



Agència  
per a la Qualitat  
del Sistema Universitari  
de **Catalunya**

## **EVALUATION PROGRAMME FOR AFFILIATED INSTITUTIONS GUIDELINES FOR THE SELF-EVALUATION**

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# EVALUATION PROGRAMME FOR AFFILIATED INSTITUTIONS<sup>1</sup>

## 1. INTRODUCTION

This document describes the general characteristics of the Evaluation Programme for Affiliated Institutions implemented by AQU Catalunya in collaboration with the Directorate General for Universities and the Catalan universities. In particular, the document describes the aims of the evaluation, the procedures and the quality standards and specific criteria to be used as reference for evaluation. A description is also given of the work of the institution's academic coordinators during the evaluation process.

## 2. THE PURPOSE OF THE EVALUATION

The Evaluation Programme for Affiliated Institutions has fundamentally three purposes:

1. To assist all affiliated institutions in the higher education system in Catalonia to achieve a level of quality that enables them to successfully deal with the challenges in general facing the higher education system in the short and medium terms. Several of these challenges are:
  - The design and delivery of Bachelor and Master's degree programmes in accordance with the requirements of Royal Decree 1393/2007, 29 October, concerning the regulation of recognised university degree programmes in Spain.
  - Involvement in the AUDIT programme in order to give impetus to quality assurance systems.
2. To stimulate certain institutions in attaining or demonstrating that they have attained advanced levels of quality within one or more areas of their scope of activity.
3. To assist decision-making by the Board of the Inter-university Council of Catalonia and the Ministry of Innovation, Universities and Enterprise in relation to university programming.

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<sup>1</sup> An affiliated institution here refers to a college/educational establishment or institute that is affiliated or associated with the university.

The Evaluation Programme for Affiliated Institutions is essentially aimed at affiliated institutions where most of the programmes of study are official recognised degree programmes. If this is not the case, the evaluation model will need to be specifically adapted to the institution.

### 3. THE EVALUATION MODEL

The model envisages two levels of evaluation: a basic level and an advanced level.

#### 3.1. Basic evaluation

The basic level sets a series of quality standards and specific criteria in relation to:

1. The programmes of study.
2. The management of the institution.
3. The human resources.
4. The physical resources.

Attainment of this basic level of quality should enable any affiliated institution to successfully deal with challenges such as those mentioned in section 2.

The basic level quality requirements are set out as specific criteria that the institution must comply with. A series of examples of evidence associated with each quality criterion is proposed, which the institution can use to show that it complies with each quality criterion.

An example of a specific quality criterion at the basic level is:

**The management team gathers and periodically analyses data on how the programme of study is running (academic performance; the satisfaction of students, teaching staff, employers; etc.) and informs the community on the result of its analyses.**

Examples of evidence whereby the institution can demonstrate that it complies with the criterion are:

*There are documents produced by the management team that show that an assessment is made of the collected data.*

*The minutes of the meetings of the governing bodies show that details were presented at the meeting on the functioning of the programmes of study and that these were discussed.*

These examples of evidence are not exclusive and the institution may propose alternative evidence.

The complete list of quality standards and specific criteria at the basic level are given in section 5 of this document.

### 3.2. Advanced level

The aim of the advanced level evaluation is to encourage institutions to enhance their quality to a level of excellence either within one or more areas of their spheres of activity or by demonstrating levels of excellence already achieved. In particular, a wider range of scope is taken into consideration, which includes:

1. Programmes of study.
2. Management of the institution.
3. The human resources.
4. The physical resources.
5. Research and knowledge transfer.
6. Involvement with the community.

The advanced level evaluation is less prescriptive and more open than the basic evaluation. In particular, a standard of quality is set for each of the six spheres of activity considered at the advanced level although there are no specific criteria, meaning that each institution has considerable freedom to determine how it wants to achieve the standard of quality and also how it will demonstrate its strengths in relation to the standard.

The complete list of the advanced level standards is given in section 6 of this document.

## 4. THE PROCEDURE

An institution may decide on just a basic evaluation or an extended basic evaluation with an advanced evaluation in one or more of the six areas given in section 3.2. The evaluation procedure is nevertheless made up of three stages: the gathering of data, the drawing up of the self-evaluation report, and the evaluation of the evidence by an external review panel.

In the *data gathering* stage, the institution will need to have a series of details connected with its activity (number of students, teaching staff, room facilities, resources, etc.).

Once all of this data has been gathered together, the institution must then *prepare a self-evaluation report*, in which it basically states the evidence that it can provide to demonstrate that it complies with the basic quality criteria and the advanced standards, if the institution has chosen this type of evaluation for any of its spheres of activity. This self-evaluation report will also contain a section where the institution must state the actions it considers necessary to enhance its level of quality (for example, to comply with the criteria that it still does not meet at the basic level or to achieve an advanced quality standard).

Lastly, an *external review panel*, designated by AQU Catalunya in agreement with the university, makes a two-day site visit to the institution to evaluate the abovementioned evidence in the self-evaluation report. The external review panel then issues a report with the outcome of the evaluation and its recommendations.

The evaluation process may be accompanied with an agreement between the institution, the corresponding university, AQU Catalunya and the Directorate General for Universities for a monitoring and enhancement plan to be carried out on the basis of the conclusions of the evaluation.

## 5. THE QUALITY STANDARDS AND SPECIFIC CRITERIA - BASIC LEVEL

In the case of the basic evaluation, four standards of quality associated with the following spheres of the institution's activity can be identified:

1. Programmes of study.
2. Management.
3. Human resources.
4. Physical resources.

Each of these standards is associated with specific quality criteria that will be used as a reference during the evaluation process. The criteria are given below in **bold type** and for each criterion various examples of evidence, proposed in *italics*, which can be used to show that the institution complies with the criterion.

In order for accreditation to be given for the basic level evaluation of quality, the institution must comply with all of the criteria.

### 1. Programmes of study

#### STANDARD:

The institution must keep clear and easily accessible information on the programmes of study that it offers, and it must have mechanisms that enable it to monitor the delivery of degree programmes and set up continuous enhancement processes.

#### SPECIFIC CRITERIA:

**1.1. The institution keeps clear, publicly available and easily accessible information on the programmes of study that it offers, which at least includes the entry requirements, general aims, graduate profile and course duration/timetables.**

*The external review panel can gain unaided access to the section on the website where the programmes of study are described and can check that the information is clear and that it contains the minimum elements that are required.*

**1.2. The syllabi of all courses and modules are publicly available to the institution community, they are easily accessible and updated with information that at least includes the learning outcomes, the topics, student activities, student workload in quantifiable terms, and the method of evaluation.**

*The external review panel can gain unaided access to the section on the website where the course syllabi are described. It can check (with a sample of courses) that the syllabi contain all of the information stated in this criterion.*



**1.3. The organisation of curricula is consistent with the learning outcomes and the envisaged graduate profile.**

*The academic coordinators can state what courses and/or activities in the curricula contribute to each learning outcome and the elements that characterise the graduate profile.*

**1.4. The institution keeps information that is clear, publicly and easily accessible on profession-orientated work practice/placement (either internal or external) that, at the very least, include: definition of its character, guidelines on development-supervision and assessment, and, in the case of placement, the procedure to allocate work experience places and the formalities (signing of agreements).**

*The external review panel can access the information on profession-orientated work practice/placement on the institution's website, and it can check that all of the information on this criterion is given.*

**1.5. The management team periodically gathers and analyses data on the functioning of the curriculum (academic performance; satisfaction of students, teaching staff, employers; etc.) and informs the community about the result of this analysis.**

*There are documents produced by the management team that show that an assessment is made of the data gathered.*

*The minutes of the meetings of the governing bodies show that details were presented at the meeting on the functioning of the curricula and that these were discussed.*

**1.6. The management team periodically gathers and analyses data on the employment and labour market outcomes of graduate students (employment rate, graduate satisfaction, employer satisfaction, etc.) and informs the community of the result of this analysis.**

*There are documents produced by the management team that show that an assessment is made of the data gathered.*

*There are minutes from the meetings of the governing bodies that show that data on graduate employment are presented and discussed at meetings.*

**1.7. The management team periodically establishes enhancement measures, based on the data gathered on the functioning of the curricula.**

*The external review panel can consult the information on all current enhancement plans and the records of their monitoring, development and closure on attainment of the goals.*

## 2. Management

### STANDARD:

The management team is involved in a process of continuous enhancement of the institution, and informs the community of the aims and outcomes of this process.

### SPECIFIC CRITERIA:

**2.1. There is clear, publicly available and easily accessible information that specifies the most relevant aspects regarding the institution's organisation and internal administration (management team, governing bodies, committees, etc.).**

*The external review panel can easily access this information.*

**2.2. The institution has an adequate system to manage student transcripts that gives full guarantees to the students and conforms to the regulations.**

*The staff responsible for the management of the transcripts of student records can demonstrate the correct functioning of the management system used for this to the members of the external review panel.*

**2.3. Medium and long-term goals, as well as annual goals, have been set by the management team. These goals envisage improvements to the running of the institution, adequate staff and physical resources, and enhancement of the quality policy.**

*Insofar as it is possible, the goals must be quantifiable and the actions in order for them to be carried out must be specified. There is documentary evidence of, and any member of the management team can enumerate, the annual goals and the medium and long-term goals.*

**2.4. The management team manages its goals and actions, it assesses the results and decides new goals according to this assessment.**

*There are documents produced by the management team in which the annual results are assessed. New goals must be consistent with short and medium term goals and with the results of the assessment that is made annually.*

**2.5. The management team periodically informs the community of its goals, plans and results.**

*The external review panel can consult the records of the governing bodies, which show that the management team periodically provides information on progress vis-à-vis its goals.*

*The institution issues an annual report, which explains the goals for the year and the results that have been achieved, and is appropriately distributed.*

**2.6. The management team and the university's delegate to the institution periodically monitor the affiliation agreement.**

*The management team and the delegate can describe how the affiliation agreement is monitored to the external review panel. They can provide, for example, the minutes of meetings dealing with this monitoring.*

### 3. Human resources

#### STANDARD:

The institution has a workforce that is sufficiently adequate for its requirements and it takes measures to enhance its adequacy.

#### SPECIFIC CRITERIA:

**3.1. The institution's teaching staff is adequate in terms of quantity and qualifications for the number of students and the requirements of the institution's programmes of study.<sup>2</sup>**

*The staff's adequacy can be checked from the data on the institution's academic staff in the self-evaluation report. In particular, the self-evaluation report will need to include a table with all of the institution's teaching staff, their academic qualifications (undergraduate and postgraduate/doctorate), category of contract, teaching staff accreditation (AQU or ANECA), assignment (number of allocated teaching hours), teaching and research/professional experience, and suitability to the fields of knowledge associated with the institutions programmes of study.*

**3.2. In the case where it does not currently comply with the prevailing legislation (articles 72.2 and 72.3 of Organic Law 4/2007, dated 12 April, which amended Organic Law 6/2001, dated 21 December, on Universities in Spain (LOMLOU)), the institution has started measures in order to achieve compliance within the legally stipulated period of time.**

*The institution shall set out the measures taken to comply with the prevailing legislation in relation to the number of accredited doctoral teaching staff (50% of the teaching staff must be a holder of a doctorate degree and 60% of these must be accredited) and, where applicable, the measures that it will carry out to replace any public service teaching staff.*

**3.3. The support staff is adequate in terms of quantity and qualifications for the number of students and the requirements of the institution's programmes of study.<sup>3</sup>**

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<sup>2</sup> Although there is no optimum student-teacher ratio, the average number of full time students per teacher is 16 in the OECD, 12.2 in Spain and 10.4 at public universities in Catalonia.

<sup>3</sup> The average for the public universities in Catalonia is 6.5 administration and services staff to every one hundred (100) full-time students.

*This adequacy can be checked from the data on the institution's support staff set out in the self-evaluation report. In particular, the self-evaluation report must include a list of the profiles of the institution's support staff and specify, for each profile, the staff member's status in the institution; professional experience; and his/her suitability to the fields of knowledge associated with the institution's programmes of study.*

**3.4. The management team regularly carries out training activities for its staff (at least once a year).**

*The management team can describe the most recent staff training activities carried out in the institution.*

## 4. Physical resources

**STANDARD:**

The available physical resources for student support are adequate and meet the requirements of the programmes of study.

**SPECIFIC CRITERIA:**

**4.1. The institution has sufficient room and space facilities in terms of quantity and quality to meet the requirements of the programmes of study.**

*It is possible to assess their adequacy from the data on room facilities and equipment in the self-evaluation report and with a visit around the facilities. In particular, it will need to be checked that there is a sufficient room facilities adequately equipped for active teaching methods.*

**4.2. The institution has sufficient laboratories and/or teaching facilities that are adequately equipped to meet the requirements of the learning outcomes of programmes of study.**

*It is possible to assess their adequacy from the data on room facilities and equipment in the self-evaluation report and with a visit around the facilities. In particular, it will need to be checked that the laboratories and teaching facilities have adequate equipment to carry out the practical learning activities envisaged in the programmes of study.*

**4.3. The institution has sufficient room facilities for the non-academic activities of the students, teaching staff and support staff.**

*It is possible to assess their adequacy from the data on room facilities and equipment in the self-evaluation report and with a visit around the facilities. In particular, consideration must be given to room facilities for cafeteria, reading, sport, etc.*

#### 4.4. The institution has student support services that are adequate for the requirements of the programmes of study.<sup>4</sup>

*It is possible to assess the adequacy of the available services from the data in the self-evaluation report. In particular, the report will need to list the available services (library, careers guidance, etc.), with justification of their adequacy to the requirements of the programmes of study.*

## 6. ADVANCED LEVEL STANDARDS

A wider range of possible spheres of activity by the institution is considered in the advanced evaluation. In particular, the following areas are dealt with:

1. Programmes of study.
2. The management of the institution.
3. Human resources.
4. Physical resources.
5. Research and knowledge transfer.
6. Involvement with the community.

A definition for the standard of quality for each of these spheres or areas is given below although there are no specific prescriptive criteria for how the institution should attain the standard. Each institution is therefore free to decide how it will attain or demonstrate the standard of quality, which it will need to describe clearly in the self-evaluation report. Nevertheless, various useful examples of best practices associated with each standard are provided in *italics*. The advanced level standards of quality assume that the institution complies with the specific basic level criteria.

### 1. Programmes of study

#### STANDARD:

The programmes of study offered by the institution are adequate to the requirements of the educational context and there are mechanisms to review the programmes offered by the institution according to any new requirements that are identified.

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<sup>4</sup> With regard to libraries in the public universities in Catalonia, the average is 10 users to each reading place, while the average number of users to each computer for public use is 132. The users include students, teaching and research staff, and administration and services staff.

The programmes of study contain a variety of elements that enhance the student's studies at university (recognition for sports activities, professional practice, stays abroad, advice on employment and the labour market, etc.).

The institution has well-defined processes to promote its studies and for new student orientation and reception. The processes for registration and other academic formalities are clear and efficient. It also has a good academic support system for the students throughout their studies.

The institution promotes a quality policy in teaching. The teaching staff are provided with space for teaching practice.

The institution has well defined monitoring and evaluation processes for the programmes of study and learning outcomes, and the learning outcomes are used to identify enhancement measures.

### Examples of best practices

- *The institution has a committee with representatives from the socio-economic environment of the region that periodically considers the adequacy of the programmes of study that are offered and identifies new requirements.*
- *The institution has an extensive portfolio of companies that collaborate in placement/work experience programmes and a well-established administration and evaluation process for placement/ work experience.*
- *The institution offers a wide number of stays abroad and has a well-established process for the administration and evaluation of these stays.*
- *Members of the institution periodically visit secondary education institutions to explain the institution's programmes of study; they participate in open days; etc.*
- *All new students receive written information on the running of the institution. The heads of the institution make a presentation to all new students during the first few weeks of the academic year.*
- *The institution systematically gathers the opinions of the students on aspects to be enhanced in the student reception process.*
- *All students in the institution have a tutor who helps them with their problems and academic doubts.*
- *There are clearly written regulations on the registration procedures (key times and dates, requirements, order of registration, etc.).*
- *The institution systematically gathers the students' opinions on aspects that can be improved in the registration process.*
- *Most the institution's courses have student work plans that are well defined and publicly accessible, in terms of ECTS assignment, evaluation criteria, etc., in addition to that envisaged in point 1.2.*

- *The teaching staff uses active teaching methods and frequent feedback mechanisms with the students regarding their progress (or lack of progress).*
- *The teaching staff gathers information on the running of the courses (students' opinions, required study time, academic performance, etc.), they analyse the information and periodically establish enhancement measures for the course.*
- *The institution periodically organises internal sessions for teachers to exchange impressions on teaching.*

## 2. Management of the institution

### STANDARD:

The management team has drawn up, for example, a strategic plan or other documents in which it has defined long, medium and short-term goals; it has established action plans that are consistent with these goals; it has allocated resources to carry out these plans, the plans are monitored, and the community is informed of their results.

The internal administration of the institution is adequately regulated. Representatives of all stakeholders in the institution participate in the governing bodies, and the decisions of these organs are correctly documented. The management team takes these decisions into account when establishing its goals and plans of action.

### Examples of best practices

- *The institution, with the participation of the community, has defined its medium and long-term goals. These goals are publicly made known and subject to periodic revision.*
- *The short-term goals have allocated resources, indicators, action plans, people in charge, deadlines, etc.*
- *The management team produces an annual report, which includes information on goals, actions, outcomes and new goals. This report is made publicly available and is submitted for approval to the institution's community.*
- *The institution has a regulation that clearly states the governing bodies, together with their functions, composition and decision-making and replacement mechanisms. The governing bodies include representation from all of the institution's stakeholders.*
- *The institution keeps an updated register of agreements by the governing bodies. The management team analyses these agreements, establishes the actions that stem from them and informs the community of these measures and their outcomes.*
- *The management team's composition and the functions of each of its members are clearly defined, publicly available and easy to access.*



- *The management team meets frequently. Planned actions are reviewed at the meetings, final assessments are made and new actions identified.*

### 3. Human resources

#### STANDARD:

The institution has a staff policy that enables it to adequately meet its requirements. This policy includes clear criteria on recruitment and promotion, which are an encouragement to the staff to improve.

The institution gives priority to enhancing the development and training of its staff and assisting the integration of new staff. In addition, it promotes measures to improve their working conditions.

#### Examples of best practices

- *There is a publicly available and easily accessible list of the institution's staff and their functions.*
- *The institution has regulations that are clear, publicly available and easily accessible regarding the recruitment of new staff and promotion. The promotion procedures take into account the quality of teaching performance.*
- *There is a reception plan for new students and new staff that includes the goals of the plan, specific actions, people responsible for each action and the necessary materials. This plan includes the issuing of relevant written information to new staff on the running of the educational institution. There is an evaluation procedure for the reception plan, and the management team uses the results of the evaluation to identify potential improvements.*
- *The institution has a training plan that meets the requirements of all types of staff and a process for identifying the training requirements of its staff. There is an evaluation procedure for the training plan.*

### 4. Physical resources

#### STANDARD:

The management team administers the institution's resources in a transparent way. It has adequate physical resources and services for its requirements and appropriate mechanisms for identifying the need for new resources and services and/or improving existing ones.

#### Examples of best practices

- *The institution has an annual budget which is both publicly and easily accessible. This annual budget is approved by the governing bodies.*



- *The management team manages the budget in a transparent way. It can, at any time, explain the state of its implementation, and it explains the results to the community at the end of the financial year.*
- *There is a list that is publicly and easily accessible of all the room facilities in the institution, with a description of their use and equipment.*
- *The institution has a clear, public and easily accessible policy concerning the use of the room facilities by both groups in the institution and from outside.*
- *The institution keeps a complete inventory of its scientific and technical equipment. There is a maintenance procedure for all of the equipment in the inventory.*
- *The management team keeps a list of deficiencies and requirements concerning equipment and makes decisions to meet these requirements.*

## 5. Research and knowledge transfer

### STANDARD:

The management team knows about and disseminates (both internally and externally) the research and knowledge transfer projects being developed in the institution, it promotes new projects and allocates resources for their effective development. It also offers adequate support services for research and knowledge transfer.

The results of research and knowledge transfer projects developed in the institution are of quality.

### Examples of best practices

- *The management team keeps an updated catalogue of the research and knowledge transfer projects being developed at the institution and knows who is in charge of each project.*
- *The management team keeps adequate indicators on research and knowledge transfer and their results, it periodically analyses these indicators and it makes decisions on the basis of its analyses.*
- *The management team periodically organises sessions to present the results of research and knowledge transfer projects.*
- *The management team has a process to identify possible new research and knowledge transfer projects, it allocates specific resources to give impetus to them and it carries out periodic monitoring of their development.*
- *The institution has a clearly laid out catalogue of support services for research and knowledge transfer that includes aspects such as travel management, economic*

*management, grant management, etc. There is a procedure to evaluate the running of these services, identify aspects to be improved and for the recognition of excellence.*

- *The institution's teaching staff regularly publishes the results of their research and knowledge transfer in congresses and international journals. These results are indexed in outside publications. The management team keeps a record of publications and index references.*

## 6. Involvement with the community

### STANDARD:

The management team maintains free-flowing contact with representative institutions and entities within the socio-economic context of the region and identifies ways to collaborate with them. The institution allocates resources to give impetus to various ways of collaborating and disseminates the outcomes.

### Examples of best practices

- *The management team knows which institutions and entities best represent the socio-economic context of the region, and maintains regular contact with them.*
- *Members of the institution form part of the representational bodies of various institutions and entities in the socio-economic context.*
- *The management team allocates the necessary resources to set in motion new collaboration projects within the socio-economic context.*
- *The management team keeps the list of collaboration projects and agreements with the socio-economic context and monitors the outcomes. This information is publicly available and easily accessible.*

## 7. THE WORK OF THE ACADEMIC COORDINATORS

Once the decision has been made to carry out the evaluation of the affiliated institution (in accordance with AQU Catalunya and the university that it is affiliated to), the institution must:

1. Prepare a self-evaluation report.
2. Prepare the package of documentary evidence.
3. Prepare for the site visit by the external review panel.
4. Participate in several of the activities carried out during the site visit by the external review panel.

Each of these is briefly described below.

### 7.1. Preparing the self-evaluation report

The self-evaluation report is the key piece that the entire evaluation process and the work of the external review panel are based on. All the necessary details for preparing the self-evaluation report are in the section on “Guidelines for completing the self-evaluation report”. A brief summary of this is given below.

The purpose of the self-evaluation report is to help both the academic coordinators in the institution and the external review panel to prepare for the evaluation. It consists of four sections:

1. General information on the institution, which enables the members of the external review panel to understand the context of the institution’s activity.
2. Specific information on human and physical resources, which enables the external review panel to assess the adequacy of these resources.
3. Self-evaluation of each quality standard and specific criterion, specifying the materials that demonstrate compliance with each one.
4. A final self-reflexion, with an assessment of the level of compliance with the quality standards and criteria and proposals for action in the short and medium terms.

Representatives from the various stakeholder groups involved in the institution will have to participate in the preparation of the self-evaluation report. In specific terms, it is recommended that the self-evaluation report be prepared by a committee made up of academic coordinators, the management team, representatives from the university that the institution is affiliated to, teaching staff, administration staff, students and others considered to be appropriate, and that the entire community in the institution be involved in its preparation. An example of the composition of the self-evaluation committee is as follows:

- An academic coordinator from the institution (who leads the work of preparing the self-evaluation report).

- One or two members from the management team (in addition to the academic coordinator, who will also probably form part of the management team).
- A member of the institution's support staff.
- Two members of the teaching staff.
- Two students.
- The university's delegate to the institution.

The self-evaluation report has to be sent to AQU Catalunya, which then refers it to the members of the external review panel.

## 7.2. Preparing the package of documentary evidence

One of the jobs of the external review panel is to check the validity of the evidence referred to in the self-evaluation report. Certain types of evidence will have to be assessed in the interviews with staff from the institution or in the site visit to the facilities (for example, the degree to which the aims of the management team are understood by the teaching staff). Many other types of evidence, however, can be assessed prior to the site visit by the external review panel (for example, minutes of meetings, documents on the programmes of study, etc.).

In addition to preparing the self-evaluation report, the management team will therefore need to establish the necessary mechanisms whereby the external review panel can consult most of the evidence referred to in the self-evaluation report prior to the actual site visit. Ideally, the evidence will be made available to the external review panel in one of the following ways:

- The institution's web site.
- A special intranet for the external review process.
- A CD-ROM, enclosed as an appendix to the self-evaluation report.

All evidence provided must be clearly indexed and with appropriate reference to the self-evaluation report to enable assessment to be carried out efficiently.

Prior to the site visit to the institution, the external review panel studies the self-evaluation report and the evidence provided. The members of the external review panel may request additional documentation from the institution to complement the evidence provided, and those responsible for this in the institution will need to prepare the complementary documentation requested, which must be given to the external review panel at the start of the site visit.

## 7.3. Preparing for the site visit by the external review panel

The purpose of the external review panel's visit to the institution is to meet the staff, see its activities and facilities, identify the strong and weak points, and check *in situ* the validity of the evidence provided by the academic coordinators. During the visit, the following activities need to take place:

1. The external review panel is received by the management team.
2. Preliminary work session/briefing and review of the additional material provided by the management team at the request of the external review panel.
3. Visit to the facilities.
4. Interview with the management team.
5. Interview with students.
6. Interview with graduates.
7. Interview with teaching staff.
8. Interview with the support staff.
9. Interview with the university's delegate to the institution.
10. Drawing up of the final report by the external review panel.
11. Preliminary conclusions and farewell.

The institution's academic coordinators will need to organise these activities and make all of the necessary means available to the external review panel so it can carry out its work as efficiently as possible.

The precise duration and content of each envisaged activity will depend on the institution's characteristics (for example, its size) and also the level of quality being evaluated. For example, the duration and matters to be dealt with during the interview with the teaching staff may be different if only a basic level evaluation is being carried out or if an advanced level evaluation of research and knowledge transfer is also to be undertaken.

Details of the generic requirements for each activity are given below.

### **1. The external review panel is received by the management team**

The management team is expected to make a general presentation of the institution and its activities to the external review panel; it hands over the package of additional information requested and the plan for the visit is agreed. It may also be appropriate for the university's delegate to the institution to be present at this reception.

### **2. Preliminary work session of the external review panel**

The external review panel will need to be provided with a space set up with computers, Internet connection and print-out facilities to be able to carry out its work in comfort. The person in the institution who the members of the external review panel can refer to whenever necessary should also be named.

### 3. Site visit to the facilities

The academic coordinators need to prepare a site visit to the more important facilities in the institution and accompany the review panel during the visit. The facilities to be visited will need to be selected in such a way that the review panel can assess the adequacy of the available physical resources. In particular, the visit should include:

- A representative sample of the classrooms in the institution.
- A representative sample of the laboratories in the institution.
- Other work and lounge areas used by the students.
- The library.
- Student and staff help desks.

### 4. Interview with the management team

In this interview (and the following ones), the external review panel will seek to complement the information provided by the academic coordinators in order to assess the evidence's compliance with the quality criteria. This meeting will involve the university's delegate to the institution and representatives of the self-evaluation committee (one teacher, one student and a member of the support staff) involved in preparing the self-evaluation report. It is advisable for all members of the management team to take part.

### 5. Interview with student representatives

For this meeting, the academic coordinators will need to select a representative sample of students from programmes of study on different levels. An appropriate number is between five and ten students. The academic coordinators will need to describe the characteristics of this student sample to the external review panel when presenting the plan for the site visit. The interview must take place without the presence of any other person from the institution.

### 6. Interview with representatives of the graduates

For this meeting, the academic coordinators will need to select a representative sample of the graduates from the institution (ideally, graduates from three or four years prior to the evaluation). An appropriate number is between five to ten graduates. The academic coordinators will need to describe the characteristics of this sample of graduates to the external review panel when presenting the plan for the site visit. The interview must take place without the presence of any other person from the institution.

### 7. Interview with a representatives of the institution's teaching staff

For this meeting, the academic coordinators will need to select a representative group of members of the institution's teaching staff, from different levels of the curriculum. An appropriate number is between four to eight people. The academic coordinators will need to describe the characteristics of this sample of the institution's support staff to the external review panel when

presenting the plan for the site visit. The interview will be held without the presence of any other person from the institution.

#### **8. Interview with representatives of the support staff**

For this meeting, the academic coordinators will need to select a representative sample of the institution's support staff. An appropriate number is between three and five people. The academic coordinators will need to describe the characteristics of this sample of the institution's support staff to the external review panel when presenting the plan for the site visit. The interview must take place without the presence of any other person from the institution.

#### **9. Interview with the university's delegate to the institution**

In the interview with the university's delegate to the institution, the external review panel may obtain information on the mechanisms used by the university to supervise the institution's activities and on the delegate's opinion regarding strong points and aspects that need improving in the running of the institution.

During the interview, the university's delegate may be accompanied by other people from the university involved in supervising the institution's activities.

#### **10. Preparation of the final report by the external review panel**

The plan for the visit will need to include time for the external review panel to prepare the preliminary version of the final report, which will not necessarily be drawn up at this time. The academic coordinators will need to provide adequate space for this activity (probably the same space used for activity 2).

#### **11. Preliminary conclusions and farewell**

The visit finishes with a meeting between the external review panel, the management team, the three representatives from the self-evaluation committee (teacher, student and one member of the support staff) and the university's delegate to the institution. During this meeting, the members of the external review panel make a brief presentation of their conclusions and preliminary assessments, prior to the drawing up of their report.

### **7.4. Preparing the timetable for the visit**

As mentioned above, the duration and content of the activities will depend on the institution's characteristics and the type of evaluation. The external review panel is responsible for making a preliminary proposal for a timetable, based on the self-evaluation report submitted and the necessary assessment to show that the evidence is viable. The members of the institution's self-evaluation committee who drew up the report will also need to agree to the proposed timetable.

The table given below shows a possible timetable for the visit, which may be appropriate for the basic evaluation. Some of the activities may require more time if an advanced evaluation is to be carried out of any of the institution's spheres of activity.

<b>Day 1</b>	
10.00 to 10.15	External review panel is received by the management team
10.15 to 12.00	Preliminary work session / briefing
12.00 to 14.00	Visit to the facilities
14.00 to 15.30	Luch
15.30 to 16.30	Interview with the management team
16.30 to 17.30	Interview with the students
17.30 to 18.00	Break
18.00 to 19.30	Interview with the graduates

<b>Day 2</b>	
9.30 to 10.30	Interview with the teaching staff
10.30 to 11.00	Break
11.00 to 12.00	Interview with the support teaching staff
12.00 to 13.00	Interview with the university's delegate to the institution
13.00 to 15.00	Luch
15.00 to 16.00	Start of the drawing up of the final report
16.00 to 16.30	Preliminary conclusions and farewell

## 7.5. Preparing the assessment report

During the few days after the site visit, the external review panel will need to finish the preliminary version of its assessment report, which is to be sent to AQU Catalunya, the institution and the university.

Both the institution and the university can make comments on the preliminary report, which are to be sent to the external review panel. These comments will be taken into account prior to the drawing up the final assessment report, which is to be sent to AQU Catalunya, the institution and the university, and also made publicly available.



# GUIDELINES FOR COMPLETING THE SELF-EVALUATION REPORT

## 1. INTRODUCTION

As a first step in the evaluation process, a committee in charge of preparing the self-evaluation report needs to be set up by the institution. This committee will need to include representatives from the different stakeholder groups in the institution. In specific terms, it is recommended that the self-evaluation report be prepared by a committee made up of academic coordinators, the management team, teaching staff, administration staff, students and others considered to be appropriate, and that the process involve the participation of all of the community in the institution. An example of the self-evaluation committee is as follows:

- One academic coordinator from the institution (who leads the work of preparing the self-evaluation report).
- One or two members from the management team (in addition to the academic coordinator, who will also probably form part of the management team).
- A member of the institution's support staff.
- Two teachers.
- Two students.
- The university's delegate to the institution.

This self-evaluation report must then be sent to AQU Catalunya, which will organise the external review of the institution. The self-evaluation report must be of use to both the external review panel and those responsible in the institution so that the site visit envisaged in the evaluation protocol can be adequately prepared.

The self-evaluation report must consist of four sections:

1. General information on the institution.
2. Specific information on the human and physical resources.
3. Self-evaluation of each quality standard and specific criterion.
4. Final self-reflexion.

The necessary instructions for preparing each section in the self-evaluation report are given below.

## 2. GENERAL INFORMATION ON THE INSTITUTION

This section must include all of the information necessary for the external review panel to comprehend the context within which the institution functions. In particular, the following information must be included:

- Basic data: year established, name, address, web site, university that the institution is affiliated to, etc. A short section may be included on the institution's most outstanding historic acts and events.
- Affiliation agreement.
- Regulation, status, etc.
- Degrees offered.
- Number of students, teaching staff and support staff.
- Other important activities in the institution.
- Academic coordinator.
- Organisation of the teaching staff.

## 3. SPECIFIC INFORMATION ON HUMAN AND PHYSICAL RESOURCES

This section must contain specific data on the institution's human and physical resources to enable the external review panel to assess their adequacy in relation to the requirements of the programmes of study.

This data, which may be submitted in any appropriate format, must include:

- A list of the profiles of the institution's academic staff, specifying for each profile the academic qualification, category, dedication (part or full-time), teaching, research and/or professional experience, and also their suitability in relation to the fields of knowledge associated with the programmes of study offered by the institution.
- A list of the profiles of the institution's support staff, specifying for each profile their status in the institution, professional experience and their suitability in relation to the fields of knowledge associated with the programmes of study offered by the institution.
- A list of the available equipment (room and space facilities, laboratories, laboratory equipment, study rooms, etc.), with justification for their adequacy in relation to the requirements of the programmes of study.
- A list of the available services (library, careers guidance, etc.), with justification for their adequacy in relation to the requirements of the programmes of study.

## 4. SELF-EVALUATION OF EACH QUALITY STANDARD AND CRITERION

The institution's quality, at the basic level, will be evaluated according to four standards of quality that refer to programmes of study, management of the institution, human resources and physical resources. Each of the four quality standards is associated with specific quality criteria that the institution will need to conform to in order to comply with the standard.

The self-evaluation report will need to include a section on each quality standard with a brief explanation of the degree to which the institution complies with each specific criterion associated with the standard. This section will also need to specify the type of information that will be made available to the external review panel to demonstrate that the institution complies with each specific criterion.

In addition to the basic level evaluation, the institution may also decide on an advanced evaluation in one or more of the following spheres of activity: programmes of study, management of the institution, human resources, physical resources, research and knowledge transfer, and involvement with the community. Each of these spheres of activity has an associated advanced level standard of quality, but no specific criteria (as in the case of the basic level). The institution therefore has considerable freedom to determine how it wants to achieve the standard of quality and also how it will demonstrate its strengths in relation to the standard. In the case where the institution decides on an advanced evaluation, the self-evaluation report will need to clearly specify the way in which the institution complies with the corresponding standards, together with the associated evidence.

A description of the quality standards and the specific criteria is given in the presentation document for the Evaluation Programme for Affiliated Institutions.

The self-evaluation report must include the data and a corresponding commentary on:

- Students
  - Admission/entry
  - Academic development
  - Outcomes
    - Drop-out rate
    - Progress (credits attained / enrolled credits)
    - Graduation rate
    - Duration of studies

## 5. FINAL SELF-REFLEXION

The last section of the self-evaluation report must include the overall assessment by the self-evaluation committee. In particular, this section will need to clearly specify:

- The specific criteria that the institution complies with.

- The criteria that the institution still does not comply with.
- Actions to be considered in order for the institution to comply with all the criteria in the short or medium term.

## 6. EVIDENCE

As a complement to the self-evaluation report, the self-evaluation committee will need to prepare a package with the materials that demonstrate compliance with the quality standards, as specified in the self-evaluation report. This package must be made available to the external review panel prior to the site visit (for example, via the institution's web site, a CD-ROM or an intranet set up especially for the evaluation process).