

# GUIDELINES FOR ACCREDITATION



**Εθνική Αρχή  
Ανώτατης Εκπαίδευσης**  
Hellenic Authority  
for Higher Education

## ACRONYMS

EAC	Evaluation & Accreditation Council
EEAP	External Evaluation & Accreditation Panel
ENQA	European Association for Quality Assurance in Higher Education
ESG	Standards and Guidelines for Quality Assurance in the European Higher Education Area
HAHE	Hellenic Authority for Higher Education
HEI	Higher Education Institution
IQAS	Internal Quality Assurance System
SP	Study Programme
QAU	Quality Assurance Unit

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# 1 INTRODUCTION

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The Hellenic Authority for Higher Education (HAHE) is an independent administrative authority established by Law 4653/2020. HAHE is the continuation of the Hellenic Assurance and Accreditation Agency (HQA) which was established and has been operating since 2006

The HAHE **mission** is to ensure high quality in Higher Education. In the context of its mission, HAHE contributes in the formation and implementation of the national strategy for Higher Education and in the distribution of financing for Higher Education Institutions (HEIs), and evaluates and accredits the operational quality of HEIs

**Accreditation** is an external evaluation process based on specific, predetermined, internationally accepted quantitative and qualitative criteria and indicators that have been published in advance and are in line with the Standards and Guidelines for Quality Assurance in the European Higher Education 2015 (ESG 2015).

This guide is addressed to the Higher Education Institutions and provides a detailed description of the accreditation process aiming at offering accurate information in order to carry out the accreditation of their Internal Quality Assurance System and Study Programmes.

## 2 MAIN CHARACTERISTICS OF ACCREDITATION

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### 2.1 PURPOSE OF ACCREDITATION

Accreditation includes: a) internal evaluation carried out by the Institution through its Quality Assurance Unit (QAU/MODIP) and b) external evaluation by a Panel of Independent Experts. The process is primarily centered on the quality and effectiveness of the IQAS/SP, by shifting to some extent the focus away from evaluating “input” to evaluating qualitative outcomes (“output”), and in particular to achieving the objectives of the IQAS/SP.

**Accreditation** aims at ensuring quality in Higher Education and at enhancing the effectiveness and transparency of the overall operation of HEIs. More specifically, accreditation guarantees the quality of study programmes and titles awarded, and that a strategy is developed for the continuous improvement of the services offered by the Institution. The accreditation of a SP makes sure that the academic study programme offered by the HEI meets all the HAHE Quality Standards and that the performance and skills of the students graduating from this specific course (learning outcomes) are consistent with the intended professional qualifications that are demanded from society and the labor market.

### 2.2 PRINCIPLES OF ACCREDITATION

The accreditation process will be based on the following principles:

- Accreditation is an evidence-based process carried out by independent experts;
- The information provided by the Institution is assumed to be factually correct unless evidence points to the contrary;
- Accreditation is a process of verification of information provided in the Accreditation Proposal and other accompanying documentation and the exploration of any matters which are omitted from that documentation;
- The process is transparent, and outputs are published;
- The level of conformity with the Standards required for the Study Programme or the Internal Quality Assurance System is that of “substantial compliance” with most aspects of the Standards, not rigid adherence.

### 2.3 REMIT OF ACCREDITATION

The accreditation process will cover all quality assurance activities of the IQAS/SP under accreditation, regardless of whether they are compulsory or voluntary in nature.

The first accreditation of an IQAS/SP will pay specific attention to the policies, procedures, and quality criteria in place. Full evidence of concrete results in all areas of the IQAS/SP may not be required. However, the Institution must be able to document how they are able to achieve

results according to the Accreditation Proposal by the next accreditation (review) of the IQAS/SP.

The second and subsequent accreditation reviews will require clear evidence of results in all areas of the IQAS/SP. In addition, further reviews will need to acknowledge progress from the previous accreditation. This is a mandatory element in both the IQAS/SP Accreditation Proposal and the Accreditation Report drafted by the Panel of Independent Experts following completion of the review.

In any case it should be noted that all accreditation reviews – whether first, second, or subsequent – must always have a developmental approach and aim at constant improvement of the IQAS/SP.

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***N.B:*** The Panel is expected to review the current status of an IQAS/SP and not planned or foreseen actions and/or developments which may affect the operations of the IQAS/SP in a substantive way.

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## 2.4 THE MAIN STEPS OF THE ACCREDITATION PROCESS

Accreditation is a pre-defined, reliable and useful process. Therefore it should be implemented consistently and published. It includes the following steps:

- Accreditation Proposal of an IQAS/SP to be submitted to HAHE by the Quality Assurance Unit (QAU) of the Institution;
- Review by a Panel of Independent Experts (External Evaluation & Accreditation Panel - EEAP) including a site visit to the Institution;
- An Accreditation Report resulting from the accreditation process drafted by the Panel to be submitted to HAHE;
- Adopting and publishing the HAHE Accreditation Decision;
- Consistent follow-up of the IQAS/SP operation by the Institution's QAU.

This section provides a short overview of these steps, while a more detailed description of each one can be found in later sections of this guide.

The HAHE accreditation process is initiated by a request from an Institution that wishes to be granted accreditation for a Study Programme or its Internal Quality Assurance System. The Institution should contact HAHE in time to initiate the accreditation process (about 3 months prior to the expected date of the site visit). From this moment onwards, the process is assigned to a HAHE staff member who will act as the accreditation process Coordinator. This person serves as the main contact person for the Institution and the EEAP throughout the process and will support all those involved during the different stages of the accreditation process.

During the initial phase, HAHE and the Institution agree on the terms of reference of the accreditation process, including the activities to be subjected to the review as well as the overall timeline.

## **Accreditation Proposal**

The first main stage of the accreditation process is the production of the IQAS/SP Accreditation Proposal by the Institution. In order to be accepted by HAHE, the Proposal shall be drawn up in accordance with the requirements of the relevant Standards and HAHE's guidelines and should cover all indicated elements. Furthermore, in the case of a second or subsequent review, the Institution is also expected to make explicit reference to the recommendations from previous Accreditation Reports, underlining the related developments that have occurred meanwhile.

## **Review**

HAHE will commission the composed Panel of Independent Experts to carry out the accreditation process. The EEAP will review all IQAS/SP areas of activity and provide their view on whether it is acting in substantial compliance with the HAHE Standards. The Panel will make a judgement on the operation of the IQAS/SP by conducting a thorough assessment of the Accreditation Proposal, a study of additional material (such as information available on the Institution's website or submitted to the Panel by the Institution upon request), and a site visit to the Institution. The purpose of the site visit is to verify information provided in the Accreditation Proposal and to gain new knowledge about the IQAS/SP under review. It is also an opportunity for the Institution to engage in a constructive discussion and an exchange regarding the activities and development of the IQAS/SP in the near future.

## **Accreditation Report**

Based on the information collected, through documentation of the IQAS/SP and the site visit, the EEAP draws up the IQAS/SP draft Accreditation Report using the relevant HAHE template and sends it to HAHE. The Panel's judgement on compliance of the IQAS/SP is provided for each criterion separately with the following grading: fully compliant, substantially compliant, partially compliant and non-compliant. Before sending the Report to the Institution for factual corrections, the HAHE Coordinator checks the draft Accreditation Report for completeness, consistency, clarity and language.

After completing the above steps, the EEAP finalises the Accreditation Report, which is then submitted to HAHE. Finally, the HAHE Evaluation & Accreditation Council (EAC) takes the decision on the IQAS/SP accreditation based on the Panel's judgement and the recommendations given in the Accreditation Report which is then notified to the Institution and published on the Internet.

## **Follow-up**

All Institutions are required to submit a follow-up report at the latest two years after the accreditation decision. The purpose of this report is to engage the Institution in a constant process to assess and enhance the quality of its IQAS/SP. The report will address all criteria on which the Panel and/or the EAC have made recommendations and describe the steps it has



taken or is willing to take in order to address them. In addition, any significant changes or developments in the IQAS/SP should be described briefly.

Finally, an optional visit to the Institution is provided for by a group of experts in order to assess the progress that has been made in the IQAS/SP two years after the accreditation decision. The visit is usually carried out, whenever possible, by two members of the original EEAP. The specific objective of the progress visit is to generate a dialogue aimed at further improving the operation of the IQAS/SP.

### 3 TERMS OF REFERENCE FOR THE ACCREDITATION PROCESS

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After the IQAS/SP Accreditation Proposal has been checked, the basic outline of the review process is formed. The Authority drafts the terms of reference and preliminary timetable for the process and sends it to the reviewed Institution. The terms of reference are as follows:

- It is clearly identified that the purpose of accreditation is confirmation on compliance of the IQAS/SP with the HAHE Standards for Quality Accreditation;
- They clearly identify the specific issues of the IQAS/SP to be reviewed during the accreditation process. All activities of the Institution related to the operation of the IQAS/SP that fall under the scope of the Standards, whether they are of obligatory or voluntary nature, should be included in the review (each of the activities needs to be described in detail in the Accreditation Proposal and in the Report drafted by the EEAP);
- They should clearly outline how the accreditation process is going to be carried out: the number of the EEAP members, administrative arrangements, timetable, language issues, etc.;
- They should mention any relevant information on preceding events (e.g. previous IQAS/SP accreditation applications) regarding accreditation.

The terms of reference and timetable form the basic outline of the accreditation process.

## 4 PRODUCTION OF THE ACCREDITATION PROPOSAL

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### 4.1 FORM AND CONTENT OF THE ACCREDITATION PROPOSAL

An essential component of the IQAS/SP accreditation process is the preparation of the Accreditation Proposal. At this stage the Institution evaluates to what extent the IQAS/SP is in compliance with the relevant HAHE Quality Accreditation Standards and gathers the key documentation which supports its claim of compliance. As the Accreditation Proposal normally provides a substantial portion of the evidence which the EEAP draws on in forming its conclusions, it is important that the report provides clear information, sufficient reflections, critique, and analysis and that its contents can be corroborated by relevant evidence. This allows the EEAP to prepare lines of enquiry in advance of the site visit.

The IQAS/SP Accreditation Proposal should normally be 40 - 50 pages in length (excluding annexes). The contents of the Proposal may vary depending on the range of activities of the IQAS/SP and its specific features. However, the Institution must make sure to include a description and assessment of all the activities related to the IQAS/SP accreditation to be evaluated by the Panel, covering for each type of activity each of the principles in the Standards. For each principle the Institution should explain how they interpret and comply with it, including sufficient documentation. It must also provide an analysis on the effectiveness (efficiency) of the Institution's approach.

Where in previous IQAS/SP external evaluation processes areas for development have been identified and recommendations have been expressed, these are expected to be taken into consideration by the Institution and any progress made in these areas should be mentioned in the Accreditation Proposal.

The Institution may enclose as annexes to the Accreditation Proposal the most crucial documentation (no more than ten annexes) it thinks may help the Panel in its analysis of the Accreditation Proposal. Further documents may be requested by the Panel before and/or during the site visit.

The IQAS/SP Accreditation Proposal, annexes, and additional documents should be in Greek and made readily available to the Panel. Finally, a short summary of the Proposal in English may be requested.

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***N.B.:*** The Accreditation Proposal should be self-standing and self-explanatory. The main purpose of the annexes is to provide further background to the issues described in the Proposal. So these should not be necessary for the understanding of the Proposal.

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## 4.2 SCRUTINY OF THE ACCREDITATION PROPOSAL

HAHE checks the IQAS/SP Accreditation Proposal prior to sending it to the EEAP to ensure that it conforms to the HAHE guidelines and includes all the necessary elements. The scrutiny of the Proposal is of a technical nature, refers to its formal parts and will not include any assessment on the compliance of the IQAS/SP with the HAHE Standards. Should the Proposal be lacking information, HAHE will notify the Institution that will be given two weeks to submit a revised Accreditation Proposal.

In addition, HAHE may ask, on behalf of the EEAP, that the Institution revise the Accreditation Proposal, should the Panel consider that it is not complete and that it is lacking crucial information. The Institution, after completing the IQAS/SP Accreditation Proposal, submits it again to HAHE which then sends it to the Panel.

## 5 APPOINTMENT OF THE EEAP

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### 5.1 NOMINATION OF EXPERTS

The members of the EEAP are drawn from the HAHE Register of experts. The experts are Greek and/or foreign scientists of an established reputation, professors in universities of similar status abroad, researchers or experts preferably experienced in matters concerning the evaluation, accreditation and quality assurance in Higher Education.

The HAHE Register includes 6,000 experts and is constantly revised with new inclusions, following an open call for expression of interest published by HAHE. It is further expanded based on recommendations made by HEIs and affiliated organizations to include more experts.

### 5.2 TRAINING OF EXPERTS

HAHE organizes short training sessions aimed at experts interested in becoming members of an EEAP. Based on the feedback and the lessons learned from the evaluation of HEIs, the training sessions provide experts with the necessary knowledge and guidance on the HAHE Quality Accreditation Standards, the ENQA Standards and Guidelines (ESG) and the accreditation process. In addition, the experts are briefed during the training sessions on the expectations of HAHE on the Accreditation Report and the comments submitted by the Panel following completion of the review.

Only experts who have attended the short training session organized by HAHE may be appointed to an EEAP. However, attendance of a training does not automatically guarantee an invitation to join a Panel, as this is done on the basis of the needs of each accreditation process (expert profile, nationality, language competences, gender, expertise etc.).

### 5.3 APPOINTMENT OF EXPERTS

The selection and appointment of experts for an EEAP is carried out by HAHE to avoid conflicts of interest and to preserve the integrity of the process.

When appointing experts to an EEAP, the key requirement is that the members of the Panel should have a sufficient level of knowledge, experience, and expertise to conduct the review to a high standard and be totally independent of the HEI or SP under review. Experts are required to notify HAHE in writing of any connection with the HEI/SP which could result in a potential conflict of interest. Furthermore, experts are required to notify the HAHE Coordinator as soon as possible of any changes which occur during the process.

The EEAP consists of three (3) to five (5) members according to the provisions of article 11 of Law 4653/2020. In case of study programmes under accreditation leading to the exercise of

legislatively regulated professions, one member of the Panel comes from the relevant professional association or chamber.

In addition, when appointing a Panel, the following selection criteria are applied:

- All Panel members must have been trained by HAHE;
- At least two Panel members come from foreign countries;
- The Panel Chair must come from a foreign country, have previous experience taking part in a HAHE External Evaluation Committee/EEAP and have fluent knowledge of English which is the main working language, and/or of Greek;
- At least one member of the Panel has good knowledge and understanding of Higher Education in Greece;
- At least two members of the Panel must have fluent knowledge of English;
- Gender balance is taken into consideration to the greatest extent possible;
- Current members of the HAHE Supreme Council and the EAC are not eligible to become members of the EEAP.

The QAU of the reviewed Institution must notify HAHE in writing of any potential conflict of interest of one or more members of the Panel with the HEI/SP under review. The QAU is also given the opportunity to comment on the selected members of the EEAP.

The EEAP must be approved by the EAC. To grant its approval the EAC should take into consideration the CVs of all Panel members, and that all selection criteria are met.

After the EEAP has been established, the HAHE Coordinator notifies the experts of its composition and facilitates contact between the members and the Panel Chair and with the contact person who has been appointed by the QAU of the relevant HEI for the accreditation process of the IQAS/SP.

## 6 THE SITE VISIT

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### 6.1 OBJECTIVES

The site visit of the EEAP has a number of key objectives. In particular, it allows the Panel to:

- share with the Institution the impressions gained from the IQAS/SP Accreditation Proposal and on-the-spot findings;
- explore the IQAS/SP compliance with the HAHE Standards during meetings and interviews with the Institution's representatives;
- explore the IQAS/SP compliance with the Standards through additional documentation;
- engage in a dialogue with the Institution on its operations and IQAS/SP compliance with the Standards;
- formulate the Panel's preliminary findings regarding compliance with the Standards;
- produce a first draft of the Accreditation Report as a solid basis for further development and completion of the Report after the site visit.

To reach these objectives, it is essential that the visit is well prepared and that the process is carried out efficiently and effectively. It is also imperative that the Panel conduct their interviews and meetings in a room that ensures privacy. It is furthermore the responsibility of the Institution to ensure that the Panel may enjoy its breaks, including all meals, privately.

The length of the visit should be determined at the beginning of the accreditation process. In most cases, a visit duration of two or three days is necessary to validate the information contained in the Accreditation Proposal, as well as to clarify any points at issue.

In some cases, and with the consent of both the Institution under review and the Chair of the EEAP, an external observer may attend the site visit (the conditions regarding the participation of observers are specified in the relevant HAHE Decision).

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***N.B.:*** *The EEAP should receive the IQAS/SP Accreditation Proposal as soon as possible after their appointment. It is important to leave at least six weeks available to the Panel between the date of receipt of the Proposal and the date of the site visit.*

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## 6.2 BEFORE THE SITE VISIT

### 6.2.1 PREPARATION AND REVIEW OF AVAILABLE INFORMATION

Well ahead of the site visit, the Institution under review has submitted the Accreditation Proposal and related annexes to HAHE for distribution to the EEAP according to the aforementioned procedure.

The Panel should carefully study all material available before the site visit and use it to determine the main lines of enquiry for the site visit and to draft an outline of the Accreditation Report. The Institution should facilitate the Panel's access to such material so that the review is carried out in an accurate and effective manner.

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***N.B.:** It is recommended that the Panel Chair, with input from the other Panel members, request additional documentation where deemed necessary in advance of the visit. Eventual additional documents, for which the need arises in the meeting or which may not be available electronically, may be requested and should be provided to the Panel before the review.*

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### 6.2.2 PANEL'S PREPARATORY TELECONFERENCE BRIEFING

A preparatory telephone or teleconference briefing will be organized by the HAHE Coordinator with the Panel Chair and the members of the EEAP to discuss the entire IQAS/SP accreditation process. More specifically, the issues of this briefing will be as follows:

- purpose of the review;
- roles and responsibilities of Panel members;
- information on the current legal framework of the Greek HEIs;
- use and understanding of the IQAS/SP Quality Accreditation Standards;
- link between evidence and information, analysis, and conclusions in the IQAS/SP Accreditation Proposal;
- timeline and management of the site visit;
- drawing up the draft Accreditation Report;
- submission of the final Accreditation Report and decision-making process regarding accreditation.

The above briefing is compulsory and is chaired by a HAHE member. It usually takes place two or three weeks before the site visit and lasts about 60-90 minutes. It also presents an important opportunity for the Panel members to be introduced to each other prior to the site visit.

In addition to the preparatory telephone briefing, the members of the EEAP are expected to be in regular contact both among them and with the HAHE Coordinator as the need arises.

### 6.2.3 PREPARATION OF MATERIAL AND SETTING THE PROGRAMME OF THE SITE VISIT

For the purpose of organizing the site visit and of developing well-structured lines of enquiry during the meetings with the Institution's representatives, it is strongly advised that the Panel members draft an IQAS/SP mapping grid, based on the HAHE template. The site visit



programme will be prepared by HAHE, in cooperation with the Panel Chair and the Institution's QAU.

It is also advised that the Panel draft an outline version of the Panel's Accreditation Report prior to the site visit. This will save time during the review and will make it easier for the Panel to identify areas that will require further examination or clarification and to ensure that no gaps remain after completion of the review.

#### 6.2.4 NOMINATION OF AN INSTITUTION REPRESENTATIVE

In order to ensure that the Panel reaches a sufficient understanding of the specific national legal context in which the IQAS/SP under review operates, the Panel may request to meet an Institution "representative" during the site visit. This person who is appointed by the reviewed Institution for the purposes of accreditation would typically be a senior member of staff with sufficient knowledge on the history and present situation of the IQAS/SP in question (and would likely not be the person in charge of the organisation of the accreditation process at the Institution). The Panel may request to hold a pre-visit meeting with the Institution representative to clarify certain elements, so that time during the meetings may be used in full for verification of the IQAS/SP compliance with the Standards. The Institution representative may also be invited to provide further clarification to the Panel in between two meetings or at the end of the first and/or second day of the site visit.

### 6.3 DURING THE SITE VISIT

#### 6.3.1 EEAP KICK-OFF MEETING

The whole EEAP meets on the day before the site visit to discuss the schedule of the visit. More specifically, the Panel members discuss the schedule of the site visit (meetings/interviews, private panel meetings and time to study documentation), the specific roles of each member during the site visit, their impressions gained from the pre-visit information, and any highlighted lines of enquiry on which the Panel wishes to focus during the visit. Although the Panel needs to address all the criteria contained within the HAHE Standards, by developing "lines of enquiry" the Panel is able to target its efforts where there is greatest concern about the level of compliance of the IQAS/SP with some of the accreditation criteria, or where information provided in the IQAS/SP material available provides less comprehensive evidence. In addition, where necessary, the Panel might also identify any additional documentation to which it would like to have access during the site visit. However, it may be evident from the information available before the site visit that the SP clearly fulfils some of the criteria, and these areas may warrant only a briefer exploration and verification during the site visit.

During the kick-off meeting, the Panel decides on the agenda for the first meetings or interviews as well as on procedural issues, e.g. who will ask the questions and in what order.

The kick-off meeting is also an opportunity for the HAHE Coordinator to remind the Panel about the requirements of the accreditation process and to highlight some elements that may require specific attention during the site visit. Likewise, the Panel is encouraged to clarify any remaining questions with the HAHE Coordinator at this point.

### 6.3.2 MEETING WITH INSTITUTION REPRESENTATIVES

During the site visit, the EEAP will meet Institution representatives. An indicative list of representatives that the Panel is strongly advised to meet includes:

- the Rector;
- the QAU President and any QAU members who have contributed to writing the IQAS/SP Accreditation Proposal;
- the President of the Department/academic unit and representatives of the Internal Evaluation Group (OMEA) (for SP accreditation);
- representatives of teaching and research staff (DEP/EP);
- representatives of special teaching staff (EEDIP/EEP) etc.;
- student representatives;
- alumni;
- administrative staff representatives;
- social partners from the public and private sector and from social bodies and associations involved in the HEI/SP

In order to ensure that fruitful and constructive discussions take place during the meetings, the following should also be taken into consideration:

- A room must be available for the EEAP to hold all its sessions with Institution representatives as well as its private meetings.
- The number of participants should not be more than eight (8) persons per session, except for students who sometimes prefer larger groups. In this case participants cannot be more than ten (10) people.
- The duration of each session cannot exceed forty five (45) minutes (unless decided otherwise by the Panel).
- The EEAP must hold private meetings with the various groups. For example, during the Panel's meeting with the students only students can participate without DEP/EP or administrative staff members being present. Meetings must be handled with confidentiality by the Panel. In addition, the Panel should refrain from citing separately each person's statements in detail in the Accreditation Report to be drafted during and after the site visit.
- All meetings are interactive. The Panel must have prepared a list of enquiries in advance in order to engage in a constructive dialogue with the participants. It is deemed appropriate therefore that both the enquiries and the meetings be based on HAHE guidelines.
- Institution representatives should be well prepared in the subject matters under review. Participants should avoid any formal presentations so that there is adequate time for discussion between the representatives and the Panel.
- It is imperative that additional time be provided for the Panel's private meetings. The Panel members should have 15 minutes in between two sessions for discussion regarding the last meeting and to prepare for the next one. These short breaks can also be used as an opportunity to catch up in case some sessions last longer than expected.

At the beginning of each meeting, the Panel Chair should:

- Introduce the Panel members to the Institution representatives and ask for introductions from those present;
- Outline the areas to be covered during the meeting and in what order;
- Declare the meeting closed.

After each meeting, the Panel discusses the evidence and information provided, what still needs to be investigated and notes the main conclusions of the meeting for future reference. The Panel should have around 10-15 minutes in between scheduled meetings for private conversation. Typically, the Panel would hold an additional meeting at the end of the day to map areas still to be covered and adjust, if needed, the interview questions for the following day.

It is helpful for the Panel to reserve the last interview slot for the leadership of the Institution to clarify any remaining issues after the other interviews or to give answers to questions that have arisen during the interviews.

Distance interviews might be conducted when the direct participation of some representatives is not possible. However, this is an option for limited cases, not for the majority of interviews to be held. If any distance interviews are needed, the Institution should inform the HAHE Coordinator before the site visit schedule is finalised. Those interviews should be clearly indicated in the schedule. The Institution must make sure that a room is available which is appropriately equipped for distance interviews.

Finally, the EEAP must visit the Institution's facilities: teaching rooms, laboratories, secretariat, libraries, sporting facilities, student services etc. If the Institution has many facilities scattered around outside the campus it should be considered whether such a visit is deemed necessary. Any unnecessary visits should be avoided in order to reduce as much as possible the time needed for the Panel to move around and provide sufficient time for an exchange of views.

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***N.B.:*** During the meetings the Panel may request from the Institution representatives eventual additional documents which may not be available electronically.

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### 6.3.3 FINAL PANEL MEETING

Just before the end of the site visit, the Panel meets to draw together its conclusions based on the information presented. At this point it is useful to take time to work through each aspect of the Accreditation Standards and confirm the Panel's key findings and any areas of concern.

### 6.3.4 FINAL MEETING WITH THE INSTITUTION

The site visit concludes with a final de-briefing meeting involving the EEAP members and the Institution representatives. The Panel Chair can outline the Panel's overall impressions but not its final decision. The Panel Chair can also explain the next steps in the accreditation process.

## 6.4 AFTER THE SITE VISIT

After the site visit the Institution may not submit new information to the Panel on the study programme or the internal quality assurance system. All relevant information should be provided to the Panel either before or during the site visit. In addition, once the Institution receives the HAHE's draft Accreditation Report it can only make factual comments. It is imperative that the Institution refrain from contacting the Panel members on matters related to the content of the Report prior to its completion.

### 6.4.1 PROCESS ASSESSMENT

After completion of the review, HAHE sends to the Panel members and the Institution representatives an evaluation questionnaire on the process in order to gather useful feedback.

### 6.4.2 PRODUCTION AND PUBLICATION OF THE ACCREDITATION REPORT

The main outcome of the process is the Accreditation Report by the experts group. The drafting of the Report is based on the IQAS/SP Accreditation Proposal, the site visit and the EEAP's findings. The purpose of the Report is to:

- Provide the EAC with sufficient and clear information on the Standards compliance of the IQAS/SP under review and to enable the EAC thus to reach a sound conclusion regarding accreditation of the Institution's Internal Quality Assurance System or Study Programme;
- Be perceived by the Institution as a reliable/fair and relevant document for the consolidation and further development of the IQAS/SP;
- Serve as a source of reliable and transparent information of the IQAS/SP for other bodies and other interested stakeholders.

#### 6.4.2.1 *Writing up findings*

When writing up findings, it is important that these are written in a way that reveals both the evidence for and the reasoning/analysis behind the Panel's conclusions to enable the HAHE EAC to make an assessment on the compliance of the IQAS/SP under review with accreditation criteria and reach a sound conclusion. Under each criterion the Panel should carefully describe the relevant evidence which led them to this specific conclusion and provide an assessment of compliance of the study programme with this criterion. The Accreditation Report must be written in English and particular care should be taken to use correct terminology for compliance with accreditation criteria.

Furthermore, when drafting the Accreditation Report, the following should be kept in mind:

- All criteria need to be fully covered.
- Each criterion should be discussed separately.
- Under each criterion, the Report should include:
  - a. **Evidence:** short description of the evidence gathered – making reference to meetings or IQAS/SP documentation explored.
  - b. **Analysis:** a consideration of how far, based on the evidence available, the IQAS/SP does (or does not) meet the accreditation criterion in question and eventual reasons for lack of compliance.

- c. **Conclusion:** explanation of how compliant the IQAS/SP is in the opinion of the Panel with each criterion:
  - (i) Fully compliant: The IQAS/SP is entirely in accordance with the accreditation criterion which is implemented in an effective manner.
  - (ii) Substantially compliant: The IQAS/SP is to a large extent in accordance with the accreditation criterion, the principle/spirit of which is followed in practice.
  - (iii) Partially compliant: Some aspects or parts of the criterion are met while others are not. The interpretation of the criterion is correct, but the manner of implementation is not effective enough.
  - (iv) Non-compliant: The IQAS/SP fails to comply with this criterion.
- d. **Recommendations and commendations** (if any).

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**N.B. 1:** *The direct link between evidence, analysis, and conclusions should be evident in the Accreditation Report and provide the EAC members, who make the final decision on accreditation, with clear information on how the Panel reached its conclusion on IQAS/SP compliance with the accreditation standards and criteria. Any recommendations should follow from the judgement on compliance. In other words, the judgement must clearly follow from the evidence and analysis provided, and statements such as “the Panel is convinced that the IQAS/SP is fully compliant” or “it was clear from the interviews that the IQAS/SP fully complies” are not sufficient, if not supported by evidence and analysis.*

**N.B. 2:** *The Panel is asked to choose between the following terms: fully/substantially/ partially or non-compliant and should avoid any other wording.*

**N.B. 3:** *The role of commendations, in addition to recommendations, is important to highlight and promote good practice and excellence in quality assurance, and the Panel is thus asked not only to highlight areas that require further development but also areas in which the IQAS/SP has excelled.*

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#### **6.4.2.2 Panel judgement on compliance**

The Panel is expected to comment on the overall compliance of the IQAS/SP with the Standards but not to take the final decision. This is the duty and responsibility of the EAC. Full or substantial Standards compliance of the IQAS/SP is necessary in order to decide in favor of accreditation. Where the IQAS/SP is found to be either partially compliant or non-compliant with the Standards, the reasons that led the Panel to this conclusion should be explained.

#### **6.4.2.3 Drafting the Accreditation Report**

For the sake of both completeness and accuracy, it is important that the Accreditation Report is drafted throughout the process rather than solely after the site visit. Several of the sections may be written in an outline form before the site visit takes place, based on the IQAS/SP material and other information available to the EEAP during the review. It is further advised to add notes to the draft Report during the course of the site visit, building on the outcomes of the meetings and further scrutiny of documentary evidence. The Panel decides whether each member will contribute to the drafting of the Report. In any case, all Panel members should carefully read and comment on the draft Accreditation Report.

After the Panel members reach an agreement on the final version of the draft Report, this is finalised and submitted to HAHE. The HAHE Coordinator checks that the draft Report is in line with the HAHE relevant Standards and sends it to the Institution without the Panel's final judgement. The Institution is given two weeks to read the Report and to comment on factual accuracy and any possible grave misunderstandings. At this stage the Institution's QAU should not submit any additional material or documentation. The HAHE Coordinator, after receiving the Institution's comments on the draft Report, will send it to the Panel. Subsequently, the Panel reviews the Institution's comments, drafts the final Report and sends it to HAHE. The Accreditation Report should normally be around 25 pages in length.

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***N.B.:*** *The Accreditation Report is not final and may not be used by the Institution until HAHE has completed the process.*

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### 6.4.3 DECISION-MAKING PROCESS

It is the EAC responsibility to assess the Accreditation Report and to decide on whether the IQAS/SP may be granted accreditation. The EAC uses the Report to reach a conclusion on the degree of Standards compliance of the IQAS/SP under review and whether the necessary conditions are met for the IQAS/SP to be granted accreditation. In order to facilitate its decision making, the EAC relies on the recommendations of the competent HAHE Review Committee for the initial scrutiny of the Accreditation Report. In particular, the main steps of the process are the following:

1. The Accreditation Report is distributed by the HAHE Coordinator to the competent HAHE Review Committee.
2. Each member of the Review Committee reads the report and produces a recommendation to the EAC in the format of a scrutiny form.
3. The EAC makes a decision on the basis of the Accreditation Report and the scrutiny by the members of the HAHE Review Committee. The EAC is not, however, obliged to follow the recommendations of the EEAP nor of the Review Committee. The EAC takes its final decision in light of the gathered evidence.
4. Should the EAC deviate from the recommendations of the EEAP and/or the recommendation of the Review Committee, the reasons shall be specified in the EAC letter to the Institution, which will be published on the HAHE website together with the Accreditation Report.

The possible outcomes of the EAC decision on whether a study programme or an internal quality assurance system is in substantial compliance with the Accreditation Standards– and thus can be granted accreditation – are the following:

1. The IQAS/SP is considered to be in full/substantial/partial compliance with the Standards and is granted accreditation for four (4) years.
2. The IQAS/SP is considered as not sufficiently in compliance with the Standards.

The minimum period before a second accreditation process of the IQAS/SP after an unsuccessful one is two years. The EAC will conclude with a negative decision on accreditation of a study programme or an internal quality assurance system when it considers that there is non-compliance at any Accreditation Standards principle. Other than that, the decision is based on a holistic assessment and is not the result of a mathematical equation.

#### 6.4.4 ADDITIONAL INFORMATION

If the contents of the Accreditation Report, or the way in which the entire process was conducted, do not, in the EAC opinion, allow it to come to a conclusion, the EAC may decide what additional information is required. This may comprise further documentary evidence, additional information from the EEAP or the Institution itself, or information to be acquired during an additional visit to the Institution (lasting normally one day), carried out by the EEAP Chair and one Panel member, to complete the assessment on compliance.

The procedures followed by HAHE in respect to accreditation for HEI study programmes or internal quality assurance systems, and the rules relating to appeals against a decision of HAHE, are decided by the EAC and contained in the HAHE Statutes.

After completion of an accreditation process, the final Report, together with the EAC decision and the related recommendations, is published on the websites of HAHE and the reviewed Institution.

### 6.5 FOLLOW-UP

In order to provide the best possible support for the development and improvement of the operations of the IQAS/SP, a Follow-up Report to be drafted by the Institution is obligatory. Whenever possible this may be complemented by a small-scale progress visit to the Institution conducted by two members of the original EEAP. This visit which will be used to discuss issues regarding the IQAS/SP Accreditation Standards is considered of particular importance as it may be viewed as a challenge leading to the improvement of the Institution or academic unit offering the SP under review. As such a conversation is carried out separately from the discussion on compliance of the IQAS/SP with Accreditation Standards, the benefits are expected to be greater for the IQAS/SP.

#### 6.5.1 FOLLOW-UP REPORT

The reviewed Institution is requested to submit a Follow-up Report usually within two years of the HAHE's positive decision on accreditation. This may be reduced to one year in cases where urgent action is considered necessary. The purpose of this follow-up is to engage the Institution in a continuous reflection on improving the quality of the IQAS/SP. The Follow-up Report is expected to address the recommendations from HAHE following the accreditation process. In addition, through the Follow-up Report the Institution may also highlight other developments or changes in the Institution's activities and processes that may be relevant in view of its compliance with accreditation standards. The Follow-up Report is sent to HAHE and will be published on the HAHE website as additional material to the IQAS/SP Accreditation Report as soon as it has been considered by the EAC.

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***N.B.:*** *The Follow-up Report should be self-standing and self-explanatory without further documents annexed.*

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#### 6.5.2 PROGRESS VISIT

The IQAS/SP accreditation includes a voluntary progress visit to the Institution by two members of the EEAP of the IQAS/SP under review (when possible). The progress visit will not have the objective of checking the compliance of the IQAS/SP with the Accreditation Standards, but rather to generate a stronger enhancement-oriented dialogue that might be difficult to truly integrate in the ordinary site visit. The Institution may suggest specific areas of interest to be discussed with the Panel members and may focus on areas in which the IQAS/SP is struggling to meet the requirements of the Standards. The two experts who attend the progress visit must not participate in the Panel during the following accreditation process of the IQAS/SP to avoid possible conflicts of interest.

The additional voluntary site visit will take place two years after completion of the accreditation process and will last one day. The Institution may request HAHE to have a voluntary visit performed at least ten months before its approximate timing. Although it is not a mandatory part of the accreditation process, most Institutions are likely to benefit greatly from a progress visit.



## 7 EEAP MEMBERS' ROLES AND RESPONSIBILITIES

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The EEAP is composed of three (3) to five (5) members, of which one is assigned the specific duties of the Panel Chair.

Each member of the Panel is expected to actively contribute to the work of the team. Therefore, experts are advised to carefully consider their workload before accepting the assignment. Failure to actively contribute to the Panel and its duties is deemed a breach of the Code of Conduct. The EAC will assess the need for intervention on a case-by-case basis and will take the feedback of the Panel Chair into account.

### 7.1 EEAP CHAIR

The EEAP Chair has overall responsibility for the assessment of the IQAS/SP and the production and submission of a comprehensive Accreditation Report. The Chair must also ensure that the terms of reference of the review are respected. More specifically, the EEAP Chair shall:

#### Before the site visit

- Liaise with HAHE to establish the timetable of activities for the site visit;
- Review the documentation, including the IQAS/SP Accreditation Proposal, and any other information available prior to the site visit, to ensure it is complete and adequate for the needs of the Panel;
- Request additional documentation from the Institution, in agreement with the other Panel members, prior to the site visit where necessary;
- Agree on the lines of enquiry to be pursued during the site visit with contributions from the rest of the Panel;
- Work with the Panel members to produce an outline Accreditation Report.

#### During the site visit

- Chair all meetings and discussions;
- Ensure that all lines of enquiry identified are satisfactorily covered;
- Ensure that all Panel members participate in the visit actively and in a balanced way, following the agreed sharing of tasks;
- Ensure that the HAHE guidelines are respected throughout the accreditation process.

After the site visit

- Ensures that the draft Accreditation Report is produced in cooperation with the Panel members;
- Review any changes or additions suggested by HAHE in view of respecting the requirements of the guidelines;
- Review any changes suggested by the Institution after it has commented on the draft Accreditation Report;
- Submit the final report to the EEAP and HAHE;

At all times

- Identify and remedy any possible misunderstandings of concepts within the EEAP;
- Inform the HAHE Coordinator about any eventual breach of the procedure by the Institution or any of the Panel members and alert without delay the Coordinator to any concerns regarding the integrity of the accreditation process.

## 7.2 EEAP MEMBERS

It is the responsibility of all members of the EEAP to:

Before the site visit

- Review the documentation, including the IQAS/SP Accreditation Proposal and any other information available prior to the site visit;
- Indicate to the Panel Chair if any essential documentation should be requested from the Institution in addition to that which was provided with the Accreditation Proposal;
- Respond swiftly to emails from the HAHE Coordinator or the Panel Chair regarding the process in question;
- Make appropriate travel arrangements, ensuring that the most economic and feasible option is used and inform the Panel Coordinator of the planned arrival and departure dates and times;
- Contribute to developing the lines of enquiry to be pursued during the site visit.

During the site visit

- Actively participate in all meetings and discussions and contribute to pursuing the lines of enquiry as agreed in the Panel kick-off meeting;
- Take occasional notes during the meetings in order to be able to constructively contribute to the Panel's judgement on the compliance of the IQAS/SP against accreditation standards.

After the site visit

- Contribute to the drafting of the Report as agreed by the Panel in accordance with HAHE guidelines;
- Carefully read and comment on the initial draft Report and give any comments or amendments within the set deadline;
- Contribute to the amendment of the Accreditation Report if requested by HAHE.

### 7.3 ACCREDITATION PROCESS COORDINATOR

HAHE assigns a trained and experienced staff member as a Coordinator of the accreditation process. The main tasks of the Coordinator are to:

- Draft the necessary correspondence between HAHE and the Institution according to the relevant template;
- Prepare the EEAP's composition, relevant CVs and all information necessary for the EAC to take its decision;
- Draft the non-conflict-of-interest declarations of the Panel members following the EAC decision on the Panel's composition and to gather the documents duly signed by the Panel members;
- Serve as a liaison between the EEAP and the reviewed Institution;
- Support the Panel in the practical arrangements for the hotels and meals of the Panel during the site visit and liaise on these with the contact person at the QAU under review;
- Discuss with the Institution the process and its practical arrangements to ensure the IQAS/SP complies with the HAHE Accreditation Standards;
- Monitor the entire accreditation process to assure HAHE that its expectations are met;
- Check the completeness of the draft Accreditation Report according to the HAHE's template for the Accreditation Report;
- Receive the final Accreditation Report;
- Forward the final Accreditation Report to the EAC;
- Make sure that the EEAP members receive reimbursement of their expenses by the competent HAHE Finance Department;
- Receive and analyse feedback on the accreditation process;
- Inform the EEAP and the reviewed Institution on the EAC decision;
- Forward the final IQAS/SP Accreditation Report to the Institution and ensure that it is published on the HAHE website.

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***N.B.:*** *The HAHE Coordinator is not a member of the EEAP. He/she will thus not participate actively in the interviews during the site visit and will not contribute to the actual drafting of the Report by the EEAP.*

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## 8 FINANCIAL ISSUES

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HAHE fully covers the costs of the accreditation process. These include travel and accommodation expenses, and a daily allowance (flat rate per diem) for each member of the EEAP.

The financial terms and conditions are stated in detail in the contract signed between HAHE and each member of the EEAP. Detailed information and clarifications on expenses reimbursed to EEAP members can be found in the relevant HAHE document.

## 9 APPEALS PROCEDURE

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According to the appeals procedure provided for, the Institution may question the formal outcomes of the IQAS/SP accreditation process, where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the procedures have not been consistently implemented.

If the Institution wishes to appeal the decision of the EAC or the judgement by the EEAP that it is not compliant with the HAHE Standards, the HAHE Appeals and Complaints Committee will hear the appeal.

*HAHE reserves the right to modify the present Guide at its discretion.*