

**Report of the Panel appointed to undertake a
review of the Organ für Akkreditierung und
Qualitätssicherung der Schweizerischen
Hochschulen (Swiss Center of Accreditation
and Quality Assurance in Higher Education)
(OAQ) for the purposes of renewal of full
membership of the European Association for
Quality Assurance in Higher Education
(ENQA)**

2 September 2011

PSM/v. Final

GLOSSARY OF TERMS	
BFH	Bern University of Applied Sciences
CRUS	Conference of the Rectors of the Swiss Universities
EAC	European Association of Conservatories
ECA	European Consortium for Accreditation in Higher Education
EFHK	Federal Commission for Universities of Applied Sciences
EPF	Swiss Federal Institute of Technologies
EQAR	European Quality Assurance Register for Higher Education
ETH	Swiss Federal Institute of Technologies
EHEA	European Higher Education Area
ENQA	European Association for Quality Assurance in Higher Education
ESG	Standards & Guidelines for Quality Assurance in the European Higher Education Area
EU	European Union
EUA	European University Association
FDHA	Federal Department of Home Affairs
FDEA	Federal Department of Economic Affairs
FOPH	Federal Office of Public Health
FMH	Swiss Medical Association
FHNW	University of Applied Sciences of Northern West Switzerland
GAC	German Accreditation Council
HEI	Higher Education Institution
HES-SO	University of Applied Sciences of West Switzerland
HR	Human Resources
HTW	UAS for Technologies and Economics, Chur
HWZ	UAS for Economics, Zurich
INQAAHE	International Network for Quality Assurance Agencies in Higher Education
iQA	Internal Quality Assurance
KFH	Conference of the Rectors of the Universities of Applied Sciences
MEBEKO	Federal Commission of Professional Medical Professions (Medizinalberufekommission)
NQF	National Qualifications Framework
OAQ	Swiss Centre of Accreditation and Quality Assurance in Higher Education
OPET	Federal Office of Professional Education and Technology
QA	Quality Assurance
Q-audit	Quality Audit procedure (of OAQ)
SAC	Swiss Accreditation Council (for medical education)
SER	State Secretariat for Education and Research
SUC	Swiss University Conference

SUPSI	University of Applied Sciences of Italian speaking Switzerland
UAS	Universities of Applied Sciences
UNI	University
VSS	Swiss Student Union
ZHAW	Zurich University of Applied Sciences
Abbreviations of legal texts:	
Accreditation Guidelines	Guidelines of the Swiss University Conference for Academic Accreditation in Switzerland, 28 June 2007 (SR/RS 414.205.3)
UAS Accreditation Guidelines	FDEA Guidelines on Accreditation of Universities of Applied Sciences and Degree Programmes, FDEA, 4 May 2007
UFG/LAU	Federal Law on Financial Aid to Universities, 8 October 1999 (SR/RS 414.20)
MedBV/OPMéd	Ordinance on Medical Professions, 27 June 2007 (SR/RS 811.112.0)
MedBG/LPMéd	Federal Law on Medical Professions, 23 June 2006 (SR/RS 811.11)
iQA	Guidelines for Quality Assurance at Swiss Universities, SUC, 7 December 2006 (SR/RS414.205.2)
HFKG/LAHE	Federal Law on Funding and Coordination of the Higher Education Sector (draft)

Overview

Introduction

1 OAQ was granted full membership of the European Association for Quality Assurance in Higher Education (ENQA) in December, 2006. The regulations of ENQA require agencies to undergo successfully further external review at least once every five years, for the purpose of renewing their membership. OAQ has now undergone external review and this report is being submitted to the ENQA Board to enable it to reach a decision on OAQ's application for renewal of its ENQA membership for a further five years from 1 January 2012.

2 External reviews mainly focus on how far agencies meet the ENQA criteria for full membership; these criteria primarily reflect the European Standards and Guidelines in Quality Assurance (ESG) in the European Higher Education Area (EHEA), adopted in Bergen in 2005 by EHEA Ministers responsible for Higher Education.

Terms of Reference for the Review

3 ENQA has identified two types of external review which may be undertaken for the purpose of seeking membership:

- a) a review, the sole purpose of which is to fulfil the periodic external review requirement for ENQA membership; and
- b) a review which has a number of purposes, only one of which is to fulfil the periodic external review requirement of ENQA membership.

4 This review is type A, and evaluates how, and to what extent, OAQ continues to fulfil the criteria for ENQA membership and thus the Standards and Guidelines for Quality Assurance in the European Higher Education Area. The review has been co-ordinated by ENQA itself at the invitation of OAQ.

Membership of the Panel

5 The members of the Panel appointed by ENQA to undertake the review were:

Christian Bjerke, former member of the Academic Affairs Committee, European Students' Union (ESU), (Norway)

Marion Coy, (Chair of the Panel), formerly President of Galway-Mayo Institute of Technology, (Ireland)

Guy Aelterman, Vice-Chancellor, Artesis University College, Antwerp, (Belgium)

Paul Mitchell, (Secretary to the Panel), independent HE consultant, (Mega Mitchell Consulting), (UK)

Maria E. Weber, Scientific Collaborator, Fachhochschulrat (FHR) (Austria).

Approach

6 The review was carried out using a process designed and managed by the Panel following established ENQA practice, independently of OAQ. The Panel sought to conduct the review in a manner that was not only professional and courteous, but also constructively searching and challenging. The review process as a whole proceeded smoothly and responsively. During the site visit, the Panel was met with unfailing courtesy and helpfulness, and by willingness at all levels to engage candidly in the discussion and exploration of key issues.

Procedure

7 In fulfilling the purposes of the review the Panel has:

- considered the broad professional and political contexts within which OAQ operates
- considered a self-evaluation document prepared by OAQ and a range of supporting documents submitted in advance of the site visit
- considered additional documentation relevant to the Panel's lines of enquiry during the site visit
- conducted a three-day visit to OAQ (27 – 29 June 2011), at the OAQ's headquarters in Bern, Switzerland (Appendix 1),
- met a range of stakeholders (from categories selected by the Panel) (Appendix 1), representative of all OAQ's operations, including:
 - the Director, programme managers, Scientific Collaborators and administrative support staff of OAQ itself
 - HEI representatives with management responsibility for and direct experience of their institution's engagement with the operation of all OAQ's quality audit and programme accreditation procedures in Universities and in the Universities of Applied Sciences
 - a group of experts (including students) who have acted for OAQ as members of evaluation panels for University quality audits
 - a group of experts (including students) who have acted for OAQ as members of evaluation panels for programme accreditation in the Universities of Applied Sciences
 - a group of experts (including students) who have acted for OAQ as members of evaluation panels for programme accreditation in other professional subject areas of the OAQ's operations
 - experts who have acted for OAQ as members of panels for other OAQ evaluation activity
 - Members of the OAQ Scientific Advisory Board for the Universities of Applied Sciences
 - Members of the OAQ Scientific Advisory Board for Universities
 - Members of the Accreditation Commission for OAQ accreditation activity in Germany

- Representatives from all statutory bodies and other professional organisations who commission quality assurance activities from OAQ

Self-evaluation document

8 The self-evaluation document submitted by OAQ comprised an account of the following principal areas:

- An introduction, setting out OAQ's rationale for seeking to renew its ENQA membership and a description of the process which had underpinned the preparation of its self evaluation document
- An overview of the Swiss Higher Education system, including a description of the complex distribution of governmental responsibilities for University affairs as between the Swiss Confederation and the Cantons
- An outline of the nature and roles of various bodies, which perform key co-ordinating roles across the sector, including:
 - the Swiss University Conference (SUC)
 - the Rectors' Conference of the Swiss Universities (CRUS)
 - the Rectors' Conference of the Swiss Universities of Applied Science (KFH)
- An introduction to the structure, organisation and work of the OAQ and to the legal framework within which it operates
- Self-evaluation against the European standards and guidelines for the external quality assurance of higher education (ESG Part 2); and self-evaluation against European standards and guidelines for external quality assurance agencies (ESG Part 3):
- A review of developments during 2006-2011, including:
 - OAQ's response to the previous recommendations of the ENQA Board and an update on internal organisation
 - A brief review of the likely implications, challenges and opportunities presented by a major new national HE law expected to come into place at the beginning of 2013.
- Appendices containing key documents

9 The Panel considered the self-evaluation document to be fit for purpose. However, it would have been strengthened had it contained greater evidence of a capacity for self-reflection and a more robust analysis of the organisation's strategic intent. The panel felt that the opportunities presented by undertaking a self-evaluation were not exploited fully. The document provided an adequate description of activity but did not use the opportunity to critique OAQ's own strategy and policy in a manner which would have assisted the agency in providing greater role clarification to both internal and external stakeholders. It also tended to focus on administrative and procedural compliance and to portray the organisation as task-focused and reactive. In its self-characterization, the agency emphasised its administrative function and did not present a well-articulated profile of its professional identity. There was little evidence of the agency actively seeking an external critique of its identity, role, performance and impact in this self-assessment. In view of the impending

major legislative change, an opportunity was missed to analyse the challenges and opportunities facing the agency.

The Panel's visit comes at a defining time for the OAQ. There has been huge recent churn within the professional staffing of OAQ, with over half the current staff (including the Director) being newly appointed within the last year. There is a sense of some isolation of the OAQ from its major stakeholders having taken place in recent years, which the new Director is actively seeking to address. There is a recognition that the Agency should continue to rebuild its informal relationships with HEIs and their networks and to re-establish its profile with the regulatory agencies and with university Rectors as a major player in development of the national QA framework. The Panel strongly supports the new Director's ambitions to strengthen the external profile of the Agency, to enhance the internal leadership and management of OAQ's own strategic direction and to enhance its own capacity for setting and measuring its own performance. Major legal changes concerning the regulation of quality within the Swiss HE sector are pending. The Panel was impressed by the overall potential strength and capacity of OAQ's staff, which should enable the Agency to take its rightful place as a driving force in the new unfolding national QA landscape.

The expansion of external quality assurance activity by OAQ into Germany (and potentially Austria) is a huge opportunity for OAQ to increase its know-how and to test new concepts, which can in turn influence the development of future processes carried out in Switzerland. In addition, it reinforces the international profile of OAQ.

A summary of the supporting documentation made available to the Panel is shown at Appendix 2.

The 2006 Review and current membership of ENQA

10 In 2006 an international expert group established by the Swiss University Conference (SUC), undertook an assessment of the OAQ with respect to the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). On the basis of the analysis of the documentation submitted to them and the interviews undertaken during a site visit, the evaluators agreed that 'the OAQ was essentially acting in conformity with the ESG'. After consideration of this report, the Board of ENQA on 12 December 2006 agreed to grant OAQ full membership of the Association. In doing so, the Board advised that, in conjunction with the next external review of OAQ to take place in 5 years' time, attention should be paid on progress made in the following areas:

- decision-making procedures;
- participation of students in the evaluation process;
- publication of reports; and
- internal quality assurance and feedback mechanisms

In the course of the current review, therefore, the Panel members paid special attention to the ways in which these questions have been

addressed. Aspects of these issues are amplified later in this report, but the Panel's overall findings on these four issues are:

Decision making procedures

11 The previous 2006 Panel had commented *inter alia* that:

Responsibility for decision-making in accreditation procedures should be transferred from the Swiss University Conference (SUC) to an independent accreditation council. Such a council should be composed in a way which gives academic representatives a substantial influence. Furthermore, depending on the composition of the accreditation council, a scientific advisory board should be consulted before the council makes any decisions.

The OAQ is established by law and is thus in practice recognised by the central and local government offices in Switzerland as responsible for quality assurance at Swiss universities. Legally, the OAQ determines and carries out its own procedures and makes its recommendations independently and without being subject to the influence of the Swiss administration, universities or other third parties. It remains however the case under current legislation that technically the responsibility for final decision making on the outcome of certain categories of review can still rest with a body external to OAQ. Thus the evaluation, including the report, is made in an independent and autonomous way by OAQ. The final accreditation decision, however, which can have consequences for funding, diploma recognition etc., is within the purview of another and different body.

Since 2006, the scope of OAQ's activities has broadened significantly. Where the legal framework allows, the OAQ has made sure that the power to take decisions lies within independent boards and commissions of OAQ. Such is the case for the accreditation of German universities and programmes and the evaluation of programmes of continuing education of the UAS. In these procedures the OAQ's Accreditation Commission and its Scientific Board for Universities of Applied Sciences respectively are directly responsible for all decisions. In the case of the accreditation of basic medical education, an independent Swiss Accreditation Council is responsible for decisions according to the MedBG/LPMéd. This procedure has been established by the Swiss authorities.

A key pending national development is the setting up of an independent accreditation council, which is included in the new draft legislation on higher education (HFKG/LAHE). With the enactment of the new Federal Law the SUC as well as the FDEA will be replaced as the final decision-making bodies for the accreditation of universities and UAS and their programmes respectively by an independent accreditation council.

During the course of its visit the Panel tracked a number of reports which had been submitted by OAQ in accordance with its procedures to the relevant higher authority for a final decision on the recommendations contained therein. The Panel found that where amendments had been made, these were largely of a stylistic or clarifying nature; in no case had the substantive recommendations been set aside or varied. A strict reading of the ENQA membership criteria/ESG would indicate substantial rather than full compliance with the Standard. Current national legislation precludes a different approach by OAQ.

The Panel felt that the decision-making procedures attached to new OAQ commissions introduced since the last review represented very significant indicators of the future direction of travel for guaranteeing the complete future integrity of OAQ's decision making processes.

Participation of students in the evaluation process

12 In regard to Standard 3.7, the 2006 Panel had expressed a reservation because of the fact that students did not participate in the procedures as members of the expert panel.

There have been a number of developments since 2006. A student expert now takes part in every accreditation or evaluation procedure of the OAQ. To recruit qualified student experts, the OAQ has established, in cooperation with the Swiss Students' Union (VSS), a pool of trained student reviewers. Student experts are drawn from this pool and must complete a training programme offered by OAQ and VSS before they are eligible to participate as experts for the procedures.

Publication of reports

13 The 2006 Panel had expressed a reservation concerning the publication of OAQ's final expert reports and recommendations, insofar as negative results are not published. It had gone on to observe that the necessary legal basis for this should become available with the initiation of a constitutional amendment to reform the educational system.

The Panel finds that there still exist legal barriers with regard to the publication of decisions and reports, according to the different assessment procedures conducted and the relevant legal frameworks, decision-making bodies and authorities involved.

However, some of these obstacles have been overcome over the past years. In the case of the accreditation of the programmes of basic medical education, all decisions and reports based on the MedBG/LPMéd must be published by law. The decision of the government in this case to establish the legal provision that allows the publication of negative decisions is an important precedent. It is likely that the new law and its bylaws will extend this approach and over time resolve existing problems regarding publication policies.

The Panel accepts to some extent the constraints imposed by current legislation, but believes that the OAQ itself could take a more proactive stance in fostering an expectation in all its procedures that publication of all reports as a source of public information is the normal expectation and in seeking to progress the national debate on publication of all reports, both positive and negative, in line with widely accepted QA practice. The perceived legal barrier should be further explored to establish with certainty the extent of publication rights available to the OAQ in regard to OAQ publishing its reports in full – or at least providing them to the organisation being reviewed, where this is not already the case.

Internal Quality Assurance (iQA) and feedback mechanisms of the Agency

14 The previous 2006 Panel had commented *inter alia* that:

- *Priority should be given to precisely defining the various procedures and to clearly separating the different areas of responsibility (evaluation, accreditation, quality audit and recognition in the context of qualifying for financial support) so that the respective supplier of study programmes, i.e. OAQ's customers, unequivocally know which procedure is applied in their particular case.*
- *The experts advise the OAQ to set priorities for its work, giving precedence to its core task of evaluating quality assurance systems and accrediting study programmes offered by public and private suppliers.*

Since the last report, OAQ's areas of activity and staff responsibilities have been more crisply articulated and promulgated. The number of quality assurance procedures has substantially increased and the field of activity of OAQ has broadened considerably; the scope of each activity is clearly defined. OAQ has also adopted a more clearly defined management structure. Three units were introduced that mirror the three key activities of the OAQ:

- a unit for procedures in the university sector
- a unit for procedures in the UAS field
- a unit for procedures in the medical education sector

Each unit is headed by one person (sector coordinator) who has the responsibility of managing the procedures in that domain.

Additionally, one person coordinates international activities (comprising requests for services, European projects, distance education, procedures abroad, international conferences, activities with the QA-networks of which OAQ is a member, dialogue/reflection on HE policies and assessment procedures jointly coordinated with international bodies). Finally, one person coordinates internal and external communications.

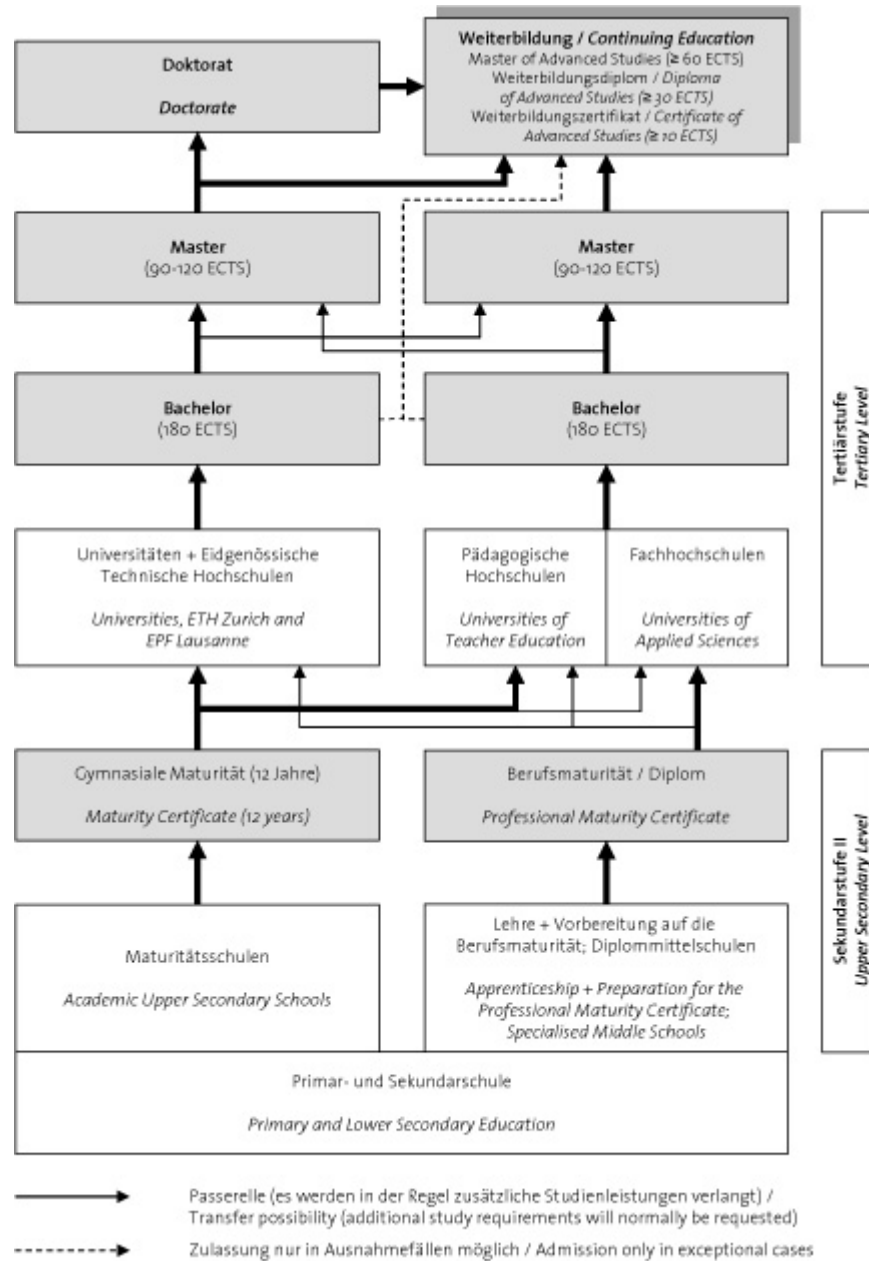
During the last five years, OAQ has significantly increased its range of activities, including for example new activities relating to compulsory accreditation procedures for medical education and for programmes offered by UAS. The OAQ has sought to build its internal capacity through increased knowledge sharing, increased embedding of good practice through the development of handbooks, checklist and manuals and sharing of knowledge in the preparation of numerous new procedures and instruments, use of feedback from the relevant Scientific Board and of external experts. One person coordinates the QA of the agency itself and this person is also a member of the ENQA iQA group.

15 The Panel believes that OAQ has thus responded appropriately and in a timely way to the comments of the 2006 Panel.

Local context

The Swiss higher education sector

16 Pathways through the Swiss education system are shown in summary diagrammatic form below¹:

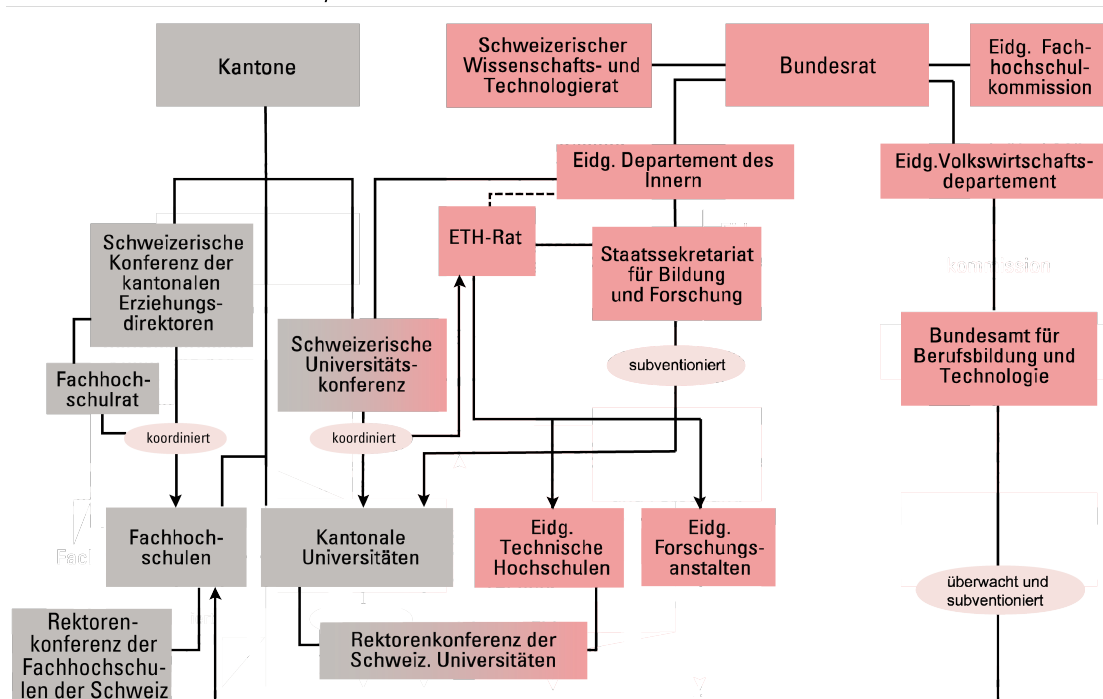


¹ <http://www.zfw.ethz.ch/about/systematik>

17 The Swiss higher education sector consists of twelve public universities (including two technical universities, known as the Swiss Federal Institutes of Technology), nine Universities of Applied Sciences (seven public and two private) and approximately seventy private university institutions.

The system is characterized by a complex distribution of responsibilities as between the Cantons and the Swiss Confederation (marked respectively as grey and red in the table below). This complex distribution of financial and regulatory responsibilities has resulted in the development of some highly complex decision-making structures in relation to the regulation, funding and monitoring of Swiss HEIs.

Struktur des Schweizer Hochschulsystems



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The **Swiss Confederation** finances the two **Swiss Federal Institutes of Technology** as well as four **Federal Research Institutes**. It promotes scientific research and is responsible for the regulation of professional training and the Universities of Applied Sciences (**UAS**). It contributes financially to vocational training, the UAS and the Cantonal universities. The **Cantons** are responsible for the universities, (in part) for the Universities of Applied Sciences (**UAS**) and a large number of educational institutions of professional and vocational training. They contribute an important part of the financing for these institutions.

At federal government level, the higher education institutions are overseen by two ministries:

- **The Federal Department of Home Affairs (FDHA)** and
- **The Federal Department of Economic Affairs (DFEA).**

The **State Secretariat for Education and Research (SER)** is part of the Federal Department of Home Affairs. It is the federal government's office for national and international matters concerning general university affairs, research and the aerospace domain.

The **Federal Office for Professional Education and Technology (OPET)** is part of the Federal Department of Economic Affairs. It is responsible for the implementation of the federal government's policy in the areas of vocational and advanced vocational training in the Universities of Applied Sciences, as well as innovation and technology. The **Swiss Science and Technology Council** is a consulting body of the Federal Council in all matters concerning education, research and technology policy. The **Federal Commission of Universities of Applied Sciences** advises the Federal Council and the Federal Department of Economic Affairs in matters relating to the UAS.

A key body is the **Swiss University Conference (SUC)**, which is the joint federal and cantonal body for coordination and cooperation in university matters. The Swiss University Conference consists of representatives from the university cantons, the State Secretariat for Education and Research and the ETH Board. It has the power to enforce a number of decisions in defined areas, including decisions on accreditation. The **Rectors' Conference of the Swiss Universities (CRUS)** represents all universities and is responsible for the coordination of the management of the universities. The **Rectors' Conference of the Swiss Universities of Applied Sciences (KFH)** is an association of the seven public and two private UAS. The KFH represents the interests of the UAS in matters relevant to the Confederation, the cantons and other institutions in charge of education and research policy as well as the public in general.

Future legal framework

18 A new Federal Law (Federal Law on Funding and Coordination within the Higher Education Sector) is scheduled to come into force in January 2013. It will provide a single legal framework for all types of higher education institution. The draft of this law is currently passing through the various stages of debate within the Swiss Parliament.

The planned Federal Law will have a considerable impact on accreditation in Switzerland. An Accreditation Council will be created, which will be independent (organisationally and financially) from the politically-determined Council of Higher Education, which will replace the SUC as the coordinating body. Institutional accreditation by the new Council will become obligatory for all public HEIs and for private HEIs who wish to describe themselves as university institutions or universities, introducing greater consumer protection. In addition, institutional accreditation will be a prerequisite for federal funding. The Accreditation Council will take all accreditation decisions including the accreditation of programmes leading to a regulated medical profession. Otherwise, programme-level accreditation will become voluntary.

The OAQ and the local context

19 The activities of the OAQ are underpinned by the Federal Law on Financial Aid to Universities, which was approved by the Swiss Parliament in 1999 (Federal Law on Financial Aid to Universities of 8 October 1999 (UFG/LAU), SR/RS 414.20.)

This law

- regulates how Swiss universities are funded
- sets out the legal framework for cooperation between the Federation and the Cantons
- provides the legal basis both for external quality assurance activity in Swiss HEIs and for the creation of the OAQ.

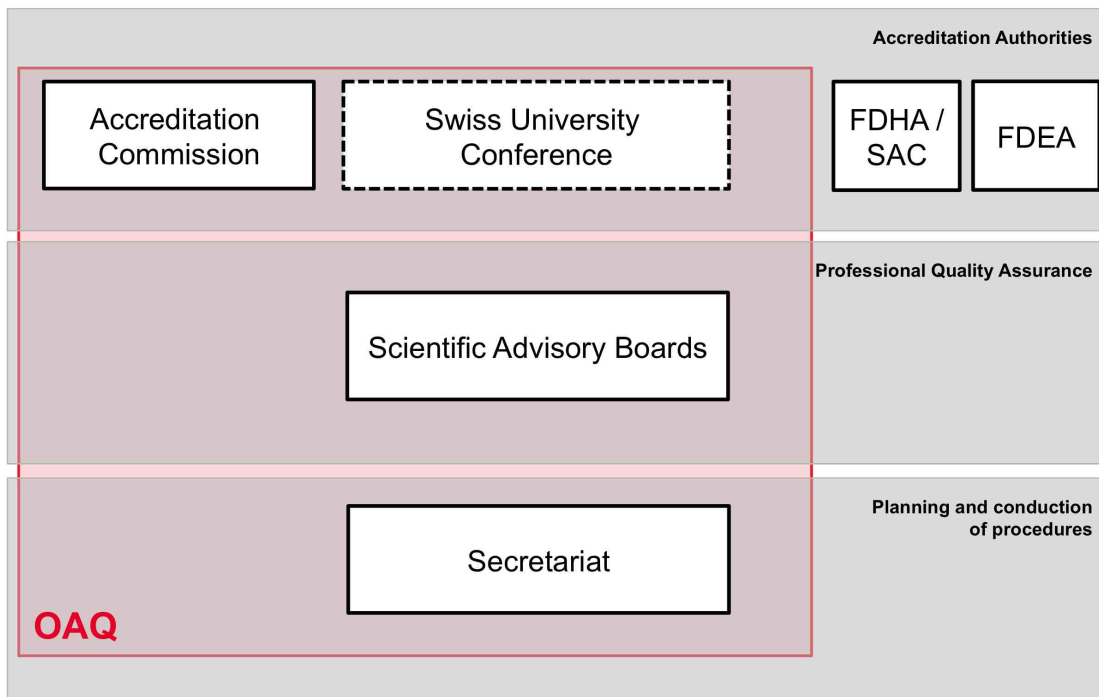
The OAQ was founded specifically to foster the quality of teaching and research of the Swiss universities. To accomplish this task, a Secretariat and a Scientific Advisory Board were created. The law requires periodic assessment of the universities' quality management as a prerequisite for funding by the Federation, but does not require compulsory accreditation of programmes or institutions, in line with the concept of autonomy of the universities. The OAQ accredits private institutions and their programmes on demand.

The decision to recognise institutions as eligible for federal funding is taken by the Federal Council. The procedure is administered by the SER based on a report from the OAQ. Decisions of accreditation in the domain of public or private institutions of higher education are taken by the SUC based on a report and a recommendation from the OAQ.

Since 2004, the OAQ has been involved in the accreditation of the federally regulated training of medical professions, namely physicists, dentists, chiropractors and pharmacists. These accreditations (according to the law regulating the medical professions) are organised by the Federal Office of Public Health and decided by the Federal Council. The OAQ is mandated by the Federal Office of Public Health to prepare the instruments (standards and guidelines) for and to undertake the external evaluations. Overall responsibility for the accreditation procedures and the preparation of the decisions lies with the Federal Office of Public Health.

In 2006 the OAQ was recognised to undertake the external evaluation of the UAS, which are obliged to accredit all their study programmes. The responsibility for administering these procedures lies with the Federal Office of Professional Education and Technology which prepares the decision for the Federal Department of Economics. The UAS may choose from a number of agencies to undertake the external evaluation (six agencies, including OAQ and five recognised German agencies) which have full procedural autonomy. The OAQ assumes complete responsibility for all steps of this latter activity and final accreditation decisions are taken by the FDEA. In regard to the voluntary evaluation procedures which apply to UAS postgraduate continuing education, final decisions are taken by OAQ's Scientific Advisory Board for UAS.

A simplified outline of reporting relationships is shown below:



OAQ compliance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area

ESG Part 2: European standards and guidelines for the external quality assurance of higher education

ESG 2.1 Use of internal quality assurance procedures

(ENQA Criterion 1)

Standard:

External quality assurance procedures should take into account the effectiveness of the internal quality assurance processes described in Part 1 of the European Standards and Guidelines.

Guidelines:

The standards for internal quality assurance contained in Part 1 provide a valuable basis for the external quality assessment process. It is important that the institutions' own internal policies and procedures are carefully evaluated in the course of external procedures, to determine the extent to which the standards are being met.

If higher education institutions are to be able to demonstrate the effectiveness of their own internal quality assurance processes, and if those processes properly assure quality and standards, then external processes might be less intensive than otherwise.

OAQ compliance

20 OAQ's self evaluation report contains the following grids which indicate the convergence between the standards of Part 1 of the ESG and the equivalent standards applied by the OAQ within its various procedures:

- SUC accreditation standards for university Institutions (Art. 9-10 of the Accreditation Guidelines)
- FDEA accreditation standards for UAS (Point B.1 of the UAS Accreditation Guidelines)
- GAC accreditation criteria for procedures in Germany (Chapters 2 and 5 of the Rules for the Accreditation of Study Programmes and for System Accreditation, GAC, 8 December 2009)
- SUC standards for iQA in universities (Art. 3 of the iQA Guidelines).

The OAQ's assessment methodologies seek to focus on the effectiveness of internal quality assurance processes at Swiss public HEIs and on how they are aligned with Part 1 of the ESG. In the Panel's view, OAQ's procedures and guidelines are in accordance with recognized good practice in terms of consistency, independent judgement, openness and clear communication and map closely to ESG Part 1. Based on recent individual examples available to the Panel, the Panel considers that OAQ's processes are fit for purpose in testing and challenging institutions' internal quality assurance policies and their procedures for managing quality and standards, and believes that the processes are compatible with section 1 of the ESG.

Panel judgement:

Fully compliant

Panel Recommendations

No recommendations

ESG 2.2 Development of external quality assurance processes

(ENQA Criterion 1 cont.)

Standard:

The aims and objectives of quality assurance processes should be determined before the processes themselves are developed, by all those responsible (including higher education institutions) and should be published with a description of the procedures to be used.

Guidelines:

In order to ensure clarity of purpose and transparency of procedures, external quality assurance methods should be designed and developed through a process involving key stakeholders, including higher education institutions. The procedures that are finally agreed should be published and should contain explicit statements of the aims and objectives of the processes as well as a description of the procedures to be used.

As external quality assurance makes demands on the institutions involved, a preliminary impact assessment should be undertaken to ensure that the procedures to be adopted are appropriate and do not interfere more than necessary with the normal work of higher education institutions.

OAQ compliance

21 Formally, the aims and objectives of the various quality assurance processes, (for the operation of which the OAQ is responsible), are determined by Swiss law. On a strict reading, this constrains the OAQ from fully meeting the requirements of this Standard. Nevertheless, within that overall context, OAQ has exercised considerable professionalism and autonomy in devising and operationalising the necessary procedures which are captured in the various accompanying instruments (Guides for HEIs and Experts).

In order to ensure clarity of purpose and transparency of these procedures, all external quality assurance instruments, processes and procedures for Quality Audits are designed and developed through a process involving key stakeholders, including Governmental bodies and higher education institutions. These documents describe the aims, objectives and the processes themselves and are published on the OAQ website. The procedures seek to take account of current international good practice, which is assured by the active participation of OAQ in the main international QA networks and relative projects.

The Swiss Q-Network (created in 2003) has been a useful sounding board for stakeholder input. It is composed of staff responsible for IQA at Swiss public HEIs and representatives of the CRUS and OAQ. For example, the draft Guidelines for Quality Assurance at Swiss Universities were discussed in considerable detail within the Q-Network before they were formally adopted by the SUC in December 2006. Similarly the network was a major source for the written and oral feedback which informed an impact assessment of OAQ Quality Audits undertaken in 2010. The Panel heard from some of those interviewed that the unaided interpretation of some written OAQ procedural documents in regard to guidance on the

presentation of evidence was not always straightforward. Communication is a challenge for all agencies, but OAQ may wish further to consider a more structured involvement of 'user groups' in the formative drafting stage of its operating documents.

The Panel notes that there is no routine engagement with professional bodies, 'civil society' and, in particular, the student body as stakeholders (except insofar as individual institutions might chose to involve students in any internal institutional consultations) and recommends that this be further considered by OAQ.

Panel judgement:

Substantially compliant.

Panel Recommendations

- That OAQ consider a formalisation of mechanisms for the involvement of other stakeholders, especially students, (as stakeholders) in the future design and development of its procedures
- OAQ may wish further to consider a more structured involvement of 'user groups' in the formative drafting stage of its operating documents.

ESG 2.3 Criteria for decisions

(ENQA Criterion 1 cont.)

Standard:

Any formal decisions made as a result of an external quality assurance activity should be based on explicit published criteria that are applied consistently.

Guidelines:

Formal decisions made by quality assurance agencies have a significant impact on the institutions and programmes that are judged. In the interests of equity and reliability, decisions should be based on published criteria and interpreted in a consistent manner. Conclusions should be based on recorded evidence and agencies should have in place ways of moderating conclusions, if necessary.

OAQ compliance

22 All procedures conducted by the OAQ have a legal basis. The procedures as well as the criteria for decisions are published in the respective laws and regulations, as well as in the different OAQ guidelines. The guides for external evaluation and for the briefing of experts are critical in ensuring a coherent and consistent interpretation of the standards.

In all the assessments conducted by the OAQ the experts' report, based on a template provided by the OAQ, has to be analytical and examines the quality of the assessed unit against the formal requirements to be fulfilled. Strengths, weaknesses and special characteristics of the unit are outlined. In addition, the experts formulate recommendations on quality improvement. The report ends with an overall recommendation. Conclusions are based on recorded evidence. If the report does not meet the requirements in terms of form and content, the OAQ reserves the right to ask for improvements.

- **Q-audits**

The iQA Guidelines are the basis for the (Universities) Quality Audit procedure. Seven standards define the requirements for an internal quality assurance system. Substantial compliance with these standards is the prerequisite for a positive decision. In the OAQ guide for universities each standard is accompanied by a commentary. The commentary was developed to guarantee a shared and consistent understanding of the standards.

- **Accreditation in the field of universities**

The Accreditation Guidelines are the basis of the accreditation procedures in the university domain. There are two strands in the Guidelines. One relates to institutional accreditation procedures and the other to programme accreditation procedures. Universities and degree programmes are accredited if they fulfil the quality standards. To guarantee consistent application and interpretation of the standards, OAQ has developed explanatory reference points for each standard (available on the OAQ website).

The final expert report must contain a recommendation on the accreditation decision (i.e. accreditation yes / yes with conditions / no). The OAQ evaluates the self-evaluation, the expert report and the response (if any) submitted by the institution. On this basis, the OAQ writes a draft

of its final report which is passed to the Scientific Advisory Board for approval. The final report of the OAQ contains recommendations on accreditation for consideration by the SUC. Together with the self-evaluation report, the expert report and the institution's response, the finalised report of the OAQ is submitted to the SUC for decision on accreditation.

If the accreditation ends with a positive assessment, then the assessed unit receives unconditional accreditation that is valid for 7 years. Conditions will be applied to accreditation if gaps are found in content or structure. In such cases, the assessed unit must prove that it is able to rectify the shortcomings by the end of the given deadline, according to Art. 27 §2 of the Accreditation Guidelines. The OAQ verifies the implementation within the set deadline. Accreditation is granted if the deficiencies have been rectified. If the accreditation ends with a negative assessment, then accreditation will not be granted or will be withdrawn if conditions are not met.

- **Graduate medical programmes**

The accreditation of study programmes (Bachelor + Master) in medical and allied education which lead to a federal diploma is mandatory according to the UFG/LAU and MedBG/LPMéd (Art. 23§1 MedBG/LPMéd). (Courses in human medicine, dentistry, veterinary medicine, pharmaceuticals and chiropractics). The ongoing accreditation cycle started in 2010 and has to be concluded by 31 August 2012 (Art. 63 MedBG/LPMéd). A programme will be accredited if, in addition to the accreditation according to UFG/LAU, it fulfils the criteria according to Art. 24§1 let. a-b MedBG/LPMéd.

Both authorities, the SUC and the SAC (Swiss Accreditation Council) need to take a decision on the accreditation of graduate programmes in medical education (Art. 26 Accreditation Guidelines and Art. 28 MedBG/LPMéd). The accompanying instruments for the accreditation of the study programmes in all five federal medical professions were compiled by the OAQ on behalf of the FOPH and approved by the SUC and the SAC. The instruments for Veterinary Medicine, Pharmacy and Chiropractic Medicine were adapted to the respective professional fields.

The quality standards comply with international demands according to the *Global Standards for Quality Improvement in Medical Education, European specifications*, of the World Federation of Medical Education as well as with national requirements defined by the MedBG/LPMéd and the UFG/LAU. These instruments are published on the websites of the FOPH and the OAQ. The final expert report must contain a recommendation on the accreditation decision (yes / yes with conditions / no). The OAQ evaluates the self-evaluation, the expert report and the comments (if any) submitted by the unit. On this basis, the OAQ writes a draft of its final report which is passed to the Scientific Advisory Board and to the Federal Commission of Medical Professions (MEBEKO), for consultation. The final report of the OAQ contains separate recommendations on accreditation for the attention of SUC and SAC, respectively. Together with the self evaluation report, the expert report and the unit's opinion, the finalised report of the OAQ is submitted to the Swiss Accreditation Council and the SUC for a decision on accreditation.

If the accreditation ends with a positive assessment, then the assessed programme receives unconditional accreditation that is valid for 7 years. Conditions will be applied to accreditation if gaps are found in content or structure. In such cases, accreditation is granted but the deficiencies must be rectified within the specified timeframe. If the accreditation ends with a negative assessment, then accreditation will not be granted or will be withdrawn if conditions are not met.

- **Postgraduate medical programmes**

The accreditation of professional postgraduate medical programmes that lead to a FMH speciality title is mandatory according to MedBG/LPMéd (Art. 23§2). The criteria for accreditation of postgraduate medical education programmes are outlined in Art 25 MedBG/LPMéd. The decision-making authority is the FDHA. The accompanying instruments were compiled by the OAQ on behalf of the FOPH and approved by the FOPH.

For each of the programmes, the OAQ selects a panel of 2 international experts who write an experts' report on the basis of the self-evaluation report of the respective medical association. This external evaluation is the common basis for all programmes. As a control sample, the experts also conducted site visits for selected programmes to test how the concept of a specific postgraduate medical programme is implemented in practice.

The final expert report must contain a recommendation on the accreditation decision (accreditation yes / yes with conditions / no). The OAQ evaluates the self-evaluation, the expert report and the opinion (if any) submitted by the medical association responsible for the programme. On this basis, the OAQ independently writes a final report with a recommendation on accreditation which is passed to FDHA for a decision on accreditation. If the accreditation ends with a positive assessment, then the assessed programme receives unconditional accreditation valid for 7 years. Conditions will be applied to accreditation if gaps are found in content or structure. In such cases, accreditation is granted but the deficiencies must be rectified by the specified timeframe. If the accreditation ends with a negative assessment, then accreditation will not be granted or will be withdrawn if conditions are not met.

- **Accreditation in the field of UAS**

Swiss Universities of Applied Sciences and their corresponding degree programmes are accredited at federal level. The Federal Department of Economic Affairs (FDEA) is the responsible body for accrediting all Swiss UAS and their degree programmes. The FDEA may delegate review of accreditation requests to recognized accreditation agencies, which then determine whether the required qualitative standards and legal targets have been met. UAS and their degree programmes are accredited if they fulfil the criteria according to the UAS Accreditation Guidelines 43 (Point. B.1§1). Points of reference and matching questions for all quality standards have been defined to make the quality expectations clear. The final expert report must contain a recommendation on the accreditation decision (yes / yes with conditions / no). The OAQ evaluates the self-evaluation, the experts' report and the opinion (if any) submitted by the assessed unit. On this basis, the OAQ independently elaborates the final accreditation recommendation which is passed to the Scientific Advisory Board for UAS for approval. The finalized documents (self-evaluation report, expert report and the unit's opinion) along with the agency's accreditation recommendation are submitted to the Federal Office for

Professional Education and Technology (OPET) that prepares the accreditation decision for the FDEA. When preparing the accreditation decision, the OPET always consults the Federal Commission for Universities of Applied Sciences (EFKH) that acts as an advisory body to the OPET. The FDEA reaches its decision – which, for comparability reasons, might be subject to minor calibrations and therefore slightly different from the accreditation recommendation submitted by the agency - on the basis of the report drafted by the group of experts and the accreditation recommendation of the corresponding agency.

If the accreditation request receives a positive assessment, then the degree programme in question will receive unconditional accreditation and therefore authorises the institution to deliver the degree. Conditions will be applied to accreditation if gaps are found in content or structure. In such cases, accreditation is granted but the deficiencies must be rectified within the specified timeframe. If the accreditation request receives a negative assessment, then accreditation will not be granted or will be withdrawn if conditions are not met. The FDEA accreditation is valid for 7 years.

- **Accreditation in Germany**

The German Accreditation Council has developed rules for the decisions on institutional and programme accreditations. All agencies working within the German framework have to adhere to these publicly available rules.

Summary of findings

The Panel can confirm that the criteria for decisions within OAQ's quality assurance processes and the decision making process are published prior to the implementation of the process. Criteria for reaching decisions are clearly set out in OAQ's procedures. Selection criteria for membership of evaluation teams include expertise and experience in higher education, competencies in teaching, research and didactics, complemented by expertise in quality assurance, knowledge of the professional field/subject area under review; teams include student members. Members of evaluation teams must have attended a briefing event beforehand to support consistency of judgements. Final reports are required to give the supporting evidence on which analyses and judgements are based. Decisions are thus taken by more than one person against publicly available criteria, which aim to support an evidence-based decision-making process which is fair, coherent and transparent.

Although independent in formulating its conclusions and proposals, final formal decisions are however taken by (different) separate entities (e.g. FDHA, FDEA and CUS), with the exception of the procedures in Germany and evaluation procedures of UAS' postgraduate programmes. This is discussed further in section 3.6. Despite the operational integrity of OAQ's decision making processes, this Standard cannot be fully attained pending the new legislation. Greater transparency of decision making at each stage of the decision making process, could be achieved through the publication of recommendations at each stage of the process; this would engender both clarity and increased confidence in the current system

Panel judgement: Substantially compliant.

Panel Recommendations

- The publication of all OAQ reports would be helpful on the one hand as a contribution to quality enhancement, and on the other hand as the source of external and independent assessment contributing to the formulation of the final decision. This would enhance consistency and transparency.

ESG 2.4 Processes fit for purpose

(ENQA Criterion 1 cont.)

Standard:

All external quality assurance processes should be designed specifically to ensure their fitness to achieve the aims and objectives set for them.

Guidelines:

Quality assurance agencies within the EHEA undertake different external processes for different purposes and in different ways. It is of the first importance that agencies should operate procedures which are fit for their own defined and published purposes. Experience has shown, however, that there are some widely-used elements of external review processes which not only help to ensure their validity, reliability and usefulness, but also provide a basis for the European dimension to quality assurance.

Amongst these elements the following are particularly noteworthy:

- insistence that the experts undertaking the external quality assurance activity have appropriate skills and are competent to perform their task
- the exercise of care in the selection of experts
- the provision of appropriate briefing or training for experts
- the use of international experts
- participation of students
- ensuring that the review procedures used are sufficient to provide adequate evidence to support the findings and conclusions reached
- the use of the self-evaluation/site visit/draft report/published report/follow-up model of review
- recognition of the importance of institutional improvement and enhancement policies as a fundamental element in the assurance of quality.

OAQ compliance

23 All external quality assurance processes of the OAQ are designed specifically to ensure their fitness to achieve the aims and objectives set for them. Experts engaged for a procedure are carefully selected according to defined selection criteria and are confirmed by the Scientific Boards of the OAQ following consultation with the institution/study programme.

For example, an expert panel for programme accreditation is composed as follows: a panel leader who is an international experienced QA-specialist and an academic in the specific discipline or/and has experience in HEI management; two experts from the specific discipline; a qualified student expert within the specific discipline having a wide knowledge of the Swiss academic system. The independence of the experts is one of the main selection criteria and no panel member is permitted to have a perceived conflict of interest. Their independence is verified by the OAQ Boards and the expert is required to confirm no conflicts of interest when signing the expert contract.

The OAQ engages many of its experts from abroad, due to the requirements of the different accreditation guidelines, mainly in fulfilment of the independence criterion. The OAQ has built up a pool of national and international experts in all disciplines (around 500 experts). To find excellently qualified experts, national and international networking is very important. The details of the pool of experts are captured on a database, although it was not always possible to keep this fully up to date.

The experts – once chosen and confirmed for a procedure – are briefed prior to the on-site-visit. Usually the briefing takes place on the eve of the visit. The briefing follows a standard protocol, including an opportunity for questions and discussion.

Since 2007, the OAQ also includes students as panel members. The students undertake a training programme before they are engaged. The OAQ, together with the national student association (VSS) has built up a “pool” of student experts.

OAQ’s procedures follow three phases (self-evaluation, external evaluation, decision-making) and teams must always provide enough evidence to support their findings and conclusions. The group of experts receive the self-evaluation report one month prior to the site visit.

All important stakeholders are interviewed, the infrastructure is visited and any missing evidence gathered. The site visit ends with a debriefing session where the main outcomes of the procedure are presented by the panel leader. One month after the visit, the expert report is given to the institution/study programme. After the response of the institution/study programme has been considered, the final expert report is prepared (which is published except in the case of the UAS), followed by the decision. If there are conditions, the OAQ has pre-defined follow-up procedures in place.

In regard to quality enhancement, the template for the experts’ report is designed in such a way as to include a profile of strengths and weaknesses and a list of suggestions for improvement.

OAQ bases its procedures on a ‘fitness for purpose’ principle.

The processes it uses share the following common features:

- Members of evaluation teams are appointed by the OAQ with due regard to experience and expertise.
- In appointing a team, members are selected on an international basis
- Due regard is given in the composition of teams to language needs
- Briefing events are held by OAQ and all team members must attend
- The self-study report and an intensive on-site visit are considered a sufficient basis on which to scrutinise the relevant evidence which is to underpin analyses and judgements.
- Teams are debriefed on completion of their work
- Institutions are invited, on completion of the relevant process, to give feedback to OAQ on the process for quality enhancement purposes.

The Panel was impressed by the strenuous effort made to ensure the independence of teams, through the extensive international recruitment of team members. Nevertheless, the Panel heard from interviewees of some variations in the availability of appropriate experts and in the performance of some external experts. The panel was also concerned about the limited amount of training required of non-student team members, although the logistics of providing more training to an international group were not underestimated. Members also noted that in some panel memberships an

undue reliance could sometimes be placed on student panel members in terms of the expectation placed on them to develop a Panel's understanding of the (complex) Swiss HE system.

Panel judgement:

Substantially compliant.

Panel Recommendations

- That OAQ work with panel chairs to identify how to further enhance the role of experts through an enhanced induction and training process, possibly delivered through e-learning.
- That OAQ strengthen the consistency of its procedures for briefing international experts on the national context, in view of the necessity to explain, clearly and in a transparent and detailed way, the complexity and historical context of the Swiss HE system.
- That management of the data-base of experts be improved, in particular, the currency of the database.
- That a more formalised system to review and document the performance of experts be developed.
- That OAQ consider expanding the profile of expert panels to include greater professional, business and community involvement

ESG 2.5 Reporting
(ENQA Criterion 1 cont.)

Standard:

Reports should be published and should be written in a style which is clear and readily accessible to its intended readership. Any decisions, commendations or recommendations contained in reports should be easy for a reader to find.

Guidelines:

In order to ensure maximum benefit from external quality assurance processes, it is important that reports should meet the identified needs of the intended readership.

Reports are sometimes intended for different readership groups and this will require careful attention to structure, content, style and tone.

In general, reports should be structured to cover description, analysis (including relevant evidence), conclusions, commendations, and recommendations.

There should be sufficient preliminary explanation to enable a lay reader to understand the purposes of the review, its form, and the criteria used in making decisions. Key findings, conclusions and recommendations should be easily locatable by readers. Reports should be published in a readily accessible form and there should be opportunities for readers and users of the reports (both within the relevant institution and outside it) to comment on their usefulness.

OAQ compliance

24 OAQ has developed for all its procedures templates for the reports of the experts as well as for the OAQ report itself. The predefined form and structure of reports guarantee that they are comparable. The reports usually conclude with the strengths and weaknesses as well as recommendations and a proposition for a decision with the corresponding conditions. This enables the reader to find easily the main conclusions of the report.

The declared aim of the OAQ is to publish all reports and decisions. However the Agency is constrained by the different legal frameworks and regulatory bodies which impact on its accreditation and evaluation roles. The current position is as follows:

- University sector (excluding Medical Education)

In the case of accreditation and recognition procedures with a positive decision, the OAQ publishes the decision and (if the evaluated institution agrees) the report of the experts as well as the final report of the OAQ. The SUC publishes a list with all accredited institutions and programmes. At present, there is no legal basis for the publication of negative decisions. The Federal Law on Data Protection prohibits the publication of any negative accreditation decision or report.

- Universities of Applied Sciences

The OAQ as well as the OPET publish a list of all accredited programmes. The OAQ can also publish a short executive summary of the experts' report as well as a summary of the procedure (information on the programme in general and the accreditation procedure). As is the case for the university sector, the Federal Law on Data Protection prohibits the publication of any negative accreditation decision.

– Medical Education

In the case of the accreditation of medical education (graduate or postgraduate education), the MedBG/LPMéd and its bylaws enable publication of all accreditation decisions, the experts' reports as well as the OAQ reports. Reports regarding the accreditation of the programmes of graduate medical education are published by the Swiss Accreditation Council. In the case of accreditation of programmes of postgraduate education, the Federal Department of Home Affairs is responsible for publishing reports. After the formal decision of the competent authorities all reports and decisions are also published on the OAQ website.

– Accreditation procedures in Germany

According to the regulations for **programme accreditation** of the German Accreditation Council only positive accreditation decisions (as well as the experts' report and the names of the experts) can be published. The German Accreditation Council is informed about any negative decision but neither the decision nor the report(s) can be published.

In the case of **institutional** accreditation, both positive and negative decisions, together with a summary of the experts' report and the names of the experts are published on the OAQ Website.

In relation to the issue of publication of reports, the Panel has reached the overall conclusion that the OAQ meets this Standard only insofar as national legislation permits, for example in its Medical and German operations. The current lack of transparency in publication and decision making in relation to recommendations requiring ratification at levels above OAQ causes unnecessary mistrust throughout the system; publication at each stage of the referral process would instil increased confidence.

The coming new legislation is stated to allow full publication of all reports, both negative and positive. A major concern is that there is currently no provision for publication of negative reports. This state of affairs was already discussed in the 2006 report. However the new law, which has been in gestation for some years now, will be voted on this year. The law will repair this significant shortcoming in the implementation of the ESG. If this for any reason fails to materialise, the Panel would urge OAQ to seek legal opinion on whether its interpretation of current legislation is unduly cautious. Second, it would urge OAQ and its stakeholders to consider whether the current position on non-publication of reports in Switzerland continues to be tenable in the European HE QA context and in the context of ever increasing Freedom of Information legal provisions.

Panel judgement:

Substantially compliant.

Panel Recommendations

- That OAQ with its stakeholders initiate further work on present and future legal frameworks for publication of reports, in the light of the emerging new legislation
- That OAQ undertake a comprehensive review of the extent to which reports could be tailored to meet the needs of different stakeholder groups.

ESG 2.6 Follow up-procedures

(ENQA Criterion 1 cont.)

Standard:

Quality assurance processes which contain recommendations for action or which require a subsequent action plan, should have a predetermined follow-up procedure which is implemented consistently.

Guidelines:

Quality assurance is not principally about individual external scrutiny events: it should be about continuously trying to do a better job. External quality assurance does not end with the publication of the report and should include a structured follow-up procedure to ensure that recommendations are dealt with appropriately and any required action plans drawn up and implemented. This may involve further meetings with institutional or programme representatives. The objective is to ensure that areas identified for improvement are dealt with speedily and that further enhancement is encouraged.

OAQ compliance

25 Where accreditation is granted subject to prescribed conditions, there is a mandatory documented follow-up procedure. The formal follow-up procedure, usually lasting between 3 and 4 months, is initiated at the deadline given for the fulfilment of the conditions. The follow up procedure comprises three stages: a self-evaluation carried out by the HEI; an external evaluation organised by the OAQ (which might include a site visit by the selected panel of independent experts); a decision is then made by the appropriate authority, based on OAQ's final report and its recommended decision. In most cases, a desk based exercise is sufficiently robust for this purpose. The assessment panel is usually composed of one or two members of the assessment panel who participated in the original exercise. However the assessment can sometimes be made by one or two scientific collaborators of the OAQ, depending on the nature of the original conditions imposed. This is decided by the OAQ Director on a case-by-case basis.

In the case of an unconditional accreditation, which is granted for 7 years, a reaccreditation is triggered by a request from the institution. Expert panels always take into account the results of previous internal and external assessments and review the extent to which any previous action plans have been implemented.

In all other cases, the OAQ as well as the experts' panel can make recommendations (which are not conditional) and the OAQ can propose a follow-up visit to see how these recommendations have been implemented.

For the accreditation procedures carried out in Germany, after expiry of half of the accreditation term, the Higher Education Institution mandates an agency (licensed by the German Accreditation Council) to carry out an in-depth examination of the study programmes (mid-term review). The

accreditation agency submits a report that provides information on the results of the mid-term review and where appropriate, makes recommendations about the remediation of any deficiencies. Afterwards the agency publishes the report and makes it available to the HEI.

Finally, in order to ensure that areas identified for improvement are dealt with speedily and that further enhancement is encouraged, the OAQ has established feed-back mechanisms by means of questionnaires to be completed by all assessed units and all panel members.

In discussions with institutional representatives, it was clear that institutions valued informal feedback and informal recommendations (not having the status of formal conditions) from OAQ panels, which helped to facilitate quality improvement and further enhancement within the institution concerned. The Panel felt that OAQ could usefully review in consultation with its stakeholders, how this informal quality enhancement aspect of the review processes could be more securely embedded in its operations.

On the basis of the evidence it has reviewed, the Panel considers OAQ's formal follow-up procedures to be robust and effective.

Panel judgement:

Fully compliant.

Panel Recommendations

- That OAQ could usefully review in consultation with its stakeholders, how the informal quality enhancement aspect of feedback from the review processes could be more securely embedded in its operations.

ESG 2.7 Periodic reviews

(ENQA Criterion 1 cont.)

Standard:

External quality assurance of institutions and/or programmes should be undertaken on a cyclical basis. The length of the cycle and the review procedures to be used should be clearly defined and published in advance.

Guidelines:

Quality assurance is not a static but a dynamic process. It should be continuous and not 'once in a lifetime'. It does not end with the first review or with the completion of the formal follow-up procedure. It has to be periodically renewed. Subsequent external reviews should take into account progress that has been made since the previous event. The process to be used in all external reviews should be clearly defined by the external quality assurance agency and its demands on institutions should not be greater than are necessary for the achievement of its objectives.

OAQ compliance

26

- **Q-audits**

Swiss universities have to undergo a Quality Audit every four years. The length of the Audit cycle is defined by law and published and the OAQ undertakes the Quality Audits on behalf of the SER. Due to the imminent implementation of the new Federal Law, the audit cycle has been suspended for 2011/12.

- **Accreditation in the university domain**

An accreditation in the university domain is valid for seven years. As the accreditation is voluntary a renewal of the accreditation once it has expired is not mandatory. The length of the validity of the accreditation is defined and published in the Accreditation Guidelines.

- **Accreditation in the field of medicine**

MedBG/LPMéd defines the general framework for length of cycles and review procedures for the accreditation of the programmes in both basic and postgraduate medical education. The framework is published in the website of the FOPH. The responsible authority for executing the follow-up and review procedures is the FOPH.

Accreditation of programmes in basic medical education is granted for seven years (Art. 29 MedBG/LPMéd and Art. 30 of the Accreditation Guidelines). Accreditation of programmes in postgraduate medical education is granted for seven years (Art. 29 MedBG/LPMéd).

- **Accreditation in the domain of UAS**

UAS that have been authorised by the FDEA (before the introduction of the current accreditation system) are considered to have been accredited. Degree programmes that had previously been subject to an external quality audit (federal peer review or cantonal qualification recognition procedure) remain accredited until 2014. All newly introduced degree programmes (Bachelor and Master), however, must be accredited before the first qualifications for these programmes are issued. Given the shorter

duration of Master's degree programmes, the deadline for accreditation has been lengthened to one year after the first Master's degrees are issued. FDEA accreditation (programme and institution) is valid for seven years (Point B.5§2 of the UAS Accreditation Guidelines).

OAQ has to date conducted all its external reviews on a cyclical basis, at a variety of intervals. The Panel is concerned that the current pause in audit activity in anticipation of new legislation should not become an extended interval introducing a period of stagnation in QA activity. The first re-accreditations of programmes as well as institutions are envisaged for 2014. If, as seems likely, the future focus of system-wide QA activity is likely to centre on institutional-level accreditation, then the OAQ is well placed to shape political opinion and to undertake pre-planning of an operational framework for the new national HE quality system.

Panel judgement:

Fully compliant.

Panel Recommendations

- Notwithstanding the impending new legislation, OAQ in conjunction with its stakeholders, should not persist indefinitely with the "pause" in some cycles of activity.

ESG 2.8 System-wide analysis

(ENQA Criterion 1 cont.)

Standard:

Quality assurance agencies should produce from time to time summary reports describing and analysing the general findings of their reviews, evaluations, assessments, etc.

Guidelines:

All external quality assurance agencies collect a wealth of information about individual programmes and/or institutions and this provides material for structured analyses across whole higher education systems. Such analyses can provide very useful information about developments, trends, emerging good practice and areas of persistent difficulty or weakness and can become useful tools for policy development and quality enhancement. Agencies should consider including a research and development function within their activities, to help them extract maximum benefit from their work.

OAQ compliance

27 OAQ has sought to enhance its capacity to undertake and disseminate system wide analysis in support of quality enhancement. It undertakes a number of tasks as follows:

- At the conclusion of each assessment cycle, each project coordinator at the OAQ is now required to analyse the general findings from the reviews, evaluations, assessments for their area and produce a summary report, which is published on the agency's website. An example would be the 'Synthesis Quality Audit Report', which explored the impact, strengths and weaknesses of OAQ's Quality Audit procedures in the Universities. It provides useful information about developments, trends, good practice and areas of persistent difficulty or weakness.
- OAQ's work is discussed with institutions and other stakeholders, such as the Q-network.
- OAQ participates actively in selected international events for the purposes of reflection on and dissemination of international good practice (an example of OAQ's input would be a published article on the accreditation of higher education music programmes in Switzerland, undertaken in close cooperation with the European Association of Conservatoires, presented at the European Quality Assurance Forum in November, 2010).
- A critical paper on institutional assessments including strengths, weaknesses and lessons learnt was published in the EUA Bologna Handbook in 2009
- The OAQ is also actively involved in exploring new approaches to external quality, particularly within the ECA and the research or project-based activity of its working groups. OAQ is participating in the research work aiming at defining principles and recommendations regarding learning outcomes in accreditation procedures. Additionally, it is represented on the Steering Group of the EC-funded JOQAR project, coordinated by ECA, exploring

principles and criteria for the accreditation of joint programmes in Europe, including pilot procedures.

Much of the capacity of OAQ is taken up with operating the core processes of the various evaluation exercises it undertakes. The Panel believes that there is more work to be done in the area of dissemination and quality enhancement activity, which is likely to require the provision of appropriate additional resources. OAQ does not, at present, make as much use as it might of the cumulative information it acquires about accredited programmes and institutions, in order to identify and promulgate methodically systemic good practice and analyse commonly encountered problems. Through the production of analytical reports and the commissioning of developmental initiatives relating to the generic, sector-wide aspects of its work, OAQ could expand its impact as a vehicle for quality promotion and the enhancement of teaching, learning and research. There is an opportunity for OAQ, by increasing its capacity to undertake system wide analysis, to make a major contribution to the development of higher education both within Switzerland and also internationally.

While many of the HEIs commented on the administrative efficiency of OAQ, they also articulated a need for OAQ to be more active in enhancing the effectiveness of HEIs in relation to quality assurance and enhancement. The Panel was disappointed to hear that OAQ had suspended both publication of its newsletter and its seminar/meetings programme. OAQ should consider developing more consistent professional relationships with the quality networks and should use this relationship to develop the capacity of the system to benchmark its performance and outcomes. A new communication strategy with HEIs and other relevant agencies needs to be developed. This strategy should assist in the transfer of knowledge about good national and international practice and it should also aim to raise the ambition of the sector as a whole.

Panel judgement:

Substantially compliant

Panel Recommendations

That OAQ consider:

- development of a proposal for an expansion of and a more systematic approach to its activities in sector-wide analysis
- development of an outline work plan of future activity in sector-wide analysis
- undertaking a skills analysis within OAQ to determine what further HR capacity is needed to support this work, for example in data management and analysis
- discussing with stakeholders the way in which additional OAQ capacity can additionally help to underpin and in due course evaluate the effectiveness of new methodologies introduced through the new legislation
- discussing with stakeholders future funding arrangements for enhancing OAQ's analytical capacity.

ESG Part 3: European standards and guidelines for external quality assurance agencies

ESG 3.1 Use of external quality assurance procedures for higher education (ENQA Criterion 1 cont.)

Standard:

The external quality assurance of agencies should take into account the presence and effectiveness of the external quality assurance processes described in Part 2 of the European Standards and Guidelines.

Guidelines:

The standards for external quality assurance contained in Part 2 provide a valuable basis for the external quality assessment process. The standards reflect best practices and experiences gained through the development of external quality assurance in Europe since the early 1990s. It is therefore important that these standards are integrated into the processes applied by external quality assurance agencies towards the higher education institutions. The standards for external quality assurance should together with the standards for external quality assurance agencies constitute the basis for professional and credible external quality assurance of higher education institutions.

OAQ compliance

28 Overall compliance with ENQA Criterion 1 is measured against ESG Part 2 and ESG 3.3. The Panel confirms that, as described in the previous section and in section 30 below, OAQ's processes and procedures are based on, and are overall substantially compliant with ENQA Criterion 1.

Panel judgement:

Substantially compliant.

Panel Recommendations

- (see detailed comments and recommendations under ESG Part 2 and under section 3.3)

ESG 3.2 Official status

(ENQA Criterion 2)

Standard:

Agencies should be formally recognised by competent public authorities in the European Higher Education Area as agencies with responsibilities for external quality assurance and should have an established legal basis. They should comply with any requirements of the legislative jurisdictions within which they operate.

OAQ compliance

29 OAQ's legal standing derives directly from a number of statutory sources:

- The current legal basis for the OAQ is set out in Art. 7 of the Federal Law on Financial Aid to Universities of 8 October 1999 (UFG/LAU) and Art. 7 of the Intercantonal Convention on Coordinating University Policy of 9 December 1999.
- The organisation and the responsibilities of the OAQ are outlined in Art. 18-23 of the Cooperation Agreement between the Federal Government and University Cantons on matters relating to Universities of 14 December 2000.
- Since January 2008, the OAQ is also officially recognised by the Federal Department of Economic Affairs (FDEA) as an accreditation Agency for the Universities of Applied Sciences and as such has the right to conduct accreditation procedures. The prerequisites for federal recognition of an accreditation agency are set out in the FDEA Ordinance of 4 May 2007 on Recognition of Accreditation Agencies for Universities of Applied Sciences and Degree Programmes (UAS Accreditation Agency Ordinance).
- Since June 2009 the OAQ has been formally accredited by the German Accreditation Council, which empowers the OAQ to conduct system accreditation and/or programme accreditation at HEIs in Germany.
- Based on the Federal Law on Medical Professions, which came into force in September 2007, the Federal Office of Public Health (FOPH) has given the OAQ the mandate to conduct the legally required accreditation procedures, which is regulated by a formal agreement between the OAQ and the FOPH.

The Panel notes that OAQ is recognised in all its key purposes by the relevant statutory, professional and regulatory bodies and believes that OAQ fully meets the requirement for this standard.

Panel judgement:

Fully compliant.

Panel Recommendations

No

recommendations

ESG 3.3 Activities

(ENQA Criterion 1 cont.)

Standard:

Agencies should undertake external quality assurance activities (at institutional or programme level) on a regular basis.

Guidelines:

These may involve evaluation, review, audit, assessment, accreditation or other similar activities and should be part of the core functions of the agency.

OAQ compliance

30 As already discussed, OAQ conducts various types of quality assessment on behalf of the federal and cantonal authorities or as mandated by third parties including:

- Institutional evaluation, undertaken by an HEI applying for public funding for the first time, linked to the recognition of the right to financial aid (6 procedures conducted so far); based on the *Directives for the recognition of the right to financial aid according to the UFG/LAU*, FDHA, 10 December 2002.
- Institutional Quality Audits, a cyclical obligatory assessment of the internal quality assurance system at public universities, linked to the renewal of the right to financial aid (22 procedures conducted in 2 cycles: in 2003-4 and 2007-8); based on the *Directives for the recognition of the right to financial aid according to the UFG/LAU*, FDHA, 10 December 2002, and the *Guidelines for Quality Assurance at Swiss Universities* (iQA Guidelines), 7 December 2006.
- Accreditation (at institutional and programme level) in the domain of public and private university institutions, on a voluntary basis (43 procedures have been completed since 2003); based on the *Guidelines of the Swiss University Conference for Academic Accreditation in Switzerland* (Accreditation Guidelines), 28 June 2007.
- Accreditation of medical programmes (graduate as well as postgraduate medical education), legally required by the Federal Office of Public Health;
 - 2 full cycles for postgraduate medical education have been completed: in 2005 (47 procedures completed) and 2010 (48 procedures conducted; ongoing decision-making phase);
 - the first cycle of accreditation of graduate medical education (Bachelor + Master) is ongoing (15 procedures running); based on the *Federal Law on Medical Professions* (MedBG/LPMéd), 23 June 2006, on the *DFHA Ordinance on Accreditation of the programmes for the academic medical professions*, 20 August 2007, on the *Ordinance on Medical*

Professions (MedBV/OPMéd), 27 June 2007, and on the Accreditation Guidelines of 28 June 2007.

- Accreditation (at institutional and programme level) for the Universities of Applied Sciences, where programme accreditation is legally required and linked to the right to deliver a degree (since 2008, subsequent to the OAQ recognition by the Federal Office for Professional Education and Technology, 44 procedures have been completed); based on the *Guidelines on Accreditation of Universities of Applied Sciences and degree programmes (UAS Accreditation Guidelines)*, FDEA, 4 May 2007.
- Evaluation of postgraduate continuing education (MAS, EMBA) in the domain of Universities of Applied Sciences, on a voluntary basis (since 2008, 22 programmes have been evaluated);
- Accreditation in Germany (System Accreditation and/or programme accreditation), in the domain of higher education institutions (since 2009, subsequent to the OAQ accreditation by the German Accreditation Council; two System Accreditations ongoing, no procedures completed yet); based on the *Rules for the Accreditation of Study Programmes and for System Accreditation*, GAC, 8 December 2009.
- Other assessments of HEI outside of Switzerland, based on specific mandates (e.g. 1 institutional evaluation undertaken in Liechtenstein, so far).

An extensive programme of both institutional and programme level external quality assurance activities represents the core function of the OAQ.

Panel judgement:

Fully compliant.

Panel Recommendations

No recommendations

ESG 3.4 Resources

(ENQA Criterion 3)

Standard:

Agencies should have adequate and proportionate resources, both human and financial, to enable them to organise and run their external quality assurance process (es) in an effective and efficient manner, with appropriate provision for the development of their processes and procedures (*and staff*) (*Addition by ENQA for ENQA criterion*)

OAQ compliance

31 The OAQ has two primary sources of funding:

- funds (62%) provided by the SUC (of which half comes from funds from the Federation and half from the Cantons)
- funds (38%) earned through contracts with other parties, largely the OPET and the FOPH

A (lesser) and more intermittent third source of funding is represented by the fees paid by private Swiss higher education institutions, or by HEIs outside of Switzerland, or by HEIs in Germany undergoing an assessment procedure with the OAQ.

The SUC serves as the statutory board of financial accountability for the OAQ (Intercantonal Convention on Coordinating University Policy of 9 December 1999). The Director of the OAQ has to present a proposed annual budget and a financial statement for adoption by the SUC. In terms of budgeting, the two major sources of funding are linked: as long as the OAQ budgets its procedures according to the "Fees Regulation" defined by the SUC, the financial contribution of the SUC in combination with all the money earned in contracts covers all operating costs of the OAQ. The 2010 financial statement shows an overall income of CHF 3m. This represents an excess in income over expenditure of CHF 300k.

The Agency's HQ occupies two floors of a building in central Bern adapted for office use; It is well located, well appointed and is fitted out with physical and IT facilities appropriate to the Agency's functions. Some activities are sub-contracted to third parties: these include web design and production, database & IT support, and corporate design and translation.

The OAQ monitors and records all its procedures using an internet-based database. This includes information such as the nature of, beginning and end points of procedures, composition of expert groups and a record of final decisions. All important documents are also attached to the database. The collaborators have access to the database and are responsible for updating the information.

At present, the OAQ Secretariat consists of 13 (9.1 FTE) employees. Staffing comprises a Director, with a flat structure of 9 scientific collaborators, 2 administrative/secretarial staff and 1 student collaborator.

Disciplinary and interregional aspects are taken into consideration in the recruitment of staff, so as to fashion a strong, broadly-based team, fully able to function with credibility at the appropriate disciplinary level and on a Federal basis. The salary scales and conditions of service are determined by federal laws. The OAQ has a protocol governing the professional development of its staff. ('Rules for Continuing Training of Staff')

In autumn 2010, OAQ initiated an externally facilitated process (initiated by a Strategy Workshop, moderated by an external consultant) to review its overall strategy. The Strategy Workshop clearly identified the need for an overall human resources (HR) Strategy. The HR Strategy would define an updated frame of reference for the recruitment, professional development and continuing training of its staff. The Panel would urge the OAQ to take forward this work, so as to ensure that the skills mix within the Agency is appropriate to meet the future demands which will be made of it and that future professional development is driven primarily by the needs of the Agency's work plan.

The Panel was struck by the calibre of OAQ staff whom it met; this was re-inforced in feedback from the institutional representatives and reviewers it met during the site visit. The Panel considers that whilst OAQ's current level of resource is sufficient for its immediate purposes, it believes there is a need for OAQ to develop or redeploy (in collaboration with funders) some additional capacity within OAQ to support system-wide analysis as discussed under Standard 2.8 above. It would also suggest for consideration an increase in the complement of administrative staff to manage some of the more routine practical arrangements associated with the organisation of site visits.

The agency has very high calibre staff and the internal staff development plan needs to focus on developing their professional expertise. At the moment, there is a tendency to view OAQ staff as administrators of processes and procedures. This weakens the standing of the agency and is an under-utilization of the core strength and capacity of its staff. In view of the large number of relatively new staff in the agency, it is also imperative that they have more direct contact with the HEIs in order to build up mutual knowledge and mutual trust and confidence.

Panel judgement:

Fully compliant.

Panel Recommendations

- That OAQ be encouraged to complete its HR strategy and to develop a more formal and complete procedure for the induction and subsequent professional development of staff.

ESG 3.5 Mission statement

(ENQA Criterion 4)

Standard:

Agencies should have clear and explicit goals and objectives for their work, contained in a publicly available statement.

Guidelines:

These statements should describe the goals and objectives of agencies' quality assurance processes, the division of labour with relevant stakeholders in higher education, especially the higher education institutions, and the cultural and historical context of their work. The statements should make clear that the external quality assurance process is a major activity of the agency and that there exists a systematic approach to achieving its goals and objectives. There should also be documentation to demonstrate how the statements are translated into a clear policy and management plan.

OAQ compliance

32 The OAQ mission statement is publicly available on the OAQ website:
http://www.oaq.ch/pub/en/02_07_00_mission.php.

In January 2011, the OAQ adopted an internal strategic policy document, which had grown out of a Strategy Workshop, which complements the mission statement. The SER also points to 'the annual activity plan' which is stated to show the way in which the OAQ translates its mission statement into a clear policy and management plan.

The Panel believes that the mission statement, as it currently stands, is incomplete insofar as it does not contain clear explicit goals and objectives and does not adequately articulate OAQ's relationship with other stakeholders. Its value is thus diminished.

Panel judgement:

Substantially compliant

Panel Recommendations

- That further work is required to articulate more explicit goals for the agency and to set out more clearly how the Agency will interact more proactively with other stakeholders such as professional bodies, employers and society more broadly.

ESG 3.6 Independence

(ENQA Criterion 5)

Standard:

Agencies should be independent to the extent both that they have autonomous responsibility for their operations and that the conclusions and recommendations made in their reports cannot be influenced by third parties such as higher education institutions, ministries or other stakeholders.

Guidelines:

An agency will need to demonstrate its independence through measures, such as:

- its operational independence from higher education institutions and governments is guaranteed in official documentation (e.g. instruments of governance or legislative acts)
- the definition and operation of its procedures and methods, the nomination and appointment of external experts and the determination of the outcomes of its quality assurance processes are undertaken autonomously and independently from governments, higher education institutions, and organs of political influence
- while relevant stakeholders in higher education, particularly students/learners, are consulted in the course of quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency.

OAQ compliance

33 OAQ enjoys operational independence in regard to the way in which it operates its various quality processes, including:

- complete operational autonomy in delivery of the different mandates received
- autonomy in recruiting its staff
- ownership of procedures for all forms of quality assessment
- responsibility for the selection of external experts/teams for quality assessments;
- autonomy in conducting assessments;
- internal safeguarding mechanisms to underpin key decisions, through the OAQ's international Scientific Advisory Boards (systematic checks of all strategic decisions and guarantee of their international compatibility);
- full responsibility for writing final reports, including recommendations for quality improvement and proposals for accreditation/recognition/evaluation decisions with no influence from third parties;

The Panel has explored the issue of independence in some depth. It recognises OAQ's determination to ensure that the principle of independence is upheld across its key processes.

Although independent in formulating its conclusions and proposals, final formal decisions are however taken by 'political' bodies (FDHA, FDEA and CUS) with the exception of the procedures in Germany and evaluation procedures of UAS' postgraduate programmes. As discussed earlier in this

report, it remains the case under current legislation that technically the responsibility for final decision making on the outcome of certain categories of review can still rest with a body external to OAQ.

The Accreditation Council envisaged in the new law will in future legally guarantee independence of decision making. The Accreditation Council will be independent from the politically determined Council of Higher Education that will replace the SUC. The new Accreditation Council will have full decision-making powers.

In the legal national context within which OAQ currently operates, the Panel believes however that this Standard is substantially met.

Panel judgement:

Substantially compliant.

Panel Recommendations

- For the remaining period of the current legislation, OAQ should maintain a clear tracking of any differences between the conclusions of OAQ reports and those of any higher formal decision-making body (such as OPET). In the interests of transparency, both versions should be published separately, unless expressly prohibited by law, or fed back in some other way.

ESG 3.7 External quality assurance criteria and processes used by the agencies
(ENQA Criterion 6)

Standard:

The processes, criteria and procedures used by agencies should be pre-defined and publicly available. These processes will normally be expected to include:

- a self-assessment or equivalent procedure by the subject of the quality assurance process
- an external assessment by a group of experts, including, as appropriate, student member(s), and site visits as decided by the agency
- publication of a report, including any decisions, recommendations or other formal outcomes
- a follow-up procedure to review actions taken by the subject of the quality assurance process in the light of any recommendations contained in the report.

Guidelines:

Agencies may develop and use other processes and procedures for particular purposes.

Agencies should pay careful attention to their declared principles at all times, and ensure both that their requirements and processes are managed professionally and that their conclusions and decisions are reached in a consistent manner, even though the decisions are formed by groups of different people.

Agencies that make formal quality assurance decisions, or conclusions which have formal consequences, should have an appeals procedure. The nature and form of the appeals procedure should be determined in the light of the constitution of each agency.

OAQ compliance

34 All processes, criteria and procedures used by the OAQ are pre-defined and publicly available on the agency's website under the respective category (Universities, UAS, Germany, Q-audits). They are also explained and referred to in the different guides compiled by the OAQ in order to assist the self-evaluation and the external evaluation phases. An inventory of all OAQ procedures was provided to the Panel.

Normally quality assessment procedures of the OAQ last between 9 and 12 months and are held in three stages: a self-evaluation undertaken by the higher education institution (phase I); an external evaluation organised by the OAQ including an on-site visit by the selected panel of independent experts (phase II); decision making by the decision-making authority, based on the OAQ final report and its proposal for a decision (phase III). In the case of accreditation of a private HEI, the above-mentioned phases are preceded by a preliminary *prima facie* examination procedure, whereby the institution must submit a number of prescribed documents and evidence to the OAQ, in accordance with published criteria.

All institutions undergoing an assessment procedure by the OAQ are provided with a guide to self-evaluation, including guidance on the production of the self-evaluation report. Two to three preparatory meetings (organised by the OAQ scientific collaborators), precede the on-

site visit and take place at the institution under assessment. The group of experts conducting the external assessment is provided with a guide to external evaluation, highlighting *inter alia*, the operating principles for the site visit. Each expert also receives a briefing pack which forms the basis for the oral briefing session that precedes the site visit. During the site visits, experts have the opportunity to meet representatives of all the main interest groups involved in the unit under assessment. This complements the information and evidence provided in the self-evaluation report. These meetings are structured in interview sessions lasting on average one hour. The site visit for the accreditation of a single study programme lasts on average two to three days.

The group of experts is selected according to predefined criteria. The expert group must include a student. In collaboration with the Swiss students' union, the OAQ has established an "accreditation pool" of student experts. Members of this pool receive bespoke training. Only students who have attended this training are eligible to serve as experts.

Accreditation can be granted with conditions. In such cases, a follow-up procedure is mandatory. In all other cases, the OAQ as well as the expert panels can make recommendations for consideration by the institution concerned. The OAQ has established formal follow-up procedures for cases of conditional accreditation. These processes again include the three phases mentioned above, with the difference being that an additional on-site visit is not always necessary to verify the fulfilment of the conditions set for accreditation. In most cases, a desk based assessment is sufficient. Another important difference is the composition of the assessment panel, which might consist of one or two members of the original assessment panel or one or two scientific collaborators of the OAQ, according to the type of condition to be fulfilled and the competencies required for the assessment. This is decided on a case-by-case basis.

The declared aim of the OAQ is to publish all reports and decisions. However, as already discussed, the Agency's freedom of action is constrained by various different legal frameworks and regulatory bodies which impact on its accreditation and evaluation roles. All positive decisions can be published, according to Art. 33§3 of the Accreditation Guidelines. In agreement with the evaluated institution, the final report of the OAQ and the Experts' Report are published. Within the accreditation of basic medical education programmes, all reports are published, as required by law. In the case of accreditation in the domain of UAS, only positive accreditation results can legally be published by the OAQ, as the reports, once handed over to the decision-making body, are no longer the property of the agency. The planned Federal Law will in principle allow for any OAQ procedural outcome to be published.

The OAQ makes legally binding accreditation decisions only in the procedures it conducts within the framework of the German Accreditation Council. For these procedures the OAQ has appointed a standing appeals commission consisting of three people. The appeals procedure has been published. For all other kinds of procedures conducted by the OAQ, different authorities technically make the formal final decisions and

consequently formal appeals are addressed to them (e.g. to SUC). All include an appeals procedure that is legally defined and published, although not all such procedures were easily accessible to the Panel.

The Panel is thus able to confirm that OAQ's review processes include self-evaluation; external assessments and site visits by a group of experts; publication of a report; and a follow-up procedure. Detailed information regarding these processes is publicly available. Student participation in review activity is now well established. Current legal restrictions on the publication of reports inhibit OAQ's capacity to meet this standard fully.

Panel judgement:

Substantially compliant.

Panel Recommendations

- That OAQ re-write its documentation on appeals procedures in a composite document and ensure its ready accessibility through the OAQ website and other appropriate means.

ESG 3.8 Accountability procedures

(ENQA Criterion 7)

Standard:

Agencies should have in place procedures for their own accountability.

Guidelines:

These procedures are expected to include the following:

- 1 A published policy for the assurance of the quality of the agency itself, made available on its website.
- 2 Documentation which demonstrates that:
 - the agency's processes and results reflect its mission and goals of quality assurance
 - the agency has in place, and enforces, a no-conflict-of-interest mechanism in the work of its external experts
 - the agency has reliable mechanisms that ensure the quality of any activities and material produced by subcontractors, if some or all of the elements in its quality assurance procedure are subcontracted to other parties
 - the agency has in place internal quality assurance procedures which include an internal feedback mechanism (i.e. means to collect feedback from its own staff and council/Board); an internal reflection mechanism (i.e. means to react to internal and external recommendations for improvement); and an external feedback mechanism (i.e. means to collect feedback from experts and reviewed institutions for future development) in order to inform and underpin its own development and improvement.
- 3 A mandatory cyclical external review of the agency's activities at least once every five years.

OAQ compliance

35 The quality principles and measures of the OAQ are outlined in a paper published in December 2005 and recently revised in March 2011. http://www.oaq.ch/pub/de/02_08_00_qualitaet.php

This paper seeks to demonstrate how the agency perceives its quality as an organisation as well as the quality of its processes. Quality requirements and goals are listed. The paper is intended to encompass all activities of the agency and acts as the basis of all procedures.

In order to put the agency's quality principles into practice, OAQ handbooks provide detailed descriptions of all internal procedures. A management handbook, issued in 2009, sets out the framework of all rules governing everyday work at the agency. The management handbook contains a detailed list of all documents governing the procedures executed by the agency, giving information about the validity of every document and providing step-by-step advice on how to run any Agency procedure.

The OAQ takes considerable care to ensure the integrity of its External experts. As set out in the OAQ bylaws, experts must be independent and

must be able to make an impartial assessment. All the experts selected by the OAQ must on appointment sign a statement confirming their independence. Additionally, each expert is checked by the OAQ for his/her independence in relation to the particular institution/programme undergoing accreditation. The institution applying for accreditation has the right to object to the choice of the experts proposed by the OAQ, for example, when the institution believes that an expert deals with activities in competition with its own. In addition, the OAQ has developed, together with the other ECA member organizations, commonly agreed principles for the selection of experts, including no conflict-of-interest mechanisms. The Scientific Boards and the Accreditation Commission for Germany make the definitive selection of the expert teams for procedures in their respective domains. Furthermore, they examine and adopt the OAQ's final report on the procedure. Members of the Boards who have a perceived conflict of interest with the object to be accredited take no part in such discussions.

The OAQ subcontracts certain other activities to third parties: external communication (website), database & IT issues, corporate design and translation. Only translations of reports or templates for reports are in some cases directly linked to external quality assurance procedures. The quality of the activities and the material produced by the respective subcontractors is ensured by way of internal feedback mechanisms of the OAQ staff. At least two persons check the material produced by subcontractors and evaluate their activities.

In regard to internal feedback, OAQ has a number of bodies which provide quality assurance for the scientific content of OAQ's work. There is no single corporate management Board.

- Members of the **Scientific Advisory Board for Universities** are appointed on the nomination of the Rectors' Conference of the Swiss Universities (CRUS) by the Swiss University Conference. A term of office lasts 4 years and members may be re-elected once. The Board is composed of a president and 4 members, 2 of whom have to live and work abroad. All have to be experts in the field of quality assurance. The Board is responsible for the scientific quality of the OAQ's work in the university domain and offers its advice to the organisation.
- Members of the **Scientific Advisory Board for Universities of Applied Sciences** are nominated by the Rectors' Conference of the Swiss Universities of Applied Sciences and appointed by the Scientific Board for Universities. Their term of office lasts 4 years and members may be re-elected once. The Board is composed of a president and 3 members, 2 of whom live and work abroad and one person is also a member of the Scientific Board for Universities. The Board is responsible for the scientific quality of the OAQ's work in the domain of UAS and offers its advice to the organisation and has decision-making power with respect to the evaluation of postgraduate continuing education programmes.
- Members of the **OAQ Accreditation Commission for procedures undertaken in Germany** are identified and proposed by the OAQ Secretariat and appointed by the Scientific Board for Universities. A term of office lasts 4 years and members may be re-elected once.

The Board is composed of a president and 9 members, all of whom must be independent from any German HEI. Members, largely coming from outside Germany, represent the academic as well as the professional world. All of them have to be experts in the field of accreditation and one must be a student. Two members are representatives of the Scientific Advisory Boards of the OAQ, in order to assure coherence between the various activities undertaken by the agency. The Commission offers its advice to the OAQ and has full decision-making powers for accreditation procedures in Germany.

Feedback from the different Scientific Advisory Boards is gathered on all matters governing the quality of the procedures in their respective field of competence. The Board members give their feedback by mail or during Board meetings.

OAQ staff are expected to comment on emerging procedures, on working tools (guides, guidelines, standards) and on general rules governing everyday work (internal feedback). In weekly meetings with the whole team, the different development points are discussed. Minutes of these meetings provide a written record of discussions and formal decisions.

External feedback is collected from the experts who have taken part in OAQ procedures as well as from institutions that have undergone a review, in order to test their satisfaction with the whole procedure (organisational aspects, conceptual aspects, etc.). Tailored questionnaires for the different types of procedures are used for this type of external feedback. The questionnaires include comments on the procedure, its organisation by the OAQ, the composition of the expert panels, the tools used, the site visits, etc.

The status of all OAQ procedures currently in progress is monitored through a database accessible to all; it includes information such as the nature of, the beginning and end points of the procedure, the composition of the expert panels and the final decision taken. Similarly, a coordination tool for all OAQ's international activities is accessible to all staff, regularly updated and brought to formal staff meetings on a regular basis in order to assign responsibilities, monitor developments and decide on pending requests.

Internal documents (annexes to the management handbook, checklists in the procedure handbook) can be adapted based on internal and external feedback and made available to the staff rapidly. When internal or external feedback concerns the operation of particular OAQ guidelines, standards, or other formal instrument this will be discussed with all stakeholders including the relevant Scientific Advisory Board.

After the external review of OAQ undertaken in 2006 as part of the application for ENQA membership, the agency underwent an external evaluation in 2009 when applying for accreditation by the German Accreditation Council (GAC) to become eligible for undertaking system

and/or programme accreditation in Germany. It has now submitted itself for five-yearly review in regard to continued ENQA membership.

The Panel considers that OAQ substantially meets this Standard. However OAQ's history to date has been to some extent reactive and has been characterised by a high volume of operational activity with limited opportunity for reflecting on its own performance. A more structured approach to obtaining and interpreting feedback from external stakeholder groups could help OAQ to enhance its own performance. Similarly the involvement of external advisers drawn systematically from all stakeholder groups (perhaps through an Advisory Council) in OAQ's governance arrangements could help OAQ in monitoring its own performance at corporate level.

Panel judgement:

Substantially compliant.

Panel Recommendations

- That OAQ develop and strengthen its procedures to ensure a continuous cycle for reviewing its own effectiveness at all levels.
- That OAQ develop a process for the on-going benchmarking of its own performance
- That OAQ review the effectiveness of the operation of its Scientific Advisory Boards
- That OAQ, as a matter of urgency, develop, in consultation with relevant entities, a governance structure
- That OAQ develop and publish a full strategic plan and institute a process of reviewing its performance against the targets in the plan

ENQA Criterion 8

- i. *The agency pays careful attention to its declared principles at all times, and ensures both that its requirements and processes are managed professionally and that its judgments and decisions are reached in a consistent manner, even if the judgments are formed by different groups;*
- ii. *If the agency makes formal quality assurance decisions, or conclusions which have formal consequences, it should have an appeals procedure. The nature and form of the appeals procedure should be determined in the light of the constitution of the agency;*
- iii. *The agency is willing to contribute actively to the aims of ENQA.*

OAQ compliance

36 OAQ's policies and procedures are described fully in its publications and OAQ is governed by these in all of its actions and decision-making processes; they provide the reference point for internal and external stakeholders alike. The quality of its work is overseen by the Scientific Advisory Boards and managed by a highly professional staff.

Appeals procedures are discussed under Standard 3.7

OAQ dedicates considerable resources to participation in international networks and in international cooperation, mostly through its membership of the main QA networks such as ENQA, the European Consortium for Accreditation in Higher Education (ECA) and the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) but also by cooperating in the framework of EUA. OAQ plans to continue to contribute to ENQA as a full member and actively to share good practice in quality assurance that can contribute to the improvement of its own procedures.

Panel judgement:

Fully compliant.

Panel Recommendations

No recommendations

Overall conclusion

OAQ has, during the period since the last review, continued to operate efficiently. It has done so in a difficult context, considering the extent of internal churn in staffing and the uncertainty created by the prolonged gestation of the new legislation.

The agency has considerable strengths and commands a high level of trust from HEIs and government agencies. It is a small organisation conducting a high level of activity and most of its staff are relatively new. It is therefore understandable that the organisation is very task and administratively focused. It would now benefit from a substantial re-appraisal of its positioning within the system.

At structural level, the absence of an effective governance system is an impediment to the development of OAQ. There is little scope to consider the identity, role and positioning of the organisation as there is no internal architecture to support this approach. The Scientific Advisory Boards do not involve themselves with governance nor can they be expected to do so. They respond to academic issues as they arise and they are informed of the annual activity plan but they do not have a role in the formulation of strategy or in charting the evolution of the agency. Therefore, the current structure emphasises activity and process, not purpose and impact. In addition, there is an absence of mechanisms/structures to evaluate internal performance. There is, for example, no formal mechanism for the review of the effectiveness of the Scientific Advisory Boards or the performance of the Chief Executive. In the absence of an effective governance structure, strategic direction and oversight are not explicitly considered nor is risk management effectively monitored.

The role of civil society in relation to quality assurance and enhancement does not appear to have gained great traction in the Swiss higher education system. This is particularly evident in the absence of any mechanisms to broaden the participation in and influence of external stakeholders in the structures, deliberations and activities of the agency. The participation of students in the review panels is now well embedded, but there is considerable scope for the further expansion of the role of students, business, the professions and the wider community. OAQ's stated aim of assisting decision-making by prospective students is not well served by the low-level of system-level analysis and commentary carried out by the agency, and this deficit will also hinder the broader evaluation of the system's performance. At another level, the weak external focus of the agency has had a negative impact on its communication policy and strategy. OAQ needs to develop an approach to communication which takes account of the needs of multiple and diverse stakeholders.

OAQ's own sense of identity needs to be strengthened. Staff members are rightly proud of the administrative efficiency of the organisation. It is a concern, however, that many of those we met characterised the role of the agency in purely administrative terms. Many representatives of HEIs articulated a need for a greater challenge to their own thinking, for a greater exposure to good international practice and for the articulation of

higher standards of achievement to which they could aspire. There is a clear role here for the OAQ at the level of system leadership and enhancement.

OAQ carries a very wide range of responsibilities. As an organisation with a very able staff with a strong team ethos, it is well placed to make a major contribution to the development of the quality and standards agenda in the emerging new Swiss HE legislation. OAQ is an agency that needs to grasp the opportunity to provide greater leadership in relation to quality assurance within the higher education domain. It must ensure that it does not see itself as simply an administrative entity.

OAQ's overall performance against the standards of the ESG is generally high. It is a trustworthy and highly credible agency. The Panel would recommend that OAQ be re-confirmed in membership of ENQA for the standard period of five years.