

Institutional Evaluation Programme

Guidelines for Alliances

Evaluation aligned with the EuniQ model

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Email: info@iep-qaa.org

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1. Introduction and indicative time frame

These guidelines provide alliances that have registered for an IEP evaluation with information and guidance on various aspects of the evaluation process.

IEP overview

The Institutional Evaluation Programme (IEP) is an independent membership service of the European University Association (EUA) that has been designed to ensure that higher education institutions gain maximum benefit from a comprehensive evaluation conducted by a team of experienced higher education leaders on a peer-review basis. The programme is now, after 30 years of history, being extended to offer also a tailor-made evaluation for European University Alliances.

The intention is that these evaluations support the participating alliances in the continuing development of their strategic leadership, capacity to manage change and internal quality culture, cooperation mechanisms, and the evaluation of joint educational offer. EUA-IEP provides recommendations in the context of the specific aims and objectives of the alliance in question.

IEP is based on the following core characteristics:

- comprehensive evaluations, which take into account the alliance's specific goals, objectives and profile, with emphasis on an inclusive self-evaluation process and alliance's self-knowledge;
- an improvement-oriented approach, which actively supports the alliance in fulfilling its mission, independent from governments or other such bodies and is not geared towards an accreditation or rankings;
- a European focus, which takes into account the framework of current developments in higher education, with international evaluation teams representing diversity in the field.

The focus of IEP is the alliance as a whole rather than its individual member institutions, operational units, or study programmes. It encompasses all elements of the EuniQ methodology and criteria, approved by the European Commission.

The evaluation focuses upon:

- Capacity of strategic leadership and effectiveness of internal governance and management processes that support it at the alliance level.
- Relevance of common alliance-level internal quality processes and the degree to which their outcomes are used in decision making and strategic management of the alliance and its activities, as well as perceived gaps in these internal mechanisms. As part of this larger framework the evaluations address the issues on internal quality assurance identified in the first part of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG – see **Annex 5**).

IEP does not impose externally defined criteria, yet the evaluation is structured around five key questions addressed in all areas of the alliance's joint activity and processes (governance and decision-making, quality culture, management of research and use of research results, teaching and learning, service to society, and internationalisation):

- What is the alliance trying to achieve/what is the vision of the alliance?
- How does the alliance plan to achieve its goals/realise its vision?
- How does the alliance monitor to what extent its vision is actually realised?
- How is the quality of education, research and any other services provided by the alliance assured?
- How will the alliance move from project-based management to long-term and sustainable cooperation?

IEP is a member of the European Association for Quality Assurance in Higher Education (ENQA) and is listed in the European Quality Assurance Register for Higher Education (EQAR).

The evaluation reports are public and available on the [IEP website](#).

IEP evaluation teams

IEP evaluation teams consist of highly experienced and knowledgeable higher education leaders – rectors¹ or vice rectors (current or former), a senior higher education professional acting as the team coordinator, and a student. Each team member comes from a different country, and none comes from the same country as the alliance coordinator. The team consists of five members.

Team members are selected by the EUA-IEP Secretariat with a view to providing each participating alliance with an appropriate mix of knowledge, skills, objectivity and international perspective. Conflicts of interest may be raised by the alliance. IEP will take into account any concerns over conflicts of interest that may exist and will make an informed decision over the final composition of the team.

All team members have received training on conducting EUA-IEP evaluations for alliances and have substantial experience in IEP institutional evaluations.

Indicative time frame

The following time frame is indicative; adjustments in consideration of the Alliances' specific needs may be adopted.

¹ In this document, Rector refers to the Executive Head of Institution, also called President, Vice-Chancellor or Principal, among others.

Timeline	Tasks
Registration, contract, payment, objective of evaluation May - June Year 1	• The alliance registers for an evaluation • EUA-IEP and the alliance sign a contract • Dates for the online meetings and site visit are to be suggested by the alliance • IEP establishes an evaluation team for each participating alliance • The alliance is invited to attend a 60 minutes individual preliminary videoconference organised by IEP to discuss the objectives of the evaluation and to receive guidance on planning the process
Self-evaluation July - October Year 1	• The alliance undertakes a self-evaluation and provides IEP with a self-evaluation report on the basis of the framework outlined in the IEP guidelines • The alliance must send the self-evaluation report to IEP at the latest four weeks prior to the online meetings
Online meetings and site visit November - March Year 2	• The evaluation team conducts online meetings with the alliance and requests any additional information as appropriate • The alliance submits additional information prior to the site visit, as required • The site visit takes place six to ten weeks after the online meetings • The evaluation team makes a site visit to the coordinating institution of the alliance, at the end of which it presents an oral summary of its conclusions. The site visit includes interviews with staff and students from all alliance members (some of these may be conducted online during the onsite visit).
Report April - June Year 2	• IEP presents the draft written report to the alliance for comments on factual errors • IEP sends the finalised report to the alliance
Applying recommendations and follow up June Year 2 onwards	• The alliance may use the “Evaluated by – Institutional Evaluation Programme” icon on its website and other informational products to signify the completion of an IEP evaluation. The icon may be used for up to five years after the receipt and publication of the final evaluation report. IEP will

	send the icon to the alliance along with the guidelines for usage upon completion of the evaluation. • The alliance will address the IEP recommendations in accordance with its internal procedures. • The alliance is invited to an informal follow-up videoconference with the IEP secretariat around three months after the final report has been completed, to provide feedback about the evaluation process and how the institution is addressing the recommendations.
Progress report September Year 3	• The alliance will send IEP a progress report one year after the receipt of the final IEP evaluation report.

2. The roles of institutional actors

To understand the various roles and bodies mentioned in these guidelines, please refer to the Glossary in **Annex 7**.

The role of the **alliance leadership** is crucial in ensuring the success of the evaluation. The alliance leadership will:

- Appoint an alliance liaison person for the evaluation process
- Set up a self-evaluation group as soon as IEP has confirmed the registration of the alliance
- Clarify the responsibility of the self-evaluation group towards staff members who are not on the team, i.e., the self-evaluation group should not work in isolation but seek, through alliance-wide discussions, to present as broad a view as possible of the alliance
- Support and encourage the whole evaluation process by explaining its purpose across the alliance
- Sign off on the final self-evaluation report. This does not mean that the rectors or all actors in the alliance necessarily agree with all statements in the self-evaluation report, however the rector must accept responsibility for both the self-evaluation process as well as the report

The **self-evaluation group** (hereafter 'group') will steer the self-evaluation process and write the self-evaluation report based on the guiding questions for the IEP evaluation.

The self-evaluation group should have the following characteristics:

- The group is *small* (max. 10 members) to ensure that it is efficient.
- Its members are in a good position to judge the alliance's strengths, weaknesses, opportunities and threats.
- It is representative of the main stakeholders in the alliance (academic and administrative staff and students). While it is important that the major constituencies of the alliance are represented, the group should not be an exhaustive gathering of all units and faculties within the alliance.
- The rectors should *not* be part of the group (see above for the role of the alliance leadership), but there should be someone from the leadership team in the group (e.g. a vice-rector or equivalent).
- It plans, coordinates and distributes the work. This might include tailoring the guiding questions (**Annex 2**) to the alliance's specific context, gathering and analysing the data, co-ordinating the work of any sub-group, compiling the final report.
- It provides opportunities for a broad discussion of the self-evaluation within the institution in order to promote shared understanding and ownership of the process and the report.

The **liaison person** will liaise with the IEP secretariat and team coordinator on all aspects of the evaluation, including the arrangements of the online meetings and the site visit (arranging transportation for the evaluation team to and from the airport, between hotel and institution, hotel reservations, dinners, lunches and scheduling meetings).

Finally, it is essential for the success of the IEP evaluation that information about the procedures, goals and expected benefits of undertaking an IEP evaluation is circulated widely in the institution. **Annex 1** of these guidelines contains a sample handout that may be used by the alliance to support this.

3. The self-evaluation

IEP emphasises self-evaluation as a crucial phase in the evaluation process. The self-evaluation phase has two aspects that are equally important: the self-evaluation *process* and the self-evaluation *report*:

- The self-evaluation *process* is a collective alliance reflection and an opportunity for the alliance itself to identify key areas that require further attention, as well as understanding its strengths and how best to utilise them. Alliances are urged to involve all members of the alliance in this process.
- The self-evaluation *report* is one outcome of the self-evaluation process; it provides information to the evaluation team, with emphasis on the alliance's strategic and quality management activities.

The goal of both the *process* and the *report* is to enhance the alliance's strategic leadership, capacity for improvement and change through self-reflection. This is a crucial phase in which careful consideration should be given to maximise the engagement of the whole alliance.

While the evaluation will give special attention to the focus area of internationalisation, the self-evaluation process should cover not just this, but all aspects of the alliance, as outlined in the guiding questions (**Annex 2**).

The self-evaluation process

Conducting the self-evaluation process and writing the report is an ambitious task that requires a substantial time investment, usually over a period of approximately three months. It is of the utmost importance to the running of the evaluation and especially the site visit that deadlines are respected and the self-evaluation report is submitted at least 4 weeks before the online meetings. To ensure this, the self-evaluation group is advised to plan to **meet weekly for a couple of hours** to ensure progress.

Annex 2 presents a list of guiding questions that will steer the key discussions of the self-evaluation group and inform the data collection and support analysis of the information gathered in order to prepare the self-evaluation report. However, these questions do not have to be rigidly adhered to. Since each alliance operates within its own specific context, the self-evaluation group may want to tailor these questions before starting its work. The guiding questions are structured into four major sections that reflect the four central questions upon which an IEP evaluation is based.

The self-evaluation report

After the self-evaluation group has collected and analysed the evidence, it will synthesise all the information gathered and present its findings in the self-evaluation report.

As the main vehicle for the alliance to present itself, the self-evaluation report is also an opportunity for the alliance to *reflect critically* upon the way it is managed and show how the various elements of strategic thinking and quality management are interconnected.

Therefore, the self-evaluation report should not be simply descriptive, but *analytical, evaluative and synthetic*. A SWOT analysis should be an integral part of the self-evaluation report and form the basis of the reflective process. The SWOT should be evidence based and focus on the current state of the alliance rather than on future plans.

As an important step in the evaluation exercise, the self-evaluation report has four major purposes:

- To present a succinct but analytical and comprehensive statement of the alliance's view of quality and strategic management
- To analyse the strengths and weaknesses of the alliance, identify the opportunities and threats it faces and propose specific actions to address them
- To provide quantitative and qualitative data supporting the analysis
- To provide a framework against which the alliance will be evaluated by the IEP team

A proposed structure for this report is presented in **Annex 3**, however this is for guidance only, and can be adapted according to the alliance context.

Some practical considerations to be taken into account when preparing the self-evaluation report:

- The maximum length of the self-evaluation report is 25-30 pages, excluding the appendices. The reason for this relatively short report is to maintain a focus on alliance level management of the joint activities without probing too deeply into the specifics of and the individual member institutions and their activities. Alliances are also encouraged to make use of any existing data and documents.
- A list of typical appendices to the self-evaluation report can be found in **Annex 3**. Where possible, weblinks to documents/resources available online should be provided, rather than sending them as appendices to the report.
- Unless there has been a previous agreement on the language of the evaluation, the self-evaluation report and its appendices should be written in English.
- The self-evaluation report is written partly for an internal audience (the alliance's staff and students) and partly for the evaluation team. The evaluation team is knowledgeable about higher education in general but, as international peers, they may lack in-depth knowledge of specific national situations. The self-evaluation group should keep this in mind when writing its report.
- For the same reason, attention should be paid to the consistency of terminology across the report, particularly with regard to translated names of governance bodies and alliance units/offices. If appropriate, a list of abbreviations used may also be provided at the start or end of the report.

- The self-evaluation report should be made available to all alliance members.
- IEP and the evaluation team will consider the self-evaluation report as confidential and will not provide the report or any information about it to third parties.
- The report should be sent in electronic format to the IEP secretariat at least **four weeks** prior to the online meetings. The IEP secretariat will distribute it to the members of the evaluation team.

4. Online meetings and site visit

Preparing for the online meetings and the site visit

Each alliance will have online meetings with the IEP evaluation team and a site visit at the coordinating member institution's premises by the IEP evaluation team. The aim of the online meetings is to allow the team to gain a general picture of the alliance, the way and context in which it operates, and to determine the main challenges and issues that should be addressed during the site visit. The site visit then allows for a more in-depth investigation of the priority areas of concern. The online meetings and particularly the site visit are an opportunity not only for the team to gather information but also for the team and alliance to engage in a dialogue about how the alliance can develop, in line with IEP's 'critical friend' approach.

As with all aspects of the IEP evaluation, the following guidelines and the sample schedules for the online meetings and the site visit are typically adapted to the alliance context, so as to best achieve the goal of supporting the institution's strategic leadership and capacity to change.

In order to ensure fruitful discussion during the online meetings and the site visit, the following basic principles should be taken into account for each meeting:

- The number of participants in an online meeting should not exceed ten, including the members of the IEP evaluation team. The number of participants in each meeting carried out on-site **should not exceed eight** (except when meeting the self-evaluation group). This is to ensure that all participants in a meeting have an opportunity to answer questions and contribute to the discussion.
- The team should meet separately with individual groups, e.g., only students should attend the students' meeting, with no members of the staff present.
- All meetings will be treated confidentially by the evaluation team. It will not quote individuals or report on statements that could be traced back to a specific participant. Online meetings will not be recorded.
- In order to maintain the confidentiality of discussions and to avoid unnecessary misunderstandings, special attention should be paid to the quality of interpretation, if this is necessary for any meetings. Ideally the interpreter should come from outside the alliance. IEP needs to be informed about the meetings in which interpretation is needed so that suitable technology can be employed and the schedule be adjusted appropriately.
- All meetings are interactive and participants should not prepare any presentations. The evaluation team will come prepared with questions in order to start a dialogue.

Furthermore, taking into account the following considerations regarding the programme and logistics will help to ensure a smooth visit:

- The final schedules for the online meetings and the site visit are subject to agreement by the alliance and evaluation team. The schedule of the site visit particularly will be highly dependent on the themes on which the evaluation team wishes to concentrate.
- For the online meetings, care should be taken to distribute meetings over two days so as to keep the schedule reasonable for both the alliance and the team.
- Enough time should be left for the team's internal debriefing sessions. Furthermore, apart from the initial dinner with the rector during the site visit, dinners are also debriefing time for the team and should therefore not be attended by members of the alliance.
- A 15-minute gap should be left between each meeting, whether online or on-site. This is important for practical and technical reasons, and also to give the evaluation team a few minutes to reflect together on previous meetings or to make changes to plans for the next meeting. Such brief breaks, in addition to longer coffee breaks, can also be useful to catch up on time if some meetings take longer than expected.
- If the evaluation team needs to move from one location to another the time required for this should be taken into account when planning the programme of the site visit. Participation of other member institutions may take place online during the onsite visit.
- For the online meetings, appropriate technology should be used to ensure good sound and video quality.
- All practical arrangements for the site visit, including local transportation, accommodation and meals should be arranged in advance and paid for by the alliance. IEP will liaise with the team and cover the team's travel costs (flights/trains) to arrive to the location of the site visit.
- Participants in the meetings should receive in advance information about the evaluation team and the objectives of the evaluation in general and the particular meeting in which they are involved.
- It would be helpful for the team to receive the names and positions of the people to be interviewed in each meeting beforehand (at the latest the day before) and name plates/name tags should be provided for all meetings (online and on-site).

Online meetings

The online meetings serve the following purposes:

- to contribute to greater awareness in the alliance at large of the evaluation process and its purpose
- to set an open and self-critical tone for the meetings
- to understand the alliances context, mission and goals and the way in which it operates including the structures and processes of strategic decision making (planning, teaching and research, financial flows and human resources policy), the existing procedures for quality assurance

In addition, the team will be able to:

- validate the self-evaluation report and clarify any uncertainties
- identify the existing gaps/key issues and request additional documentation if needed
- identify topics for and prepare the site visit schedule

During the online meetings, the team will meet the following persons and bodies:

- The core leadership of the alliance, including rectors or vice-rectors of the alliance member institutions
- Representatives of the executive and management bodies
- The self-evaluation group
- Student representatives

The choice of persons the evaluation team meets is highly important. For the benefit of both the alliance and the team, a representative sample of the alliance community should be involved in the self-evaluation group (see above in section 2 the characteristics of the group). A sample schedule for the online meetings is proposed in **Annex 4**.

At the end of the online meetings, the evaluation team will:

- Ask for additional information if necessary. These additional documents should be sent to all members of the team and to the IEP secretariat at least four weeks before the date of the site visit.
- Decide the dates of the site visit in co-operation with the alliance, if they have not already been confirmed. The site visit should take place six to ten weeks after the last online meeting
- Identify the persons, bodies or units to meet during the site visit.

The online meetings contribute to the team's understanding of the specific characteristics of the alliance. As such, these do not lead to any conclusions. The evaluation team will not produce any evaluation report at this point.

Site visit

The site visit serves the following purposes:

- to have open and self-critical discussions about various alliance matters
- to further inform the team on how the alliance operates
- to find out whether, how, and with what results, the alliance strategy and internal quality assurance policies and procedures are implemented coherently
- to reach a conclusion about the issues being evaluated
- to probe issues that were identified as requiring further investigation from the self-evaluation report and during the online meetings
- to form an impression of the alliance's infrastructures
- to compile the oral report

During the site visit, taking place at the coordinating institution's premises, the evaluation team should meet at least the following persons and bodies:

- The coordinating institutions rector
- The self-evaluation group
- Representatives of executive and management bodies, and of central services
- Representatives of QA services of member universities as well as of the alliance
- Representatives of staff working on finances, student services
- Representatives of key external stakeholders and partners (public authorities, private industry, other actors from society that are relevant for the alliance)
- Representatives of the governance bodies of the alliance (such as boards and councils)
- Representatives of academic staff in charge of joint educational offer
- Representatives of academic staff in charge of joint research and innovation activities
- Students involved in alliance joint activities

The preparation of the site visit differs from the process for the online meetings: while for the online meetings the alliance proposes the first draft of the programme, for the site visit the evaluation team will be responsible for proposing the programme, which will then be discussed with the alliance. An example of a schedule for the site visit is given in **Annex 4**, but the exact programme will depend very much on the findings of the online meetings and the specificities of the institution. The schedule of the visit may include parallel sessions, with the team splitting in two, in order to cover more ground and collect more evidence. The team will advise the alliance in good time of its plans in this respect.

Please note that:

- Faculty is used here in a generic sense to mean a “structural unit”, i.e., some institutions have only faculties while others have different types of faculties, research institutes and other structures. The evaluation team (split in pairs if necessary) may be interested in visiting a mixture of these units.
- The number and types of units to be visited should be adjusted based on the institutional structure and size: some institutions have small numbers of large units; others have large numbers of small units.

The standard length of the site visit is **four days**. However, in specific circumstances the visit may be extended or shortened by up to one day, in agreement between the team, the alliance and the IEP secretariat. Any change in the length of the site visit should be discussed with the IEP secretariat and decided as early as possible in the evaluation process, and at the latest during the online meetings.

The oral report

At the end of the site visit, the evaluation team delivers the **oral report**, presenting their preliminary findings, firstly to the rector alone and then in a meeting with members of the alliance community. The alliance is responsible for deciding who to invite to this presentation, but it should usually include at least the self-evaluation group and those who were interviewed by the team during the online meetings and site visit.

Videotaping or recording the oral report session or including members of the media during this session is not recommended. However, if the alliance intends to do this, it must be agreed with the team chair in advance of this session.

5. Evaluation report

After the site visit, the evaluation team will draft a written report based on the contents of the oral report presented at the end of the site visit. The report will present the key findings of the evaluation and recommendations for how the alliance can improve.

The draft report will be sent by the EUA-IEP Secretariat to the rectors of the alliance and the liaison person, giving the alliance the opportunity to bring attention to any factual errors in the report.

Any corrections should be sent to the IEP secretariat within two weeks. The report will then be finalised and sent officially to the **secretary general**, again via the IEP secretariat.²

The alliance is encouraged to disseminate the final report widely amongst its stakeholders. IEP also publishes all final evaluation reports on its website (www.iep-qaa.org) and the DEQAR database (www.deqar.eu).

The table below summarises the timing and division of tasks during the report-writing stage.

Time frame and division of responsibilities		
Task	Main responsibility	Time frame
Preparing draft report	Team coordinator and the evaluation team. IEP secretariat is in charge of reviewing the report and language editing.	Within 9 weeks after the site visit
Sending report to alliance	IEP secretariat	Within 2 weeks of receipt of the draft report
Commenting on factual errors	Secretary general	Within 2 weeks of receipt of the draft report
Any changes due to factual errors + sending final report to alliance + publishing it on IEP website and DEQAR database	IEP secretariat	Within 1 week of receiving comments on factual errors (or confirmation that there are none)

² On receipt of the evaluation report, the alliance has the right to lodge a complaint on procedural grounds within one month, if it considers that an evaluation has not been carried out with due consideration to the IEP Guidelines. Alliances that wish to lodge a complaint are requested to contact the IEP secretariat for information regarding further steps.

After receiving the final report, evaluated alliances may also use the “Evaluated by – Institutional Evaluation Programme” icon on their websites and other informational products for up to five years to signify their completion of an IEP evaluation. The icon will be sent along with guidelines for usage upon completion of the evaluation.

6. Follow-up activities

For the ultimate success of the evaluation, it is important that the process does not end with the final evaluation report, but that this is followed up. The crucial form of follow-up is what happens within the evaluated alliance after it has received the report. In this regard, following the voluntary nature of IEP and the principle of alliance autonomy, alliances are free to implement (or not) the recommendations. It is, however, expected that each alliance will analyse the experiences and results of the evaluation process (both in terms of self-evaluation phase and IEP team's contribution) and address the recommendations made in the final evaluation report.

Beyond this, there are three further stages of follow-up with IEP, which are outlined below.

Follow-up videoconference

Evaluated alliances are invited to take part in an informal videoconference meeting with the IEP secretariat to provide feedback about the evaluation process and outcomes and how the alliance is addressing the recommendations. This videoconference should take place approximately three months after the evaluation report is finalised.

Progress report

Within one year of receipt of the final evaluation report, the alliance should submit to the IEP secretariat a brief progress report. The aim of the progress report is to shed light on how the alliance has addressed the recommendations made by the evaluation team. This does not mean that the team will expect the alliance to have taken up all their recommendations, instead feedback is expected on whether the alliance is implementing specific recommendations or not, in what way and why.

The progress report encourages the institutional self-reflection process and provides an opportunity to take stock of the initial impact of the evaluation. It also provides valuable feedback to the evaluation team on the usability and practicability of their recommendations to the alliance.

The report will be shared with the IEP team, who will provide a brief feedback on it. IEP and the evaluation team will consider the progress report as confidential and will not communicate the contents or any information regarding this report to third parties.

One to three years after the initial evaluation, alliances have the option of registering for a follow-up evaluation. A follow-up evaluation will identify the impact that the initial evaluation has had on the alliance's development. Any alliance interested in having a follow-up evaluation should contact the IEP secretariat (info@iep-qaa.org).

7. Exceptional circumstances and force majeure

In cases of unforeseen exceptional circumstances that would make a site visit to the coordinating institution's premises not advisable or impossible, the visit can be organised at another alliance member institution (as agreed by the alliance and IEP), or this failing, an online evaluation will be organised instead. Possible exceptional circumstances include but are not limited to serious political unrest, natural disasters, or epidemiological concerns. IEP evaluations will always be carried out in respect of existing national regulations of the countries involved, as well as of evaluation of reasonable risk to those taking part in the visit.

In case an online evaluation needs to be opted for, the IEP guidance for online evaluations applies (**Annex 6**).

Annex 1 - The EUA's Institutional Evaluation Programme

Participating institutions can distribute this sheet to all participants in the self-evaluation process, in the online meetings and the site visit.

The Institutional Evaluation Programme (IEP) is a quality assurance agency and an independent membership service of the European University Association (EUA) that has been designed to ensure that higher education institutions gain maximum benefit from a comprehensive evaluation conducted by a team of experienced European higher education leaders.

Consistent with institutional autonomy, the mission of IEP is to support higher education institutions and systems in developing their strategic leadership and capacity to manage change through a process of voluntary institutional evaluations.

IEP evaluates higher education institutions in the context of their specific goals and objectives with the aim of improving quality. The Programme applies a context-driven approach to its evaluations, emphasises an inclusive self-evaluation process and institutional self-knowledge. This supports improved strategic leadership and efficient internal governance and management, as well as contributes to external accountability.

Therefore, IEP evaluations focus on the effectiveness of quality culture and the degree to which the outcomes of the internal quality processes are used in decision-making and strategic management, as well as on identifying any gaps in these internal mechanisms. The IEP evaluations have a formative orientation, i.e., they are aimed at contributing to the development and enhancement of the institutions. IEP is not geared towards passing judgements, accrediting, ranking or comparing institutions.

The evaluation team consists of rectors or vice-rectors (active or former), a student and a senior higher education professional acting as team coordinator. Team members provide an international and European perspective; they all come from different countries, and none of them comes from the country of the institution being evaluated. Team members (other than the team coordinator) are not paid for their IEP work; they are motivated to serve by a commitment to the Programme's nature and purposes and by a desire to contribute to the development of the institution being evaluated.

During the online meetings, the evaluation team becomes acquainted with the institution and its context. In the site visit, generally two months later, the focus is on finding out whether, how, and how effectively, the institution's strategic policies and quality procedures are implemented.

It should be emphasised that the main preoccupation of the team is to be helpful and constructive. Team members will come prepared to lead discussions with carefully prepared questions. Sessions are intended to be interactive. No formal presentations should be made.

The evaluation team's conclusions and recommendations are collected in a report that will be presented to the institution and subsequently published on the IEP website and the DEQAR database.

Since 1994, IEP has conducted over 460 evaluations in more than 50 countries (mostly in Europe but also in Latin America, Asia and Africa). These have included all types and sizes of higher education institutions: public and private universities and polytechnics, comprehensive and specialised institutions, including art and music schools.

Annex 2 - Guiding questions for self-evaluation process

I. Norms and values, mission and goals: *What is the alliance trying to achieve/what is the vision of the alliance?*

The alliances' strategy and policies enable the realisation of an inter-university 'campus' which assures, in close collaboration with internal and external stakeholders, the quality of a joint provision that responds to societal challenges.

This section discusses alliance level shared norms and values. It analyses the mission and goals of the alliance. The IEP evaluation team will be particularly interested in the strategic choices the alliance has made with regard to its scope and profile. For each of the following issues, consider not just the current situation, but also reflect on the rationale behind the choices made and the extent to which the scope and profile are fit for purpose.

- Profile
 - What is the vision, mission and profile of the alliance and what makes it unique?
 - What balance is the alliance aiming to achieve between its teaching and learning, research and service to society?
 - How do the alliance's strategy and policies aim at contributing to regional development and how do they reflect societal and other challenges that are deemed relevant by the alliance and its stakeholders (challenge-based approach)?
 - What are the alliance's academic priorities, i.e. which joint activities, joint educational offer and (if applicable) areas of joint research are emphasised?
 - What are the alliance's goals and priorities in terms of its European and international positioning? How do they align with the member institutions' goals and priorities in their local and national contexts?
- What is the degree of centralisation/decentralisation of the alliance activities' governance and management that the alliance aims for?
- How does the alliance see its relationship with its funders, including the European Commission?
- How are the internal and external stakeholders, including affiliated entities and associate members, involved in the development of the alliance's strategy/policies and the realisation of the inter-university campus.

II. Governance and activities: *How does the alliance plan to achieve its goals/realise its vision?*

The alliance takes adequate measures to implement its strategy and policies in an effective manner and to enhance the quality of its provision (teaching and learning with links to research, innovation and service to society).

On each topic in this section the self-evaluation should not only focus on describing the current state of affairs, but reflect on the fitness-for-purpose of the policies and processes in place with respect to the stated objectives and also give concrete proposals on how identified weaknesses could be remedied and strengths could be further enhanced (ideally three specific points per topic).

In addition, the way in which the alliance's ambitions related to internationalisation are embedded in each of the following topics should be reflected throughout.

Governance and decision-making

- What are the roles and responsibilities of the alliance level decision-making bodies and is the distribution of tasks and responsibilities clear and meaningful?
- What are the links between central services and member institutions (or their constituent units); how is the cooperation coordinated?
- What kind of policies does the alliance have in place for quality assurance, internationalisation, research and innovation management etc.? How are these policies linked to the overall strategic direction of the alliance?
- Who has decision-making power over academic and research activities of the alliance, funding issues, selection and promotion of alliance staff, admission to alliance's higher education provision, etc.?
- How is it ensured that activities are aligned with the desired alliance profile and missions? Who is responsible for this?
- How are internal (including students) stakeholders involved in the alliance governance and decision-making, including in the co-creation of the alliance's activities?
- How are external stakeholders and the local communities involved, to foster societal engagement, diversity and inclusiveness of students and staff, as well as their entrepreneurial key competence?
- How does the alliance communicate information about its activities to its internal and external stakeholders? (cf. ESG 1.8)
- Funding:
 - Are the financial resources of the alliance adequate and appropriate to achieve its objectives and to support the joint activities?
 - How are decisions made about budget allocation, including to new initiatives?
- Human resources:

- Are the human resources of the alliance adequate and appropriate to achieve its objectives?
- What are the key features of the alliance's human resource policy? What is the profile of staff employed by and for the alliance and its activities (academic vs support staff)?
- Are there alliance level activities that support staff development, in particular in view of the internationalization activities?

Quality culture

Note that processes related to teaching and learning are enshrined in part 1 of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG – see annex 5). However, the alliance should not limit this section merely to teaching and learning, but examine also monitoring and enhancement processes of other activities, such as research activities, administrative processes and service to society.

- What does the alliance's joint quality assurance policy consist of? (cf. ESG 1.1)
- Does the alliance set specific, relevant and attainable objectives relating to the quality of its provision (teaching and learning with links to research, innovation and service to society)?
- What is the scope of the alliance's internal quality assurance system?
- What is the relationship between strategic management and the quality assurance system?
- Does the alliance have an internal quality assurance handbook or equivalent?
- How does the alliance support the development of a quality culture?

Teaching and learning

- How does the joint educational offer reflect the alliance's mission and goals?
- What does the alliance offer in terms of joint or double degree programmes?
- How and to what extent does the alliance implement a student-centred approach to teaching and learning? (cf. ESG 1.3)
- What are the alliance policies and activities related to the use of different modes of delivery and flexible study paths?
- How and to what extent the alliance policies for joint educational offer support and encourage the implementation of innovation in teaching?
- How do the design and approval of study programmes function in the alliance (for joint provision only)? Who does what? (cf. ESG 1.2)
- What are the policies and processes covering the various phases of the student life cycle? (cf. ESG 1.4)
- Student support services (cf. ESG 1.6) :

- Is the organisation and content of student support services adequate to meet the goals set, and to address the specific needs of students involved in alliance/joint education activities?
- How effective are student support services in enhancing the achievement of students?
- What support is available for students and staff who are physically mobile? How does the alliance take into account their needs?

Research (if relevant)

- How do the joint research activities reflect the alliance's overall mission and goals?
- How is the management of joint research organised?
- How is research linked to teaching activities in the alliance?

Service to society

- How does the alliance define its service to society role? What kind of specific activities are included? E.g. research and technology transfer, continuing education and service to community, etc.
- What is the specific contribution of the alliance to the society, beyond the reach of its individual member institutions?

III. Institutional self-knowledge: *How does the alliance monitor to what extent its vision is actually realised?*

This question refers to the internal monitoring processes and practices in place in the alliance for its joint activities, and to how the information collected feeds into the strategic management of the alliance (cf. ESG 1.7).

- What are the tools used to monitor and evaluate the alliance's different activities, including specific measures to evaluate progress, processes, deliverables, and cost efficiency?
- Specifically related to teaching and learning mission: how are different types of joint education offer monitored and reviewed? (cf. ESG 1.9)
- How do quality processes address and ensure the use of innovative pedagogical models, links between education and research and innovation (e.g. how research results and innovation feed back into education), and the measurement of the appropriateness and impact of mobility (for students and researchers as well as for academic and administrative staff), including mobility with non-higher education institutions?
- Do the existing tools provide sufficient evidence to inform decision-making at various levels? How could they be improved to ensure they are fit-for-purpose?

- How is the quality assurance of alliance level activities linked with the overall quality assurance processes of the member institutions?
- How does the alliance monitor and ensure that enhanced cooperation is sustained across different levels and areas of activity, building on complementary strengths and synergetic effects of the alliance's network?
- How are internal and external stakeholders involved in quality assurance processes? How is the active role of students, staff, alumni, the professional field and external independent experts ensured?

IV. Quality assurance and continuous improvement: *How is the quality of education, research and any other services provided by the alliance assured?*

This section explores how the alliance ensures and enhances the quality of its joint activities, and how it uses evaluation results to support improvement. It also considers the alliance's capacity to respond to internal and external changes in a sustainable way (cf. ESG 1.1, 1.7, 1.9).

- How does the alliance act upon the results of monitoring and evaluation activities? How are these results used to inform decision-making and continuous improvement?
- How responsive is the alliance to the demands, threats and opportunities in its internal and external environments? What enables or limits its capacity to adapt and evolve?
- How could the alliance become more responsive? What strategies or structures could enhance its agility?
- How are quality assurance processes aligned across the alliance and with member institutions?
- How are stakeholders involved in quality assurance and improvement?

V. Strategic management and capacity for change: *How will the alliance move from project-based management to long-term and sustainable cooperation?*

Using the information gathered for all the above sections, the self-evaluation group should conduct a SWOT analysis in relation to the goals and mission of the alliance. On the basis of that analysis the following questions should be considered, to assess the alliance's capacity to change in order to improve.

- How do the member institutions contribute to the alliance's long-term sustainability, including reducing existing (administrative) obstacles?

- Are there areas in which a better match could be attained between the mission and goals of the alliance and the activities taking place to meet these? (study programmes, research, service to society)? Why does this happen, how can it be changed?
- How are internal and external stakeholders involved in the development of the alliance?
- How does the alliance share its outputs and good practices with the relevant stakeholders, including with other alliances?

Annex 3 - Proposed structure and content for the self-evaluation report

Introduction

Brief outline of the alliance's motivation for having an evaluation, and what it hopes to achieve.

Brief analysis of the self-evaluation process:

- Who are the self-evaluation group members and how were they selected?
- To what extent was the report discussed across the alliance and its member institutions?
- What were the positive aspects, as well as the difficulties, encountered in the self-evaluation process?

Context of the alliance

Brief presentation of the alliance and the context in which it operates:

- Brief historical overview
- Legal status (if any) of the alliance
- Overview of the mission, strategy and vision of the alliance
- Brief overview of the profiles of the higher education institutions that are members of the evaluated alliance (e.g., geographical position, international profile, number and type of faculties/research institutes/laboratories in the alliance, number of students and staff)
- Status of the institution (and, if applicable, of the alliance) with respect to the external quality assurance requirements (cf. ESG 1.10)

Body of the report

The body of the self-evaluation report should be structured according to the guiding questions for the self-evaluation process (**Annex 2**).

As mentioned in section 3.2, the body of the self-evaluation report should not be simply descriptive, but *analytical, evaluative and synthetic* as well. It should assess strengths and weaknesses, identify threats and opportunities and show how the various elements of strategic and quality management are interconnected. In addition, the analysis should take into account changes that have taken place in the recent past as well as those that are anticipated in the future. After each of the six topic areas three specific areas for improvement may be identified (dealing with existing weaknesses or strengths that could further enhanced). A SWOT analysis should form an integral part of the report and be evidence based.

Conclusion

The conclusion summarises the strengths, weaknesses, opportunities and threats and offers a specific action plan to remedy weaknesses and to develop strengths further.

A useful conclusion has the following characteristics:

- Since the goal of the evaluation is to promote ongoing quality and strategic development, the report should be honest, self-reflective, and refer back to the alliance's mission and goals. Therefore, strengths and weaknesses need to be stated explicitly; specifically, it is best to avoid playing down or hiding weaknesses.
- Strengths and weaknesses that are discussed in the main body of the report are summarised again in the conclusion.
- Strengths and weaknesses that are not discussed in the body of the report should not appear in the conclusion since they would be unsubstantiated.
- Plans to remedy weaknesses should be offered in the conclusion in the form of a specific action plan.

Appendices

Appendices will typically include the following:

- The current Strategic Plan (if one exists) or preferably, an Executive Summary of it and any relevant strategic document.
- An organisational chart(s) of the
 - management/governance structure
 - central services administration and support services
- Number of students involved in alliance activities including mobility
- Number of staff (with a breakdown by academic and administrative) involved in planning, coordination, management and delivery of alliance activities
- Key data on finances

Beyond these appendices, the alliance is free to add other information, but the number and length of appendices should be limited to what is strictly necessary in order to understand the statements and argumentation in the self-evaluation report.

Where possible, weblinks to documents/resources available online should be provided, rather than sending the full documents as appendices to the report.

If appropriate, a list of abbreviations used may also be provided at the start or end of the report.

Annex 4 - Sample schedules for the online meetings and the site visit

Sample schedule for the online meetings

<i>Time</i>	<i>What & who?</i>	<i>Why?</i>
60 minutes	Meeting with rectors of the universities that are members of the alliance and with the liaison person	Welcome, make acquaintance; go over preliminary programme; discuss key issues for evaluation from the alliance's perspective (arising from self-evaluation and/or from rectors' experience). Discuss issues that need to be stressed in evaluation team's visit and report.
60 minutes	Introduction meeting with self-evaluation group	Introduction to the alliance: structures, quality management and strategic management; any other relevant issues. Understand self-evaluation process and extent of different members' involvement; how useful was the self-evaluation for the alliance (emerging issues, function in strategic planning processes)? Are self-evaluation data still up to date? How was the evaluation approached?
60/90 minutes	Meeting with members of executive body of the alliance	Discuss implementation of the alliance' strategy and goals, how strategy is embedded throughout the alliance activities, what are the current challenges.
30 minutes	Debriefing meeting IEP team alone	Reflect on impressions of first meetings and adjust, if necessary, the questions for the upcoming meetings
60/90 minutes	Meeting with management body	Discuss roles and responsibilities across the alliance as well as coordination; links with other bodies; involvement in Strategic Planning, Research/Teaching, Quality Management, Subject Level Reviews; support for academic operations.

60- minutes	Meeting with student representatives IEP team and representatives of students involved in alliance activities	Discuss student representatives' views on the alliance, on relations with governing bodies, on student input in quality management and in (strategic) decision making on alliance activities
60 minutes	Debriefing meeting IEP team alone	Reflect on impressions; list issues for additions to self-evaluation report and the site visit. Plan the site visit schedule (select bodies, special or additional persons to speak with)
60 minutes	Debriefing with the rector of the coordinating institution and the liaison person IEP team with the rector of the coordinating institution and liaison person	Reflect upon impressions of first meetings and complete information as necessary. Agree topics for the additional documentation and plan the site visit schedule (select persons to speak with); logistical support for or during visit; arranging team's meeting and working rooms (where team can work on its oral report)

Sample schedule for the site visit

<i>Time</i>	<i>What & who?</i>	<i>Why?</i>
Optional (online)	Meeting the alliance liaison person IEP coordinator and the alliance liaison	To touch base and ensure that all is on track with the programme of the visit
DAY 0		
Late afternoon	Arrival of evaluation team	
60 minutes	Briefing meeting IEP team alone	Division of tasks, preliminary discussion of evaluation report structure and issues
Evening	Dinner IEP team with rector(s) and liaison person	Welcome, renew acquaintance; go over site visit programme

DAY 1		
9.00 – 10.00	Meeting with rector of the coordinating institution and liaison person IEP team with rector of the coordinating institution and liaison person	Discuss any changes in context or internal situation since the online meetings and identify issues that need to be stressed in the team's visit and report
10.15 – 11.15	Meeting with self-evaluation group IEP team with self-evaluation group, liaison person	Discuss any changes in context or internal situation since the online meetings, analyse their impact, review additional information sent to the team, clarify any open questions
11.30 – 12.30	Meeting with the executive body IEP team with members of the	Clarify issues raised in previous online meeting; discuss strategic development, coordination and alignment of member

	executive body of the alliance	institutions
12.45 – 14.00	Lunch IEP team with liaison person	Reflect upon impressions of first meetings and complete information as necessary
14.15 – 15.15	Meeting with vice-rectors/managers responsible for QA in member universities IEP team with a representation of vice-rectors/managers responsible for QA in member universities	Discuss how the QA system of the alliance relate with the individual QA systems of member universities, coordination structures, shared policies, and efforts to harmonize across systems
15.30 – 16.30	Meeting with the staff working on QA of alliance IEP team with representatives of the staff working on QA of alliance at central level	Discuss the functioning of the QA system of the alliance: quality management and role of quality assurance activities; input in self-evaluation
16.45 – 18.00	Meeting with academic staff involved in alliance activities IEP team with representatives of academic staff working in joint activities	Discuss input in self-evaluation; staff development; motivation policies. Please note that leadership of the alliance should not be present at this meeting: it is reserved for “regular” academic staff only
Evening	Dinner IEP team alone	Reflect on impressions

DAY 2		
9.00 – 10.00	Meeting with finance officer(s) of the alliance IEP team with finance officer(s) of the alliance	Discuss management of alliance's finances
10.15 – 11.15	Meeting with outside partners IEP team with representatives of industry, society and/or local authorities	Discuss relationships of alliance with external stakeholders of private and public sector
11.30 – 12.30	Meeting with student services staff IEP team with representatives of student services staff	Discuss main issues related to the student experience
12.45 – 14.00	Lunch IEP team alone	Evaluation team, alone, to exchange impressions
14.00 – 15.15	Tour of campus	To get to know the campus, paying special attention to student facilities
15.30 – 16.45	Meeting with staff members in charge of joint educational offer IEP team with representatives of staff in charge of joint educational offer	Discuss issues related to joint educational offer
17.00 – 18.00	Meeting with staff in charge of joint research and innovation activities IEP team with representatives of staff in charge of joint research and innovation activities	Discuss issues related to the joint research and innovation activities including joint doctoral programmes, research projects, joint application for grants, etc.
18.00 – 19.00	Debriefing meeting IEP team alone	Exchange impressions, review day and begin drafting the oral report [IEP team needs a working room in the

		hotel for this task]
Evening	Dinner IEP team alone	Continuation of debriefing meeting
DAY 3		
09.00 – 10.00	Meeting with central services IEP team with staff members representing central services of the alliance	Discuss role of alliance strategic documents (development plans, etc.) in development of alliance; special issues arising from self-evaluation and/or from talk with rector(s)
10.15 – 11.15	Meeting with students involved in alliance activities IEP team with regular students not members of student representative bodies	Discuss students' views on alliance experience (e.g., teaching and learning, student input in quality assurance and (strategic) decision making)
11.30 – 12.30	Meeting with management body IEP team with representatives of the management body	Discuss the daily implementation and coordination of the alliance activities and work packages
12.30 – 13.30	Lunch IEP team alone	Evaluation team, alone, to exchange impressions
Afternoon	Debriefing meeting IEP team alone	Exchange impressions, review day and draft the oral report [IEP team needs a working room in the hotel for this task]
Evening	Dinner IEP team alone	Continuation of debriefing meeting
Day 4		
9.00 – 10.00	Concluding meeting IEP team with rector(s)	Discuss draft oral report <i>with the rector(s) alone</i> , to ensure it reflects the findings of the team as well as the needs of the

		rectors for the alliance further development
10.00 – 10.30	Adapting oral report IEP team alone	Adapt oral report according to discussion with rector(s)
10.30 – 12.00	Presentation of oral report IEP team with liaison person and rector(s) and members of the alliance (invitations to be decided by the rector(s), e.g., self-evaluation group, etc).	
Afternoon	Lunch IEP team alone Departure of IEP evaluation team	

Annex 5 - Standards and guidelines for quality assurance in the European Higher Education Area (ESG)

Standards and guidelines for quality assurance in the European Higher Education Area (ESG). Approved by the Ministerial Conference in May 2015.
https://www.eua.eu/index.php?option=com_attachments&task=download&id=3117:standards-and-guidelines-for-quality-assurance-in-the-european-higher-education-area-esg-2015

Part 1. Standards and guidelines for internal quality assurance

1.1 Policy for quality assurance

STANDARD:

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

GUIDELINES:

Policies and processes are the main pillars of a coherent institutional quality assurance system that forms a cycle for continuous improvement and contributes to the accountability of the institution. It supports the development of quality culture in which all internal stakeholders assume responsibility for quality and engage in quality assurance at all levels of the institution. In order to facilitate this, the policy has a formal status and is publicly available. Quality assurance policies are most effective when they reflect the relationship between research and learning & teaching and take account of both the national context in which the institution operates, the institutional context and its strategic approach. Such a policy supports

- the organisation of the quality assurance system;
- departments, schools, faculties and other organisational units as well as those of institutional leadership, individual staff members and students to take on their responsibilities in quality assurance;
- academic integrity and freedom and is vigilant against academic fraud;
- guarding against intolerance of any kind or discrimination against the students or staff;
- the involvement of external stakeholders in quality assurance.

The policy translates into practice through a variety of internal quality assurance processes that allow participation across the institution. How the policy is implemented, monitored and revised is the institution's decision. The quality assurance policy also covers any elements of an institution's activities that are subcontracted to or carried out by other parties.

1.2 Design and approval of programmes

STANDARD:

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

GUIDELINES:

Study programmes are at the core of the higher education institutions' teaching mission. They provide students with both academic knowledge and skills including those that are transferable, which may influence their personal development and may be applied in their future careers.

Programmes

- are designed with overall programme objectives that are in line with the institutional strategy and have explicit intended learning outcomes;
- are designed by involving students and other stakeholders in the work;
- benefit from external expertise and reference points;
- reflect the four purposes of higher education of the Council of Europe (cf. Scope and Concepts);
- are designed so that they enable smooth student progression;
- define the expected student workload, e.g. in ECTS;
- include well-structured placement opportunities where appropriate;
- are subject to a formal institutional approval process.

1.3 Student-centred learning, teaching and assessment

STANDARD:

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

GUIDELINES:

Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process. This means careful consideration of the design and delivery of study programmes and the assessment of outcomes.

The implementation of student-centred learning and teaching

- respects and attends to the diversity of students and their needs, enabling flexible learning paths;
- considers and uses different modes of delivery, where appropriate;
- flexibly uses a variety of pedagogical methods;
- regularly evaluates and adjusts the modes of delivery and pedagogical methods;
- encourages a sense of autonomy in the learner, while ensuring adequate guidance and support from the teacher;
- promotes mutual respect within the learner-teacher relationship;
- has appropriate procedures for dealing with students' complaints.

Considering the importance of assessment for the students' progression and their future careers, quality assurance processes for assessment take into account the following:

- Assessors are familiar with existing testing and examination methods and receive support in developing their own skills in this field;
- The criteria for and method of assessment as well as criteria for marking are published in advance;
- The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved. Students are given feedback, which, if necessary, is linked to advice on the learning process;
- Where possible, assessment is carried out by more than one examiner;
- The regulations for assessment take into account mitigating circumstances;
- Assessment is consistent, fairly applied to all students and carried out in accordance with the stated procedures;
- A formal procedure for student appeals is in place.

1.4 Student admission, progression, recognition and certification

STANDARD:

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

GUIDELINES:

Providing conditions and support that are necessary for students to make progress in their academic career is in the best interest of the individual students, programmes, institutions and systems. It is vital to have fit-for-purpose admission, recognition and completion procedures, particularly when students are mobile within and across higher education systems. It is important that access policies, admission processes and criteria are implemented consistently and in a transparent manner. Induction to the institution and the programme is provided. Institutions need to put in place both processes and tools to collect, monitor and act on information on student progression.

Fair recognition of higher education qualifications, periods of study and prior learning, including the recognition of non-formal and informal learning, are essential components for ensuring the students' progress in their studies, while promoting mobility. Appropriate recognition procedures rely on

- institutional practice for recognition being in line with the principles of the Lisbon Recognition Convention;
- cooperation with other institutions, quality assurance agencies and the national ENIC/NARIC centre with a view to ensuring coherent recognition across the country.

Graduation represents the culmination of the students' period of study. Students need to receive documentation explaining the qualification gained, including achieved learning outcomes and the context, level, content and status of the studies that were pursued and successfully completed.

1.5 Teaching staff

STANDARD:

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

GUIDELINES:

The teacher's role is essential in creating a high quality student experience and enabling the acquisition of knowledge, competences and skills. The diversifying student population and stronger focus on learning outcomes require student-centred learning and teaching and the role of the teacher is, therefore, also changing (cf. Standard 1.3). Higher education institutions have primary responsibility for the quality of their staff and for providing them with a supportive environment that allows them to carry out their work effectively.

Such an environment

- sets up and follows clear, transparent and fair processes for staff recruitment and conditions of employment that recognise the importance of teaching;
- offers opportunities for and promotes the professional development of teaching staff;
- encourages scholarly activity to strengthen the link between education and research;
- encourages innovation in teaching methods and the use of new technologies.

1.6 Learning resources and student support

STANDARD:

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

GUIDELINES:

For a good higher education experience, institutions provide a range of resources to assist student learning. These vary from physical resources such as libraries, study facilities and IT infrastructure to human support in the form of tutors, counsellors and other advisers. The role of support services is of particular importance in facilitating the mobility of students within and across higher education systems.

The needs of a diverse student population (such as mature, part-time, employed and international students as well as students with disabilities), and the shift towards student-centred learning and flexible modes of learning and teaching, are taken into account when allocating, planning and providing the learning resources and student support.

Support activities and facilities may be organised in a variety of ways depending on the institutional context. However, the internal quality assurance ensures that all resources are fit for purpose, accessible, and that students are informed about the services available to them.

In delivering support services the role of support and administrative staff is crucial and therefore they need to be qualified and have opportunities to develop their competences

1.7 Information management

STANDARD:

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

GUIDELINES:

Reliable data is crucial for informed decision-making and for knowing what is working well and what needs attention. Effective processes to collect and analyse information about study programmes and other activities feed into the internal quality assurance system.

The information gathered depends, to some extent, on the type and mission of the institution. The following are of interest:

- Key performance indicators;
- Profile of the student population;
- Student progression, success and drop-out rates;
- Students' satisfaction with their programmes;
- Learning resources and student support available;
- Career paths of graduates.

Various methods of collecting information may be used. It is important that students and staff are involved in providing and analysing information and planning follow-up activities.

1.8 Public information

STANDARD:

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

GUIDELINES:

Information on institutions' activities is useful for prospective and current students as well as for graduates, other stakeholders and the public. Therefore, institutions provide information about their activities, including the programmes they offer and the selection criteria for them, the intended learning outcomes of these programmes, the qualifications they award, the teaching, learning and assessment procedures used the pass rates and the learning opportunities available to their students as well as graduate employment information.

1.9 On-going monitoring and periodic review of programmes

STANDARD:

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

GUIDELINES:

Regular monitoring, review and revision of study programmes aim to ensure that the provision remains appropriate and to create a supportive and effective learning environment for students.

They include the evaluation of:

- The content of the programme in the light of the latest research in the given discipline thus ensuring that the programme is up to date;
- The changing needs of society;
- The students' workload, progression and completion;
- The effectiveness of procedures for assessment of students;
- The student expectations, needs and satisfaction in relation to the programme;
- The learning environment and support services and their fitness for purpose for the programme.

Programmes are reviewed and revised regularly involving students and other stakeholders. The information collected is analysed and the programme is adapted to ensure that it is up-to-date. Revised programme specifications are published.

1.10 Cyclical external quality assurance

STANDARD:

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

GUIDELINES:

External quality assurance in its various forms can verify the effectiveness of institutions' internal quality assurance, act as a catalyst for improvement and offer the institution new perspectives. It will also provide information to assure the institution and the public of the quality of the institution's activities.

Institutions participate in cyclical external quality assurance that takes account, where relevant, of the requirements of the legislative framework in which they operate. Therefore, depending on the framework, this external quality assurance may take different forms and focus at different organisational levels (such as programme, faculty or institution).

Quality assurance is a continuous process that does not end with the external feedback or report or its follow-up process within the institution. Therefore, institutions ensure that the progress made since the last external quality assurance activity is taken into consideration when preparing for the next one.

Annex 6 - Guidance for online evaluation

This guidance applies in case a fully online evaluation needs to be opted for. This document is based on the good practises and lessons learnt from the online site visits IEP conducted between 2020 and 2022. The guidance is expected to support the IEP secretariat, higher education institutions and evaluation teams in organising online evaluations in exceptional situations.

When conducting online evaluations, the following should be considered:

- The decision of organising an evaluation fully online should be taken by the alliance, evaluation team and IEP secretariat as early as possible after the start of the process.
- The online visit should be planned well in advance and the meetings should be carried out during a maximum period of two weeks. The team should propose the draft schedule of the visit based on the outcomes of the online meetings, availability of the team members, and alliance's preferences and deadline.
- Some of the online meetings could be organised as parallel meetings where the team splits in two. This is more time efficient for the team and allows to meet more diverse interviewees.
- The alliance should not record any of the online meetings because of the confidential nature of the discussions and the effect it might have on the quality of interviews.
- The IEP secretariat will set up the online meetings and will make sure to allow the team members to debrief in the same virtual meeting room after the interviewees have left the room, thus, a break of at least 15 minutes in between each meeting will be scheduled.
- The number of meetings per day, their size and length should be carefully planned. The length of an online meeting should not exceed 60 minutes and no more than 10 people (including the team) should participate in a meeting. Occasionally, the meetings can have larger participant groups allowing the team to form an idea of how a more diverse group (e.g., Senate) of university staff responds and interacts beyond a core self-selected group.
- The total length of meetings per day should not exceed six hours a day. This, however, depends on the team's and alliance's preferences.
- The interviewees and team members should keep their cameras on during the sessions to ensure more collegiate and open atmosphere among all participants.
- The interviewees should be encouraged to connect from a quiet location, where they can speak freely, in confidence and undisturbed for the duration of the interview session.
- When possible, the team could also use Google Street view to see the premisses of the institution.

Annex 7 - Glossary

Executive body (depending on the structure of the alliance, this could be, for example, the secretary general of the alliance, or the executive director, or the alliance coordinator): this is the person(s)/body leading the execution of the alliance's strategic goals, ensuring the coordinated implementation of joint initiatives, and the consistent alignment among member institutions.

Management body (depending on the structure of the alliance, this could be, for example, the steering committee or coordination board): this is the person(s)/body responsible for the day-to-day operational and strategic management of the alliance, including the main activities and work packages, the coordination of funding allocation and management, and the collaboration across member universities.

Student representatives (depending on the structure of the alliance, they could be, for example, members of student councils, boards, or forums): they are students not only involved in alliance activities (joint educational and/or research activities), but also members of bodies specifically created to ensure student representation within the alliance governance.

Finance officer(s): the person(s) responsible for the financial management of the alliance's joint funding, especially the grant received from the European Commission; normally based at the coordinating institution and member of the management body.

Alliance student services: these are shared or coordinated services across the alliance whose competences can include Mobility Support Services, Joint Course Access & Virtual Campus Tools, Language & Intercultural Services, Career & Skills Development, Wellbeing, Inclusion & Accessibility, Student Engagement Opportunities.

Staff members in charge of joint educational offer: they are academic and administrative staff who collaborate across institutions and form a network in charge of the design, coordination, implementation, monitoring and evaluation of the educational offer of the alliance.

Staff members in charge of joint research and innovation activities: they are academic and administrative staff who collaborate across institutions and form a network of academic R&I leaders, research managers and coordinators, doctoral programme(s) support, administrative officers.

Central services (depending on the structure of the alliance, they could be, for example, a Central Coordination Office, Functional Working Groups): they are in charge of services, such as HR, IT and legal services, that function as shared services across partners.