Institutional Evaluation Programme

Guidelines for institutions

Follow-up evaluation

2024

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1. Introduction and indicative time frame

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

Aims of the follow-up process

Institutions that have gone through the EUA's Institutional Evaluation Programme (IEP) have the possibility of requesting ***a follow-up evaluation*** one to three years after the initial evaluation. This allows these institutions – and IEP – to identify the impact that the initial evaluation has had on the development of the institution and its strategic leadership, investigate the experiences gained from implementing the IEP recommendations and give impetus for further improvement.

As with the initial evaluation, a follow-up evaluation does not impose externally defined criteria, and is structured around four key questions addressed in all areas of institutional activity (governance and institutional decision-making, quality culture, management of research and use of research results, teaching and learning, service to society and internationalisation):

- What is the institution trying to do?
- How is the institution trying to do it?
- How does the institution know it works?
- How does the institution change in order to improve?

The evaluation will also take into consideration the issues on internal quality assurance identified by the first part of the Standards and guidelines for quality assurance in the European Higher Education Area (ESG – see **Annex 5**).

Beyond this, the exact form of the follow-up evaluation depends on the specific situation in each institution. The evaluation will be designed to build directly on the outcomes of the initial evaluation. Generally, it takes account of new aspects of the internal and external environment, the progress made by the institution in implementing changes recommended in the initial evaluation, while also examining new or ongoing challenges faced.

The follow-up process can be a helpful opportunity for the institution to review what has happened since the initial evaluation process was concluded; to make the progress made better known within the community and thus motivate the staff and students. Highlighting the beneficial consequences of the evaluation process helps to promote confidence and encourage participation in quality enhancement processes across the institution, thereby supporting the development of quality culture.

Following an initial evaluation, the challenge is to sustain development so that it becomes integrated into the institution's policies and processes, avoiding going back to business as usual. A follow-up

evaluation offers the institutional leadership further momentum to ensure the engagement of the whole community in the continuous improvement process.

IEP evaluation teams

As with the initial evaluation, the IEP evaluation team will consist of highly experienced and knowledgeable peers from the European higher education community. The team for a follow-up evaluation will generally consist of four members, including a team coordinator and a student representative. Wherever possible, two of these will be members of the team that carried out the initial evaluation in order to provide some continuity combined with fresh perspectives.

Indicative time frame

The following time frame applies for institutions that register for an IEP evaluation during the regular registration period in the spring. However, the IEP secretariat is prepared to work with each participating institution to adapt this time frame to specific circumstances and requirements. If institutions require changes or adjustments to the indicative time-frame, these must be discussed when they register and generally as early as possible.

Timeline	Tasks
Registration **March - May 2024**	• The institution registers for participation in IEP
Contract, payment, objective of evaluation **July - October 2024**	• IEP and the institution sign a contract • The institution is expected to pay the fee for the evaluation by the end of September unless otherwise agreed upon • Dates for the site visit are to be suggested by the institution • IEP establishes an evaluation team for each participating institution • The institution 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. A workshop replaces the videoconference in case of an IEP coordinated evaluation
Self-evaluation **October 2024 - February 2025**	• The institution undertakes a self-evaluation and provides IEP with a self-evaluation report on the basis of the framework outlined in the IEP guidelines • The institution must send the self-evaluation report to IEP at the latest four weeks prior to the site visit

Site visit **March - June 2025**	• The evaluation team conducts a site visit to the institution, at the end of which it presents an oral summary of its conclusions • The site visit takes place at least four weeks after the submission of the self-evaluation report
Report **July - September 2025**	• IEP presents the draft written report to the institution for comments on factual errors • IEP sends the finalised report to the institution • IEP publishes the evaluation report on its website (www.iep-qaa.org) and the Database of External Quality Assurance Results (DEQAR) (www.deqar.eu)
Applying recommendations and follow up **October 2025 onwards**	• The institution 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 institution along with the guidelines for usage upon completion of the evaluation. • The institution will address the IEP recommendations in accordance with its internal procedures. • The institution 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 2026 onwards**	• The institution will send IEP a progress report **one year after** the receipt of **the final IEP evaluation report**.

2. The roles of institutional actors

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

- Appoint an institutional liaison person for the evaluation process
- Set up a self-evaluation group as soon as IEP has confirmed the registration of the institution
- 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 institution-wide discussions, to present as broad a view as possible of the institution
- Support and encourage the whole evaluation process by explaining its purpose across the institution
- Sign off on the final self-evaluation report. This does not mean that the rector or all actors in the institution 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 institution's strengths, weaknesses, opportunities and threats.
- It is representative of the main stakeholders in the institution (academic and administrative staff and students). While it is important that the major constituencies of the institution are represented, the group should not be an exhaustive gathering of all units and faculties within the institution.
- The rector should *not* be part of the group (see above for the role of the institutional 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 national and institutional 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 **institutional 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 institution 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 institutional reflection and an opportunity for the institution itself to identify key areas that require further attention, as well as understanding its strengths and how best to utilise them. Institutions are urged to involve all members of the institution 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 institution's strategic and quality management activities.

The goal of both the *process* and the *report* is to enhance the institutional 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 institution. If an institution wants the evaluation process to address one or more of its particular strategic priorities in-depth, it should pay particular attention to the chosen priorities in its self-evaluation process and report.

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 site visit. 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 institution 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 institution to present itself, the self-evaluation report is also an opportunity for the institution 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 institution 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 institution's view of quality and strategic management
- To analyse the strengths and weaknesses of the institution, 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 institution 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 institutional context.

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

- The maximum length of the self-evaluation report is 20-25 pages, excluding the appendices. The reason for this relatively short report is to maintain a focus on institutional management without probing too deeply into the specifics of all faculties and activities. Institutions 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 institution's staff members 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 institutional 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 institutional 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 site visit. The IEP secretariat will distribute it to the members of the evaluation team.

4. Site visit

The next step is a site visit to the institution by the IEP team. The team coordinator, acting on behalf of the team, will agree with the institution's liaison person the arrangements for the visit, both in terms of the schedule and content. The team coordinator will provide, at the latest two weeks before the visit, a **provisional list** of the **areas to be discussed** and of the **people to be interviewed.** The programme will be confirmed before the visit, though some changes may be made on the spot as the visit proceeds. This also means that the institution should ensure that all institutional key players are present for the duration of the visit and available in case the schedule needs to be amended.

Annex 4 offers a **sample schedule**, which can be used as a basis for planning the programme. However, institutions and evaluation teams should bear in mind that it is **only a suggestion and can be modified as appropriate** taking into consideration the size and structure of the institution, as well as the themes to be addressed during the evaluation.

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

- The number of participants in each meeting **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. Similarly, different levels of institutional hierarchy should not be mixed within meetings. This is to ensure participants do not feel inhibited from expressing their views.
- 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.
- 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 institution. IEP needs to be informed about the meetings in which interpretation is needed so that 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:

- Enough time should be left for the team's internal debriefing sessions. Furthermore, apart from the initial dinner with the rector, dinners are also debriefing time for the team and should therefore not be attended by members of the institution.
- A 15-minute gap should be left between each meeting to allow groups to go in and out. 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 (e.g., to another faculty), the time required for this should be taken into account when planning the programme of the site visit. If the institution is spread across several sites, careful consideration should be given as to whether visits to several sites are necessary. Unnecessary visits should be avoided in order to keep travelling time to a minimum.
- All practical arrangements for the site visit, including local transportation, accommodation and meals should be arranged in advanced and paid for by the institution. 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 should be provided for all meetings.

Main focus of the follow-up visit

The evaluation team will look at:

- the **past**:
  - key changes introduced in the period that followed the IEP evaluation report
  - recommendations in the IEP evaluation report which were implemented by the institution
  - recommendations in the IEP evaluation report which were not implemented by the institution
- the **present and future**: the new or remaining challenges, the current transformation agenda, its links with *quality*, and the institution's expectations in terms of a renewed capacity for change.

The evaluation team will focus on the *governance* aspects, i.e., the **strategic management** of institutional quality by the institutional leadership. Thus, it will meet the senior leadership and various stakeholders inside and outside the institution, taking into account the institution's expected or desirable development. In other words, the follow-up process offers a *dynamic analysis* of the current understanding of strategic and quality developments in the institution.

It is expected that information provided in the self-evaluation report will point out the impact the initial evaluation had on the institutional change processes.

Main elements of the visit schedule

In order to facilitate a growing awareness for the need for change, the follow-up visit will be organised in a slightly different way to the initial evaluation. **Three moments** will structure the follow-up process:

- A **meeting** with the current leadership (who might not be the same as at the time of the initial evaluation) in charge of the institution's strategic development. The aim of this meeting is to get an overview of past achievements, discuss blockages and hopes for the future in terms of the institution's strategic management and quality assurance in the context of the external changes (e.g. legal framework, economic conditions, etc) that have taken place since the initial evaluation. This discussion will identify those areas of action representing the key levers of institutional change, today or in the future, i.e., develop a possible *agenda for change*.
- A series of **interviews** with members of institutional community responsible for implementing action in key strategic areas, examining each domain in terms of opportunities and obstacles met – or to be met. The evaluation team will meet with staff (alone) and students (alone). This will allow for an assessment of the present strategic leadership and *capacity for change*.
- An **oral report** for the institutional leadership and other members of the institutional community presenting the IEP team's preliminary findings, firstly to the rector alone and then in a meeting with members of the community. The institution 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 two visits.

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

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 institution 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.

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, focusing on an analysis of the changes since the initial evaluation and recommendations for further improvement.

The draft report will be sent to the rector and the liaison person by the IEP secretariat, giving the institution 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 **rector**, again via the IEP secretariat.[1]

The institution 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 Database of External Quality Assurance Results (DEQAR) (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 institution	IEP secretariat	Within 2 weeks of receipt of the draft report
Commenting on factual errors	Rector	Within 2 weeks of receipt of the draft report
Any changes due to factual errors + sending final report to institution + 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)

[1] On receipt of the evaluation report, the institution 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. Institutions that wish to lodge a complaint are requested to contact the IEP secretariat for information regarding further steps.

After receiving the final report, evaluated institutions 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 institution after it has received the report. In this regard, following the voluntary nature of IEP and the principle of institutional autonomy, institutions are free to implement (or not) the recommendations. It is, however, expected that each institution 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 institutions 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 institution 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 institution should submit to the IEP secretariat a brief progress report. The aim of the progress report is to shed light on how the institution has addressed the recommendations made by the evaluation team. This does not mean that the team will expect the institution to have taken up all their recommendations, instead feedback is expected on whether the institution 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 institution.

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.

7. Exceptional circumstances and force majeur

In cases of unforeseen exceptional circumstances that would make a site visit to the institution's premises not advisable or impossible, 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 country of the institution, 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.

The aim of a follow-up visit is specifically to look at the impact that the initial evaluation has had on the development of the institution and its strategic leadership, investigate the experiences gained from implementing the IEP recommendations and give impetus for further improvement.

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 456 evaluations in 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 institution trying to do?*

This section discusses institutional norms and values. It analyses the mission and goals of the institution. The IEP evaluation team will be particularly interested in the strategic choices the institution 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 institution; what makes it unique?
  - What balance is the institution aiming to achieve between its teaching and learning, research and service to society?
  - What are the institution's academic priorities, i.e. which study programmes and areas of research are emphasised?
  - What are the institution's goals for its relationship to society (external partners, local and regional government) and its involvement in public debate?
- What is the degree of centralisation/decentralisation of institutional governance and management that the institution aims for?
- How does the institution see its relationship with its funding agencies (public and others, such as research contractors)?
- What are the institution's goals and priorities in terms of its local, national, European and international positioning?

II. Governance and activities: *How is the institution trying to do it?*

The issues addressed in Section I should be re-visited, but rather than stating objectives, Section II will reflect how the strategies discussed above in Section I are operationalised and objectives are achieved. Of interest in this section is the level of institutional autonomy and the extent to which the institution takes full advantage of this.

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).

Institutional governance and decision-making

- What are the roles and responsibilities of the institution's decision-making bodies?
- What are the links between central services and faculties/departments; how is the cooperation coordinated?
- What kind of policies does the institution have in place (central services or at faculty level) for quality assurance, internationalisation, research and innovation management etc.? How are these policies linked to the overall strategic direction of the institution?
- Who has decision-making power over academic and research activities, funding issues, selection and promotion of staff, admission, etc.?
- How is it ensured that activities are aligned with the desired institutional profile and missions? Who is responsible for this?
- How are internal (including students) and external stakeholders involved in institutional governance and decision-making?
- How does the institution communicate information about its activities to its internal and external stakeholders? (cf. ESG 1.8)
- Funding:
    - Analyse the total budget (breakdown of income and expenditure) of the institution
    - How are decisions made about budget allocation, including to faculties/departments and for new initiatives at institutional level?
- Human resources:
    - What are the key features of the institution's human resource policy? What is the profile of the staff (academic vs support staff, per faculty, demographics)?
    - How does the institution ensure the competences of its staff? What kind of staff development structures and processes are in place? (cf. ESG 1.5)

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 institution 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 institutional quality assurance policy consist of? (cf. ESG 1.1)
- What is the scope of the institution's internal quality assurance system?
- What is the relationship between strategic management and the quality assurance system?
- Does the institution have an internal quality assurance handbook or equivalent?
- How does the institution support the development of an institutional quality culture?

Teaching and learning

- How do the study programmes reflect the institutional mission and goals?
- How and to what extent does the institution implement a student-centred approach implemented to teaching and learning? (cf. ESG 1.3)
- What are the institutional policies and activities related to the use of different modes of delivery and flexible study paths?
- How and to what extent the institution policies support and encourage the implementation of innovation in teaching?
- How does study programme design and approval function in the institution? 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?
    - How effective are student support services in enhancing the achievement of students?

Research

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

Service to society

- How does the institution 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.

Internationalisation

- Is there an internationalisation policy in place?
- What are the main internationalisation activities undertaken by the institution?
- How do the internationalisation activities reflect the institution's overall mission and goals?
- How is the management of internationalisation activities organised?

III. Institutional self-knowledge: *How does the institution know it works?*

The question "How does the institution know it works?" refers to the internal monitoring processes and practices (sometimes also referred to as institutional research activities) in place in the

institution and the information collected feeds into the strategic management of the institution (cf. ESG 1.7).

- What are the tools used to monitor and evaluate the institution's different activities?
- Specifically related to teaching and learning mission: how are programmes monitored and reviewed? (cf. ESG 1.9)
- Do these tools provide sufficient evidence to inform decision-making at various level? How could they be improved to ensure they are fit-for-purpose?
- How is the link between the evidence and institutional planning and development processes ensured?
- How are internal and external stakeholders involved in these processes?

IV. Strategic management and capacity for change: *How does the institution change in order to improve?*

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

- How does the institution act upon the results of monitoring and evaluation activities?
- How responsive is the institution to the demands, threats and opportunities present in its internal and external environments? How could the institution become more responsive ?
- To what extent does the institution take full advantage of its autonomy?
- Are there areas in which a better match could be attained between the mission and goals of the institution 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 institution?

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

Introduction

- Brief analysis of the self-evaluation process
- Brief presentation of the institution and the context in which it operates with focus on key changes in the context that will not appear later in the report and have happened since the initial evaluation.

Body of the report

It is advised that the body of the self-evaluation report should follow the structure of the evaluation report of the initial evaluation, including a SWOT analysis that should be evidence based. **Under each topic, attention should be given to 1) whether and how the institution has addressed the previous recommendations given under that section heading, 2) new reforms implemented and 3) new challenges faced.**

- Institutional governance and decision-making
- Quality culture
- Teaching and learning
- Research
- Service to society
- Internationalisation

In each case, the institution should bear in mind the key questions used by IEP to guide the evaluation process:

- What is the institution trying to do?
- How is the institution trying to do it?
- How does the institution know it works?
- How does the institution change in order to improve?

Consideration should also be given to the way which the institution addresses the issues set out by the Standards and guidelines for quality assurance in the European Higher Education Area (see **Annex 4**).

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 main findings of the self-evaluation process and offers a specific action plan to remedy weaknesses and to develop strengths further.

Appendices

Appendices to the self-evaluation report will typically include the following:

- The current Institutional Strategic Plan (if one exists) or preferably, an Executive Summary of it
- An organisational chart(s) of the
  - management structure (rector, council/senate, faculty deans and councils, major committees, etc.)
  - institution's faculties (or any other relevant units of teaching/research)
  - central services administration and support services (rector's office staff, libraries, etc.)
- Student numbers for the whole institution, with a breakdown by faculty, over the last three to five years; student/staff ratio (lowest, highest and mean ratios); time-to-graduation; drop-out rates; gender distribution by faculty; demographic trends in the wider target population
- Academic staff numbers for the whole institution, over the last three to five years, with a breakdown by faculty, rank, gender and age
- Key data on finances: i.e. government funding (amount and percentage of total budget), other funding sources (type and percentage of total budget) and research funding (percentage within total budget); breakdown of institutional funding for teaching and research per faculty over the last three to five years
- Infrastructure in relation to the number of students and staff: number and size of buildings, facilities, laboratories, and libraries; their location (e.g., dispersed over a large geographical area or concentrated on a single campus); condition of the facilities
- Handbook for prospective international students (if one exists).

Beyond these appendices, the institution 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.

Attention should be paid to the consistency of terminology across the report, particularly with regard to translated names of governance bodies and institutional units/offices. If appropriate, a list of abbreviations used may also be provided at the start or end of the report.

Annex 4 - Sample schedule for the follow-up visit

Time	*What & who?*	*Why?*
Optional (online)	**Meeting the university liaison** IEP coordinator and the university liaison	To touch base and ensure that all is on track with the programme of the visit
DAY 0		
Afternoon	**Arrival** of evaluation team	
	Briefing meeting IEP team alone	Division of tasks, discussion of self-evaluation; issues/questions to be covered during the visit
18.00 – 19.30	**Presentation of the institution by its leadership** IEP team with institutional leadership	They provide background to the evaluation team on the state of affairs and priorities of the institution
Evening	**Dinner** IEP team with rector and liaison person	Get to know one another, discussion about recent and anticipated changes, and the key areas to be addressed during the visit; review what is expected from the evaluation team and from the rector

DAY 1		
9.00 – 09.50	**Meeting with Self-Evaluation Group** IEP team with self-evaluation team and liaison person	Discuss the self-evaluation process and - self-evaluation report
10.15 – 11.15	**Meeting with the leadership** IEP team with the institutional leadership	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change

11.30 – 12.30	**Meeting with the deans** IEP team with deans' Council or deans from several faculties	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change
12.45 – 14.00	**Lunch** IEP team alone	Evaluation team, alone, to exchange impressions
14.15 – 15.30	**Meeting with senate or equivalent body** IEP team with senate representatives	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change
15.45 – 16.45	**Meeting with vice-rectors** IEP team with vice-rectors	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change
17.00 – 18.00	**Meeting with students** IEP team with students	Discussing the student experience in the institution
18.00 – 19.00	**Debriefing meeting** IEP team alone	Exchange impressions, review the day
Evening	**Dinner** IEP team alone	Reflect on impressions and start preparing oral report

DAY 2		
9.00 – 10.00 Parallel (the evaluation team may split in two groups)	**Visit to faculties A & B** IEP team with dean and possibly vice-dean	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change

10.15 – 11.15 Parallel (the evaluation team may split in two groups)	**Visit to faculties A & B** IEP team with academic staff representatives	Discussing the daily realities of the academic staff
11.30 – 12.30 Parallel (the evaluation team may split in two groups)	**Visit to faculties A & B** IEP team with students	Discussing the student experience in the institution
12.45 – 14.00	**Lunch** Evaluation team and Chair of the self-evaluation group	Complete the information as necessary and discuss the self-evaluation process
14.15 – 15.15	**Meeting with Quality Assurance staff**	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change
15.30 – 16.30	**Meeting with central services** IEP team with staff members from central services	Discuss the impact of the IEP evaluation report and the present (and future) key elements of the institutional development, mainly in terms of the capacity for change
17.00 – 18.00	**Meeting with outside partners** IEP team with representatives of industry, society and/or local authorities	Discuss relationships of institution with external stakeholders of private and public sector
18.00 – 19.00	**Debriefing meeting** IEP team alone	Exchange impressions, review the day
Evening	**Dinner** IEP team alone	Continuation of debriefing meeting

DAY 3		
9.00 – 10.00	**Meeting with international academics and international graduate students** IEP team with researchers and students	Discuss about their experience of the institution from an international point of view
10.15 – 11.30	**Visit to research labs, learning centre, library or any new facility**	
12.00 – 13.00	**Lunch** IEP Team alone	Exchange impressions
Afternoon	**Debriefing meeting** IEP team alone	Exchange impressions, review day and begin drafting the oral report [evaluation 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 with rector	Discuss draft oral report *with the rector alone*, to ensure it reflects the findings of the team as well as the needs of the rector for the institution's further development
10.00 – 10.30	**Adapting oral report** IEP team alone	Adapt oral report according to discussion with rector
10.30 – 12.00	**Presentation of oral report** IEP team with rector and members of the institution (invitations to be decided by the rector, e.g. rectoral team, liaison person, self-evaluation group, senate etc).	
Afternoon	**Lunch** IEP team alone Departure of 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 institution, 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 the institution'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 institution 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 university'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.
- The institution should present an online virtual tour of the campus. The tour should show the main premises of the university and – given the goals that the institution sets for IEP - to reflect on their strengths and weaknesses.
- When possible, the team could also use Google Street view to see the premisses of the institution.