

# Use and Interpretation of the ESG

for the European Register of Quality Assurance Agencies

Register Committee

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## 1. Introduction

The European Quality Assurance Register for Higher Education (EQAR) manages a register of quality assurance agencies that have demonstrated their substantial compliance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (European Standards and Guidelines, ESG<sup>1</sup>).

The Register Committee<sup>2</sup> is EQAR's independent decision-making body that decides on inclusion of quality assurance agencies on the Register.

The ESG provide the criteria at European level against which the quality assurance agencies (QAAs) and their activities are assessed. This ensures that QAAs adhere to the same set of principles and the processes and procedures are modelled to fit the purposes and requirements of their context.

## 2. Aims and Target Groups

The present policy on the Use and interpretation of the ESG aims to:

- increase the transparency of the Register Committee's interpretation of the ESG;
- ensure clarity as to which activities are within the scope of the ESG and, thus, covered by registration on EQAR;
- ensure consistency in the Register Committee's decisions;
- facilitate the understanding of the Register Committee's decisions<sup>3</sup>;
- inform quality assurance agencies, external review coordinators and external review panels *ex ante* of the Register Committee's interpretation of the ESG.

In the interest of efficient use of resources and avoiding duplication for agencies, EQAR has adopted a system that allows agencies to use one single external review process and report to support their registration on EQAR as well as for other purposes, such as membership in ENQA, fulfilling national requirements or demonstrating adherence to other standards.

Since these reviews are not organised by EQAR itself, EQAR established a set of formal requirements for external reviews and published the present policy on the Use and Interpretation of the ESG. In order to ensure that external reviews of quality assurance agencies are a sufficient and robust basis for the Register Committee's decisions it is vital that coordinators are aware of this document and ensure that the panels undertaking a review take it into account.

While key parts of the introduction to the ESG as well as the standards of Parts 2 and 3 are quoted in this document, it should always be read in conjunction with the [full text of the ESG](#).

### 3. Key Concepts and Definitions

The Register Committee uses the following key concepts and definitions, which are based on those defined by the ESG:

- The **standards** are requirements that have to be adhered to, based on agreed and accepted practice for quality assurance in higher education.
- The **guidelines** provide explanation in relation to the importance and possible implementation of the standard. The Committee takes into account the guidelines when interpreting the standards.
- The term “**programme**” refers to higher education provision in its broadest sense, including provision that is not part of a programme leading to a formal degree.
- Unless otherwise specified, “**stakeholders**” are understood to cover all actors within an institution, including students and staff, as well as external stakeholders such as employers and external partners of an institution.
- The term “**institution**” refers to higher education institutions. Depending on the institution’s approach to quality assurance it can, however, refer to the institution as whole or to any actor(s) within the institution.
- The terms “**quality assurance activity**” and “**type of review**” refer to distinct types of external quality assurance deployed by an agency, each based on a separate set of processes and criteria. For instance, “programme accreditation” might be one activity and “institutional evaluation” another one. The activities may range from purely enhancement-driven ones to formal assessment and decisions.

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### 4. Scope and Applicability of the ESG

**The focus of the ESG is on quality assurance related to learning and teaching in higher education, including the learning environment and relevant links to research and innovation. [...]**

The ESG apply to all higher education offered in the EHEA regardless of the mode of study or place of delivery. Thus, the ESG are also applicable to all higher education including transnational and cross-border provision. [...]

At the heart of quality assurance activities are the twin purposes of accountability and enhancement. Taken together, these create trust in the higher education institution’s performance.<sup>4</sup>

**The Register Committee takes into account all external quality assurance activities that are within the scope of the ESG, carried out within and outside the EHEA, irrespective of whether they fulfil a statutory mandate or are initiated by higher education institutions on a voluntary basis. Where agencies have subsidiaries that are not effectively distinguishable from the agency itself, the activities, or parts of activities, carried out by those subsidiaries are expected to be in substantial compliance with the ESG as well (see Annex 5 for details).**

Activities within the scope of the ESG are characterised by the following:

- (a) Nature: the activity follows a predefined process and involves evaluating or assessing an entity against a set of predefined standards or another reference point set beforehand, with limited or no flexibility.<sup>5</sup>
- (b) Subject: the activity is substantially concerned with teaching and learning in higher education, including the learning environment and relevant links to research and innovation.
- (c) Typical terminology: the terms “evaluation”, “review”, “audit”, “assessment” or “accreditation” (see ESG 3.1) are used.
- (d) Object: the activity concerns (an) organisational unit(s) such as (an) individual higher education institution(s), (a) study programme(s), (a) faculty(ies) or (a) department(s).<sup>6</sup>

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In order to be registered on EQAR, all external quality assurance within the scope of the ESG needs to be conducted in compliance with the ESG. The report on the external review of an agency must thus contain a thorough analysis of all such activities.

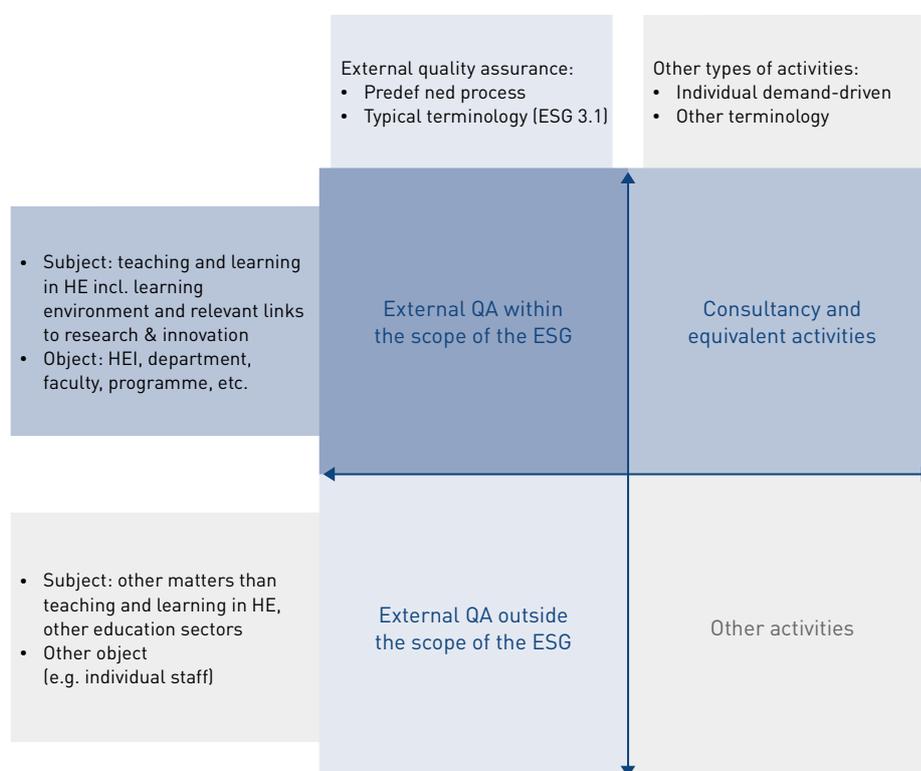


Figure 1: Typology of agencies' activities

Many quality assurance agencies also carry out a range of activities outside the scope of the ESG (see Figure 1 for an overview). These may include:

- activities that are external quality assurance in nature (i.e. characterised by elements a and c above), but that do not relate to teaching and learning in higher education, or that do not concern individual higher education institutions or programmes;

- activities that relate to teaching and learning, but that are not external quality assurance in nature (e.g. projects, consultancy services); and
- activities that are neither external quality assurance in nature, nor relate to teaching and learning in higher education.

These activities are not as such considered by the Register Committee. EQAR's sole interest is to ensure a clear and transparent separation between activities within and outside the scope of the ESG.

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## 5. Evidence Base for Decisions

The primary basis of the Register Committee's decision is the external review report, which contains evidence that has been reviewed and analysed by an independent expert panel. As a rule, the Register Committee bases its decision on the factors prevailing when the external review was undertaken.

The Register Committee may seek additional clarification from the applicant agency, the review panel or the review coordinator. However, since additional information provided by the applicant agency has not been reviewed by an independent panel, it is taken into account only as far as appropriate.

## 6. Making Judgements on ESG Compliance

The criterion for inclusion on the Register is *substantial compliance* with the ESG. The Register Committee makes a holistic judgement on the agency's compliance with the ESG as a whole, based on the external review panel's findings, analyses of and conclusions on the agency's compliance with the relevant standards (ESG 2.1 – 2.7 and 3.1 – 3.7, see Figure 2).

In the assessment of each standard the Register Committee distinguishes between *compliance* (which may be *full* or *substantial*), *partial compliance* and *no compliance*. Should the Register Committee not consider the panel's conclusion with regard to compliance with a specific standard persuasive, this is explained in the Committee's decision<sup>3</sup>. If a specific standard is not addressed in the decision it is implied that the Committee largely concurred with the review panel's analysis and conclusion without further comments.



Figure 2: Steps to the Register Committee's overall judgement

If the agency is in (full or substantial) *compliance* with all standards it is in substantial compliance with the ESG as a whole.

If there are one or several standards with which the agency complies only partially this is considered in the holistic judgement, which might be positive or negative depending on the amount and significance of the areas where only partial compliance has been achieved. However, there are no numerical rules for arriving at a judgement.

As a rule, a conclusion of *no compliance* for any one standard prevents an overall judgement of *substantial compliance*.

The overall judgement does not distinguish between *substantial compliance* and *full compliance*, since for inclusion on the Register it is sufficient to substantially comply with the ESG. Likewise, if the conclusion is *not substantially compliant*, no difference is made between partial or no compliance.

The Register Committee bears in mind the specific legislative, political and socio-economic context of each agency. The external review report, however, has to demonstrate how the agency meets the requirements of the ESG in its context. If specific legal requirements are the reason for an agency to only partially comply with a standard it is expected that the agency makes reasonable efforts to work with competent authorities towards a change of these legal requirements.

## 7. Interpretations of Specific Standards

In the following, the document summarises the principal interpretations of the standards and expectations of the Register Committee towards reports. For the different standards, the following are provided:

- **Interpretations** – specify how the Register Committee interprets a standard. This is omitted where there is no need for specific clarification;
- **Reports should at least demonstrate** – specifies what the Register Committee expects the agencies' self-evaluation reports and external review reports to show at least in order to demonstrate compliance with the standard.

### ESG Part 2: Standards and guidelines for external quality assurance

The Register Committee considers the applicant agency's compliance with Part 2 of the ESG separately in each of its activities. Where agencies have several distinct activities, it is expected that the external review report relates specifically to each activity under each standard of Part 2 (see also interpretation of ESG 3.1).

#### 2.1 Consideration of internal quality assurance

External quality assurance should address the effectiveness of the internal quality assurance described in Part 1 of the ESG.

- Interpretation:**
1. This standard relates to the crucial link between internal and external quality assurance of higher education institutions and programmes.

To “address” means that the agency should systematically include all standards of Part 1 of the ESG in their criteria and procedures used to evaluate/accredit/audit institutions or programmes, while they may be addressed differently depending on the type of external quality assurance.

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**Reports should at least demonstrate:**

- How the agency addresses the effectiveness of internal QA processes in its evaluations, audits and accreditations.
- How standards 1.1 – 1.10 (see [Annex 4](#)) are addressed in the agency's criteria and processes for institutions/programmes.

## 2.2 Designing methodologies fit for purpose

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

- Interpretations:**
2. If the agency works in different jurisdictions it should take into account the relevant regulations of the jurisdiction in which the reviewed institution is based.
  3. In the case of joint programmes, the quality assurance agency should use the European Approach for Quality Assurance of Joint Programmes<sup>7</sup>.

**Reports should at least demonstrate:**

- How the agency develops, reviews and updates the processes and criteria used in its different activities.
- How the agency ensures that its methodologies are fit for purpose.
- How stakeholders are involved in the design and continuous improvement of the agency's processes.

## 2.3 Implementing processes

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

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

- Interpretations:**
4. If site visits are not part of the processes used by the agency there need to be clear reasons for that.

5. The agency should provide follow-up procedures for all reviews that contain any sort of recommendations.
6. It is up to the agency to determine the nature and timing of the follow-up in light of its mission and as appropriate in its context, taking into consideration the national legislation.
7. The agency remains responsible for ensuring a consistent follow-up even if the formal decision is taken by another body or another body carries out the actual follow-up.

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**Reports should at least demonstrate:**

- How the agency ensures that its processes are reliable, useful and consistent.
- How the key features in the standard are implemented by the quality assurance agency in each of its activities.
- If no site visits are used, how evidence provided by institutions is validated through other mechanisms.

## 2.4 Peer-review experts

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

**Interpretations:**

8. The agency should make use of a wide range of experts with different perspectives, including those of institutions, academics, students and employers/professional practitioners.
9. At least for reviews across border the agency should include experts from a variety of national origins.
10. The agency should ensure a consistent approach to the selection of experts as well as appropriate training or briefing of experts.
11. The agency needs to pay close attention to avoid conflicts of interest of experts, especially when the agency operates within small scientific or professional communities.

**Reports should at least demonstrate:**

- How the agency's groups of experts are composed.
- How the agency ensures in the selection process that experts have appropriate skills and competences, and no conflict of interest.
- How the agency organises training or briefing of experts.

## 2.5 Criteria for outcomes

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

- Reports should at least demonstrate:**
- How the agency published the criteria used in each of its activities.
  - How the agency ensures consistency in its application of criteria for all types of reviews.

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## 2.6 Reporting

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

- Interpretations:**
12. All reports should be published in full, including those that resulted in a negative decision or conclusion.
  13. The publication of summary reports (rather than full reports) does not fulfil the requirement of the standard.
  14. Reports also have to be published for voluntary or commissioned evaluations of institutions or programmes, irrespective of whether they take place in the agency's base country or elsewhere, within the EHEA or beyond.
  15. All experts should be appropriately involved in producing the report.
  16. "Published" means that reports should be easily accessible on the agency's website, while "clear and accessible" refers to the reports' structure, content, style and language.

- Reports should at least demonstrate:**
- How reports are made accessible to the public for all types of reviews.
  - How the agency ensures that its reports are clear and understandable in their structure, content and style.

## 2.7 Complaints and appeals

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

institutions.

**Interpretation:** 17. It should be possible to appeal any formal decision.

**Reports should at least demonstrate:**

- Which appeals processes are in place for each of the agency's activities.
- How the agency handles complaints.

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## ESG Part 3: Standards and guidelines for quality assurance agencies

### 3.1 Activities, policy and processes for quality assurance

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

**Interpretations:**

18. Agencies should themselves conduct external quality assurance activities on a regular basis, using established processes and criteria. Organisations that only occasionally organise reviews of institutions or programmes do not comply with the standard.

19. The involvement of stakeholders should be organised in a way that ensures the agency's independence (see ESG 3.3).

**Reports should at least demonstrate:**

- How the agency complies with standards 2.1 – 2.7 (in a distinct chapter, each standard should be addressed separately for each different type of review).
- How the agency's mission translates into its daily activities.
- How stakeholders are involved in the agency.
- How the agency ensures a clear distinction between external quality assurance and its other fields of work, if applicable; Annex 5 should be taken into account in that regard.

### 3.2 Official status

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

**Interpretations:** 20. For international organisations it might be a prerequisite to be registered on EQAR in order to be formally recognised by a (national) public authority. In

such a case, the agency is not expected to be formally recognised as a quality assurance agency before it is registered on EQAR.

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- Reports should at least demonstrate:**
- What is the legal status of the agency.
  - In which higher education system(s) the agency is formally recognised as a quality assurance agency.

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### 3.3 Independence

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

- Interpretations:**
21. Where an agency's independence is not obvious from its structures and status, the Register Committee expects that the external review panel considers in greater detail how operational independence is safeguarded in practice.
  22. The integrity of expert groups' reports should be ensured by preventing undue influence of stakeholders on the findings, analysis, conclusions and recommendations, and that the body which takes (accreditation, audit, etc.) decisions after external QA activities, operates independently and without political or other undue influence.
  23. If the agency has other activities than external quality assurance (e.g. seminars, consultancy), adequate policies and processes should be in place to safeguard independence of the respective organisational units in performing their QA functions (see Annex 5).

- Reports should at least demonstrate:**
- How the agency's organisational independence is demonstrated by official documentation.
  - How the agency operates independently de facto, especially in terms of defining procedures and methods as well as nomination and appointment of experts.
  - How the agency ensures that the outcomes of its quality assurance processes are its independent responsibility.

### 3.4 Thematic analysis

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

- Reports should at least demonstrate:**
- How the agency conducts and publishes analyses of the general findings from its activities.
  - How it uses the outcomes of these analyses.

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### 3.5 Resources

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

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- Reports should at least demonstrate:**
- How the agency's financial arrangements ensure the sustainability of its activities within the scope and in line with the ESG.

### 3.6 Internal quality assurance and professional conduct

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

- Interpretations:**
24. The processes for internal quality assurance need to be formal and regular, and not just informal.
  25. Integrity of an agency's activities includes that it uses the EQAR and ESG "labels" only in connection with activities that are within the scope of the ESG and have been subject to an external review; Annex 5 should be taken into account in that regard.
  26. When a registered agency involves a partner or subcontractor (for activities within the scope of the ESG) that is not itself an EQAR-registered agency, the registered agency should demonstrate how it ensures ESG compliance of the parts of the work performed by the partner/subcontractor.
  27. Where an agency uses the results of another agency or makes a decision based on a report from another agency, the same principles as for subcontractors apply.

- Reports should at least demonstrate:**
- How the agency's internal QA system guarantees the quality and integrity of its activities.
  - How the internal QA system fosters continuous improvement within the agency.

### 3.7 Cyclical external review of agencies

Agencies should undergo an external review at least once every five years in

order to demonstrate their compliance with the ESG.

The cyclical review of an agency is a prerequisite for (continued) EQAR registration and inherently fulfilled by the agency undergoing a review.

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- <sup>1</sup> The ESG were first adopted by ministers in Bergen in 2005 at the proposal of the E4 Group, including the four main European stakeholder organisations in higher education: the European Association for Quality Assurance in Higher Education (ENQA), the European Students' Union (ESU), the European University Association (EUA) and the European Association of Institutions in Higher Education (EURASHE). Between 2012 and 2015, the ESG were thoroughly revised. The new version of the ESG was adopted by EHEA governments in their Ministerial meeting in Yerevan, in May 2015. See also: <https://eqar.eu/application/criteria.html>
- <sup>2</sup> The Committee comprises of quality assurance experts from different backgrounds, who are nominated by EQAR's Founding Members (ENQA, ESU, EUA, EURASHE), BUSINESSEUROPE and Education International, but act in their personal capacity as independent experts. See also: <https://eqar.eu/about/register-committee.html>
- <sup>3</sup> Published at: <https://eqar.eu/publications/decisions.html>
- <sup>4</sup> Standards and Guidelines for Quality Assurance in the EHEA (2015 version), p. 5, see [https://eqar.eu/fileadmin/documents/e4/ESG\\_endorsedMay2015.pdf](https://eqar.eu/fileadmin/documents/e4/ESG_endorsedMay2015.pdf)
- <sup>5</sup> The process and standards might have been developed by the registered agency itself or by a third party, e.g. the registered agency implements a process prescribed by regulations of a country where it is operating. Such activities might be offered in a competitive market (e.g. HEIs choosing from among different agencies) or in a non-competitive environment (e.g. one agency in charge of a sector). Furthermore, such activities might be obligatory by statute, or on a voluntary basis (i.e. HEI seeking evaluation or accreditation by a specific agency outside of any legal obligation).
- <sup>6</sup> Activities concerning the evaluation of individual staff or students, a funding programme, etc. are not within the scope of the ESG.
- <sup>7</sup> See <https://eqar.eu/projects/joint-programmes.html>

## Annex 1:

# Checklist for Agencies

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When preparing for an application for registration or renewal of registration, agencies should ensure that:

- They submit their application, including a brief description of their activities and the draft terms of reference of the external review, to EQAR before the external review process;
- They forward the confirmation received from EQAR as to what activities should be covered by the external review to the review coordinator;
- For renewal applications: they forward the Register Committee's previous decision on approval/renewal to the review coordinator;
- Their self-evaluation report demonstrates the agency's compliance with each standard of Parts 2 and 3 of the ESG separately;
- The self-evaluation covers all external quality assurance activities within the scope of the ESG, as confirmed by EQAR, and addresses them separately for each standard of Part 2, including under ESG 2.1 a mapping of their criteria and procedures onto the standards of Part 1;
- For initial applications: the review is well-timed for the annual deadlines for submission of external review reports (15 March & 15 September);
- For renewal applications: the review report will be completed before their current registration expires.

## Annex 2:

# Checklist for Review Coordinators

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When preparing an external review, coordinators should ensure that:

- The agency submits the draft terms of reference to EQAR;
- The review panel members are independent and have no real or apparent conflict of interest with regard to the agency;
- The review panel includes the stakeholder perspectives required (a panel which does not include a student, an academic staff member and an international expert is not accepted; consultation with those constituencies is no a substitute for their presence on the panel!);
- The review panel receives adequate training for their work;
- The review panel members receive the EQAR policy on the Use and Interpretation of the ESG (this document);
- In case of a review for renewal of registration: the review panel receives the Register Committee's previous decision on approval/renewal;
- The review panel interviews the stakeholders of the agency during the on-site visit;
- The chair of the review panel is available to provide clarification to EQAR, if requested.

## Annex 3:

# Checklist for Review Panels

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When carrying out an external review, review panels should ensure that:

- The EQAR policy on the Use and Interpretation of the ESG (this document) is taken into account in its analysis;
- The review report provides clear evidence, analysis and conclusions for each standard of Parts 2 and 3 of the ESG separately, whereas ESG 2.1 include an analysis of how the standards of Part 1 are addressed in the agency's criteria and procedures;
- The report covers all external quality assurance activities of the agency within the scope of the ESG, as confirmed by EQAR, and addresses them separately for each standard in Part 2.

## Annex 4:

### ESG Part 1: Standards for internal quality assurance

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#### 1.1 Policy for quality assurance

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

#### 1.2 Design and approval of programmes

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

#### 1.3 Student-centred learning, teaching and assessment

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

#### 1.4 Student admission, progression, recognition and certification

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

#### 1.5 Teaching staff

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

#### 1.6 Learning resources and student support

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

### **1.7 Information management**

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

### **1.8 Public information**

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

### **1.9 On-going monitoring and periodic review of programmes**

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

### **1.10 Cyclical external quality assurance**

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

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## Annex 5:

# Guiding principles for the separation between agencies' activities

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This annex addresses the clear and transparent separation between different activities by registered agencies, within and outside the scope of the ESG. While agencies may choose the most suitable ways of ensuring such a separation, as expected by the ESG, it is recommended that agencies use the following guiding principles as a benchmark.

### Clear communication

1. Agencies make clear distinctions (e.g. on their website, in publications and external quality assurance reports) between their different fields of activity and, in particular, between those activities within the scope of the ESG and other activities.
2. While the agency decides on and is responsible for its own terminology, it is able to demonstrate that the terms it uses are clearly defined, and that there is no risk of confusion whatsoever between external quality assurance within the scope of the ESG and other activities.
3. Agencies apply special care to avoid confusion if and when they use the typical terms “evaluation”, “review”, “audit”, “assessment” or “accreditation” (see ESG 3.1) for activities outside the scope of the ESG.
4. Agencies only use the EQAR label and refer to the ESG in connection with activities within the scope of the ESG. Agencies do not make any statements that might create the impression that other activities were within the scope of the ESG or covered by their registration on EQAR.

### Preventing conflicts of interest

5. Agencies take appropriate precautions to prevent any conflicts of interest arising from different activities they carry out, and publish the respective measures or principles on their website.
6. Among the various activities outside the scope of the ESG, consultancy deserves special attention. “Consultancy” means that an agency offers a service to an individual higher education institution, usually for a fee. Unlike external quality assurance activities, which are based on predefined processes and standards, these activities are usually driven by the institution’s demands and requirements, to serve a specific purpose.

7. Where consultancy services relate to issues covered by the ESG (i.e. teaching and learning in higher education, including the learning environment and relevant links to research and innovation) and in which the agency also makes assessments, there is a particular potential for conflicts of interest.
8. Agencies thus ensure that they do not carry out any external quality assurance (within the scope of the ESG) of the same unit (e.g. institution, faculty, department or study programme) to which they have provided consultancy during the past six years.
9. Agencies do not select experts to review an entity who have provided consultancy to the entity before.

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## **Subsidiaries**

10. If agencies have subsidiaries or are linked to other organisations that are not effectively distinguishable from themselves (i.e. share the name, staff or organisational structure), there is a high probability that the public may attribute activities and actions of those entities to the registered agency, i.e. considers them as if they were conducted by the registered agency.
11. Therefore, unless a subsidiary or linked organisation is effectively distinguishable, all rights and obligations resulting from EQAR registration apply equally to subsidiaries or linked organisations.