ including a regular follow-up procedure, not only for decisions of accreditation with conditions, considering the length of the accreditation validity and the lighter second cycle considered.
- AAQ should detail the follow-up procedures in the accreditation guides.

### ESG 2.4

The panel recommends AAQ to include a student member for all programme evaluation procedures, including for continuing education programmes. As mentioned by the panel in 2016, AAQ and SAC together with their partners should try to find ways and means by which the student perspective could be included in this procedure.

### ESG 2.6

- As already mentioned by the review panel in 2016, the present panel also recommends AAQ to publish negative reports.
- The panel recommends AAQ to alert the regulation bodies on the risk existing that HEIs can decide not to authorise the publication of the external evaluation report because of not having a legal notice for this. In the meantime, the Agency should anticipate this risk with a process to apply if a HEI takes this type of decision.

The panel considers AAQ to be in full compliance with the following standards: 2.5, 2.7, 3.2, 3.3, 3.4, 3.7 and to be substantially compliant with the following standards: 2.1, 2.2, 2.3, 2.4, 2.6, 3.1, 3.5, 3.6.

**In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, AAQ is in compliance with the ESG.**

## SUGGESTIONS FOR FURTHER DEVELOPMENT

### ESG 3.3

The review panel suggests to

- 1) formalize the role and responsibilities of the SAC secretariat in its two functions in order to avoid any internal and external confusion and,
- 2) solve the one year and a half interim resource allocation of AAQ by accelerating the recruitment process (being inside the Agency or not).

Indeed, as identified by AAQ itself in the SAR and the information the panel could obtain during the interviews, there is a confusion of roles and duties of the SAC. An effort has been made to internally separate the meeting dealing with its decision-making role as an Accreditation body and the meeting dealing with the one as the Supervisory body of AAQ. Nevertheless, the fact that SAC secretariat is managed, for both roles, by AAQ should be processed with the concrete roles and responsibilities of each body.

#### ESG 3.4

- The panel encourages AAQ to have a systematic approach for selection of topics and therefore ensure that their regularity is safeguarded but also to improve the dissemination of thematic analysis results among stakeholders.
- The panel suggests AAQ to ensure that thematic analyses are carried out at the end of each accreditation cycle.

#### ESG 3.5

The panel encourages AAQ to clearly define how the further professional development of employees will be addressed in the new strategic plan.

#### ESG 3.6

- The panel suggests AAQ to develop the risk management tool available in QM-Pilot jointly with the launch of the new Strategic plan.
- AAQ would take advantage of integrating its different IT systems into QM-Pilot for a better data efficiency.

#### ESG 2.4

- The briefing and training could be improved by having a more homogeneous approach in order to make it more consistent.
- Representatives from the professional world could be involved in more programme accreditation procedures, particularly those linked to health degrees and professions.

#### ESG 2.5

The panel suggests AAQ to improve the communication on the different roles for the decision-making process. In addition, the agency might be clearer in its accreditation guides on the fact that the SAC has the possibility to deviate from the experts and agency proposal for accreditation.

#### ESG 2.6

The panel suggests AAQ investigating if a summary of the external evaluation reports would be useful and would improve the readability and therefore interest by the larger community in the published reports.

#### ESG 2.7

- The panel suggest AAQ to ensure that the SAC Appeal Committee or a new Appeal procedure under AAQ's responsibility will co-exist with the appeal to court and therefore to maintain the internal appeals procedure in order to continue fulfilling the requirements of this standard.
- Regarding complaints, the panel suggests to better detail the process with information on deadlines, format and feedback.

# ANNEXES

## ANNEX I: PROGRAMME OF THE SITE VISIT

DAY 0 – 16 NOVEMBER 2020			
TIME	SESSION	TOPIC	PERSONS FOR INTERVIEW
09:00 – 11:00	-	Review panel's kick-off meeting and preparations for day 1	
11:00 – 11:15	-	Connection set-up	
11:15 – 13:00	0	A pre-visit meeting with the agency contact person to clarify elements related to the overall system and context. <i>The meeting should be expanded beyond learning about the agency's context and include the factual check exercise.</i>	<b>Berchtold von Steiger</b> (internal quality assurance) <b>(back-up: Laura Beccari)</b>

DAY 1 - 17 NOVEMBER 2020			
TIME	SESSION	TOPIC	PERSONS FOR INTERVIEW
	-	Connection set-up	
08:30 – 9:00	-	Review panel private meeting	
08:45 – 9:00	-	Connection set-up	
09:00 – 10:00	1	Meeting with the <b>AAQ Director</b>	<b>Christoph Grolimund</b> (director AAQ)
10:00 – 10:15	-	Connection set-up	
10:15 – 10:45	2	Meeting with the team responsible for preparation of the self-assessment report	<b>1) Michelle Brunner</b> <b>2) Laura Beccari</b>
10:45 – 11:00	-	Review panel's private discussion ( <i>and connection set-up for coordinator</i> )	
11:00 – 11:45	3	Meeting with the <b>holders of AAQ transversal functions</b>	<b>1) Baptiste Feuz</b> (communication) <b>2) Laura Beccari</b> (international relations) <b>3) Berchtold von Steiger</b> (internal quality assurance)

11:45 – 12:00	-	Review panel's private discussion ( <i>and connection set-up for coordinator</i> )	
12:00 – 13:00	-	Lunch break	
13:00 – 13:45	-	Review panel's private discussion ( <i>and connection set-up for coordinator</i> )	
13:45 – 14:45	4	Meeting with key staff of the agency <b>in charge of institutional evaluation formats</b> / in charge of evaluations	1) <b>Petra Lauk Kwasnitza</b> (institutional accreditation) 2) <b>Katrin Meyer</b> (system accreditation) 3) <b>Christa Ramseyer</b> (quality audit)
14:45 – 15:00	-	Review panel's private discussion ( <i>and connection set-up for coordinator</i> )	
15:00 – 15:45	5	Meeting with members of supporting processes at AAQ and office manager of the accreditation council	1) <b>Malgorzata Lanz</b> (finance + HR interim) 2) <b>Michelle Brunner</b> (databases) 3) <b>Pinkan Ravenska</b> (general support) 4) <b>Bastien Brodard</b> (SAC office)
15:45 – 16:00	-	Review panel's private discussion ( <i>and connection set-up for coordinator</i> )	
16:00 – 16:45	6	Meeting with key staff of the agency <b>in charge of programme evaluation formats</b> / in charge of evaluations	1) <b>Nina Wyss</b> (accreditation of basic medical degree courses) 2) <b>Stephanie Hering</b> (health profession programmes)
16:45 – 17:00	-	Review panel's private discussion ( <i>and connection set-up for coordinator</i> )	
17:00 – 17:45	7	Meeting with heads of some reviewed HEIs/HEI representatives <b>Other activities (processes ran outside Switzerland)</b>	1) <b>Prof. T. Hoffmeister</b> (Uni Bremen, D) 2) <b>Prof. G. Müller</b> (TU München, D) 3) <b>Univ.-Prof. Dr. Ulrike Tanzer</b> (Vice-rector Uni Innsbruck, A) 4) <b>Prof. A. Krieg</b> (RWTH Aachen, D)
17:45 – 18:30	-	Wrap-up meeting among panel members and preparations for day II	

DAY 2 - 18 November 2020			
TIME	SESSION	TOPIC	PERSONS FOR INTERVIEW
		<i>Connection set-up</i>	
08:30 – 09:00		Review panel private meeting	
08:45 – 09:00		<i>Connection set-up</i>	
9:00 – 09:45	8	Meeting with ministry representatives (where relevant)	1) <b>Dr. S. Studinger</b> (deputy director SBFI, director SCHE office), 2) <b>I. Brunelli</b> (SBFI, department of Higher Education Policy, SCHE office) 3) <b>Dr. Désirée Donzallaz Schnyder</b> (Responsible accreditation according to Medical Professions Act –MPA- in the Healthcare Professions Division, Federal Office of Public Health)
09:45 – 10:00		Review panel's private discussion ( <i>and connection set-up for the coordinator</i> )	



10:00 – 10:45	9	Meeting with heads of some reviewed HEIs/HEI representatives <b>Core activity (processes ran in Switzerland)</b>	1) <b>B. Chatagnat</b> (Ad. Dir. IHEID, CH – University Institute) 2) <b>K. Hiltwein</b> (Secr. Gen. FHNW, CH – University of Applied Sciences) 3) <b>Dr. G. Le Fort</b> (Vice-rector HES-SO; CH – Univ. of Applied Sc.) 4) <b>Prof. M. Schäfer</b> (Rector PH Bern, CH – Univ. Teacher Education) 5) <b>Dr. A. Piatti</b> (Director DFA, SUPSI, CH - evaluation of two Teacher Education programmes,)
10:45 – 11:15		Review panel's private discussion ( <i>and connection set-up for the coordinator</i> )	
11:15 – 12:00	10	Meeting with quality assurance officers of HEIs <b>Other activities in scope (processes ran outside Switzerland)</b>	1) <b>Dr. Chr. Abele</b> (Konstanz, D) 2) <b>Rudolf Bauer</b> (TU München, D) 3) <b>Dr. Chr. Fahringer</b> (Innsbruck, A) 4) <b>Gerhard Mühlbacher</b> (Linz, A)
12:00 – 13:00		Lunch break	
13:00 – 13:30		Review panel's private discussion ( <i>and connection set-up for the coordinator</i> )	
13:30 – 14:15	11	Meeting with quality assurance officers of HEIs <b>Core activity (processes ran in Switzerland)</b>	1) <b>Dr. Bernd Eichinger</b> (accreditation FHNW, CH) 2) <b>Ms. L. Algarra</b> (accreditation IHEID, CH) 3) <b>Dr. L. Reutner</b> (accreditation Pharmacy, University of Basel, CH) 4) <b>Dr. B. Kaufmann</b> (accreditation Pharmacy, University of Geneva, CH) 5) <b>Ms. F. Antonini</b> (evaluation of two Teacher Education programmes, SUPSI, CH)
14:15 – 14:30		Review panel's private discussion ( <i>and connection set-up for the coordinator</i> )	
14:30 – 15:15	12	<b>Meeting with SAC members</b>	1) <b>Jean-Marc Rapp</b> (President SAC) 2) <b>Prof. S. Springman</b> (ETH Zürich, CH) 3) <b>Prof. Chr. Musselin</b> (CSO Paris, FR) 4) <b>Florian Lippke</b> (Actionuni, Uni Fribourg, CH) 5) <b>Tia Loukkola</b> (EUA, FI)
15:15 – 15:30		Review panel's private discussion ( <i>and connection set-up for the coordinator</i> )	
15:30 – 16:15	13	Meeting with representatives from the reviewers' pool	1) <b>Lars Funk</b> (consultant 1. system accr. of RWTH Aachen and Uni Konstanz; 2. employer representative) 2) <b>Prof. I. Plattner</b> (Vice-rector PH Tirol, A, 1. inst. accr. FHNW, PH Bern, PH Graubünden. Peer leader, all CH; 2. Academic)

			3) <b>Prof. Barbara Fäh</b> (HfH, CH, 1. inst. accr. HES-SO. Peer leader progr. accr. MSc in Nursing, HES-SO, both CH; 2. Academic) 4) <b>Prof. Frank Bostyn</b> (UAE University, United Arab Emirates, 1. evaluation GEMBA, CH; 2. academic)
16:15 – 16:45		Review panel's private discussion ( <i>and connection set-up for the coordinator</i> )	
16:45 – 17:30	14	Meeting with stakeholders: <b>students</b>	1) <b>Jana Kobler</b> (student, responsible expert-pool, VSS) 2) <b>Francesco Bee</b> (student, Co-President VSS) 3) <b>Lea Schlenker</b> (expert-student)
17:30 – 18:15		Wrap-up meeting among panel members: preparation for day III and provisional conclusions	

DAY 3 - 19 November 2020			
TIME	SESSION	TOPIC	PERSONS FOR INTERVIEW
08:45 – 09:00		<i>Connection set-up</i>	
09:00 – 09:45	15	<b>Meeting with stakeholders: employer and local community representatives</b>	1) <b>Dr. R. H. Müller</b> (BLR&Partners, employer represent., CH) 2) <b>Dr. M. Weiss</b> (swissuniversities, secretary general) 3) <b>Prof. Stephan Marsch</b> (representative of the medical sector, CH)
09:45 – 11:45		Meeting among panel members to agree on final issues to clarify	
11:45 – 12:45		Lunch break ( <i>and connection set-up for the coordinator</i> )	
12:45 – 13:15		<i>Connection set-up</i>	
13:15 – 14:15	16	Meeting with CEO to clarify any pending issues	<b>Christoph Grolimund</b> (Director AAQ) <b>Katrin Meyer</b> (Deputy Director AAQ)
14:00 – 15:30		Private meeting among panel members to agree on the main findings	
15:30 – 15:45		<i>Connection set-up</i>	
15:45 – 16:45	17	Final de-briefing meeting with staff and Council/Board members of the agency to inform about preliminary findings	Invited: All AAQ All interviewees

## ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

External review of the Swiss Agency of the Accreditation and Quality Assurance (AAQ)  
by the European Association for Quality Assurance in Higher Education (ENQA)

### Annex I: TERMS OF REFERENCE

January 2020

#### **1. Background and context**

Established by the Federal Act on Funding and Coordination of the Higher Education Sector (HEdA) on January 1st, 2015, the Swiss Agency for Accreditation and Quality Assurance AAQ is the successor of the Swiss Center of Accreditation and Quality Assurance in Higher Education (OAQ), which operated from 2001 to 2014. It receives public funding by the Swiss Confederation and the university Cantons, besides mandate-based funds.

AAQ is the only Swiss agency active in the field of quality assurance and accreditation in higher education. It contributes to the development of a culture of quality in the higher education landscape.

AAQ carries out accreditation procedures based on the HEdA. Furthermore, the Swiss laws on medical, psychology and health professions assign to the AAQ the role of accreditation body for basic education and advanced professional training in medicine, for advanced professional training in the psychology professions (e.g. psychotherapy) and for basic education in the health professions such as physiotherapy, ergotherapy, etc.

Since 2011 AAQ carries out system accreditation in Germany according to the German legislation and is entitled to conduct Quality Audits in Austria according to the Austrian legislation.

Furthermore, the AAQ is authorized to deliver the EUR-ACE label to accredited engineering higher education programmes. Finally, tailor-made national and international evaluations can also be carried out with specific mandates.

AAQ has been a member of ENQA since 2006 (taking into consideration the registry on EQAR of the predecessor, the OAQ) and is applying for ENQA renewal of membership.

AAQ has been registered on the European Quality Assurance Register for Higher Education (EQAR) since 2011 (taking into consideration the registry on EQAR of the predecessor, the OAQ) and is applying for renewal of EQAR registration.

#### **2. Purpose and scope of the evaluation**

This review will evaluate the extent to which AAQ fulfils the requirements of *the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. Consequently, the review will provide information to the Board of ENQA to aid its consideration of whether membership of AAQ should be reconfirmed and to EQAR to support AAQ application to the register.

##### **2.1 Activities of AAQ within the scope of the ESG**

In order for AAQ to renew its ENQA membership and for registration in EQAR, this review will analyse all activities of AAQ that are within the scope of the ESG, i.e. reviews, audits, evaluations or accreditation of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). This is independent of whether the activities are carried out within or outside the EHEA and whether they are obligatory or voluntary.

The following activities of AAQ have to be addressed in the external review:

- Institutional accreditation in Switzerland according to HEdA (core activity)
- Programme accreditation in Switzerland (according to HEdA, to the Medical Professions Act and to the Health Professions Act)
- System accreditation in Germany
- Certification procedures in Austria (institutional Q-audit)
- Tailor-made evaluation procedures.

### **3. The review process**

The review will be conducted following the methodology of ENQA Agency Reviews. The process is designed in line with *the Guidelines for ENQA Agency Reviews* and the requirements of *the EQAR Procedures for Applications*.

The evaluation procedure consists of the following steps:

- Formulation of the draft Terms of Reference for the review;
- Finalising the Terms of Reference for the review following EQAR's Eligibility Confirmation (if relevant);
- Nomination and appointment of the review panel;
- Self-assessment by AAQ including the preparation and publication of a self-assessment report;
- A site visit by the review panel to AAQ;
- Preparation and completion of the final evaluation report by the review panel;
- Scrutiny of the final evaluation report by the ENQA Review Committee;
- Analysis of the scrutiny by the Board of ENQA and their decision regarding ENQA membership;
- Follow-up of the panel's and/or the Board's recommendations by the agency, including a voluntary progress visit.

#### **3.1 Nomination and appointment of the review team members**

The review panel consists of four members: one or two quality assurance experts (at least one of which is currently employed by an ENQA member agency), an academic employed by a higher education institution, a student member. One of the members will serve as the chair of the review panel, and another member as a review secretary. For ENQA Agency Reviews at least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated reviewers. An additional panel member may be included in the panel at the request of the agency under review. In this case, an additional fee to cover the reviewer's fee and travel expenses is applied. Although the review is carried out in English, competencies in the German and French languages are to be assured within the panel members.

The panel will be supported by the ENQA Secretariat review coordinator who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the process. The ENQA staff member will not be the secretary of the review and will not participate in the discussions during the site visit interviews.

Current members of the Board of ENQA are not eligible to serve as reviewers.

ENQA will provide AAQ with the list of suggested experts and their respective curricula vitarum to establish that there are no known conflicts of interest. The experts will have to sign a non-conflict of interest statement as regards the AAQ review.

### **3.2 Self-assessment by AAQ, including the preparation of a self-assessment report**

AAQ is responsible for the execution and organisation of its own self-assessment process and shall take into account the following guidance:

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-assessment report is broken down by the topics of the evaluation and is expected to contain, among others: a brief description of the national HE and QA system; background description of the current situation of the Agency; an analysis and appraisal of the current situation; proposals for improvement and measures already planned; a SWOT analysis; each criterion (ESG part II and III) addressed individually. All agency's QA activities (whether within their national jurisdiction or outside of it, and whether obligatory or voluntary) will be described and their compliance with the ESG analysed.
- The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which AAQ fulfils its tasks of external quality assurance and meets the ESG and thus the requirements of ENQA membership.
- The self-assessment report is submitted to the ENQA Secretariat which has four weeks to pre-scrutinise it before forwarding the report to the panel of experts. The purpose of the pre-scrutiny is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but whether the necessary information, as stated in the Guidelines for ENQA Agency Reviews, is present. For the second and subsequent reviews, the agency is expected to enlist the recommendations provided in the previous review and to outline actions taken to meet these recommendations. In case the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to reject the report and ask for a revised version within two weeks. In such cases, an additional fee of 1000 EUR will be charged to the agency.
- The report is submitted to the review panel a minimum of six weeks prior to the site visit.

### **3.3 A site visit by the review panel**

The review panel will draft a proposal of the site visit schedule which shall be submitted to the agency at least two months before the planned dates of the visit. The schedule is to include an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site visit, the duration of which is usually 2,5 days. The approved schedule shall be given to AAQ at least one month before the site visit, in order to properly organise the requested interviews.

The review panel will be assisted by AAQ in arriving in Bern, Switzerland.

The site visit will close with a final de-briefing meeting outlining the panel's overall impressions but not its judgement on the ESG compliance of the agency or the granting or reconfirmation of ENQA membership.

### **3.4 Preparation and completion of the final evaluation report**

On the basis of the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will take into account the purpose and scope of the evaluation as defined under articles 2 and 2.1. It will also provide a clear rationale for its findings concerning each ESG. A draft will first be submitted to the ENQA review coordinator who will check the report for consistency, clarity and language, and it will be then submitted to AAQ usually within 10 weeks of the site visit for comment on factual accuracy. If AAQ chooses to provide a position statement in reference to the draft report, it will be submitted to the chair of the review panel within three weeks after the receipt of the draft report. Thereafter, the review panel will take into account the statement by AAQ and finalise and submit the document to ENQA.

The report is to be finalised within three months of the site visit and will normally not exceed 40 pages in length.

When preparing the report, the review panel should also bear in mind the *EQAR Policy on the Use and Interpretation of the ESG* to ensure that the report will contain sufficient information for the Register Committee for application to EQAR.

For the purpose of applying for ENQA membership, AAQ is also requested to provide a letter addressed to the Board of ENQA outlining its motivation for applying for membership and the ways in which AAQ expects to contribute to the work and objectives of ENQA during its membership. This letter will be taken into consideration by the Board of ENQA together with the final evaluation report when deciding on the agency's membership.

### **4. Follow-up process and publication of the report**

AAQ will receive the expert panel's report and publish it on its website once the Board of ENQA has made its decision. The report will also be published on the ENQA website, regardless of the review outcome and decision by the Board. AAQ commits to preparing a follow-up plan in which it addresses the recommendations of the review panel and to submitting a follow-up report to the Board of ENQA within the timeframe indicated in the Board's decision on membership. The follow-up report will be published on the ENQA website, in addition to the full review report and the Board's decision.

The follow-up report could be complemented by a small-scale progress visit to the agency performed by two members of the original panel (whenever possible). This visit will be used to discuss issues, based on the ESG, considered to be of particular importance or a challenge to AAQ. Its purpose is entirely developmental and has no impact on the judgement of membership and/or judgment of compliance of the agency with the ESG. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

### **5. Use of the report**

ENQA shall retain ownership of the report. The intellectual property of all works created by the expert panel in connection with the review contract, including specifically any written reports, shall be vested in ENQA.

The review report is used by the Board of ENQA for the purpose of reaching a conclusion on whether AAQ is in compliance with the ESG and can thus be admitted/reconfirmed as a member of ENQA. The report can also be used for registration on EQAR, and is designed to serve these two purposes. However, the review report is to be considered final only after being approved by the Board. Once submitted to ENQA and until it is approved by the Board, the report may not be used or relied upon by AAQ, the panel, or any third party and may not be disclosed without the prior written consent of ENQA. The approval of the report is independent of the decision of the ENQA Board on membership.

## 6. Budget

AAQ shall pay the review related fees as specified in the contract between ENQA and AAQ.

It is understood that the fee of the progress visit is included in the overall cost of the review and will not be reimbursed in case the agency does not wish to benefit from it.

In the event of a second site visit required by the board of ENQA and aiming at completing the assessment of compliance, and should the agency accept a second visit, an additional fee of 500 EUR per expert, as well as the travel and subsistence costs related to the second site visit will be charged to the agency.

## 7. Indicative schedule of the review

Agreement on terms of reference	January 2020
Appointment of review panel members	February 2020
Self-assessment completed	20 June 2020
Pre-screening of SAR by ENQA coordinator	July 2020
Preparation of site visit schedule and indicative timetable	September 2020
Briefing of review panel members	October 2020
Review panel site visit	First half of November 2020
Draft of evaluation report and submitting it to ENQA coordinator for pre-screening	December 2020
Draft of evaluation report to AAQ	January 2021
Statement of AAQ to review panel if necessary	February 2021
Submission of final report to ENQA	March 2021
Consideration of the report by Board of ENQA	April 2021





## ANNEX 3: GLOSSARY

AACSB	Association to advance collegiate schools of business
AAQ	Swiss Agency of Accreditation and Quality Assurance
ACQUIN	Accreditation, Certification and Quality Assurance Institute, Germany
AHPGS	Accreditation Agency in Health and Social Sciences, Germany
AQ Austria	Austrian Quality Assurance Agency
CHF	Swiss money
ENAE	European Network for Accreditation of Engineering Education
ENQA	European Association for Quality Assurance in Higher Education
EQAR	European Quality Assurance Register
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015
EUA	European University Association
EVAG	Evaluation Agency Baden-Württemberg
FCA-CHE	Federal-Cantonal Agreement on Cooperation in Higher Education
FIBAA	Foundation for International Business Administration Accreditation
FOPH	Federal Office of Public Health
FrAQ-Sup	Réseau Francophone des agences qualité pour l'enseignement supérieur
GAC	German Accreditation Council
HE	Higher education
HEdA	Higher Education Act
HEI	Higher education institution
HPA	Health Professions Act
HS-QSG	Austrian Higher Education Quality Assurance Act
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
IQA	Internal Quality Assurance
MPA	Medical Professions Act
OAQ	Swiss Center of Accreditation and Quality Assurance in Higher Education
QA	Quality assurance
QAN	Quality Assurance Network
SAC	Swiss Accreditation Council
SAR	Self-assessment report
SCHE	Swiss Conference of Higher Education Institutions
VSS	Swiss Student Union
ZHAW	Zurich University of Applied Sciences
ZSAV-HS	Cooperation Agreement between the Confederation and the Cantons

## ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

### DOCUMENTS PROVIDED BY AAQ

#### 1. Jointly with the SAR

- Composition of the SAC
- AAQ List of Procedures 2015-2020
- Mapping ESG Part I with HEdA standards for institutional accreditation
- Mapping ESG Part I with HEdA standards for programme accreditation
- Mapping ESG Part I with 2019 standards for quality audit
- Mapping ESG Part I with GAC standards for system accreditation
- Procedural flowcharts
- Online enquiry 2020
- ESG Review 2016: follow-up table (updated 25/09/2020)
- Accreditation Guides (Institutional accreditation, programme accreditation, system accreditation, quality audit)
- AAQ Quality Principles
- Link to AAQ Day
- Link to Appeals and Complaints
- Link to publications

#### 2. Additional evidence requested before and during the visit

- Questionnaires for Institutions (after an accreditation procedure)
- Minutes SAC meetings (26/02/2020 and 16/10/2020)
- Training material for experts: briefing for Institutional accreditation, programme accreditation, quality audit
- Minutes of the 3 most recent internal team meetings
- Agenda of AAQ Institutional Accreditation Day 2018
- Agenda of AAQ Institutional Accreditation Day 2020
- QM-Pilot demonstration
- Strategic plan 2021-2024 (draft)

### OTHER SOURCES USED BY THE REVIEW PANEL

- AAQ website
- Swiss Accreditation Council website
- Federal Act on Funding and Coordination of the Swiss Higher Education Sector (Higher Education Act, HEdA)
- Ordinance of the Higher Education Council on Accreditation within the Higher Education Sector (HEdA Accreditation Ordinance)
- Organisational Regulations of the Swiss Agency of Accreditation and Quality Assurance (OReg-AAQ)
- Organisational Regulations of the Swiss Accreditation Council (OReg-SAC)

- Organisational Regulations of the Appeals Commission (OReg-AC)
- Rapport d'activités 2018 du Conseil Suisse d'Accréditation (SAC)
- Quality Document
- Annual Report 2018
- AAQ and AACSB: Mapping Standards and Procedures. AAQ. 2018
- Gespräche in Verfahren externer Qualitätssicherung: Verstehen & Optimieren. ZHAW. 2017
- Synthese und Thematische Analyse: Systemakkreditierung. AAQ. 2019
- Thematische Analyse: Evaluationen 2011-2014. AAQ. 2019 (pdf, 2 MB)
- External evaluation reports and follow-up reports (Institutional accreditation, programme accreditation, system accreditation, quality audit)
- Staatsvertrag über die Organisation eines gemeinsamen Akkreditierungssystems zur Qualitätssicherung in Studium und Lehre an deutschen Hochschulen (Studienakkreditierungsstaatsvertrag; "German Interstate Treaty")
- Musterrechtsverordnung gemäß Artikel 4 Absätze 1 - 4 Studienakkreditierungsstaatsvertrag (MRVO; "Specimen Decree")
- Leitfaden Systemakkreditierung
- Leitfaden Institutionelle Akkreditierung
- Dokumentation Programmakkreditierung nach HFKG
- Leitfaden Akkreditierung von Studiengängen nach HFKG und GesBG
- Dokumentation Humanmedizin, Zahnmedizin und Chiropraktik
- Leitfaden Akkreditierung 2018 (Programmakkred. nach MedBG)
- Leitfaden Quality Audit nach HS-QSG (Österreich)
- Leitfaden Evaluation

## ENQA AGENCY REVIEW 2021

THIS REPORT presents findings of the ENQA Agency Review of the Swiss Agency of Accreditation and Quality Assurance (AAQ), undertaken in 2020.

**enqa.**

European Association for  
Quality Assurance in Higher Education