



AQU CATALUNYA

GUIDE TO THE CERTIFICATION OF INTERNAL QUALITY ASSURANCE SYSTEMS IN HIGHER EDUCATION INSTITUTIONS

This document describes the standards and criteria for internal quality assurance system (IQAS) certification in higher education institutions. Its purpose is to guide these education centres in implementing their IQAS and the commissions whose task is to certify their effective implementation.



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© Author: Agència per a la Qualitat del Sistema Universitari de Catalunya, 2023
C. d'Enric Granados, 33
08007 Barcelona

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Editorial team of the eighth edition: Alfonso Davalillo Aurrecoechea, Laureano González Vega, Caterina Cazalla Lorite, Concepción Herruzo Fonayet, Josep Manel Torres Solà

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INTRODUCTION

The *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*¹ state that higher education institutions must have a policy and associated procedures to ensure the quality and standards of their training programmes. Specifically:

“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”. (Standard 1.1. Policy for Quality Assurance)

AQU Catalunya has been developing programmes for the design and implementation of internal quality assurance systems since 2007. The ultimate purpose of programmes such as AUDIT and SUPORT were to provide guidance in designing and implementing management systems and training technical staff at Catalan universities. Assessment of management systems under the AUDIT programme was clearly focussed on orientation and continuous improvement.

In 2015, partly due to the introduction of institutional accreditation, AQU Catalunya decided to take the next step and certify that internal quality management systems are effectively in place in university centres. This gives universities access to institutional accreditation, thus providing major advantages in terms of their autonomy in developing quality assurance processes for their academic offerings. In this context, universities have worked towards implementing internal quality assurance systems (IQAS) with the aim of introducing process-based resource management and training programme quality assurance in the context of continuous improvement, to obtain institutional accreditation and the advantages this entails.

Over the years, important elements of Catalan university IQAS certification have been outlined, such as the relationship between university central services processes and procedures and those of the university centres, the management system review and the development of an improvement action plan, and the existence of quality policies and objectives. It is worth noting that in the latter case, depending on the type of higher education centre (faculty, university school, arts school, doctoral school, department, etc.), both the quality policy and quality objectives can be set out in a strategic plan, master plan, annual management plan or similar. But in all cases they must be defined, measurable and linked to the processes in which the centre or institution has management capacities; i.e. all processes specific to the centre or that are fully or partially the responsibility of the university.

Until 2021, the scope of management system certification and institutional accreditation processes was limited to university bachelor’s and master’s degrees and, therefore, to university faculties and

¹ European Association for Quality Assurance in Higher Education et al., *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)* (Brussels: ENQA, ESU, EUA, EURASHE, 2015).

schools, as well as departments in some institutions. As a result of Royal Decree 640/2021, of 27 July, on the creation, recognition and authorisation of universities and university centres, and institutional accreditation of university centres,² and Royal Decree 822/2021, of 28 September, establishing the organisation of university education and the procedure for quality assurance,³ the need to have implemented and certified IQAS now extends to doctoral schools if they are to access institutional accreditation. Universities' own non-official training, especially lifelong learning master's degrees, must also be covered by an IQAS, since a favourable report issued by this system is required for its implementation. Hence, these centres also fall within the scope of this guide and can certify their management systems under the same criteria as all other university and higher education centres.

In the case of centres offering arts higher education, current legislation does not require them to certify their IQAS, hence certification is voluntary. However, the principles governing the certification of management systems in university centres are equally valid in higher education arts schools. AQU Catalunya has therefore decided to extend the scope of this guide to these schools, thus allowing them to access the certification of their management systems if they so decide.

Objective

The purpose of this guide is to establish the standards and criteria to determine whether a management system is in place in the higher education centre, that it is being appropriately implemented and that it guarantees the quality of the training programmes offered.

The scope of this guide includes the following higher education institutions:

- a) Faculties
- b) University schools
- c) Doctoral schools
- d) University departments
- e) Centres attached to public and private universities
- f) Arts higher education centres
- g) University centres offering lifelong learning master's degrees

Thus, the degrees within the scope of this guide are:

- a) Bachelor's degrees

² Ministry of Universities, Royal Decree 640/2021, of 27 July, on the creation, recognition and authorisation of universities and university centres, and institutional accreditation of university centres. *Boletín Oficial del Estado* (179), 2021, pp. 90776-90800. BOE-A-2021-12613.

³ Ministry of Universities, Royal Decree 822/2021, of 28 September, establishing the organisation of university education and the procedure for quality assurance. *Boletín Oficial del Estado* (233), 2021, pp. 119537-119578. BOE-A-2021-15781.

- b) University master's degrees
- c) Doctorates
- d) Bachelor's degrees in arts higher education
- e) Master's degrees in arts education
- f) Lifelong learning master's degrees

However, the higher education institution may decide to include other training programmes in the scope of its management system, such as specialisation diplomas, expert diplomas and micro-credentials. In short, any higher education training programme must be covered by a management system that, while taking into account its specificities, consists of the same elements to guarantee quality.

Conditions for certification

AQU Catalunya can certify IQAS in higher education institutions when they meet the following conditions:

- a) The centre has training programmes from which at least one cohort has graduated, except for the first IQAS certification in lifelong education centres (see regulatory framework section).
- b) The centre's IQAS is mature and stable, has implemented all the processes relating to the comprehensive management of the higher education centre and obtains satisfactory results oriented to previously established measurable objectives. The improvement action plan contains not only the aspects arising from the internal review of the centre's management processes, but also includes actions arising from external assessments of the centre and its degree courses.
- c) The centre has reviewed the IQAS in its entirety. As a result of these reviews, improvement action plans have been implemented.

Regulatory framework

In the area of higher education quality assurance, in 2005 the European Higher Education Area member countries approved the ESG with which higher education institutions, quality agencies and European governments must comply, and renewed them in 2015.

Current regulations governing the university system place great importance on implementing quality assurance systems in universities and their teaching centres. Thus, Organic Law 2/2023, of 22 March, on the University System (OLSU) establishes that universities must define, structure and develop internal quality assurance systems for their academic activities (art. 3.2.o) and, through these systems, must guarantee the academic quality of the activities in their teaching centres (art.

5.3.3).

Royal Decree 640/2021, of 27 July on the creation, recognition and authorisation of universities and university centres, and institutional accreditation of university centres,² establishes institutional accreditation as a mechanism to guarantee global academic quality in a university centre, implemented through an internal quality assurance system, which must ensure training with a given level of competence and which matches the standard quality criteria of the teaching service provided, and which should meet the students' and society's demands (art. 14.1). Article 14.3.b also establishes that these internal quality assurance systems must be certified by quality assessment agencies.

Quality assurance for educational offerings is not only limited to public universities and official degrees. Article 5.7 of Royal Decree 640/2021 extends it to public and private universities and to official and universities' own non-official offerings by establishing that "universities must ensure the quality of all their academic offerings (official and their own non-official, including lifelong learning) through internal quality assurance systems, which must be certified [...] by the quality agencies created by law of the Autonomous Communities in whose territory the university has been established".

Royal Decree 822/2021, of September 28, establishing the organisation of university education and the quality assurance procedure,³ stresses the need for internal quality assurance systems for both official and the university's own non-official studies. Thus, in Article 25.1, the Ministry of Universities establishes, for official education, that "universities must take co-responsibility for quality assurance, through the development of their internal quality assurance systems and the promotion of a culture of quality in the university community". For their implementation, lifelong learning master's degrees (university's own non-official training) must receive a favourable report from the university's IQAS, which will be binding for the university. Therefore, if they so decide, university centres offering their own non-official training may certify their management systems.

The resolution of the Ministry of Universities of 3 March 2022⁴ includes the aspects to be considered in certifying the IQAS for university centres offering official bachelor's, master's and doctoral degrees, which have been considered in this guide. In addition, the IQAS must ensure compliance with all legal regulations applicable to higher education training programmes and, in particular, those related to fairness, respect for the diversity of individuals and effective equality between women and men.

Note on terminology

In this guide, the term “institution” is used as an equivalent to university. By extension, it could be equated to the Public Authorities, especially for public arts higher education centres, if there are processes and/or procedures that are their responsibility.

The term “management system” is also often used to refer to quality management for all processes and procedures related to teaching and student learning. Given that aspects such as the Sustainable Development Goals (SDGs), respect for student diversity, effective equality between men and women and even corporate social responsibility have gained importance in quality assurance systems in recent years, the term “management system” is sometimes used to refer to this broader scope of the IQAS. In no case are the centre or institution's processes or procedures of an administrative, economic-financial, or similar nature included here; it is thus limited to the processes and procedures included in the dimensions of this guide.

⁴ Ministry of Universities, [Resolution of 3 March 2022](#), on the General Secretariat of Universities, which establishes the guidelines for an institutional accreditation procedure for centres in public and private educational institutions, as well as the Protocol for the certification of internal quality assurance systems, and the Protocol for the assessment procedure for the accreditation renewal of university centres, as approved by the General Conference for University Policies. *Boletín Oficial del Estado* (58), 2022, pp. 28266-28277. BOE-A-2022-3710.

STRUCTURE OF THE GUIDE, DOCUMENTATION AND CERTIFICATION RESULT

Structure of the Guide

Apart from the introductory aspects, objectives, preconditions and regulatory framework, this guide is structured in seven dimensions. The first six cover the minimum aspects for inclusion in the management system of an institution offering higher education training programmes levels 2, 3 and 4 of the Catalan Higher Education Qualifications Framework (MCQES) (official bachelor's degrees, university master's degrees, doctorates, higher arts bachelor's and master's degrees and lifelong learning master's degrees). Dimension 7, newly incorporated in this guide, is solely applicable to centres offering doctoral programmes.

These dimensions are:

1. IQAS quality policy and effectiveness
2. Training programme design, approval and monitoring
3. Teaching, learning and student support
4. Teaching staff
5. Learning resources and services
6. Public information and accountability
7. R&D&I and knowledge transfer

Documentation to be submitted as evidence

The processes and procedures in the centre's management system and the documentation they generate demonstrating effective implementation of the IQAS are as follows:

- a) The centre and/or higher education institution's quality policies and objectives set out in a strategic, master, annual management or similar plan, presented, approved, published and made available to its stakeholders.
- b) The implemented process management system. This system must contain the map of the processes implemented in the centre, including a description, the persons in charge, the stakeholders affected by each process and a description of the procedures involved in each process.
- c) The documentation needed to carry out each procedure and generated in its implementation, including process review reports and documentation produced for external or internal agents of the university (curriculum reports, self-accreditation reports, annual

reports, etc.).

- d) The key and strategic indicators linked to the management system processes and the centre's strategic plan (or similar), the objectives or targets established for each indicator and the results.
- e) The management system review report, which comprehensively analyses all aspects related to each process (persons in charge, regulations, documentation, records and results of management, etc.).
- f) The improvement action plan to achieve the established objectives.

Certification result

Each dimension in the Guide includes a set of criteria that must be met to achieve the corresponding standard. Each of these criteria is rated at one of three levels:

- > Satisfactory. The standard is fully achieved, with possible examples of good practices.
- > Sufficient. Compliance with the standard, at least in its basic aspects. Areas for improvement for inclusion in IQAS improvement plans, as well as recommendations, can be identified.
- > Insufficient. There is partial compliance with the standard, while detecting aspects that need to be improved. Needs for improvement are identified on a mandatory basis.

Each dimension is also rated at one of three levels, determining the degree of implementation of its processes and procedures. These levels are:

- > Advanced implementation. The processes in the dimension have been implemented in the centre and are complete and efficient, with examples of good practices. All or most of the standards have been rated satisfactory, and none has been rated insufficient.
- > Sufficient implementation. The dimension processes have been adequately implemented and are, in general, complete and efficient. Most of the standards have been rated sufficient, and none has been rated insufficient.
- > Partial implementation. The dimension processes have been implemented inadequately and there are aspects that need to be improved. Some standards have been assessed as insufficient.

Favourable IQAS implementation certification requires advanced or, at least, sufficient implementation all the assessed dimensions. Partially implemented dimensions, implying that one or more of the standards have been assessed as insufficient, leads to unfavourable IQAS implementation certification.

DIMENSION 1

IQAS QUALITY POLICY AND EFFECTIVENESS

The centre has a quality assurance policy as part of its strategy. The IQAS structure ensures effective management of its processes, including review and continuous improvement.

- > The centre has a formally defined quality assurance policy that has been made public to all stakeholders. This quality policy is set out in a strategic plan, master plan or similar, the objectives of which include indicators to measure their degree of achievement.
- > The chain of responsibilities and the stakeholders involved in the processes and procedures are correctly defined and ensure adequate operation.
- > The map of IQAS processes and procedures shows the complete set of processes implemented and their interrelationships.
- > The IQAS documentation management system enables efficient and systematic control of the documents generated.
- > The information management system enables swift, complete, reliable and representative collection of data and indicators linked to the processes and the strategic plan (or similar).
- > There is evidence that the IQAS and the quality policy and strategy are analysed periodically, contributing both to improving the efficiency of the processes and achieving the centre's quality objectives.

As established by the ESG, higher education institutions must have a quality assurance policy that is public and is part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate processes and should involve external stakeholders (**ESG 1.1. Policy for Quality Assurance**).

The quality assurance policy and processes are the main pillars of an institutional management system, which should promote a cycle of continuous improvement and contribute to the quality assurance and accountability of the centre and/or institution. This policy should promote a quality culture in which all internal stakeholders take responsibility for quality and are committed to quality assurance in all areas of the institution. This quality culture has a positive impact on the quality of the training programmes.

The policy, formally approved and publicly available, must be implemented through a series of internal quality assurance processes that facilitate the participation of the entire institution. How this policy is implemented, monitored and reviewed depends on the institution.

The set of processes and procedures related to the comprehensive management of the IQAS must show that the system is complete, mature and stable. The chain of responsibility for ensuring the implementation, monitoring and periodic review of the integrated IQAS (processes and strategy) must be clearly defined and unequivocally demonstrate the decision-making and participation of the stakeholders involved.

The IQAS must be supported by a document management system that guarantees the correct functioning of the institution and ensures efficient control of the documentation generated. It must therefore contribute systematically to the preparation, revision, location, access and preservation of documentation.

The centre must provide its own reliable data to make informed decisions and, to this end, it must have effective processes and procedures for gathering information and analysing training programmes and all activities linked to the IQAS (**ESG 1.7. Information management**). Gathering information (academic results, satisfaction results, complaints and suggestions, employment prospects, etc.) is a key element in analysing all processes and procedures in order to design improvement actions. Therefore, the IQAS must have an information management system that allows agile, complete and reliable collection of data and indicators associated with the system, as well as the analysis of results and their trends, and that, in short, contributes not only to improving the degrees within the scope of the IQAS, but also to analysing and improving the IQAS itself.

Finally, IQAS management must be part of a systematic and continuous process of review and improvement of both its processes and procedures and the quality strategy and objectives. Such monitoring and periodic review should be included in a systemic review report that comprehensively analyses all aspects related to each process (persons responsible, regulations, documentation, records and results of management) and achievement of the centre's quality objectives. Including an internal audit procedure in the review and improvement process is considered good practice.

Rubrics

<p>1.1. The centre has a formally defined quality assurance policy that has been made public to all stakeholders. This quality policy is set out in a strategic plan, master plan or similar, the objectives of which include indicators to measure their degree of achievement.</p>	
Satisfactory	The centre has implemented, updated and published a quality assurance policy that is implemented through a structured plan that adequately includes all the actions to be carried out, their objectives and the indicators to measure their degree of achievement.
Sufficient	The centre has implemented and published a quality assurance policy that is implemented through a plan that includes the main actions to be carried out, their most important objectives and the indicators to measure their degree of achievement.
Insufficient	The centre has not implemented or properly defined a quality assurance policy. There is no plan setting out the actions, their objectives and the indicators to measure their degree of achievement, or it has not been properly structured.
<p>1.2. The chain of responsibilities and the stakeholders involved in the processes and procedures are correctly defined and ensure adequate operation.</p>	
Satisfactory	The chain of responsibilities and stakeholders to ensure the proper functioning of the processes and procedures to analyse and improve the IQAS are well suited to these functions and have a high level of involvement. Decision-making is highly appropriate and always carried out following the chain of responsibilities established in the processes and procedures.
Sufficient	The chain of responsibilities and stakeholders to ensure the proper functioning of the processes and procedures to analyse and improve the IQAS are adequate for these functions. Decision-making is adequate, but not always carried out following the chain of responsibilities established in the processes and procedures.
Insufficient	The chain of responsibilities and stakeholders to ensure the proper functioning of the processes and procedures to analyse and improve the IQAS are not always adequate for these functions. Decision-making is not always adequate and not always carried out following the chain of responsibilities established in the processes and procedures.
<p>1.3. The map of IQAS processes and procedures shows the complete set of processes implemented and their interrelationships.</p>	
Satisfactory	There is an up-to-date process and procedure map that includes all IQAS processes and their interrelationships.
Sufficient	There is a process and procedure map that includes most of the main IQAS processes and their interrelationships.
Insufficient	The process and procedure map is not consistent with the implemented IQAS processes, nor are interrelationships well established or coherent with implementation of the system.

1.4. The IQAS documentation management system enables efficient and systematic control of the documents generated.	
Satisfactory	An IQAS documentation management system is in place that allows very easy access to the latest version of the system and all the documentation generated in this regard. All the documentation is systematically organised.
Sufficient	An IQAS documentation management system is in place that includes the latest version of the system and the most relevant documentation generated in this regard. Most of the documentation is organised systematically.
Insufficient	An IQAS documentation management system is in place that includes a non-updated version of the system and/or the relevant documentation. Furthermore, the documentation is not organised systematically.
1.5. The information management system enables swift, complete, reliable and representative collection of data and indicators linked to the processes and the strategic plan (or similar).	
Satisfactory	An information management system is in place that systematically collects relevant and reliable data and indicator results from all IQAS processes and the strategic plan (or similar). The information management system provides stakeholders with easy access to the data and indicator results.
Sufficient	An information management system is in place that collects relevant, generally representative and reliable data and indicators results from the IQAS processes and strategic plan (or similar). The information management system provides stakeholders with relatively easy access to data and indicator results.
Insufficient	An information management system is in place that partially collects relevant data and indicators results from the IQAS processes and strategic plan (or similar). The information management system does not guarantee the representativeness and reliability of the collected data and indicator results. Stakeholders' access to data and indicators is not adequate.
1.6. There is evidence that the IQAS and the quality policy and strategy are analysed periodically, contributing both to improving the efficiency of the processes and achieving the centre's quality objectives.	
Satisfactory	The information on the IQAS processes, based on data and indicator results, permits efficient decision making to guarantee the quality of the degree programmes. The IQAS is reviewed annually, resulting in a system review report which, together with the analysis of the indicator results, provides a complete and structured improvement plan.
Sufficient	The information on most of the IQAS processes, based on data and indicator results, generally allows decisions to be made that ensure the quality of the degree programmes. The periodic review of the IQAS results in an improvement plan, although this only provides a structured approach to the most relevant aspects.
Insufficient	The information from the IQAS processes is not used or is not relevant in decision making to guarantee the quality of the degree programmes. The IQAS is not reviewed and/or the periodic analysis of the system provides an improvement plan that is partial, unstructured and lacking relevant aspects.

DIMENSION 2

TRAINING PROGRAMME DESIGN, APPROVAL AND MONITORING

The centre has implemented processes for the design, approval, review and improvement of training programmes and, if applicable, their termination.

- > Processes and procedures for managing the design and approval of training programmes are in place and ensuring they are in line with their disciplines, the MCQES and other applicable internal and external regulations.
- > Processes and procedures for reviewing and improving training programmes are in place and guarantee continuous updating and improvement.
- > Information is collected to analyse and improve processes and procedures related to the training programme design, approval, review and improvement.
- > There is clear and continuous evidence to demonstrate that processes and procedures related to the design, approval, review and improvement are analysed and, if necessary, improved, resulting in continuous improvement in training programmes.

The training programmes are at the heart of higher education institutions' teaching mission, as indicated in the ESG. They provide students with knowledge, skills and competencies that will be applied in their future professional careers and influence their personal development.

The centre should have a policy, strategy or plan to guide its academic offerings. This policy should be based on a diagnosis of the centre's position in its territorial, national and international environment in order to assess its present and possible future offerings.

Among other things, the design of any training programme offered by a higher education institution consists of defining its training objectives and the learning outcomes to be achieved by students; its duration and ECTS credits, if applicable; the units in the programme and their sequence; the content and its nature; and the training and assessment activities.

Institutions must have processes and procedures for the design and approval of their programmes, which must be designed to meet their set objectives, including the expected learning outcomes. The qualification resulting from a programme must be clearly specified and communicated, and refer to the correct MCQES level and, consequently, to the European Qualifications and the European Higher Education Area Frameworks **(ESG 1.2. Design and approval of programmes)**.

The processes and procedures implemented by the centre must also anticipate the steps for implementing and rolling out its training programmes, whether official or the university’s own non-official programmes.

Once the curricula have been implemented and rolled out, “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”. **(ESG 1.9. Ongoing monitoring and periodic review of programmes)**.

Rubrics

2.1. Processes and procedures for managing the design and approval of training programmes are in place and ensuring they are in line with their disciplines, the MCQES and other applicable internal and external regulations.	
Satisfactory	All actions related to training programme design and approval are always carried out in accordance with its processes and procedures and guarantee that the programmes are fully adapted to their respective disciplines, to the MCQES and to the rest of the institution’s applicable internal and external regulations.
Sufficient	Actions related to training programme design and approval are generally carried out as established in the related processes and procedures. Sufficient development of the training programmes, their adaptation to their disciplines, the MCQES and the rest of the institution’s applicable internal and external regulations is guaranteed.
Insufficient	Most of the actions related to training programme design and approval are not carried out as established in the related processes. Adequate and sufficient development of training programmes is not always guaranteed.
2.2. Processes and procedures for reviewing and improving training programmes are in place and guarantee continuous updating and improvement.	
Satisfactory	All actions related to training programme review and improvement are always carried out in accordance with their processes and procedures, guaranteeing its continuing adequacy and relevance through continuous improvement.
Sufficient	Actions related to training programme review and improvement are generally carried out in accordance with their processes and procedures, guaranteeing its adequacy and relevance through sufficient continuous improvement.
Insufficient	Most of the actions related to training programme review and improvement are not carried out in accordance with their processes and procedures, and sufficient continuous improvement to the programmes is not guaranteed.
2.3. Information is collected to analyse and improve processes and procedures related to the training programme	

design, approval, review and improvement.	
Satisfactory	Complete, reliable and representative information on processes and procedures is systematically collected, allowing for their review and that of the training programmes within their scope.
Sufficient	In general, sufficient, complete and reliable information on processes and procedures is collected, thereby permitting their review and that of the training programmes within their scope.
Insufficient	Partial and unreliable information on processes and procedures is collected, which does not permit an adequate review of the processes and procedures or the training programmes within their scope.
2.4. There is clear and continuous evidence to demonstrate that processes and procedures related to the design, approval, review and improvement are analysed and, if necessary, improved, resulting in continuous improvement in training programmes.	
Satisfactory	There is clear and continuous evidence that the processes and procedures that manage the life cycle of the training programmes are analysed regularly, resulting in an improvement plan. The plan is complete and structured. Proposed actions and their results are monitored regularly and systematically.
Sufficient	The processes and procedures that manage the life cycle of the training programmes are generally analysed regularly, leading to an improvement plan, when appropriate. This plan is generally structured and includes the most relevant aspects. The most relevant elements of the improvement plan are monitored.
Insufficient	The processes and procedures that manage the life cycle of the training programmes are not analysed or their analysis results in an improvement plan, when appropriate, that is partial, unstructured and/or lacking relevant aspects. If such an improvement plan exists, its follow-up is neither systematic nor complete.

DIMENSION 3

TEACHING, LEARNING AND STUDENT SUPPORT

The centre has implemented processes that favour and support student learning as soon as they are admitted to the training programmes.

- > Processes and procedures related to teaching and student learning are in place and ensure training programmes are effectively developed and expected learning outcomes achieved.
- > Processes and procedures related to student support are in place and facilitate students' progress and well-being throughout their studies.
- > Information is collected to analyse and improve the teaching-learning process and student support.
- > There is clear and continuous evidence that the processes and procedures related to teaching, learning and student support are analysed and, when appropriate, regularly improved.

According to the ESG, institutions should consistently apply pre-established and published standards covering all phases of the student "life cycle", e.g., admission, progression, recognition and certification (**ESG 1.4. Student admission, progression, recognition and certification**).

Higher education students' experience begins with the admissions process, and it is vital that they are informed of the selection criteria and can trust that they will be applied. For this reason, the centre must have access and admission processes and procedures in place that incorporate the corresponding selection criteria. The admission process must ensure that the profile of the admitted students is as intended by the centre, so that students' achieving learning outcomes and, therefore, progressing and graduating can be maximised.

Student-centred learning and teaching play an important role in stimulating student motivation, self-reflection and involvement in the learning process. This means careful consideration of study plan design and delivery and assessment of outcomes (**ESG 1.3. Student-centred learning, teaching and assessment**).

Key elements in this approach will be the teaching methodology and activities, the assessment system and student feedback. The management system procedures should establish the mechanisms for assessing the adequacy of the teaching-learning process. In this sense, the results of bachelor's and master's degree final projects, doctoral theses and their resulting scientific

product, external academic work experience, projects, etc. are essential to determine how far learning outcomes are achieved and, therefore, the effectiveness of the teaching-learning process.

Among other aspects, the training programme management system must consider: mechanisms for updating the content of the subjects and learning activities with the latest knowledge, advances and research in the discipline in question; the teaching coordination mechanisms; the assignment of the most relevant staff to the teaching units in the study plans; and assessment systems.

Higher education institutions should have adequate and easily accessible support services (**ESG 1.6. Learning resources and student support**). In this sense, the management system must consider procedures for managing student support, with the aim of favouring their academic progress and well-being during their studies. It will therefore be necessary to specify and control the procedures for student monitoring, tutoring and supervision. Procedures should ensure that the most appropriate teachers and learning support staff are assigned to these tasks. Support and guidance should be provided for students on external academic work experience or who participate in academic and/or scientific mobility programmes.

Finally, graduation represents the culmination of the study period. Students must receive documentation explaining the qualification obtained, including the learning outcomes achieved and the context, level, content and status of the studies that have been successfully completed. In this phase, orientation and support for students in finding employment are also fundamental.

The entire teaching-learning process must respect the diversity of the student body and promote effective equality between men and women.

Rubrics

3.1. Processes and procedures related to teaching and student learning are in place and ensure training programmes are effectively developed and expected learning outcomes achieved.	
Satisfactory	All actions related to teaching and student learning are always carried out as established in the related processes and procedures. These processes ensure effective implementation of the training programmes and ensure the expected learning outcomes are achieved.
Sufficient	The actions related to teaching and student learning are generally carried out as established the related processes and procedures. These processes ensure sufficient implementation of the training programmes and ensure the expected learning outcomes are achieved.
Insufficient	Most of the actions related to teaching and student learning are not carried out as established in the related processes and procedures. Sufficient implementation of the training programmes and achievement of the expected learning outcomes are not always guaranteed.
3.2. Processes and procedures related to student support are in place and facilitate students' progress and well-being throughout their studies.	
Satisfactory	All actions related to student support are always carried out as established in the related processes and procedures. These processes facilitate adequate student progress and well-being.
Sufficient	The actions related to student support are generally carried out as established in the related processes and procedures. These processes facilitate sufficient student progress and well-being.
Insufficient	Most of the actions related to student support are not carried out as established in the related processes and procedures. These processes do not facilitate sufficient student progress and well-being.
3.3. Information is collected to analyse and improve the teaching-learning process and student support.	
Satisfactory	Complete, reliable and representative information on the processes and procedures related to teaching, learning and student support is systematically collected, thereby permitting their review.
Sufficient	In general, sufficient, complete and reliable information on the processes and procedures related to teaching, learning and student support is collected, thereby permitting review.
Insufficient	Partial and unreliable information on the processes and procedures related to teaching, learning and student support is collected, and does not permit adequate review.

3.4. There is clear and continuous evidence that the processes and procedures related to teaching, learning and student support are analysed and, when appropriate, regularly improved.	
Satisfactory	<p>There is clear and continuous evidence that the processes and procedures that manage teaching, learning and student support are analysed regularly, resulting in an improvement plan.</p> <p>The plan is complete and structured.</p> <p>Proposed actions and their results are monitored regularly and systematically.</p>
Sufficient	<p>The processes and procedures that manage teaching, learning and student support are generally analysed regularly, leading, when appropriate, to an improvement plan.</p> <p>This plan is generally structured and includes the most relevant aspects.</p> <p>The most relevant elements of the improvement plan are monitored.</p>
Insufficient	<p>The processes and procedures that manage teaching, learning and student support are not analysed or their analysis results an improvement plan, when appropriate, that is partial, unstructured and/or lacking relevant aspects.</p> <p>If such an improvement plan exists, its follow-up is neither systematic nor complete.</p>

DIMENSION 4

TEACHING STAFF

The centre has put processes in place to ensure that teaching staff assigned to teaching, supervision and tutoring activities are competent and qualified.

- > The processes and procedures for teaching staff management (establishing the profile, teaching assignment and teaching assignment assessment) are in place and ensure the training programmes are implemented effectively.
- > The processes and procedures for teacher professional development (training and assessment) are in place and ensure training programmes are implemented effectively.
- > Information is collected to analyse and improve the processes and procedures for teaching staff management and professional development.
- > There is clear and continuous evidence that the processes and procedures related to teaching staff management and professional development are analysed and, when appropriate, regularly improved.

Processes for the quality assurance of teaching staff assigned to higher education training programmes should ensure their competence, and procedures for their recruitment and professional development should be fair and transparent (**ESG 1.5. Teaching staff**).

This ESG standard is specified in Catalonia in **standard 4** of the university centre institutional accreditation, which requires the centre to ensure its teaching staff are sufficient in number, competent and adequate. In addition, the processes applied for recruitment and personal and professional development must be sustainable, fair and transparent.

In the current higher education system, despite certain external controls in the form of prior accreditation (in the university system) or access to the civil service (in certain cases in public arts higher education centres), the guarantee of the training and competence of the teaching staff and their performance assessment is the responsibility of the institutions themselves. For this reason, institutions and their centres must have a teaching staff policy in place. In accordance with the standards and criteria for university centre institutional accreditation, this policy must include the

following minimum elements:

- > The definition of the faculty profiles necessary to provide teaching, supervision and tutoring for students. With regard to doctoral programme teaching staff, the management system must also consider the adequacy and sufficiency of the research merits in the field of the doctoral theses they supervise. In the case of lifelong learning programmes or arts higher education, it must consider the adequacy and sufficiency of the professional merits.
- > The processes or procedures for teacher professional development, including access, assessment and training.
- > The procedures for analysing and assessing the profile of teaching staff assigned to teaching, supervising and tutoring students.
- > Procedures for assessing future teaching staff needs, to ensure their adequacy and profile.

Depending on the nature of each institution, these elements may be defined to a greater or lesser extent in different instances: university, centre, department (as the main provider of teaching staff) or even the corresponding educational authority. Whatever the case, the centre, as the party responsible for the training programmes it provides, must ensure that these elements are in place.

Rubrics

4.1. The processes and procedures for teaching staff management (establishing the profile, teaching assignment and teaching assignment assessment) are in place and ensure the training programmes are implemented effectively.	
Satisfactory	All actions related to academic personnel management are carried out as established in the related processes. Effective implementation of the training programmes is guaranteed.
Sufficient	The actions related to academic personnel management are generally carried out as established in the related processes. Sufficient implementation of the training programmes is guaranteed.
Insufficient	Most of the actions related to academic personnel management are not carried out as established in the related processes. Sufficient implementation of the training programmes is not always guaranteed.

4.2. The processes and procedures for teacher professional development (training and assessment) are in place and ensure training programmes are implemented effectively.	
Satisfactory	All actions related to academic personnel training and assessment are carried out as established in the related processes. Effective implementation of the training programmes is guaranteed.
Sufficient	The actions related to academic personnel training and assessment are generally carried out as established in the related processes. Sufficient implementation of the training programmes is guaranteed.
Insufficient	Most of the actions related to academic personnel training and assessment are not carried out as established in the related processes. Sufficient implementation of the training programmes is not always guaranteed.
4.3. Information is collected to analyse and improve the processes and procedures for teaching staff management and professional development.	
Satisfactory	Complete, reliable and representative information on the processes and procedures related to teaching staff management and professional development is systematically collected, thereby permitting their review.
Sufficient	In general, sufficient, complete and reliable information on the processes and procedures related to teaching staff management and professional development is collected, thereby permitting their review.
Insufficient	Partial and unreliable information on process and procedures related to teaching staff management and professional development is collected, which does not permit their review.
4.4. There is clear and continuous evidence that the processes and procedures related to teaching staff management and professional development are analysed and, when appropriate, regularly improved.	
Satisfactory	There is clear and continuous evidence that processes and procedures related to teaching staff management and professional development are analysed regularly, resulting in an improvement plan. The plan is complete and structured. Proposed actions and their results are monitored regularly and systematically.
Sufficient	The process and procedures related to teaching staff management and professional development are generally analysed regularly, resulting in an improvement plan, when appropriate. This plan is generally structured and includes the most relevant aspects. The most relevant elements of the improvement plan are monitored.
Insufficient	The process and procedures related to teaching staff management and professional development are not analysed or result in an improvement plan, when appropriate, that is partial, unstructured and/or lacking relevant aspects. If such an improvement plan exists, its follow-up is neither systematic nor complete.

DIMENSION 5

LEARNING RESOURCES AND SERVICES

The centre has implemented processes for managing material resources and services related to the training programmes. The competence of the personnel in charge is ensured.

- > Processes and procedures for managing services and material resources are in place and ensure the training programmes are effectively implemented.
- > Processes and procedures for the management and professional development of personnel in charge of training programme-related services are in place, and their competence and adequacy are ensured.
- > Information is collected to analyse and improve processes and procedures related to services and material resources and the personnel in charge.
- > There is clear and continuous evidence that management of services and material resources and the personnel in charge of them are analysed and, when appropriate, regularly improved.

Higher education institutions should have adequate and easily accessible support services (**ESG 1.6. Learning resources and student support**). In this sense, the management system must include procedures for managing student support, with the aim of favouring academic progress and well-being during their studies.

The centre must foresee the need for human resources to support a wide range of services and infrastructures: teaching infrastructure (classrooms, laboratories, clinical facilities, subject-specific facilities, etc.), libraries, study spaces, computer infrastructure, documentation, tutoring services, guidance for students with disabilities, advice on grants, career advice and placement, residential life, sports, etc. The proper functioning of these resources depends on their management support staff.

The processes related with managing the centre's material resources and services (e.g., scientific-technical equipment, virtual campus, ICT, classrooms, study rooms, computer rooms, laboratories, workshops, CRAI, reprographic services, etc.) should provide for their maintenance and the detection of needs for new resources or services. Where appropriate, IQAS processes may refer to cross-sectional processes in the higher education institution.

Rubrics

<p>5.1. Processes and procedures for managing services and material resources are in place and ensure the training programmes are effectively implemented.</p>	
<p>Satisfactory</p>	<p>All actions related to services and material resources management are always carried out as established in the related processes and procedures. These processes and procedures ensure effective implementation of the training programmes.</p>
<p>Sufficient</p>	<p>Actions related to services and material resources management are generally carried out as established in the related processes and procedures. These processes and procedures ensure sufficient implementation of the training programmes.</p>
<p>Insufficient</p>	<p>Most of actions related to services and material resources management are not carried out as established in the related processes and procedures. Sufficient implementation of the training programmes is not always guaranteed.</p>
<p>5.2. Processes and procedures for the management and professional development of personnel in charge of training programme-related services are in place, and their competence and adequacy are ensured.</p>	
<p>Satisfactory</p>	<p>All actions related to the management and professional development of the personnel in charge of the training programme services are always carried out as established in the related processes and procedures. These processes ensure their competence and adequacy.</p>
<p>Sufficient</p>	<p>Actions related to the management and professional development of personnel in charge of training programme services are generally carried out as established in the related processes and procedures. These processes ensure sufficient competence and adequacy.</p>
<p>Insufficient</p>	<p>Most of the actions related to the management and professional development of the personnel in charge of the training programme services are not carried out as established in the related processes and procedures. Sufficient competence and suitability of these personnel is not always guaranteed.</p>

5.3. Information is collected to analyse and improve processes and procedures related to services and material resources and the personnel in charge.	
Satisfactory	Complete, reliable and representative information on the processes and procedures related to the services and material resources and the personnel in charge of them is systematically collected, thereby permitting their review.
Sufficient	In general, sufficient, complete and reliable information on the processes and procedures related to the services and material resources and the personnel in charge of them is collected, thereby permitting their review.
Insufficient	Partial and unreliable information on processes and procedures related to services and material resources and the personnel in charge of them is collected, which does not permit their review.
5.4. There is clear and continuous evidence that management of services and material resources and the personnel in charge of them are analysed and, when appropriate, regularly improved.	
Satisfactory	There is clear and continuous evidence that the processes and procedures related to managing services and material resources and the personnel in charge of them are analysed regularly and result in an improvement plan. The plan is complete and structured. Proposed actions and their results are monitored regularly and systematically.
Sufficient	The analysis of the processes and procedures related to the management of services and material resources management and the personnel in charge of them results in an improvement plan, when appropriate. This plan is generally structured and includes the most relevant aspects. The most relevant elements of the improvement plan are monitored.
Insufficient	The processes and procedures related to the management of services and material resources and the personnel in charge of them are not analysed or their analysis results in an improvement plan, when appropriate, that is partial, unstructured and/or lacking relevant aspects. If such an improvement plan exists, its follow-up is neither systematic nor complete.

DIMENSION 6

PUBLIC INFORMATION AND ACCOUNTABILITY

The centre has put processes in place to ensure the publication of complete, up-to-date and accessible information on training programmes to ensure accountability.

- > Processes and procedures for public information management and accountability are in place and ensure effective implementation of training programmes.
- > Information is collected to analyse and improve processes and procedures for public information management and accountability.
- > There is clear and continuous evidence that processes and procedures related to public information management and accountability are regularly reviewed and, when appropriate, improved.

Higher education institutions must ensure transparency by publishing and disseminating their activities and results (**ESG 1.7. Information management; 1.8. Public information**). In this sense, the management system must include procedures for managing information on the centre, the operational implementation of its degree programmes and data and indicator results associated with implementing the degrees and the defined strategic objectives. The main stakeholders should be identified and the level and channels of accountability for each should be determined.

Public information must be truthful, complete, up-to-date and easily accessible to society as a whole, and permit accountability in relation to its activities.

Rubrics

6.1. Processes and procedures for public information management and accountability are in place and ensure effective implementation of training programmes.	
Satisfactory	All actions related to public information and accountability are always carried out as established in the related processes. Effective implementation of the training programmes is guaranteed.
Sufficient	The actions related to public information and accountability are generally carried out as established in the related processes. Sufficient implementation of the training programmes is guaranteed.
Insufficient	Most of the actions related to public information and accountability are not carried out as established in the related processes. Sufficient implementation of the training programmes is not always guaranteed.
6.2. Information is collected to analyse and improve processes and procedures for public information management and accountability.	
Satisfactory	Complete, reliable and representative information on the processes and procedures related to public information and accountability is systematically collected, thereby permitting their review.
Sufficient	In general, sufficient, complete and reliable information on the processes and procedures related to public information and accountability is collected, thereby permitting their review.
Insufficient	Partial and unreliable information on the processes and procedures related to public information and accountability is collected, which does not permit their review.
6.3. There is clear and continuous evidence that processes and procedures related to public information management and accountability are regularly reviewed and, when appropriate, improved.	
Satisfactory	There is clear and continuous evidence that the processes and procedures related to public information and accountability are analysed regularly and result in an improvement plan. The plan is complete and structured. Proposed actions and their results are monitored regularly and systematically.
Sufficient	The analysis of the processes and procedures related public information and accountability leads to an improvement plan, when appropriate. This plan is generally structured and includes the most relevant aspects. The most relevant elements of the improvement plan are monitored.
Insufficient	The processes and procedures related to public information and accountability are either not analysed or their analysis results in an improvement plan, when appropriate, that is partial, unstructured and/or missing relevant aspects. If such an improvement plan exists, its follow-up is neither systematic nor complete.

DIMENSION 7

R&D&I AND KNOWLEDGE TRANSFER

The centre has established processes to ensure that their doctoral programmes have research programmes and projects with internal and/or external funding, in order to obtain research results aligned with the lines of research in these programmes.

- > The processes and procedures related to R&D&I and knowledge transfer are in place and ensure that research results aligned with the lines of research in the doctoral programmes are obtained.
- > Information is collected to analyse and improve processes and procedures related to R&D&I and the transfer of knowledge and results.
- > There is clear and continuous evidence that the processes and procedures are regularly improved.

This dimension only affects doctoral schools and university centres offering doctoral programmes. It is included in the IQAS certification of these centres in accordance with the Resolution of March 3, 2022 of the Ministry of Universities on the procedures for institutional accreditation and certification of internal quality assurance systems.⁴ This resolution places the responsibility on the doctoral schools for the control of funded research programmes and projects and the transfer of knowledge from their doctoral programmes.

However, given the nature of doctoral schools and other doctoral training centres, all these elements are generally defined to differing extents in different instances: university, department and school, just as, by way of example, certain aspects of faculty management are defined in departmental or university processes and procedures. In all cases, IQAS certification for schools and/or centres offering doctoral training requires demonstration that these processes and procedures are in place, at the level determined by each university, and are effective.

The university must implement mechanisms to ensure its doctoral programmes have a research structure capable of proposing, planning and implementing research programmes and projects that can be funded internally and/or externally and whose results are aligned with the lines of research of these programmes. The processes and procedures implemented in university institutions and their centres must ensure that the research groups and lines of research, and their research projects and programmes, facilitate quality training of doctoral students. These programmes and research projects must be at the forefront of their disciplines and aligned with the most important

national and international benchmarks.

It is also essential for the university and/or centre to have processes and procedures in place that allow and facilitate knowledge transfer and collaboration in generating such knowledge between lines of research in the doctoral programmes and institutions, companies, organisations, etc.

In short, the processes and procedures implemented in the university and/or centre must guarantee that adequate and internationally recognised research, development and knowledge transfer activities are carried out in the doctoral programme lines of research, thus enabling the programmes to pass the accreditation process.

Rubrics

7.1. The processes and procedures related to R&D&I and knowledge transfer are in place and ensure that research results aligned with the lines of research in the doctoral programmes are obtained.	
Satisfactory	All R&D&I and knowledge transfer actions are always carried out as established in the related processes and procedures. Research results aligned with the doctoral programme lines of research are always ensured.
Sufficient	R&D&I and knowledge transfer actions are generally carried out as established in the related processes and procedures. In most cases, research results aligned with the doctoral programme lines of research are ensured.
Insufficient	Most of the R&D&I and knowledge transfer actions are not carried out as established in the related processes and procedures. In most cases, research results aligned with the doctoral programme lines of research are not ensured.

7.2. Information is collected to analyse and improve processes and procedures related to R&D&I and the transfer of knowledge and results.	
Satisfactory	Complete, reliable and representative information on the processes and procedures related to R&D&I and the transfer of knowledge and results is systematically collected, thereby permitting their review.
Sufficient	In general, sufficient, complete and reliable information on the processes and procedures related to R&D&I and the transfer of knowledge and results is collected, thereby permitting their review.
Insufficient	Partial and unreliable information on the processes and procedures related to R&D&I and the transfer of knowledge and results is collected, which does not permit their review.
7.3. There is clear and continuous evidence that the processes and procedures are regularly improved.	
Satisfactory	There is clear and continuous evidence that the processes and procedures for R&D&I and knowledge transfer management are analysed regularly and result in an improvement plan. The plan is complete and structured. Proposed actions and their results are monitored regularly and systematically.
Sufficient	The analysis of the processes and procedures related to R&D&I and knowledge transfer management leads to an improvement plan, when appropriate. This plan is generally structured and includes the most relevant aspects. The most relevant elements of the improvement plan are monitored.
Insufficient	The processes and procedures for R&D&I and knowledge transfer management are not analysed or their analysis results in an improvement plan, when appropriate, that is partial, unstructured and/or lacking relevant aspects. If such an improvement plan exists, its follow-up is neither systematic nor complete.

ANNEX 1

CHANGES IN THE EIGHTH EDITION

The main changes introduced in this eighth edition of the Guide are as follows:

- > The scope of the certification is extended to doctoral schools and centres offering doctoral programmes, centres offering lifelong learning master's degrees and centres offering arts higher education.
- > The title is now *Guide to the certification of internal quality assurance systems in higher education institutions*.
- > The introduction has been updated in terms of context, objectives and regulatory framework, and a note on terminology has been added.
- > A section on the structure of the Guide, documentation and certification results has been included.
- > The section on the certification procedure has been eliminated.
- > The dimensions have been revised to include new higher education institutions.
- > The heading for each dimension have been revised and standardised.
- > Dimension 7 on R&D&I and knowledge transfer in doctoral schools and centres offering doctoral programmes has been included, as a result of the Resolution of March 3, 2022, of the General Secretariat of Universities, on the IQAS certification procedure.
- > An annex has been included with a list of the most relevant changes introduced in the Guide.

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