AQU CATALUNYA

# GUIDE TO THE ACCREDITATION OF RECOGNISED BACHELOR'S AND MASTER'S DEGREE PROGRAMMES

Generalitat de Catalunya

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AQU CATALUNYA

# GUIDE TO THE ACCREDITATION OF RECOGNISED BACHELOR'S AND MASTER'S DEGREE PROGRAMMES

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# 1. INTRODUCTION

## 1.1. Aims of the guide

In our setting, and on the context of the State's regulatory presence, it may be stated that accreditation can be viewed as an administrative procedure or action that responds to a legal mandate and which grants official recognition or legal status to academic credentials (qualifications) awarded to university students by institutions.

Nevertheless, beyond this the goal of accreditation is to **ensure – for the benefit of the user – that study programmes offered by universities meet the formal and administrative requirements enforced by the relevant authority, while guaranteeing that the "educational level" attained by graduates corresponds to the level certified by the institution**. To this end, in relation to the study programme implemented, the following areas should be reviewed:

- That it meets the legal requirements set by the relevant authority (qualification title, number of ECTS credits, syllabus structure, admission criteria and requirements, etc.).
- That in relation to the established skills profile the academic proposal meets the specifications of the MECES (Spanish Framework for Higher Education Qualification) according to the qualification level, and the extent to which the academic knowledge underpinning it is relevant and up-to-date.
- That it has been developed using suitable resources in terms of teaching staff, infrastructure, learning support services and material resources.
- That certificates awarded adhere to suitable, appropriate procedures to assess student achievement, clearly showcasing the level of quality demanded.
- That the academic pathways of progression and graduation, as well as employability, of graduates fall in line with the characteristics of the students and the potential afforded by the labour context.
- That it benefits from internal assurance mechanisms guaranteeing regular review of the study process centred on the continual improvement of the education of its students.

On the basis of the foregoing, this documents set out the procedures and criteria for accreditation determined by AQU Catalunya in accordance with the European Standards and Guidelines (ESG, 2015), the primary goal of which is to ensure **equivalence between the study programme given and the European qualification level.**

To this end, AQU Catalunya's Governing Board approved the VSMA Framework (AQU, 2016), on the basis of which this accreditation guide, endorsed by AQU Catalunya's Institutional and

Programme Assessment Committee, was prepared. This guide pursues the following objectives:

- To ensure the quality of the study programmes offered in accordance with the qualification levels established and the criteria set out in current regulations.
- To assure availability of valid, reliable information to assist users of the university system in decision-making.
- To facilitate internal quality improvement processes in relation to the services and programmes developed by Catalan universities.
- To incorporate the verification process arising from the proposal for substantial amendments.

In order to achieve these aims, the accreditation model proposed in this guide makes the following presuppositions:

- **International equivalence**. As an acknowledged agency and a member of European quality assurance bodies (ENQA, EQAR), AQU Catalunya must adopt assessment guidelines and criteria in accordance with this status (in line with the ESGs, 2015).
- **Involvement of each institution in the assessment of evidence and the determination of improvement actions**. Internal validation or self-assessment is a vital aspect of the procedure. The improvement plan that supports and sets the timeframe of actions to be performed draws on verifiable, qualitative and quantitative information that is generated by an internal quality assurance system.
- **Integration of accountability and continual improvement** as a means of incorporating internal and external requirements.
- Specific attention to **students' academic achievements**, vital evidence as to the quality of the study programme.
- **Recognition of progress, best practices and outstanding quality** as an indication of the need to accept the principle that accreditation should foster continual improvement of study programmes.
- **Transparency and disclosure of processes and results, an essential goal to assuring credibility in decisions**. This also implies institutions are guaranteed the right to defence in relation to final decisions in a process of statements.

## 1.2. Regulatory framework

The launch of the EHEA has led to universities being granted a substantially greater degree of independence when it comes to forming new Bachelor's degree, Master's degree and doctoral programmes. Organic Act 4/2007, of 12 April, amending Organic Act 6/2001, of 21 December, on Universities (LOMLOU) laid the foundations for adapting university to the new

EHEA. Among other spheres, the Act determined a new structure for university degree programmes and qualifications. Subsequently, Royal Decree 1393/2007, of 29 October, established the organisation of recognised university programmes. In keeping with the principles set forth in the Organic Act, the Royal Decree extended university independence. Indeed, on the basis of established rules, it was now incumbent upon the universities themselves to determine and propose the study programmes to run and the qualifications to award, without being bound by a pre-established catalogue as they had been hitherto.

In return for greater university independence, proposals for new degree programmes must be submitted to an ***ex ante* assessment procedure** (known as **verification**) and, after a period of four years (for Master's degrees) or six years (for Bachelor's degrees and doctoral programmes), be submitted to an ***ex post* assessment procedure** (**accreditation**) based on the procedure and terms stipulated by the Government of Catalonia. In all cases, this must include a visit by experts external to the university. In the time between the two procedures, universities shall conduct a yearly **follow-up** on the development of study programmes implemented in line with their internal quality assurance system (IQAS). The criteria for accreditation are determined jointly by the quality agencies that are registered on the European Quality Assurance Register (EQAR) in line with international quality standards, in particular, the ESGs and the remaining legal regulations.

In order to establish the basis of action for these four processes, AQU Catalunya's Governing Board approved the **Framework for the verification, monitoring, modification and accreditation of recognised degree programmes** (VSMA Framework, AQU 2016), bringing them together in a logical manner to provide conceptual coherence and greater efficiency in managing the various assessment processes. In this respect, this guide provides the methodological and procedural definition behind these processes: accreditation.

Independently of whether the requirements of current regulations are met, through its governing bodies AQU Catalunya has committed to ensuring that the procedures and actions it has adopted for the external quality assurance of Bachelor's and Master's study programmes place emphasis on the importance of internal quality assurance systems within universities and their faculties.

This approach to action by AQU Catalunya fully coincides with the ESGs (ESG, 2015), which state that:

> "[...] it is important that external quality assurance recognises and supports institutional responsibility for quality assurance [...]"

Accordingly, the framework of reference and the procedures for action set out in the VSMA Framework, in addition to the approach and content set out herein, place specific emphasis on reviewing the operation of the internal quality assurance system. The assessment of internal procedures must take into consideration the array of evidence that has been progressively generated sequentially during the verification and follow-up stages. The quality of this evidence – duly documented – will enable AQU Catalunya to meet standard 2.2 of the ESGs:

> "The system for external quality assurance might operate in a more flexible way if institutions are able to demonstrate the effectiveness of their own internal quality assurance."

All in all, if evidence of the quality with which study programmes are operating can be determined owing to the quality of the proposals verified and on account of the extensive nature and relevance of the follow-up reports – particularly the preparatory accreditation (self-assessment) report – the external assessment focussed on accreditation will be reduced in size and scope and will allow the HEI to determine areas that are of particular interest to it. This principle shall apply in particular to accreditation renewals.

Lastly, we must also take into account Royal Decree 640/2021, of 27 July, on the creation, recognition and authorisation of universities and university centres and on the institutional accreditation of university centres. Among the aims of this Decree is the regulation of the procedure for providing university centres with institutional accreditation, and it makes reference to the participation of teaching staff at private universities and at private higher education centres attached to universities.

## 1.3. Student-centred teaching

The huge change entailed by shifting from a teaching model centred on the teaching staff to an education model centred on the student's learning and work by developing skills endowing the student with continual learning and adaptation to the cultural plurality and variety of the European area calls for a number of demands, including:

- For the content of programmes to be designed according to what the person learning should know and know how to do, rather than based on what the person teaching knows or believes he knows and knows how to do.
- For knowledge and know-how to be linked to significant learning projects that call for necessary (individual and group) lecturer/student interaction, as well as interaction and cooperative work among students.
- For learning to not focus on regurgitating the informative content of specific study materials, but instead on taking said content in so as to produce and carry out actions the performance of which calls for planning and for an assessment of the process and outcome of said actions.
- For the student/lecturer relationship to be founded on cooperation, mutual trust and shared responsibility.
- For students to be key players in the teaching/learning process; in other words, this entails allowing them to take part in the design of the "learning agreement", including in assessment strategies.

Accordingly, in assessing the quality of an educational proposal, particular focus shall be placed on:

- The skills profile put forward: what future graduates should know and know how to do.
- The proposal (or undertaking) of “significant performances” which illustrate that what students should know and know how to do (major projects) has been accomplished.
- The showcasing of teamwork/cooperative methodology in reaching the performances.
- The system for learning tutoring.
- Assessment strategies.
- Student participation in decision-making processes relating to the training programme.
- The structure, perspective and content of channels for informing students.

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# 2. ORGANISATION, PLANNING OF AND CRITERIA FOR ACCREDITATION

## 2.1. The faculty as the unit of assessment

According to the current academic governance of recognised programmes in Spain, the accreditation of recognised degrees and awards (Bachelor's, Master's and doctorate) must be periodically renewed in accordance with the established procedure. Accreditation is therefore applicable to all recognised academic programmes that have been introduced in Catalan universities in order for them to maintain their status as recognised qualifications.

However, **internal quality assurance systems (IQAS)** have a major impact on the phases in which the accreditation process takes place. In compliance with the ESG, HEIs should have in place an associated policy and processes aimed to assure the quality and level of their degree programmes. For this reason, universities have adopted IQAS, which have been developed at university level or at faculty level.

The **faculty** (including affiliated faculties and schools) has become the organisational model for QA processes, as it serves as the focus around which a series of programmes of study with similar disciplinary fields is structured, and it is responsible for the implementation and running of the IQAS as regards programme delivery.

The ESG state that the form of external quality assurance varies from system to system and can include institutional evaluations of different types; subject or programme evaluations; accreditation at subject, programme and institutional levels; and combinations of these.

It should not be forgotten that, as a starting point, the ESG have, among their goals, the spirit of the Graz Declaration (July 2003) of the EUA, which states that "the purpose of a European dimension to quality assurance is to promote mutual trust and improve transparency while respecting the diversity of national contexts and subject areas".

**AQU Catalunya therefore proposes that external assessments be made simultaneously of all recognised academic programmes being offered by a faculty**. The main objectives of this proposal are:

- The integration of programme review into institutional review.
- To provide an overview and reinforce the strategic vision of each faculty, and promoting coherence and consistency between undergraduate and postgraduate programmes and awards.
- To simplify external assessment and achieve economies of scale that reduce the cost of external assessment.

This approach assumes **that external assessment is, in terms of its scope, independent of accreditation**, which is applied at programme level, as mentioned at the beginning of this section. In this regard, the process takes into account the challenge of integrating into the audit the different levels of study of programmes being offered in the faculty (Bachelor's and postgraduate), whilst also allowing for the subsequent issue of accreditation reports for each programme.

## 2.2. Assessment committees

One aspect that helps to ensure the validity, reliability and usefulness of external assessment procedures is the action performed by external experts (peer reviews). Reviews led by external teams of experts are based on the academic, scientific and technical guidance afforded by experts as a distinguishing feature. They are also based on a direct study and observation of the reality to be assessed, which makes it possible to clarify the information examined and place it in context; therefore, it may be stated that the approach to accreditation is peer-based.

For a description of the profile required to sit on the different committees, see the document *Profiles and requirements for taking part in teaching staff, institutional and appeal assessment processes* (AQU Catalunya, 2020).

The selection of experts is a procedure that AQU Catalunya keeps open on a permanent basis via a mechanism where experts may register with the Agency's expert panel via the website. In addition to the CV formats that need to be enclosed when registering, the website expert section includes online training on quality, along with descriptions of the regulatory framework, the Bologna process and the Catalan university system.

### 2.2.1. External assessment committees (CAEs)

In all accreditation procedures it is necessary for an external team of auditors to visit the HEI, with the subsequent visit report playing a key role in the final decision made by the accreditation panels. As mentioned above, AQU Catalunya believes that the site visit should simultaneously involve all recognised programmes being offered in the faculty.

It is the responsibility of external assessment committees (CAEs, from the Catalan), the composition of which is designed taking into consideration the specific field of knowledge to which the faculty pertains, to perform external assessments in a specific institution. AQU Catalunya presents the CAE composition to the institution to enable the latter to specify whether any conflict of interest applies to any of the committee's members. This is the only circumstance under which any changes may be made to committee members. Upon completion of the assessment and once the external assessment report has been issued, the CAE's functions are complete.

The standard composition of an external assessment committee (CAE) is as follows:

- The **chairperson**.
- One **academic member** for each field of knowledge in the faculty.
- One **professional member** from the area of knowledge of the faculty.
- One **student** from the same field of knowledge as that of the faculty.
- One **secretary** who is a methodology specialist.

However, **the composition of the committees may vary according to the degree programmes to be assessed at each faculty and the type of visit involved**. In general, whenever possible, CAE shall be formed by a mix of members from the specific assessment committees for each field (accreditation committees) and other individuals specifically appointed to the committee.

The outcome of these duties is an **external assessment report** that the panel refers to the corresponding accreditation panel.

### 2.2.2. Accreditation panels

In the accreditation process, the special review panels set up under the VSMA Framework to individually deal with a specific subject area and be responsible for the validation, monitoring and modification of recognised programmes, take on the duties of audit panels. This ensures that the know-how acquired throughout the QA review processes is maintained and serves to reinforce the coherence of decisions made within the context of accreditation. Their main function is to issue the **audit reports** on programmes submitted for accreditation so that the corresponding bodies can make the definitive decision concerning accreditation.

In accordance with the agreement by AQU Catalunya's Institutional and Programme Assessment Committee (CAIP, from the Catalan) reached on 24 January 2011, whereby the special review panels in the VSMA Framework were set up, five permanent (standing) panels were established, each one covering one of the five main areas of knowledge: Arts and Humanities, Social and Legal Sciences, Experimental Sciences, Health Sciences, and Engineering and Architecture. These panels are also responsible for the accreditation of degree programmes.

For a description of the profile of those sitting on the different accreditation panels, as well as of the selection criteria and the general criteria on the make-up of the assessment committees, see the document *Profiles and requirements for taking part in teaching staff, institutional and appeal assessment processes* (AQU Catalunya, 2020).

### 2.2.3. Appeals Committee

The Appeals Committee is the committee in charge of deciding on the appeals which are lodged in university degree programmes accreditation processes. In the decision on appeals,

the committee will have on hand reports from experts in the field or fields of the degree programmes which lodge the respective appeals, and such experts should preferably be from outside the Catalan university system.

## 2.3. The accreditation procedure

The main stages of the accreditation process are as follows:

1) **Selection of faculties for external assessment**. The AQU Board of Management annually gives its approval to faculties selected for external assessment in the following academic year, according to the programmes due for accreditation. The proposal is drawn up jointly between the universities and AQU Catalunya.

2) **Planning of the site visit**. The dates for the site visit to each faculty are planned jointly by AQU Catalunya and the universities. The plan should be approved by either the end of the academic year prior to the one in which the visit is to be made or right at the beginning of the corresponding academic year.

3) **Submission of the accreditation application**. The HEI should formally request the accreditation of its recognised degree programmes in accordance with the criteria and the deadlines established by the Government of Catalonia's Resolution ECO/1902/2014, dated 31st July. In any case, the HEI should request the accreditation of all the degree programmes which are assessed at the latest at the time of the external visit.

4) **Acceptance of the application**. Applications that comply with the prerequisites shall be accepted by the administrative authority. If this is not the case, the HEI will be asked to make any relevant changes within ten working days. Once it has been accepted, it is then referred to AQU Catalunya, which will decide on it in a maximum time of 9 months.

5) **Documentation to be submitted**. The HEI should deliver the following documents **three calendar months** (without counting the month of August or other holiday and/or vacation periods) before the external assessment committee's visit to the faculty.

    a. **The faculty's self-assessment report**. The faculty's self-assessment report **integrates and replaces the final monitoring reports** of the programmes that are to undergo accreditation. The most significant aspects of each programme offered in the faculty are therefore kept separate in the self-assessment report. It should also contain an appropriately updated copy of the faculty or programme enhancement plan.

    b. **Evidence**. The recommended evidence which is listed in the document "Recomanacions i indicadors recomanats per a l'acreditació de graus i màsters"

(Recommended evidence and indicators for accreditation of Bachelor's and Master's degrees) should be submitted.

c. **A sample of students' achievements**. It will be necessary to prepare a selection of evidence of the assessment tests of students within the framework of final-year projects and dissertations of Bachelor's/Master's degrees, external placements and other selected subjects. The selection of the written tests, projects and/or reports should be done in such a way that there are examples of different qualifications from the last completed academic year.

6) **Analysis of the evidence**. The purpose of the review of all the evidence, which in general is envisaged in all QA procedures, is to identify the strengths and areas for improvement through the application of the standards and criteria given in this guide, and to establish the issues that need to be clarified prior to the site visit and the most important aspects to be dealt with during the visit. An assessment is made of the quality and relevance of both the evidence and the self-assessment report. On the basis on this, the external assessment committee (CAE, from the Catalan) has to decide if more or better information needs to be provided and assess whether it is appropriate for the external assessment to continue.

7) **Preliminary visit**. If it is deemed appropriate, **about six weeks** after submitting the documents the chairperson and the secretary of the CAE may visit the centre in order **to clear up any questions which have been posed and to specify the areas of enhancement**. The stakeholders to be interviewed shall also be agreed on. The faculty should be represented by two people, preferably the person who holds the top position of responsibility and some other person who has been involved in the monitoring and/or management process of the IQAS. On the preliminary visit it will be decided whether the external assessment process may be continued or whether, depending on the evidence provided, it would be appropriate to postpone it.

   On the basis of the preliminary visit or, when none is made, on the basis of the analysis of the self-assessment report and of the evidence, the CAE will issue a preliminary report with the actions which should be carried out by the HEI in order to improve information and assure the good performance of the process.

8) **Assessment**. The assessment involves the analysis of all the documents submitted and especially of the enhancement plan, which should be added to the report for the accreditation of the degree programme

   The external reviewers are to use the provided rubric table, giving appropriate examples. The assessment of the standards relating to the IQAS, to the pertinence of the public information, to the suitability of the teaching staff, and to the effectiveness of learning support will be carried out at faculty level, although the last two aspects should also be specified at degree programme level. In the case of the standards corresponding to the programme outcomes and the quality of the

programme design, assessment is carried out at programme level, with use being made of the appropriate rubric chart and examples to justify the various aspects.

9) **Organisation of the visit**. Following on from the preliminary visit, the faculty organises the timetable for the visit, which defines the various previously agreed focus groups that are to be held (teaching staff, students and graduates, support staff members/administration and services, employers, programme coordinators, management team, QA team, etc.) and the visit to the facilities. Space and facilities will also need to be set aside for the work of the CAE.

10) **The actual visit**. The main objective is to verify the delivery *in situ* of the programmes run in the faculty. The evidence provided has to be checked and verified, any controversies or disagreements detected and, if necessary, new evidence obtained so that any aspects not considered in the documentation provided can be assessed. The length of the visit will depend on the number of programmes to be audited and their status. **Two days** is considered to be the average time for most faculties.

    In the case of **faculties offering virtual or blended learning**, the visit affords an excellent opportunity to review the teaching model, as well as the level of innovation and technological infrastructure. It is advisable for the visit to take place at the actual site where the technological infrastructure is located. During the visit, the committee will examine the technological infrastructure and engage directly with technical and support staff. To assess the accessibility and user-friendliness of the platform, the CAE will hold interviews with students and graduates. The CAE shall also meet with stakeholders involved in the teaching/learning process. The visit may incorporate a mix of virtual and face-to-face interviews.

11) **Preliminary external assessment and accreditation reports**. In a period of **between four and six weeks** after the visit, the CAE will send to the respective Specific Assessment Committee (CEA, from the Catalan) the draft external assessment report (IAE, from the Catalan) so that the CEA may take it into consideration and prepare the accreditation reports (IdA, from the Catalan) of the degree programmes under assessment. It is envisaged that that the HEI will receive these reports within a period of about **eight weeks**.

    The rubrics given in the examples should be used in the drafting of the external assessment report. In the case of degree programmes which present assessments which are different from those applied to the rest of the degree programmes of the faculty, such differentiated assessment should be justified. In this report, the good practices and the aspects which are required to be enhanced should be clearly stated.

    The CEAs should draft the respective accreditation report once the draft IAE has been received and the aforementioned documents have been considered. This report will be either favourable or unfavourable, stating the aspects which should necessarily be amended in order to obtain a positive report

12) **Issue of preliminary reports and allegations.** AQU Catalunya will issue jointly the IAE and IdA. Within a period of about **twenty days**, the HEI may submit the allegations which it deems appropriate in relation to the preliminary reports, so that the CAE and the CEA may take them into consideration. The allegations should compulsorily include the new enhancement plan for the faculty's degree programmes, and contain the pertinent actions which are considered appropriate for correcting the weaknesses observed by the CAE and the CEA.

13) **Final reports**. Within a period of about **twenty days**, the CAE, after receiving and studying the allegations, will draft the final IAE proposal, which it should send to the respective CEA so that the latter, together with the allegations received, may draft the final IdA. AQU Catalunya will issue jointly the IAE and IdA.

    If the accreditation report states that it is necessary to introduce enhancements, it will stipulate jointly with the faculty and with the representatives of the degree programme, the deadline for implementing enhancements, **which under no circumstances may exceed two years**. Once this period has elapsed, the faculty will submit, together with the monitoring report, the evidence which justifies the start-up of the required measures.

    **The accreditation of degree programmes validates the incorporation of changes in the curricula if the submitted enhancement plan included them.** The changes in the report correspond to those which, according to the document *Processes for the communication and/or assessment of modifications made in university Bachelor's degree and Master's degrees*, should be communicated by means of the monitoring process. **Substantial changes entailing a re-verification of the degree programme will not be validated under any circumstances.**

    The **IdA** will be issued in a maximum time of **nine months counting from the date of the accreditation application**. Otherwise, it will be understood that the degree programme is accredited.

14) **Communication of accreditation**. AQU Catalunya will communicate the outcome of the accreditation to the Government of Catalonia, to the competent Ministry for universities (hereinafter, the Ministry) and Sport and to the Council of Universities, the qualitative evaluation of the accreditation will also be communicated. The procedure for lodging appeals in objection to the accreditation result and the qualitative evaluation of the accreditation is detailed in section 2.4.

15) **Register**. Once the final Resolution has been issued, the Ministry will communicate it to the Register of Universities, Higher Education Centres and Degree Programmes (RUCT, from the Catalan). In the event in which it is favourable, it will proceed to register the respective renewal of accreditation. If it is unfavourable, the degree programme will be recorded in RUCT as terminated as from that date. In such case, the resolution that is issued will declare the curriculum to be terminated and suitable

measures should be established to assure the academic rights of the students who are in the process of carrying out the respective studies.

**AQU Catalunya will take into account evaluations for the renewal of Erasmus Mundus programmes issued by the European Commission's Education, Audio-visual & Culture Executive Agency (EASAC). The HEI must provide the documentation for EASAC renewal at the time of accreditation.**

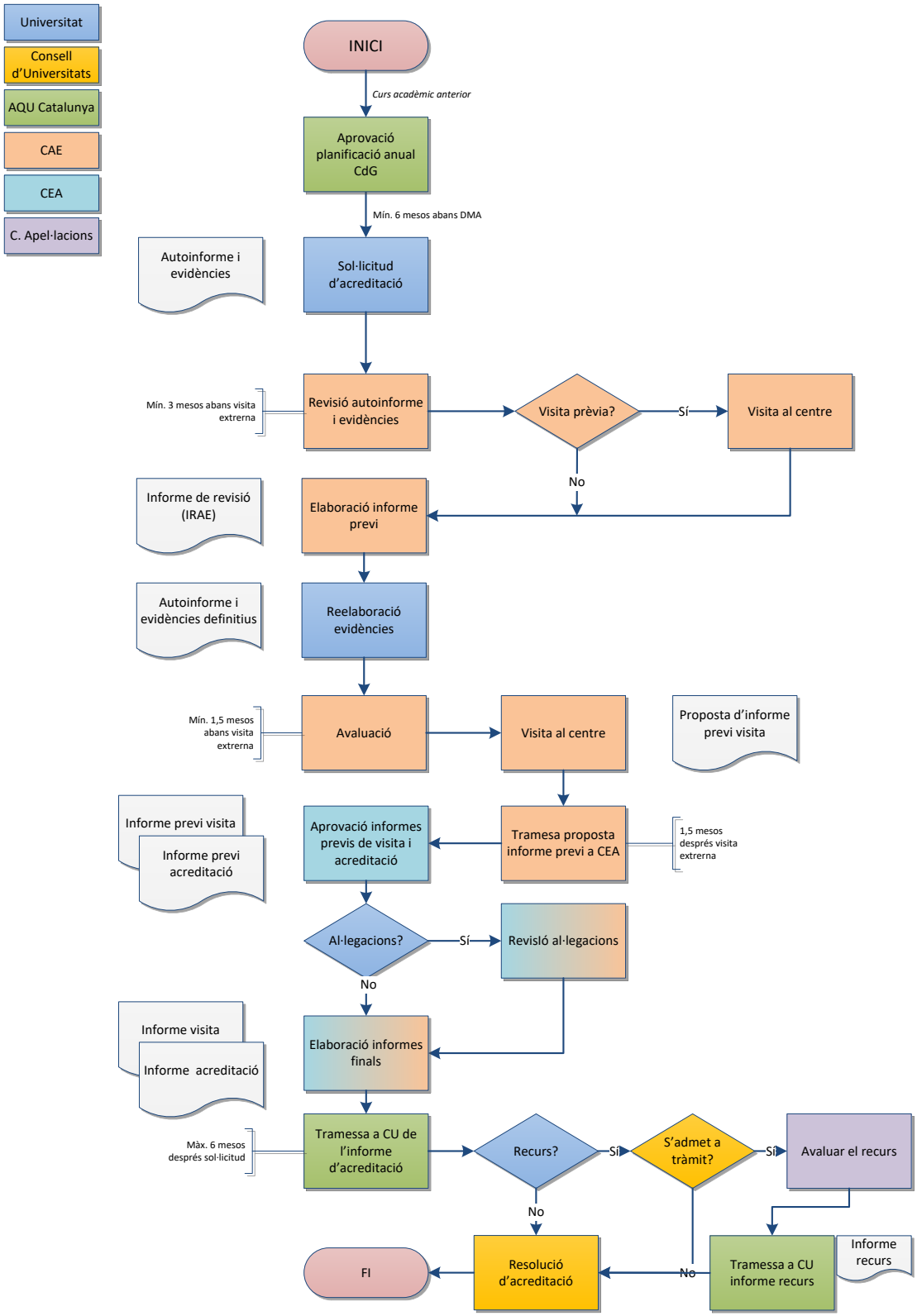
**AQU Catalunya may also recognise other forms of international accreditation awarded to study programmes. In order to be eligible for this option, programmes must first have obtained a positive evaluation and, secondly, the objectives set for both the international evaluation and the AQU accreditation process will need to be closely aligned.**

## 2.4. The appeal procedure

AQU Catalunya will communicate the outcome of the accreditation to the Ministry and to the Council of Universities. Once the resolution to award or reject accreditation has been issued by the Council of Universities, the university may lodge an appeal to said body within a maximum period of one month counting from the day immediately after the date on which notification is received.

Moreover, in relation to the resolution awarding the qualitative evaluation of the accreditation, which includes the results "compliant with conditions", "compliant" and "progressing towards excellence", the university may lodge an appeal to the Appeals Committee within a period of one month counting from the day immediately after the date on which notification is received.

An organisational chart of the procedure for assessing accreditation is set out below:


Universitat
Consell d'Universitats
AQU Catalunya
CAE
CEA
C. Apel·lacions
INICI
Curs acadèmic anterior
Aprovació planificació anual CdG
Mín. 6 mesos abans DMA
Autoinforme i evidències
Sol·licitud d'acreditació
Mín. 3 mesos abans visita extrerna
Revisió autoinforme i evidències
Visita prèvia?
Sí
Visita al centre
No
Informe de revisió (IRAE)
Elaboració informe previ
Autoinforme i evidències definitius
Reelaboració evidències
Mín. 1,5 mesos abans visita extrerna
Avaluació
Visita al centre
Proposta d'informe previ visita
Informe previ visita
Informe previ acreditació
Aprovació informes previs de visita i acreditació
Tramesa proposta informe previ a CEA
1,5 mesos després visita extrerna
Al·legacions?
Sí
Revisió al·legacions
No
Informe visita
Informe acreditació
Elaboració informes finals
Màx. 6 mesos després sol·licitud
Tramessa a CU de l'informe d'acreditació
Recurs?
Sí
S'admet a tràmit?
Sí
Avaluar el recurs
No
FI
Resolució d'acreditació
No
Tramessa a CU informe recurs
Informe recurs

## 2.5. The self-assessment report

The processes and procedures associated with the quality assurance of courses leading to higher awards are described in each HEI's internal quality assurance system. The IQAS is therefore a fundamental instrument for programme accreditation and as such should be seen as the cornerstone in the process of producing the self-assessment report.

In order to guarantee the quality of the process, the self-assessment report should comply, amongst other things, with the following requirements. It should be:

- Complete, rigorous and specific. The report should include an analysis and assessment of what are considered the key elements for the particular context being analysed and for enhancement.
- Based on evidence produced in the monitoring process and new evidence from the study programmes (for example, student achievements).
- Systematic and detailed in the analysis of the causes and consequently whatever is necessary to carry through the improvements and enhancements.
- Balanced, in terms of both the positive aspects and aspects to be improved or enhanced.
- Shared and validated by the university community in order to ensure its representation in the analysis. The self-assessment report should be made public and approved according to the procedures laid down in the IQAS.

### The various stages in producing the self-assessment report

#### *Setting up the self-assessment team*

The unit being assessed, in accordance with the IQAS, has to set up the faculty's team that is responsible for producing the self-assessment report. The team will need to consist of representatives from the faculty's various stakeholders, such as academic/programme coordinators, teaching staff, administrative staff, students and any others considered appropriate.

If the team in charge of producing the self-assessment report is different to the one in charge of the monitoring reports, it is advisable for the members to receive an *ad hoc* training, in which the key aspects to be analysed according to the methodology used are expanded on.

#### *Systematic data collection*

**Producing a self-assessment report is not a process that is built from scratch (*ex novo*)**. As mentioned above, it is the culmination of the monitoring process. By following the procedures set out in the IQAS, the self-assessment team therefore needs to aggregate the

information gathered in previous monitoring reports and add the most recent data and figures corresponding to the last academic year. Aggregation will include the data and analyses of both the faculty and the programmes delivered in the faculty. The information can be either quantitative or qualitative, and range from administrative data and input indicators to processes and the outcomes of activities in the faculty.

With respect to the degree programmes which are offered, the information of the self-assessment report should encompass the period between the verification (or last accreditation) and the last academic year completed before the external visit for accreditation.

#### *Drawing up of the self-assessment report*

Once all information is available, the self-assessment team will need to thoroughly analyse and discuss the data and figures in order to meet the accreditation standards and establish the basis for a good enhancement plan.

#### *Public information of the self-assessment report*

The HEI will submit the self-assessment report for public consultation in order that it may be validated by the university community. **No report which has not been presented for public information may be submitted to AQU Catalunya**.

#### *Final validation and referral to AQU Catalunya*

Lastly, the self-assessment report has to be validated by the HEI's corresponding body before being referred to AQU Catalunya.

## Contents of the self-assessment report

The self-assessment report must meet the standards for accreditation defined in this guide. It is to be set out according to the following main sections:

#### *1. Presentation of the faculty*

In this section, the HEI needs to provide the reader with an overview of the faculty. This can include data and figures on significant achievements in the faculty, such as the increase in the number of students and graduates, teaching staff and type of staff, etc.

#### *2. The process of producing the self-assessment report*

A brief description is necessary of the production and drawing up the self-assessment report – which should be added in the degree programme accreditation process within the scope of the IQAS – mentioning the setting up of the team in charge of this, the systematic aggregation of the data, the participation of the stakeholders, the inquiry stage and the final

analysis and discussion, including an assessment of the quality of the way in which the self-assessment report was produced (in terms of deadlines, involvement of the stakeholders, quality of the evidence, degree of satisfaction, etc.).

### *3. Assessment of compliance with the accreditation standards*

In this section, the HEI has to provide evidence-based reasoning for the degree to which the accreditation standards have been met.

For each faculty and programme, depending on the standard in question, the HEI has to make an assessment through direct reference to the most significant data that demonstrate compliance with the standards. In each case, this means **an assessment of the degree to which the desired outcomes and the programme specification have been fulfilled** (for example, if the desired learning outcomes have been achieved, if agreements concerning staff resources have been complied with, compliance of programme delivery as planned or if modifications need to be made, etc.).

**The faculty / HEI is recommended to assess each dimension and each standard on the scale of 4 grades (progressing towards excellence, compliant, compliant with conditions, non-compliant) which appears of this guide.**

**Specific considerations to be taken into account in the preparation of the self-assessment report:**

- *With the exception of the suitability of the student admission profile (in particular, Master's programmes) and coordination mechanisms, compliance with Standard 1 is direct if the information on the curriculum is maintained up to date using processes anticipated for this purpose. However, the HEI should report the changes made in the report since the time of its verification and, in any case, the CAE may assess Substandard 1.1 and Substandard 1.2, if necessary.*
- *Standards 2, 3, and 5 will mainly be applied at faculty level and Standards 4 and 6 at degree programme level. As regards the standards at faculty level, it will be necessary to make an overall reflection and, if appropriate, to point out the particularities associated with the various degree programmes.*

### *4. Assessment and proposal of the quality enhancement plan*

The HEI will need to analyse and reflect on the running of the faculty and programme delivery. This should be based on the public information as well as the data, indicators and qualitative information obtained from the IQAS.

Following on from the evaluative analysis, proposals for quality enhancement are made that will need to be integrated into the faculty's quality enhancement plan, which should include quality enhancements across the entire faculty and others that are specific to degree programmes requiring improvements.

**Any implied modification of a programme resulting from proposals for quality enhancements shall be validated by the accreditation process in the case where a favourable report is obtained**. When the HEI subsequently incorporates any such modification into the programme specification by the set standard procedure, the favourable report will thereby be automatically issued by AQU Catalunya. This will be subject to the condition that the external assessment committee (CAE) can suitably assess them. If the CAE cannot undertake this assessment because of the number of degree programmes to be assessed, AQU Catalunya will notify the university so that it may introduce them, using the usual procedure.

### *5. Evidence*

The evidence to be attached to or enclosed with the self-assessment report is given is this guide under each standard, and it will need to be available and accessible to the members of the CAE.

**In the case of faculties that deliver virtual or blended learning**, the self-assessment report shall include a description of the teaching model and an in-depth explanation of the virtual learning environment. In addition to the self-assessment report, the faculty should also provide access to the system, classes, debates and teaching materials, etc., prior to the site visit.

**A self-assessment report template is available from AQU Catalunya to help HEIs compile the information corresponding to these six sections.**

## 2.6. Adapted procedure for accreditation renewal

### Self-assessment report

- The self-assessment report submitted by the university faculty should adhere to **the selfsame structure recommended in point 2.5** of this guide. Accordingly, the faculty should reflect on whether **the six standards have been reached. The analysis should be evaluative and avoid solely being descriptive.**
- The faculty should provide **all evidence** specified in this guide, in accordance with the indications given below in relation to the subjects.
- The self-assessment report **should always be accompanied by an improvement plan** setting out the actions undertaken in the latest period and the **outcomes** thereof, as well as the actions implemented or under implementation and the **goals** those actions seek to achieve.
- The faculty should focus its analysis on the effectiveness of the actions implemented based on the outcomes attained and, in particular:
  - The **conditioning factors** to the previous accreditation as well as any others that may have **changed substantially** since the previous accreditation.
  - The **staff workforce** (4.1 and 4.2).
  - The **learning outcomes** (6.1 and 6.3), in particular those relating to the Bachelor's/Master's degree final project (TFG/TFM) and mandatory external training placements.

### The assessment procedure

- AQU must ensure that CAEs include at least one person who took part in the previous accreditation process.
- Removal of the preliminary evidence review report
  - Given that it was observed that the committees issued a positive assessment of the information provided and virtually no new information was requested in the previous assessments for the accreditation of Bachelor's and Master's degree programmes, the assessment committees **will not conduct a preliminary assessment of the self-assessment report and the evidence provided**. Accordingly, **the self-assessment report that is submitted should be definitive** and its internal approval should be carried out in line with the provisions of the faculty's IQAS.
  - If during the assessment process the CAE considers it relevant to benefit from further information, AQU Catalunya shall call on the individuals responsible from the faculty to **supply said information to the CAE during its visit**.

- Selection of subjects
    - The specific assessment committees (CEAs, from the Catalan) for each branch shall choose the subjects for which evidence should be supplied along with the self-assessment report for each study programme.
    - The CEAs may allow those responsible for the study programmes to select the subjects for assessment.
    - AQU shall notify the universities of the subjects chosen once the annual planning has been approved by the AQU Catalunya Governing Board.
    - Under exceptional, justified circumstances, universities may call for some of these subjects to be changed.
    - The study programmes must provide the CAE with evidence on the subjects as set out in this guide. Where this is not possible, it shall be mandatory to provide this evidence during the visit.
- Student report
    - As a pilot scheme and a new feature, students of Master's degrees subject to accreditation may submit to the CAE a report of **their own on how the study programme they are following is unfolding**.
    - AQU Catalunya shall engage with each university to arrange for one of its faculties to take part.
    - The AQU Catalunya student committee shall agree on the procedure for student participation in this report.
- Organisation of the visit
    - The organisation and agenda for the visit shall be arranged for each faculty according to the results of the previous accreditation.
    - The agenda shall also include a working area for the CAE in order to analyse the subjects chosen, making it possible to verify that the training activities, content, methodology and assessments, etc., enable students to achieve the envisaged learning outcomes.

**Report from the external assessment committees (CAE, from the Catalan)**

- The report shall focus on analysing the plan for improvements and the results thereof and, in particular, the conditioning factors, if applicable.
    - The CAEs shall focus their assessment on reviewing the **actions carried out by the faculty** to address the conditions that emerged in the previous accreditation and new actions implemented as a result of the follow-up.
    - Nevertheless, the CAE shall conduct an extensive assessment of **standards 4 and 6 and, in particular, sub-standards 4.1 and 6.1**. For the remaining

standards, the CAE shall solely address changes that have taken place since the last accreditation.

## 2.7. Criteria for accreditation

The outcome of the accreditation will be expressed as **favourable or unfavourable** and be structured on four levels:

a. **Accredited progressing towards excellence**. Most of the accreditation standards are assessed as "progressing towards excellence" and, consequently, numerous good practices which exceed the required minimum level are identified.

b. **Accredited**. Compliance is made with all the accreditation standards, at least on their minimum level.

c. **Accredited with conditions**. Compliance is not made with all the accreditation standards. Problems are detected which may be solved in a reasonable period of time.

d. **Not accredited**. Compliance is not made with most of the accreditation criteria or with the most significant accreditation criteria.

In order to obtain **accreditation "progressing towards excellence",** the following three conditions should be met:

a. No standard should be assessed as "compliant with conditions" or "non-compliant".

b. At least two standards should be assessed as "progressing towards excellence" including, compulsorily, either Standard 4 or Standard 6. Moreover, it is established that in order for Standards 4 and 6 to be assessed as "progressing towards excellence", as a minimum Substandard 4.1 (Academic level and experience of teaching staff) and Substandard 6.1. (Academic level and training activities of degree programme), respectively, should obtain this same assessment.

c. Substandard 4.1 and Substandard 6.1 should be assessed as "progressing towards excellence".

The degree programme **will be accredited with conditions** in the event of any of the following three conditions:

a. When three standards are assessed as "compliant with conditions".

b. When at least two standards are assessed as "compliant with conditions" and one of them is either Standard 4 or Standard 6. If Substandard 4.1 and Substandard

6.1 are assessed as “compliant with conditions”, Standards 4 and 6, respectively, will also be assessed as “compliant with conditions”.

c. When Substandard 6.1 (Academic level and training activities of the degree programme) is assessed as “compliant with conditions”.

A degree programme will not be accredited when any of the following standards is assessed as “non-compliant”:

a. Standard 1: Quality of the training programme
b. Standard 4: Suitability of teaching staff for the training programme
c. Standard 5: Effectiveness of learning support systems
d. Standard 6: Quality of programme learning outcomes

AQU CATALUNYA

# 3. CRITERIA AND STANDARDS OF THE ASSESSMENT

## 3.1. Quality of the training programme

The interests of society in the quality and standards of study programmes in higher education requires the setting up of an established qualifications framework endorsed by the ministers responsible for higher education in the EHEA, which also allows for mutual recognition between the member states. It is within this context that the Spanish qualifications framework for higher education (MECES, from the Spanish) has been developed in alignment with the European Framework constructed on the basis of the so-called Dublin descriptors.

This framework is valid for HEIs and entities responsible for the external quality assurance of degree programmes. It should also promote a shared understanding of the expectations associated with qualifications that allows for the consistent use of degrees awarded and facilitates the international mobility of graduates.

HEIs should have processes in their IQAS which allow the design and approval of the degree programmes, in a way that is consistent with the European standards and guidelines for internal quality assurance in higher education institutions, especially **ESG 1.2 (Design and approval of programmes)**, which provides that "HEIs should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the framework for qualifications of the European Higher Education Area", as well as **ESG 1.3 (Student-centred learning, teaching and assessment)** which provides that "HEIs should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach" (ENQA, 2015).

The profile of competences should be relevant within the disciplinary field and independent of the mentions or specialities of the degree programme. The proposed competences should correspond with those of national and international networks and entities. The justification for or assessment of the relevance of the proposed profile for the programme is more important in the case of programmes that are either new or not traditional in the Catalan university system. Furthermore, the competence profile has to correspond with the level of studies for the proposal, in line with the MECES (in the present context, either Bachelor's or Master's studies). In the case of study programmes that qualify for performing a regulated professional activity in Spain, the general competences will also need to conform to those laid down in the legal regulations.

At the time of the programme's accreditation the HEI is therefore expected to comply with the following standard:

**The programme's design (competence profile and structure of the curriculum) is current according to the requirements of the discipline and it meets the required level of study according to the MECES.**

The standard is broken down into the following substandards:

**1.1. The programme's competence profile meets the requirements of the discipline and complies with the required level of study according to the MECES.**

**1.2. The curriculum and structure of the curriculum are consistent with the programme's competence profile and learning outcomes.**

**1.3. Students who are admitted have an admission profile that is suitable for the programme and the number of students is consistent with the number of places offered.**

**1.4. The existence of effective teaching coordination mechanisms for the programme.**

**1.5. The different regulations are complied with in the correct way and this has a positive impact on the programme outcomes.**

**Sections 1.1 and 1.2 of this standard are deemed as met upon the initial verification of the study programme. Nevertheless, in necessary cases the CAE may assess them and/or issue proposals for improvement.**

In accordance with what has been stated in the previous chapter, the CAE may validate the addition to the degree programme of the modifications which may be communicated through the monitoring process. The CAE will specify them in its preliminary report if it considers them pertinent; otherwise, it will propose enhancements. The faculty may take advantage to state its intention of modifying the degree programme substantially but in such case it should submit a modification of the report to the Ministry so that it may be assessed by the respective CEA. In the cases in which the CAE cannot assess the modifications, the university will be informed so that it may introduce them by means of the usual modification procedure.

In the case in which the degree programmes to be accredited are also (or solely) offered as double degree programmes, the CAEs should verify that their deployment in time allows students to acquire the verified competences and that the degree programmes are

differentiated by a minimum of 90 ECTS. In this respect, the credit recognition tables will be key evidence.

When a university offers a degree programme in various faculties, the CAEs will assess that the curriculum (its compulsory subjects) is the same at all the faculties.

The assessment of Standard 1.4 also includes the timetable of the curriculum and of its subjects.

In relation to Standard 1.5, the analysis and evaluation shall focus on regulatory aspects linked to teaching quality, such as compliance with regulations in respect of teaching staff, recognition of credits, adaptation for students progressing from phased-out study programmes, etc. Particular emphasis shall be placed on the presence of the gender perspective in the study programme. Article 28.1.a) of Act 17/2015, of 21 July, on Effective Equality Between Women and Men stipulates that education in values referred to in article 5 of Act 1/2003, of 19 February, on Universities of Catalonia, must necessarily include "the promotion of the mainstreaming of the gender perspective and of studies on the contribution of women throughout history in all areas of knowledge, academic activity and research, which must be included in the curriculum of Bachelor's degrees and postgraduate programmes. Applications for accreditation of Bachelor's and postgraduate degrees must be accompanied by a report detailing how the gender perspective has been incorporated in the curriculum or, if it has not, by the plan for improvement to make this possible". Whether the study programme takes into account article 17 of Law 5/2008, of 24 April, on the right of women to eradicate gender-based violence, amended by Law 17/2020, of 22 December, will also be assessed.

The approach to the gender perspective within the implementation of study programmes, which must also include the prevention and eradication of gender-based violence, impacts many of the dimensions comprising the methodology adopted for accreditation. As a result, it was decided to enclose an annex that sets out all the evidence and indicators the HEI can compile to prove that the study programme has incorporated the gender perspective and that it is duly taken into consideration.

During the initial stages, as specified in the standard, failure to comply with this aspect shall not automatically entail an assessment of non-compliant being assigned to the dimension "Quality of the training programme". However, the HEI shall be compelled to implement actions to make it possible for this standard to be satisfactorily remedied.

If standard 1.5 is not met, dimension 1 will, at the very least, be deemed as compliant with conditions.

## Evidence[1]

- An updated report for the verification of the degree programme (AQU Catalunya).
- A report on subsequent verification and modifications of the degree programme (AQU Catalunya).
- Monitoring reports, at least 2 for Bachelor's degrees and 1 for Master's degrees (university).
- Documents relating to the coordination of the teaching activity (university).
- Specific admission tests, if applicable (university).

## Indicators[2]

- Bachelor's degrees:
  - Supply, demand, and enrolment
  - Cut-off grade3
  - Admission grade
  - Access pathway
  - Specific admission tests (if applicable)
- Master's degrees:
  - Supply, demand, and enrolment
  - Provenance
  - Training supplements (if any)

**The HEI may supplement this list of evidence (and those which appear in the rest of the standards) with all the documents which it deems appropriate.**

[1] The specification and format of the evidence and indicators are provided in the document "Evidències i indicadors recomanats per a l'acreditació de graus i masters" (Recommended evidence and indicators for accreditation of Bachelor's degrees and Master's degrees) (Catalan version). The HEIs which provide each evidence are stated in parentheses.

[2] When these indicators do not apply to any faculty (because it does not participate in pre-enrolment, etc.), the indicators which allow the same features to be assessed should be provided, if possible.

[3] To be modified by the "Equivalent cut-off grade" when this grade is available at UNEIX or EUC.

### Assessment

In the case of Bachelor's degrees, the following aspects should be taken into consideration, in a general way, for the assessment of this standard:

- Degree of correspondence between the verified report, including subsequent modifications, and the real implementation.
- Relation between the supply and the demand, and its evolution.
- Enrolment in first preference.
- Access grade and, if applicable, grades in the specific tests taken.
- Suitability of access pathways.
- Coordination mechanisms of teaching activity, including study time planning.
- Content and assessment criteria of specific tests (if applicable).
- Recognition of credits.
- Presence of the gender perspective in the delivery of the study programme.[4]

In the case of Master's degrees, the following aspects should be taken into consideration in a general way for the assessment of this standard:

- Degree of correspondence between the verified report, including subsequent modifications, and the real implementation.
- Relation between the supply and the demand, and its evolution.
- Profile of newly admitted students, and especially of the field from which they come and of the need to take training supplements.
- Suitability and effectiveness of training supplements (if applicable).
- Recognition of credits.
- Presence of the gender perspective in the teaching of the degree programme.

## Degree of compliance with standards

These standards should be assessed on four levels according to their degree of compliance:

[4] Article 28.1 of Law 17/2015, dated 21st July, on the Effective Equality of Women and Men. < >

Article 17 of Law 5/2008, of 24 April, on the right of women to eradicate gender-based violence, amended by Law 17/2020, of 22 December.

- **Progressing towards excellence.** Full compliance is made with the standard and, moreover, there are examples of good practices which exceed the required minimum.
- **Compliant.** Full compliance is made with the standard at the HEI.
- **Compliant with conditions.** Compliance is made with the standard on the minimum level and aspects are detected which should necessarily be improved. These aspects are of such a nature that they may be improved in a reasonable period of time.
- **Non-compliant.** The degree programme does not reach the minimum level required to comply with the respective standard. The enhancements needed should be made are of such magnitude that they do not allow compliance to be made with the standard in a reasonable period of time.

In general, as has been previously mentioned and considering that the degree programmes have passed the verification process, compliance is considered to have been made with Substandard 1.1 and Substandard 1.2, except if the CAE detects problems and decides to carry out their assessment. In the case of **Master's degrees verified by the fast-track procedure** which have not updated their structure, **all the standards will be assessed on the basis of the foregoing levels.**

## Rubrics

| **1.1. The programme's competence profile meets the requirements of the discipline and complies with the required level of study according to the MECES.** | |
|---|---|
| ***Compliant*** | The programme's competence profile meets the requirements of the discipline and complies with the required level of study according to the MECES. |
| | |
| **1.2. The curriculum and structure of the curriculum are consistent with the programme's competence profile and learning outcomes.** | |
| ***Compliant*** | The curriculum and structure of the curriculum are consistent with the programme's competence profile and learning outcomes. |
| | |
| **1.3. Students who are admitted have an admission profile that is suitable for the programme and the number of students is consistent with the number of places offered.** | |
| ***Progressing towards excellence*** | All the enrolled students have an access profile that concurs with what is established for the degree programme and their number is consistent with the places offered. |

| | |
|---|---|
| ***Compliant*** | Most of the enrolled students have an access profile that concurs completely with what is established for the degree programme. |
| | The number of enrolled students is consistent with the number of places offered on the programme. |
| ***Compliant with conditions*** | The academic profile of a significant number of enrolled students fully matches the established profile for the programme. |
| | Student enrolment does not match the number of places offered on the programme. |
| ***Non-compliant*** | The academic profile of the majority of enrolled students does not match the established profile for the programme. |
| | Student enrolment deviates considerably from the number of places offered on the programme. |
| | |
| **1.4. The existence of effective teaching coordination mechanisms for the programme.** | |
| ***Progressing towards excellence*** | The coordination mechanisms in place in the degree programme are very suitable. |
| ***Compliant*** | The coordination mechanisms in place in the degree programme are suitable. |
| ***Compliant with conditions*** | The coordination mechanisms in place in the degree programme show dysfunctions. |
| ***Non-compliant*** | The coordination mechanisms in place in the degree programme are unsuitable. |
| | |
| **1.5. The different regulations are complied with in the correct way and this has a positive impact on the programme outcomes.** | |
| ***Compliant*** | The different regulations are complied with and applied correctly, and this has a positive impact on the programme outcomes. |
| ***Compliant with conditions*** | The application of the various regulations shows shortcomings. |
| ***Non-compliant*** | The legal regulations relating to the programme are not suitably complied with. |

## 3.2. Relevance of the public information

Information transparency is the key to building trust in, and increasing competitiveness based on, the quality of university education, and is why it appears in one way or another in all of the declarations and communiqués of the ministers responsible for higher education in the EHEA, as reflected in, amongst others, the communiqués of the ministerial conferences in Bergen and London:

> "Building on the achievements so far in the Bologna Process, we wish to establish a European Higher Education Area based on the principles of quality and transparency", Bergen Communiqué, 19-20 May 2005.
>
> "Qualifications frameworks are important instruments in achieving comparability and transparency within the EHEA and facilitating the movement of learners within, as well as between, higher education systems. They should also help HEIs to develop modules and study programmes based on learning outcomes and credits, and improve the recognition of qualifications as well as all forms of prior learning." London Communiqué, 18 May 2007.

The importance of transparency is evident throughout the European standards defined by ENQA, in which reference is made to access to the information on programmes by the different stakeholder groups (ENQA, 2015). The aim of this accreditation standard is to encompass the important role of the public information connected with the study programme.

According to **ESG 1.8 (Public information)**, "HEIs should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible." HEIs should provide information that includes the supply of programmes and the selection criteria; the expected learning outcomes; the qualifications to which they lead; the teaching, learning and assessment procedures used; the academic outcomes obtained; the opportunities for learning available to students, and the information on the employability of degree holders.

The publication of the information ensures transparency and facilitates accountability, in harmony with the European references in matters of quality in higher education. Specifically, with respect to **ESG 1.7 (Information management)**, "HEIs should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities".

Additionally, in the guidelines of **ESG 1.1 (Policy for quality assurance)** it is established that in order to favour this objective, the policy should be public.

In order to assure the quality of public information, HEIs should reflect periodically on the validity, relevance and updating of public information, its accessibility and the continuous enhancement processes which assure its quality.

Against this background, the programme must comply with the following standard:

**The institution appropriately informs all stakeholders of the programme's characteristics and the management processes for quality assurance.**

**Programme monitoring, as defined in the VSMA Framework, helps to demonstrate compliance with this standard in the sections on "Public information on programme delivery" and "Public information on course indicators".**

The overall standard is divided into the following specific standards:

2.1. The HEI publishes truthful, complete, up-to-date and accessible information on the characteristics of the degree programme and its delivery.

2.2. The HEI publishes information on the academic and satisfaction outcomes.

2.3. The HEI publishes the IQAS which forms the framework of the degree programme and the monitoring and accreditation outcomes of the degree programme.

## Evidence

- The website of either the HEI or the programme (HEI).
- Programme monitoring reports (AQU Catalunya).
- Documentation connected with IQAS processes dealing with public information, the compilation of information and accountability (HEI).

## Assessment

For the **assessment** of this standard, the following aspects should be taken into consideration:

- The publication, completion and updating of the information relating to the degree programme (characteristics, development and outcomes). As a minimum, it will be compared to the information required in Section 3.2 of the *Guia per al seguiment*

*de les titulacions de grau i de màster* (Guide for the follow-up of Bachelor's and Master's degrees).[5]

- The readiness of access to the published information.
- The reports on accountability to society which may have been published by the HEI (monitoring report of the degree programme, self-assessment accreditation report, other reports, etc.).

## Level of compliance with the standards

These standards are assessed according to four levels of achievement:

- **Progressing towards excellence.** Full compliance with the standard. In addition there are examples of good practices that exceed the minimum level required.
- **Compliant.** Full compliance with the standard.
- Compliant with conditions. Compliance with the minimum level for the standard, and aspects have been identified that will need to be improved. The nature of these aspects is such that they can be improved within a reasonable period of time.

Non-compliant. Non-compliance with the minimum level for the standard. Improvements that need to be introduced are such that the standard cannot be reached within a reasonable period of time.

## Rubrics

| **2.1. The HEI publishes truthful, complete, up-to-date and accessible information on the characteristics of the degree programme and its delivery.** | |
|---|---|
| ***Progressing towards excellence*** | Up-to-date, exhaustive and pertinent information is offered on the characteristics of the degree programme and its delivery. |
| | The information is very clear, legible, aggregated and accessible to all stakeholders. |
| ***Compliant*** | Pertinent information is offered on the characteristics of the degree programme and its delivery. Partial information is also offered on the outcomes achieved. |
| | The information is clear, legible, aggregated and accessible to all stakeholders. |

[5] <http://www.aqu.cat/doc/doc_16385323_1.pdf>

| | |
|---|---|
| ***Compliant with conditions*** | Partial information is offered on the characteristics of the degree programme and its delivery. |
| | The published information shows certain shortcomings with respect to clarity, legibility, aggregation and accessibility. |
| ***Non-compliant*** | Inadequate information on the programme's characteristics, delivery and actual outcomes. |
| | The published information shows serious shortcomings with respect to clarity, legibility, aggregation and accessibility. |
| | |
| **2.2. The HEI publishes information on the academic and satisfaction outcomes.** | |
| ***Progressing towards excellence*** | The HEI publishes up-to-date, aggregated, accessible and exhaustive information on the academic and satisfaction outcomes of the degree programme. |
| ***Compliant*** | The HEI publishes information on the academic and satisfaction outcomes of the degree programme. |
| ***Compliant with conditions*** | The HEI publishes partial information on the academic and satisfaction outcomes of the degree programme. |
| ***Non-compliant*** | The HEI does not publish information on the academic and satisfaction outcomes of the degree programme. |
| | |
| **2.3. The HEI publishes the IQAS which forms the framework of the degree programme and the monitoring and accreditation outcomes of the degree programme.** | |
| ***Progressing towards excellence*** | The HEI publishes and disseminates exhaustively the quality policy, the IQAS processes and the elements derived from it for accountability, including the monitoring and accreditation outcomes. |
| ***Compliant*** | The HEI publishes the quality policy, the IQAS processes and the elements derived from it for accountability, including the monitoring and accreditation outcomes. |
| ***Compliant with conditions*** | The HEI publishes partially the quality policy, the IQAS processes and the elements derived from it for accountability, including the monitoring and accreditation outcomes. |

| | |
|---|---|
| ***Non-compliant*** | The HEI does not publish the quality policy, the IQAS processes and the elements derived from it for accountability. |

## 3.3. Efficacy of the programme's internal quality assurance system

Consistent with the trust placed by society in autonomous management in the universities and the transparency called for within the framework of the EHEA, HEIs should ensure that their actions are appropriately guided to achieve the objectives associated with the programmes and courses that they deliver. HEIs consequently need policies and internal quality assurance systems that have a formal status and are publicly available. The IQAS is therefore a key instrument for defining the faculty's teaching activities.

The design and implementation of the IQAS respond to the European standards and guidelines (ESG) for the internal assurance of quality in HEIs, especially in the case of **ESG 1.1 (Quality assurance policy)** and **1.9 (Continuous monitoring and periodic review of programmes)** (ENQA, 2015). As stated in ESG 1.1, "HEIs 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". These internal stakeholders assume their responsibility for quality and commit themselves to its assurance on all levels and to develop a quality culture. In order to achieve this objective, they should develop and implement a strategy for the on-going enhancement of quality. The strategy, policy and procedures should have a formal status and they should be publicly available.

Likewise, according to **ESG 1.9**, HEIs "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 enhancement of the programme. Any action planned or taken as a result should be communicated to all those concerned".

This approach was also set out in Royal Decree 822/2021, of 28 September, establishing the organization of university education and the quality assurance procedure, and in Royal Decree 640/2021, of 27 July, on the creation, recognition and authorization of universities and university centres, and the institutional accreditation of university centres. The former explicitly states that universities must act to ensure the quality of teaching and learning, while the latter establishes that IQAS must be certified before teaching centres can be awarded institutional accreditation. At the time of programme accreditation, it is expected that the HEI already has a formally established and sufficiently implemented IQAS, which assures the quality of the programmes that it covers and consequently defines the processes for the design, approval, implementation, monitoring, revision and improvement and, finally, accreditation of its programmes of study. This moment, which is related to the external assurance of quality in higher education, should also respond to **ESG 2.1 (Consideration of internal quality assurance)**, which states that "External quality assurance

should address the effectiveness of the internal quality assurance processes [...]" (ENQA, 2015).

At the time of programme accreditation, the HEI is therefore expected to comply with the following standard:

**The HEI has a functioning internal quality assurance system that has a formal status and assures the quality and continuous enhancement of the programme in an efficient way.**

**The efficacy of the IQAS is inherent to its fulfilment of the prerequisites to accredit satisfactory programme delivery.**

This overall standard is divided into the following specific standards:

3.1. The implemented IQAS has processes which ensure the design, approval, monitoring and accreditation of the degree programmes.

3.2. The implemented IQAS ensures the collection of information and of outcomes relevant to the efficient management of the degree programmes, especially including the academic and satisfaction outcomes of the stakeholders.

3.3. The implemented IQAS is periodically reviewed and generates an enhancement plan that is used for its continuous enhancement.

An institution's IQAS will also need to be based on a model of continuous improvement. The HEI will need to periodically assess the IQAS's fitness for purpose as the key instrument for the quality assurance and continuous improvement of its programmes. The IQAS's efficacy can be seen from the degree to which its processes are implemented and the analysis of the evidence produced through its application, such as the programme monitoring reports, the IQAS revision reports and the documentation necessary for accreditation, amongst other things.

## Evidence

- The IQAS manual and the related evidence (university).
- Review documents/reports and improvement plans of the IQAS (university).

- Verification, monitoring and accreditation reports on the degree programme, with identification of weak points and improvements implemented (since the verification or the last accreditation) (AQU Catalunya/university).
- Improvement plans for the degree programme (university).
- Mechanisms/instruments for collection of information on the satisfaction of the main stakeholders (university):
  - Students (teaching, facilities, academic and professional guidance services, etc.)
  - Teachers (specific to the degree programme; tutors; external placements)
  - Employers
  - Graduates

**This standard does not possess specific indicators to be considered aside from those which may be derived from the improvement plan.**

## Assessment

For the **assessment** of this standard, the following aspects, among others, may be taken into consideration:

- Level of compliance with the IQAS by the parties involved.
- Level of implementation of the design, approval, monitoring and accreditation processes of the degree programmes.
- Level of implementation of the information collection instruments.
- Effectiveness and response level of the instruments used.
- Implementation of the generated improvement plans and effectiveness of the implemented actions.

## Level of compliance with the standards

These standards are assessed according to four levels of achievement:

- **Progressing towards excellence.** The standard is fully achieved and in addition there are examples of good practices that exceed the minimum level required.
- **Compliant.** The standard is fully achieved at the HEI.

- **Compliant with conditions.** The minimum level for the standard is achieved and aspects identified that will need to be improved. The nature of these aspects is such that they can be improved within a reasonable period of time.

**Non-compliant.** The programme does not comply with the minimum level required for the corresponding standard. Improvements that need to be introduced are such that the standard cannot be reached within a reasonable period of time.

## Rubrics

| **3.1. The implemented IQAS has processes that ensure the design, approval, monitoring and accreditation of the degree programmes** | |
|---|---|
| ***Progressing towards excellence*** | The IQAS comprises an implemented process that facilitates optimum programme design and approval, with the involvement of all the stakeholders. |
| ***Compliant*** | The IQAS comprises an implemented process that facilitates programme design and approval, with the involvement of the most important stakeholders. |
| ***Compliant with conditions*** | The IQAS comprises an implemented process that facilitates incomplete programme design and approval. |
| ***Non-compliant*** | The IQAS does not comprise any process (or it has not been implemented) for programme design and/or approval. |
| | |
| **3.2. The implemented IQAS ensures the compilation of relevant information and outcomes for efficient programme management, in particular the learning outcomes and stakeholder satisfaction.** | |
| ***Progressing towards excellence*** | The IQAS has an implemented process that optimally manages the collection of relevant outcomes with the existence of a table of indicators providing complete information on its evolution in time. |
| | The IQAS allows for the compilation of information on stakeholder satisfaction (in particular, that of graduates, students, teaching staff and employers) with the programme of studies. |
| ***Compliant*** | The IQAS has an implemented process that manages the collection of relevant outcomes with the existence of a table of indicators providing complete information on its evolution in time. |

| | |
|---|---|
| | The IQAS provides for the compilation of information on the satisfaction of students and graduates with the programme of studies. |
| ***Compliant with conditions*** | The IQAS has an implemented process that partially manages the collection of relevant outcomes with the existence of a table of indicators providing partial information on its evolution in time. |
| | The IQAS compiles information on student satisfaction only with regard to certain aspects of the programme of study (for example, subject/teacher). |
| ***Non-compliant*** | The IQAS does not have a process (or it is not implemented) for the management of the collection of the outcomes of the degree programme. The data which it possesses are partial and do not include any time series. |
| | The IQAS does not compile any information on stakeholder satisfaction with the programme of study. |
| **3.3. The implemented IQAS is periodically reviewed and generates an enhancement plan that is used for its continuous enhancement.** | |
| ***Progressing towards excellence*** | The IQAS has an implemented process that obliges the HEI to periodically and completely review the suitability of the IQAS itself. The revision is materialised in a report that presents a reflection on the operation of the IQAS and that allows the tracking of the changes carried out. |
| | The enhancement actions of the IQAS are consistent with the revision carried out and are structured in enhancement plans that include all the necessary elements for the optimum periodic monitoring of their implementation. |
| ***Compliant*** | The IQAS has an implemented process for its revision which is materialised in a report that presents a reflection on the operation of the IQAS and that includes the changes carried out on the system. |
| | The enhancement actions of the IQAS are consistent with the revision carried out and are structured in enhancement plans that include the minimum necessary elements to carry out a sufficient monitoring of the implementation of the measures. |
| ***Compliant with conditions*** | The IQAS has a process for its revision but it is not implemented. Some non-systematic revision and enhancement actions are carried out on the processes of the IQAS. |
| | The enhancement actions of the IQAS have a partial scope and prioritisation, and their monitoring is not systematic. |
| | The IQAS does not have a process for its revision. |

| | |
|---|---|
| ***Non-compliant*** | Revision and improvement actions are not carried out on the IQAS. |
| | |

## 3.4. Suitability of teaching staff for the training programme

Teachers are the single most important learning resource available to most students. It is important that those who teach have a full knowledge and understanding of the subject they are teaching and the necessary skills and experience appropriate to the programme outcomes, and that they are sufficient in terms of numbers and assignment to cover the main academic duties. Assuring the quality and suitability of teachers responds directly to the European standards for internal quality assurance in higher education institutions, and specifically to **ESG 1.5 (Quality assurance of teachers)**, which recommends that "HEIs should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff" (ENQA, 2015).

At the time of the accreditation of a programme, the HEI is therefore expected to comply with the following standard:

**Staff involved in teaching in the faculty are both sufficient and suitable in accord with the characteristics of the programmes and the number of students.**

**The fact that the faculty is used as an overall unit of reference for the programmes that it delivers shall not restrict the accreditation panel from checking the compliance of specific programmes in the faculty with this standard.**

The analysis of compliance with this standard takes in **all faculty staff involved in teaching programmes in the faculty**, giving individualised attention to certain teacher typologies:

- **Bachelor's degree year-one teachers**, due to the implications that the first year (year one) has on ensuring the successful transition from secondary to university education (persistence, year-one drop-outs, academic integration, etc.). The assessment of this type of teaching staff will be of particular importance in degree programmes with high numbers of student enrolment (different groups and shifts) and a highly diverse profile for the teaching staff in the faculty.
- **Teachers responsible for Bachelor's degree final-year projects and compulsory external work experience/placement/internship**, given that it is in these parts of the curriculum where the research and/or professional experience of the teaching staff who are supervising and assessing student achievement stands out.

- **Master's degree teachers**, to check that the requirements of academic level, research potential and professional training are appropriate to this level of study.

As established in Royal Decree 640/2021, of 27 July, on the creation, recognition and authorisation of universities and university centres and on the institutional accreditation of university centres, the teaching staff of private universities and private higher education centres attached to universities may not be civil servant staff of a university teaching body in active status and assigned to a public university, nor may they be full-time teaching and research staff in the same situation.

With regard to online teaching, in view of the specific characteristics of this type of degree programmes and the variety of teaching models in existence, the HEI must present the structure, profile and academic role of the staff involved in teaching the virtual or blended study programme, as well as their teaching hours assigned to it.

Teaching staff involved in teaching on the study programme should possess knowledge and experience in virtual and blended teaching models, as well as in the use of technologies for virtual learning. The HEI should provide information on the maximum number of students per lecturer for each group.

The teaching staff responsible for coordinating and designing the study programme should be members of the teaching staff employed directly by the HEI and should have teaching and research experience in the specific discipline. Said teaching staff should be in possession of a PhD and benefit from the accreditation of an assessment agency.

The HEI shall benefit from a continuing education plan for teaching staff which addresses such issues as aspects relating to technologies for virtual programmes, the teaching model and teaching innovation.

The HEI shall ensure that (directly employed/collaborating/consulting) teaching staff benefit from the necessary technological and teaching support infrastructure at all times.

Teaching hours should be coherent with the aspects mentioned above and should be set out in a table specifying the following information for all teaching staff involved with the programme (whether stable or not): study programme, academic level, type of accreditation/figure with agency valuation, subjects taught (specifying the number of ECTS credits for the subject), annual number of hours dedicated to the subject, the total hours dedicated to the study programme per academic year and the total hours dedicated to the HEI per academic year (if applicable, distinguishing the hours devoted to face-to-face and to virtual teaching), teaching activity and research activity.

The HEI shall benefit from support from staff with experience in virtual or blended learning environments.

This overall standard is divided into the following specific standards:

**4.1. The teaching staff meet the qualifications requirements for programme delivery in the faculty, and they have sufficient and recognised teaching, research and, where applicable, professional experience.**

**4.2. There are sufficient teaching staff in the faculty, and staff assignment is adequate for them to carry out their duties and attend the students.**

**4.3. The HEI offers support and opportunities for enhancing teaching quality in the faculty.**

## Evidence

- Deployment of the curriculum: assignment of teachers, category of teachers and department/area of knowledge (university).
- Profile of teachers responsible for the supervision/assessment of final-year projects and dissertations of Bachelor's degrees (university).
- Profile of teachers responsible for the supervision/assessment of external placements, according to their academic accreditation and professional experience (university).
- Training plan or other document suitable for assessing the improvement of the quality of the teaching and research activity of teachers (university).
- For Master's degrees: a list of active research projects in which teaching staff are involved.

## Indicators

- Teachers by category and according to doctorate credentials (EUC/university).
- Percentage of classroom teaching hours delivered according to the category of teachers and PhD (EUC).
- Percentage of classroom teaching hours delivered according to research and teaching brackets (EUC).
- Percentage of classroom teaching hours delivered according to typology of teachers in the selected subjects (university).
- List of equivalent full-time students for equivalent full-time teaching and research staff (EUC).

## Assessment

For the **assessment** of this standard, the following aspects should be taken into consideration:

- Volume (bearing in mind the number of students) and dedication of teachers.
- Size of groups according to teaching activity.
- Typology of teachers according to categories, academic training and credentials (doctors/non-doctors, accredited, sexennials, etc.).
- Specialisation of teachers.
- Criteria of assignment of teachers to subjects (especially, the selected compulsory subjects, the final-year projects and dissertations of Bachelor's/Master's degrees and external placements).
- For Master's degrees: the relevance of the research projects in which teaching staff are involved.
- Teaching and research training of teachers.

## Level of compliance with the standards

These standards are assessed according to four levels of achievement:

- **Progressing towards excellence.** The standard is fully achieved and in addition there are examples of good practices that exceed the minimum level required.
- **Compliant.** The standard is fully achieved at the HEI.
- **Compliant with conditions.** The minimum level for the standard is achieved and aspects identified that will need to be improved. The nature of these aspects is such that they can be improved within a reasonable period of time.
- **Non-compliant.** The programme does not comply with the minimum level requirement for the corresponding standard. Improvements that need to be introduced are such that the standard cannot be reached within a reasonable period of time.

**In order for the degree programme to obtain an overall assessment of accredited "progressing towards excellence", Substandard 4.1 should have received an assessment of "progressing towards excellence".**

## Rubrics

<table>
<tr><th colspan="2">4.1. The teaching staff meet the qualifications requirements for the faculty's programmes, and they have sufficient and recognised teaching, research and, where applicable, professional experience.</th></tr>
<tr><td rowspan="2">Progressing towards excellence</td><td>For Bachelor's degree teaching staff:<br><br>The teaching staff have the relevant academic qualifications and external recognitions, and suitable experience to provide quality training.<br><br>The faculty has established suitable criteria for the assignment of teaching, ensuring the best teachers in all cases.<br><br>Students are highly satisfied with the teaching competence of the teaching staff.</td></tr>
<tr><td>For Master's degree teaching staff:<br><br>The teaching staff have the relevant academic qualifications and external recognitions, and suitable experience to provide quality training.<br><br>The faculty has established suitable criteria for the assignment of teaching, ensuring the best teachers in all cases.<br><br>All teaching staff are actively involved in recognised research projects and have made significant research contributions within the field of the Master's degree programme.<br><br>Students are highly satisfied with the teaching competence and the research/professional experience of the Master's degree programme teaching staff.</td></tr>
<tr><td rowspan="2">Compliant</td><td>For Bachelor's degree teaching staff:<br><br>The teaching staff have the established qualifications and external recognitions, as well as suitable experience.<br><br>The faculty has established criteria for the assignment of teaching.<br><br>Students are satisfied with the teaching competence of the teaching staff.</td></tr>
<tr><td>For Master's degree teaching staff:<br><br>The teaching staff have the established academic qualifications and external recognitions, as well as suitable experience.<br><br>The faculty has established criteria for the assignment of teaching.<br><br>Most of the teaching staff are actively involved in recognised research projects and have made significant research contributions in the field of the Master's degree programme.</td></tr>
</table>

| | |
|---|---|
| | Students are satisfied with the teaching competence and the research/professional experience of the teaching staff of the Master's degree programme. |
| ***Compliant with conditions*** | **For Bachelor's degree teaching staff:**<br><br>Part of the teaching staff have the established academic qualification and external recognitions and/or not all have suitable experience for the delivery of the training entrusted to them.<br><br>The faculty has not established suitable criteria for the assignment of teaching.<br><br>Students are partially satisfied with the teaching competence of the teaching staff. |
| | **For Master's degree teaching staff:**<br><br>Part of the teaching staff have the established academic qualification and external recognitions and/or not all have suitable experience for the delivery of the training entrusted to them.<br><br>The faculty has not established suitable criteria for the assignment of teaching.<br><br>The involvement of the teaching staff in recognised research projects and their research contributions are scant.<br><br>Students are partially satisfied with the teaching competence and the research/professional experience of the teaching staff of the Master's degree programme. |
| ***Non-compliant*** | **For Bachelor's degree teaching staff:**<br><br>Only a minority of the teaching staff have the established academic qualification and external recognitions and suitable experience for the delivery of the training entrusted to them.<br><br>The faculty has not established criteria for the assignment of teaching.<br><br>Most of the students are dissatisfied with the teaching competence of the teaching staff. |
| | **For Master's degree teaching staff:**<br><br>Only a minority of the teaching staff have the established academic qualification and external recognitions and suitable experience for the delivery of the training entrusted to them.<br><br>The involvement of the teachers in recognised research projects is practically non-existent.<br><br>The faculty has not established criteria for the assignment of teaching. |

| | |
|---|---|
| | Most of the students are dissatisfied with the teaching competence and the research/professional experience of the teaching staff of the Master's degree programme. |
| | |
| **4.2. There are sufficient teaching staff in the faculty, and staff assignment is adequate for them to carry out their duties and attend the students.** | |
| ***Progressing towards excellence*** | The structure of the body of teaching staff and the number of teachers are ideal for delivery of the programme and attending the students.<br><br>The students are highly satisfied with the attentiveness of the teaching staff in their learning process. |
| ***Compliant*** | The structure of the body of teaching staff and the number of teachers are sufficient for delivery of the programme and attending the students.<br><br>The students are satisfied with the attentiveness of the teaching staff in their learning process. |
| ***Compliant with conditions*** | The structure of the body of teaching staff and the number of teachers are insufficient for delivery of the programme and attending the students.<br><br>The students are partially satisfied with the attentiveness of the teaching staff in their learning process. |
| ***Non-compliant*** | There are serious shortcomings in the structure of the body of teaching staff and the number of teachers as regards delivery of the programme and attending the students.<br><br>The majority of students are mostly dissatisfied with the attentiveness of the teaching staff in their learning process. |
| | |

| 4.3. The HEI offers support and opportunities for enhancing teaching quality in the faculty. | |
|---|---|
| ***Progressing towards excellence*** | Teaching staff receive considerable institutional support for carrying out their duties and the quality enhancement of teaching and research activities. |
| ***Compliant*** | Teaching staff receive institutional support for carrying out their duties and the quality enhancement of teaching and research activities. |
| ***Compliant with conditions*** | Teaching staff receive little institutional support for carrying out their duties and the quality enhancement of teaching and research activities. |
| ***Non-compliant*** | Teaching staff receive no institutional support for carrying out their duties or the quality enhancement of teaching and research activities. |

## 3.5. Effectiveness of learning support systems

In addition to the teaching staff, HEIs make a series of services and resources available to students to motivate, facilitate and enhance learning, regardless of location (on campus, distance learning, etc.). In this context, **ESG 1.6 (Learning resources and student support)** recommends that "HEIs should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided" (ENQA, 2015).

At the time of the accreditation of a programme, the HEI is therefore expected to comply with the following standard:

**The HEI has adequate and efficient guidance services and resources for student learning.**

This section refers to all of the services and resources that support student learning. The scope of this section includes:

- **Services**, mainly academic and professional guidance. Students face different academic problems throughout their time at university (such as course selection and learning issues) and have special needs (accommodation and careers guidance, for example). The HEI should have appropriate means to lead and guide in such matters.
- **Physical resources**, such as facilities (classrooms, study rooms, computer labs, laboratories, libraries, etc.); technological infrastructure; scientific, technical, assistive and artistic equipment and material, of varying significance depending on the type of course:
  - **Library services** or learning resource centres.
  - **Specialised facilities** (laboratories, etc.). A check is made of compliance with the appropriate equipment in laboratories and other teaching facilities for the delivery of practical classroom activities included in the curriculum.
  - **Technological infrastructures** needed for the deployment of the degree programme and the acquisition of competences by students. These infrastructures are especially important for degree programmes of semi-distance learning or e-learning nature.

## Note

***Semi-distance learning***

For semi-distance learning courses the analysis and assessment of the following aspects is of particular importance:

- The structure and potential of the virtual learning environment and tools used for the development and delivery of teaching and learning.
- The design of materials for the development of teaching and learning.
- Tutorship and the assessment of student tests and performance.

***e-learning***

In e-learning HEIs, the foregoing aspects acquire even greater significance. Moreover, the following aspects should be added:

- Guidance, tutoring and consulting systems.
- Interpersonal communication systems.

**This section will be more time-consuming in the following circumstances: institutions/faculties that do not form part of the consortium of university libraries in Catalonia (CBUC, from the Catalan), Master's degrees (as they may require the continuous upgrading of their resources) and programmes recently introduced in the HEI.**

This overall standard is divided into the following specific standards:

**5.1. The academic guidance services provide adequate support for the learning process, and the professional guidance services facilitate entry into the labour market.**

**5.2. The available physical resources are adequate for the number of students and the characteristics of the programme.**

## Evidence

- Documents on the tutorial action plan (PAT, from the Catalan) (design, organisation and activity carried out), distinguishing, if appropriate, between tutorial actions for newly admitted students and for the set of students who are already enrolled (university). It is appropriate to distinguish:
  - Institutional support for the PAT.
  - Internal management of the PAT (monitoring mechanisms, appointment and training processes, public information, satisfaction, etc.).

  - Identification of needs.
  - Explicit identification of the intervention structure of the PAT (timing, monitoring areas, etc.).
  - Pertinent adequate identification of expected outcomes.
  - Pertinence of the planning/performance of the PAT.
- Documents of the IQAS on the student support and guidance processes (university).
- Documents of the IQAS on the external placement management processes (university).
- Institutional action plan on professional guidance (university).
- Identification of the most significant resources possessed by the HEI to favour student learning, especially including: laboratories (workplaces, subjects involved, supporting technical staff, etc.), digital infrastructures, documentation, etc. (university).

## Indicators

- Student satisfaction with the learning support systems (teaching facilities, libraries, academic and professional guidance, etc.) (university).

## Assessment

For the **assessment** of this standard, the following aspects should be taken into consideration:

- Academic guidance services (learning process).
- Employment/professional guidance services.
- Tutorial action plan: involvement, participation and satisfaction of tutors and students. Connection of this PAT with the profile of newly admitted students.
- Availability, use and suitability of material resources.
- Management of external placements.
- Generally, but especially in semi-distance learning and e-learning studies:
  - The structure and potentiality of the e-learning campus, and the interpersonal communication systems.
  - Design of the materials for the performance of the teaching/learning process.

**Programme coordinators are encouraged to provide evidence – where this is available and easily accessible – on the physical resources considered to be of particular significance.**

## Level of compliance with the standards

These standards are assessed according to four levels of achievement:

- **Progressing towards excellence.** The standard is fully achieved and in addition there are examples of good practices that exceed the minimum level required.
- **Compliant.** The standard is fully achieved at the HEI.
- **Compliant with conditions.** The minimum level for the standard is achieved and aspects identified that will need to be improved. The nature of these aspects is such that they can be improved within a reasonable period of time.
- **Non-compliant.** The programme does not comply with the minimum level requirement for the corresponding standard. Improvements that need to be introduced are such that the standard cannot be reached within a reasonable period of time.

## Rubrics

| **5.1. The academic guidance services provide adequate support for the learning process, and the professional guidance services facilitate entry into the labour market.** | |
|---|---|
| ***Progressing towards excellence*** | The efficacy of the tutorial support plan is clearly a fundamental element of support for the students in teaching and learning, as is evident from, among other aspects, the changes in the indicators on academic achievement.<br>The tutorial support plan has been progressively adapted to the students' needs. |
| | The HEI has an action plan to facilitate integration into society and the labour market, and the activities carried out (type, duration, dissemination, support staff, etc.) are very adequate. |
| | The level of both student and tutor satisfaction with the academic and professional guidance service is high. |
| ***Compliant*** | The tutorial and academic guidance support plan responds to students' needs. |

| | |
|---|---|
| | The professional guidance is suitable, considering the available evidence and the suitability of the activities carried out (type, duration, dissemination, performing agents...). |
| | Students and tutors are satisfied with the academic and professional guidance services. |
| ***Compliant with conditions*** | The effectiveness of the tutorial and academic guidance support plan as a fundamental support element for students in the teaching/learning process is clearly partial. |
| | Professional guidance shows shortcomings, as may be seen from the available evidence and the unsuitability of some of the activities carried out (type, duration, dissemination, performing agents...). |
| | Students and tutors are partially satisfied with the academic and professional guidance services. |
| ***Non-compliant*** | The effectiveness of the tutorial and academic guidance support plan as a fundamental support element for students in the teaching/learning process is not clear. |
| | Professional guidance is insufficient and the activities carried out (type, duration, dissemination, performing agents...) are inadequate. |
| | Students and tutors are not satisfied with the academic and professional guidance services. |
| **5.2. The available physical resources are adequate for the number of students and the characteristics of the programme.** | |
| ***Progressing towards excellence*** | Teaching and learning support infrastructures are excellent for motivating, facilitating and enriching students' learning (in terms of number, updating and quality equipment). |
| | The library's collection satisfactorily fulfils the needs of the programme, there is a high level of use and it is clearly inter-connected with research work going on in the faculty. |
| ***Compliant*** | Teaching and learning support infrastructures respond suitably to students' learning needs (pertinent and sufficient equipment and suitable facilities). |
| | The library's collection is adequate for the needs of the programme, it is accessible and there is a certain connection with research work going on in the faculty. |

| | |
|---|---|
| ***Compliant with conditions*** | Teaching and learning support infrastructures show shortcomings with respect to the number of places, safety, and shortage and/or unsuitability of equipment. |
| | There are certain documentary shortcomings and/or accessibility problems with the library's collection. |
| ***Non-compliant*** | Teaching and learning support infrastructures do not suitably respond to students' learning needs over the course of their studies. |
| | Library collections fail to offer students sufficient documentation throughout their studies and/or the documentation is not adequately accessible. |

## 3.6. Quality of programme (learning) outcomes

The programme outcomes need to be enumerated and analysed for programme review and enhancement. “Programme learning outcomes” means not only the learning and academic outcomes, but also graduate labour market outcomes (graduate destinations) and stakeholder satisfaction.

Programme outcomes are what students are expected to be capable of demonstrating on completion of their studies. They define and give identity to the programme. The entire teaching and learning process and a large part of the organisation’s resources are directed at the objective of achieving the intended learning outcomes. The degree itself is certification of this achievement. In recent years, increasing emphasis has been placed in external review on the learning outcomes and less on the actual processes leading to their achievement. The causes of this change lie ~~both~~ in the fact that, on the one hand, the responsibility for the design and monitoring of the processes has now been placed under the autonomy of the universities and, on the other, in the growing emphasis on outcomes assessment. This is consistent with the process of European convergence, in which there has been a shift of emphasis from contents to learning outcomes, as set out in the recent Bucharest Communiqué (2012) of the ministers responsible for higher education in the EHEA, which draws attention to the requirement that institutions further link study credits with both learning outcomes and student workload, and to include the attainment of learning outcomes in assessment procedures. The assessment of learning outcomes is therefore increasingly necessary in accreditation procedures, especially in facilitating the mutual recognition of accreditation decisions (ECA, 2009).

> **Note**
>
> Reference is made more often in this guide to **learning outcomes**, as to competences, given the more frequent use of the term at international level.

Learning assessment is the process which allows the determination of the degree of achievement of the learning outcomes, as is stated in **ESG 1.3** (Student-centred learning, teaching and assessment), which recommends that “HEIs should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach” (ENQA, 2015).

The teaching/learning process should respect and attend to the diversity of students and their needs, allowing flexible learning pathways. If appropriate, it should consider and use different teaching modalities; use various teaching methods with flexibility; assess and adjust periodically the teaching modalities and teaching methods; foster the sense of independence in students and ensure suitable guidance and support from the teacher; it should also promote mutual respect in the student-teacher relationships; and provide suitable procedures for dealing with student claims.

Both the learning activities as well as the system of assessment need to be relevant, public and adequate to certify the intended learning outcomes set out in the competence profile. The fitness of purpose of the system for assessment infers a judgement regarding its relevance (validity) and an assessment of the level of discrimination of these activities and their assurance of quality (reliability). Furthermore, international good practices, such as those of the Quality Assurance Agency (UK) recommend special emphasis is put on the assessment of the processes used by an HEI to design, approve and monitor its assessment strategies (QAA, 2006).

The labour market outcomes of graduates (graduate destinations) are also assessed in this section, as these are one of the key outcomes of university studies. This section makes use of the wealth of information on this aspect of the Catalan university system, which provides for a contextualized analysis of the main indicators.

**Note**

An analysis of the satisfaction outcomes of the main stakeholders provides an assessment of the degree to which their needs and expectations regarding the programme have been met. These outcomes affect many of the elements in programme accreditation, given that the awareness of stakeholder satisfaction, in particular that of students and graduates, with the programme of study as a whole and the different dimensions of the programme that are assessable, such as teaching staff, the physical resources, support and guidance services and the public information, amongst others, is very important. At the time of accreditation, the HEI should have in place a system for compiling information on the satisfaction of the different stakeholders, at least the students and graduates, which is formally established and implemented within the framework of the processes defined in the IQAS. The cross-dimensional nature of these outcomes means that satisfaction outcomes are not dealt with as a whole in this section, but across and throughout the entire accreditation process.

**At the time of accreditation, HEIs should have instruments that are formally established and implemented for compiling information on stakeholder satisfaction. Considering the cross-dimensional nature of these outcomes, it is recommended these be not just analysed in this section, although this information will be a key element for the focus groups.**

At the time of programme accreditation, the HEI is therefore expected to comply with the following standard:

**Learning and assessment activities are consistent with the programme's competence profile. The outcomes of these processes are adequate in terms of both academic achievements, which correspond to the programme's level as of the MECES, and the academic and employment indicators.**

This overall standard is divided into the following specific standards:

**6.1. The learning outcomes achieved meet the expected training goals and the MECES level of the degree programme.**

**6.2. The training activities, the teaching methodology and the assessment system are suitable to ensure the achievement of the expected learning outcomes.**

**6.3. The values for the academic indicators are adequate for the characteristics of the programme.**

**6.4. The values for the graduate labour market/destination indicators are adequate for the characteristics of the programme.**

## Evidence

The following **evidence** should be provided to assess this standard:

- Documents of the IQAS on the processes associated with the performance of the training programmes to favour student learning and the collection and analysis of outcomes.
- Access to the selected subjects and to samples of developments of these subjects. The following should be kept in mind with respect to the subjects:

| Bachelor's degree | Master's degree |
|---|---|
| ▪ **Four compulsory subjects**. These subjects should be representative of the main curricular areas and of the various course years of the curriculum. Their typology should respond both to science-based subjects and to technical/applied or procedural subjects. As a minimum, one of them should be of the year-one course. | ▪ **Two compulsory subjects.**<br>▪ If there are specialities, **one subject for each speciality (from among those which the student must** |

| | |
|---|---|
| ▪ If there are mentions, **one compulsory subject for each mention**.<br>▪ For **compulsory external placements**, the most significant ones.<br>▪ **Final Bachelor's degree project or dissertation**. | **compulsorily take in order to obtain the speciality).**<br>▪ If there are any, **external placements.**<br>▪ **Final Master's degree project or dissertation.** |

**In its preliminary visit to the faculty, the CAE may ask for additional subjects to be included if the analysis of the evidence so dictates.**

The following three types of evidence should be provided for each selected subject:

**1. Teaching guide of the subject**

Information that should be published on the website of the degree programme, where the following should necessarily be included:

- List of topics.
- Learning outcomes and competences to be acquired.
- Assessment system.
- Most significant training activities, including those which are the object of assessment (pointing them out).
- In the case of external placements and final-year projects and dissertations of Bachelor's/Master's degrees:

  Placement centres and volume of students per faculty and study period.

  Types of most common placements.

  Types of final-year projects and dissertations of Bachelor's/Master's degrees.

  System of supervision of external placements and final-year projects and dissertations of Bachelor's/Master's degrees.

**2. Teachers of the subject**

- Summarised CVs of the teachers teaching the subject (teaching profile, research lines and main recent publications, professional profile).
- In the case of final-year projects and dissertations of Bachelor's/Master's degrees, profile of the supervising teachers (summarised CVs with research lines and main recent publications, especially for teachers in charge of final-year projects and dissertations of Bachelor's degrees).
- Profile of tutors of compulsory external placements.

**3. Sample of student achievements**

- Selection of evidence of the assessment tests of the students in final-year projects and dissertations of Bachelor's/Master's degrees and in external placements.
- With respect to subjects, selection of the written tests, studies and reports, covering the spectrum of grades (fail, pass, notable and excellent), exceeding, between all those presented, 50% of the assessment weight. One evidence for each of the grades given for each of the selected subjects is sufficient. If appropriate, the university will maintain anonymity.
- In the case of continuous assessment, a table allowing its contextualisation. This table should include, as a minimum, the weighting and types of the various tests.

— If there are assessment rubrics which are not stated in the teaching guides, they should be provided in this section.

## Indicators

**The indicators** which should be considered to assess this standard, most of which are available on the EUC portal (academic outcomes, satisfaction and occupational integration), are as follows:

- Satisfaction of graduates with the overall educational experience of the degree programme (Standard 6.1 and Standard 6.2).
- List of presented final-year projects and dissertations of Bachelor's/Master's degrees.
- Evidence of the acquisition of level B2 of a foreign language by graduates (Standard 6.1).
- Satisfaction of students with the teaching action (Standard 6.1 and Standard 6.2).
- Academic outcomes of the degree programme (Standard 6.3).
- Overall outcomes of the year-one course (Standard 6.3).
- Employment rate: % of graduates who are employed, unemployed or inactive (Standard 6.4).
- Suitability rate (functions): % of employed graduates whose functions are related to their specific degree/graduate-level/non graduate-level (Standard 6.4).

## Assessment

For the **assessment** of this standard, the following aspects should be taken into consideration:

- Overall outcomes of the degree programme (performance, drop-outs, graduation, etc.), specifically of the year-one course.
- Achievement of the expected learning outcomes with the expected level. Consequently, assessment that the tests are pertinent and adapted to the methodologies, activities and way of teaching of the degree programme, and consequently, that they serve to express the level of achievement of the outcomes.
- Satisfaction of students.
- Satisfaction of graduates with the training received.

Labour market characteristics, taking into account the results of the latest AQU Catalunya job placement study. The results will be compared with the reference group, which will depend on the representativeness of the information available. When the data are representative at degree programme-level, the reference group will be the average for the degree programme from all the universities that offer it. If the data are not representative at degree programme-level, the reference group shall be the highest grouping with representative data.

**One of the goals of this section is to verify that the learning outcomes are achieved on the expected level. Consequently, the criterion is to verify that the tests are pertinent, that is to say, that they serve to express the level of achievement of the outcomes. Under no circumstances will there be a revision of the assessments assigned.**

## Level of compliance with the standards

These standards are assessed according to four levels of achievement:

- **Progressing towards excellence.** The standard is fully achieved and in addition there are examples of good practices that exceed the minimum level required.
- **Compliant**. The standard is fully achieved at the HEI.
- **Compliant with conditions.** The minimum level for the standard is achieved and aspects identified that will need to be improved. The nature of these aspects is such that they can be improved within a reasonable period of time.
- **Non-compliant.** The programme does not comply with the minimum level requirement for the corresponding standard. Improvements that need to be introduced are such that the standard cannot be reached within a reasonable period of time.

**In order for the accredited degree programme to obtain an overall assessment of "Progressing towards excellence", Substandard 6.1 should receive an assessment of "Progressing towards excellence".**

## Rubrics

| **6.1. The learning outcomes achieved meet the expected training goals and the MECES level of the degree programme.** | |
|---|---|
| | **For year-one courses:** |

| | |
|---|---|
| ***Progressing towards excellence*** | The documentary evidence of the students' achievements shows high levels of student learning and they easily comply with the requirements for the programme's level specified in the MECES. |
| | **For the final-year projects and dissertations (Bachelor's/Master's degrees):**<br><br>The documentary evidence of the students' achievements shows that the final-year projects and dissertations (Bachelor's/Master's degrees) comply satisfactorily with the learning outcomes and the programme's required level in the MECES.<br><br>The final-year projects and dissertations (Bachelor's/Master's degrees) follow a subject planning that is consistent with the groups and lines of research and/or knowledge transfer of the teaching staff. |
| | **For external work experience/placement/internship:**<br><br>The documentary evidence of the students' achievements shows that the external work experience/placement/internship conforms satisfactorily to the learning outcomes and the programme's level specified in the MECES.<br><br>The entities participating as practical work settings are highly appropriate for external work experience/placement/internship. |
| ***Compliant*** | **For year-one courses:**<br><br>The documentary evidence of the students' achievements shows a high level of student learning and that they sufficiently comply with the requirements for the programme's level specified in the MECES. |
| | **For the final-year projects and dissertations (Bachelor's/Master's degrees):**<br><br>The documentary evidence of students' achievements show that the final-year dissertations of Bachelor's/Master's degrees correspond to the MECES level required for the degree programme.<br><br>Most final-year projects and dissertations (Bachelor's/Master's degrees) correspond to subject planning that is consistent with the groups and lines of research and/or knowledge transfer of the teaching staff |
| | **For external work experience/placement/internship:**<br><br>The documentary evidence of students' achievements show that the external placements correspond to the MECES level required for the degree programme.<br><br>External work experience/placement/internship takes place mostly in adequate work settings (centres). |
| | **For year-one courses:** |

| | |
|---|---|
| ***Compliant with conditions*** | The documentary evidence of the students' achievements shows an uneven level of student learning and it is doubtful whether the requirements for the programme's level specified in the MECES are complied with. |
| | **For the final-year projects and dissertations (Bachelor's/Master's degrees):**<br><br>The documentary evidence of the students' achievements shows that the final-year projects and dissertations (Bachelor's/Master's degrees) only partially correspond to the learning outcomes and the programme's level specified in the MECES.<br><br>The final-year projects and dissertations (Bachelor's/Master's degrees) partially correspond to subject planning that is consistent with the groups and lines of research and/or knowledge transfer of the teaching staff. |
| | **For external work experience/placement/internship:**<br><br>The documentary evidence of the students' achievements shows that the external work experience/placement/internship only partially conforms to the programme's level specified in the MECES.<br><br>There are certain inadequacies in the entities that participate as work settings for external work experience/placement/internship. |
| ***Non-compliant*** | **For year-one courses:**<br><br>The documentary evidence of the students' achievements shows an inadequate level of student learning and non-compliance with the requirements for the programme's level specified in the MECES. |
| | **For the final-year projects and dissertations (Bachelor's/Master's degrees):**<br><br>The documentary evidence of the students' achievements shows that final-year projects and dissertations (Bachelor's/Master's degrees) correspond with neither the programme learning outcomes nor the programme's level specified in the MECES.<br><br>The final-year projects and dissertations (Bachelor's/Master's degrees) seldom correspond to subject planning that is consistent with the groups and lines of research and/or knowledge transfer of the teaching staff |
| | **For external work experience/placement/internship:**<br><br>The documentary evidence of the students' achievements shows that external work experience/placement/internship corresponds with neither the programme learning outcomes nor with the programme's level specified in the MECES.<br><br>There are considerable inadequacies in the entities that participate as work settings for external work experience/placement/internship. |

| **6.2. The training activities, the teaching methodology and the assessment system are suitable to ensure the achievement of the expected learning outcomes.** | |
|---|---|
| ***Progressing towards excellence*** | **With respect to subjects:**<br><br>The teaching methods and activities are satisfactorily aligned with the learning outcomes.<br><br>The assessment systems and criteria are varied, innovative and very pertinent to certify and distinguish learning outcomes. |
| | **With respect to final-year projects and dissertations of Bachelor's/Master's degrees:**<br><br>The final-year projects and dissertations of Bachelor's/Master's degrees are supervised and assessed using very pertinent and suitable criteria. |
| | **With respect to external placements:**<br><br>External placements are supervised and assessed using very pertinent and suitable criteria. |
| ***Compliant*** | **With respect to subjects:**<br><br>The teaching methods and activities are designed with the aim to offer opportunities to students to integrate the learning outcomes.<br><br>The assessment systems and criteria are suitable for certifying and distinguishing the learning outcomes. |
| | **With respect to final-year projects and dissertations of Bachelor's/Master's degrees:**<br><br>The final-year projects and dissertations of Bachelor's/Master's degrees are supervised and assessed using suitable criteria. |
| | **With respect to external placements:**<br><br>External placements are supervised and assessed using suitable criteria. |
| ***Compliant with conditions*** | **With respect to subjects:**<br><br>Teaching methods and activities offer a reasonable number of opportunities to develop the required learning outcomes.<br><br>The assessment systems and criteria show some shortcomings which do not allow the learning outcomes to be certified and/or distinguished in all cases. |
| | **With respect to final-year projects and dissertations of Bachelor's/Master's degrees:** |

| | |
|---|---|
| | The systems for supervision and assessment of final-year projects and dissertations of Bachelor's/Master's degrees show shortcomings. |
| | **With respect to external placements:**<br><br>The systems for supervision and assessment of external placements show shortcomings. |
| ***Non-compliant*** | **With respect to subjects:**<br><br>There is no clear relationship between learning outcomes and the teaching methods and activities of the training provided in the degree programme.<br><br>The assessment systems and criteria are not suitable for certifying and distinguishing the learning outcomes. |
| | **With respect to final-year projects and dissertations of Bachelor's/Master's degrees:**<br><br>The systems for supervision and assessment of final-year projects and dissertations of Bachelor's/Master's degrees show significant shortcomings which do not make them suitable for certifying and distinguishing the learning outcomes. |
| | **With respect to external placements:**<br><br>The systems for supervision and assessment of external placements show significant shortcomings which do not make them suitable for certifying and distinguishing the learning outcomes. |

| **6.3. The values for the academic indicators are adequate for the characteristics of the programme.** | |
|---|---|
| ***Progressing towards excellence*** | The documentary evidence shows that the time series for the academic indicators is consistent with the type of students and equivalent programmes, and it clearly shows continuous enhancement of the programme. |
| ***Compliant*** | The documentary evidence shows that the time series of most of the academic indicators is consistent with the types of students and the equivalent degree programmes. |
| ***Compliant with conditions*** | The documentary evidence shows that there is a certain mismatch in the time series for the academic indicators in relation to the type of students and equivalent programmes, and it does not show continuous improvement of the programme. |
| ***Non-compliant*** | The documentary evidence shows that there is a significant and serious mismatch in the time series for the academic indicators in relation to the type |

| | |
|---|---|
| | of students and equivalent programmes, and there is no sign of continuous enhancement of the programme. |
| | |
| **6.4. The values for the graduate labour market/destination indicators are adequate for the characteristics of the programme.** | |
| ***Progressing towards excellence*** | The employment rate for graduates is higher than that of the reference group.. |
| | The suitability rate for graduates is higher than that of the reference group. |
| ***Compliant*** | The employment rate for graduates is similar to that of the reference group. |
| | The suitability rate for graduates is similar to that of the reference group. |
| | The degree programme has mechanisms for determining graduates' job placement but does not yet have sufficient data to be able to assess this section. |
| ***Compliant with conditions*** | The employment rate for graduates is significantly lower than that of the reference group. |
| | The suitability rate for graduates is significantly lower than that of the reference group. |
| ***Non-compliant*** | The degree programme does not have mechanisms in place for determining graduates' job placement. |

# 4. ACCREDITATION RESULT

## 4.1. Final report

The definitive accreditation report (IdA, from the Catalan) issued by CEAs shall be prepared using as the primary source of evidence the external visit report prepared by the external assessment committee (IAE, from the Catalan). The final assessment report may be favourable or unfavourable and, on the basis of accreditation criteria, the outcome may be placed at four possible levels:

1. Favourable report of accredited:
    a. Progressing towards excellence.
    b. Compliant.
    c. Compliant with conditions.
2. Unfavourable report of unaccredited:
    a. Non-compliant.

The IdA must include at least the following:

1. Description of the context of the qualification.
2. Description of the procedure used, including the experts involved.
3. Results of the assessment for each of the standards.
4. Final assessment result.
5. Best practices identified.
6. Proposals for improvement (recommendations for follow-up measures).

AQU Catalunya shall send the IdA to the Council of Universities so that it may give accreditation to the study programme under assessment in accordance with the applicable legal procedure.

AQU Catalunya shall publish the accreditation and visit reports on its review reports portal (http://estudis.aqu.cat/informes).

## 4.2. Hallmarks and certificates

If the study programme assessed is awarded a favourable accreditation report, AQU Catalunya will issue a quality hallmark with its own unique number and the corresponding certificate. The hallmark shall be valid for a maximum period of four years in the case of Master's degrees and six years in the case of Bachelor's degrees worth between 180 and 240 ECTS credits. In the case of Bachelor's degrees worth 300 ECTS or 360 ECTS, the maximum period of validity shall be 7 or 8 years, respectively.

According to the evaluation made in the final report, study programmes will be awarded a favourable accreditation hallmark (compliant or compliant with conditions) or a hallmark for an accreditation of excellent (progressing towards excellence).

The terms of use are specified in the *AQU Catalunya quality hallmarks and terms of use thereof* (*Segells de qualitat d'AQU Catalunya i condicions per al seu ús*), approved by the Governing Board of AQU Catalunya in 2014.

These hallmarks will be published on the University Study Programmes of Catalonia (EUC, from the Catalan) website: http://estudis.aqu.cat.

## 4.3. Effects of accreditation

Accreditation of a university study programme by the Council of Universities enables the university responsible to continue with its implementation according to the terms set out in the latest verification report for a specific maximum period determined according the programme type:

a) Recognised **Bachelor's degree qualifications of between 180 and 240 credits** may remain on offer for a maximum period of **six years** before needing to renew their accreditation.
b) Recognised **Bachelor's degree qualifications of 300 credits** may remain on offer for a maximum period of **seven years** before needing to renew their accreditation.
c) Recognised **Bachelor's degree qualifications of 360 credits** may remain on offer for a maximum period of **eight years** before needing to renew their accreditation.
d) Recognised **Master's degree qualifications** may remain on offer for a maximum period of **four years** before needing to renew their accreditation.

If the Council of Universities does not award accreditation to a study programme, the institution responsible **may not register any new students and will need to embark on all the actions detailed in the verification report in order to gradually phase out the study programme** while adhering to the rights of students already enrolled.

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# 5. FOLLOW-UP AND CONTINUAL IMPROVEMENT

Once accreditation has been awarded, the study programme must undergo a process of reflection in relation to its development at least once every two years. The reflection shall be carried out on the same six dimensions that formed part of the accreditation process and shall be based on the last improvement plan. As a result, the study programme follow-up procedure lays the foundations for the forthcoming accreditation which, in turn, takes the follow-up process to its conclusion. The intention is for these two procedures to be viewed as a single process: a process of continual improvement that concludes with the external validation of the results achieved.

As is the case with accreditation, follow-up reports are prepared at institutional level and must include a reflection on all Bachelor's and Master's degrees offered.

The follow-up is a compulsory process, albeit one conducted internally within the institution. The reports thus prepared are among the primary sources of evidence used in the accreditation procedure. In all cases, institutions are required to submit follow-up reports on study programmes to AQU Catalunya when the corresponding accreditation report has specified that there are areas which must be improved. The CEAs will examine them to evaluate the extent to which improvements have been made in the relevant areas.

The follow-up process is described in the *Guia per al seguiment de les titulacions oficials de grau i màster* (*Guide to the follow-up of recognised Bachelor's and Master's degree programmes*, AQU, 2014).

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# 6. REFERENCES


Act 15/2015, of 21 July, on Agència per a la Qualitat del Sistema Universitari de Catalunya. http://portaldogc.gencat.cat/utilsEADOP/AppJava/PdfProviderServlet?versionId=1435962&type=01

Act 17/2015, of 21 July, on effective equality between women and men. http://portaldogc.gencat.cat/utilsEADOP/AppJava/PdfProviderServlet?documentId=698967&type=01&language=ca_ES

AQU Catalunya (2018). *General framework for incorporating the gender perspective in Higher Education teaching.* http://www.aqu.cat/doc/doc_21331700_1.pdf

AQU Catalunya (2016). *Evidències i indicadors recomanats per a l'acreditació de graus i màsters*. http://www.aqu.cat/doc/doc_58718441_1.pdf

AQU Catalunya (2016). *Terminis i procediment per a la presentació de les sol·licituds d'acreditació de títols*. http://www.aqu.cat/doc/doc_15070923_1.pdf

AQU Catalunya (2014). *Processos per a la comunicació i/o avaluació de les modificacions introduïdes en els títols universitaris de grau i de màster*. http://www.aqu.cat/doc/doc_14313418_1.pdf

AQU Catalunya (2014). *Guia per al seguiment de les titulacions oficials de grau i màster*. http://www.aqu.cat/doc/doc_16385323_1.pdf

AQU Catalunya (2014). *Segells de qualitat d'AQU Catalunya i condicions per al seu ús.*

AQU Catalunya (2010). *Framework for the validation, monitoring, modification and accreditation of recognised university degrees*. http://www.aqu.cat/doc/doc_27365192_1.pdf

AQU Catalunya (2010). *Directrius per al desenvolupament del Marc per a la verificació, el seguiment, la modificació i l'acreditació dels títols oficials*. http://www.aqu.cat/doc/doc_13036660_1.pdf

CURSA (2010). *Protocolo para el seguimiento y la renovación de la acreditación de los títulos universitarios oficiales*. http://www.aqu.cat/doc/doc_11843272_1.pdf

ENQA (2015). *Standards and Guidelines for Quality Assurance in the European Higher Education Area*. http://www.aqu.cat/doc/doc_24427439_1.pdf

Organic Act 6/2001, of 21 December, on Universities. http://www.boe.es/buscar/act.php?id=BOE-A-2001-24515

Royal Decree 1393/2007, of 29 October, establishing the organisation of recognised university programmes. http://www.boe.es/buscar/act.php?id=BOE-A-2007-18770

Real Decreto 822/2021, de 28 de septiembre, por el que se establece la organización de las enseñanzas universitarias y del procedimiento de aseguramiento de su calidad.

Law 5/2008, of 24 April, on the right of women to eradicate gender-based violence.

Law 17/2020, of 22 de December, amending Law 5/2008, on the right of women to eradicate gender-based violence.

Royal Decree 640/2021, of 27 July, on the creation, recognition and authorisation of universities and university centres and on the institutional accreditation of university centres.

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# ANNEX I. THE GENDER PERSPECTIVE

Below, for each of the six assessment standards in the accreditation process, the qualitative aspects and indicators are identified which may generally underpin evidence in order to generate an evaluative judgment regarding the focus on/inclusion of the gender perspective in the study programme pursuant to Act 17/2015.

The assessment of the inclusion of the gender perspective in the degree programme must also check that the programme follows the requirements established in article 17 of Law 5/2008, of 24 April, on the right of women to eradicate gender-based violence, amended by Law 17/2020, of 22 December.

It is necessary to bear in mind that the term "gender perspective" is used since it is the term employed in article 28.1.a) of Act 17/2015, mentioned. In actual fact, though, the term in the norm refers to "binary gender"; in other words, the idea of gender as being a division of male/man/masculine or female/woman/feminine based on the gender assigned at birth, rather than being a continuum or spectrum of gender expressions and identities. It is obvious that this classification is limited and poses problems for individuals who do not fit in with any of these categories precisely or at all.

Although the object of focus in accreditation processes is the study programme, it should not be overlooked that generally the most suitable benchmark to verify the diagnosis at a specific point in time, as well as the relevant actions in order to remedy or develop the results of this diagnosis, consists of the HEI itself.

## 1. Quality of the training programme

The following qualitative information or indicators disaggregated by gender may be provided by the study programme. It would be useful to be able to examine this data not only within the study programme, but also by comparing it with all other similar programmes in Catalonia and even study programmes from the same branch.

### Access and enrolment

- Access pathways.
- Quality of access: cut-off grades according to admission pathways.
- Demand for first choice.
- Total enrolment.
- Full-time enrolment.

## Curriculum

- Typology of subjects/courses that incorporate the gender perspective: significant contributions to the degree programme's content and specific training on the prevention of gender-based violence, especially in those studies that might have greater impact in complying with article 17 of Law 5/2008, of 24 April, amended by Law 17/2020, of 22 December (basic courses, optional courses, mentions and specialisations, etc.).
- Production of materials incorporating the gender perspective and free of sexist, violent or discriminatory content.
  - Skills and learning outcomes.
  - Teaching resources (bibliography).
  - Inclusive images and language with regard to teaching materials.
  - Training for an introduction to research taking into consideration the gender perspective.
  - Supplementary activities:
    - Knowledge of the structure of the gender perspective in the professional sphere: wages, problems, male/female inequalities
    - Knowledge of gender bias in the discipline in which the study programme is inserted.

  The analysis that the study programme could carry out should address:

  - Gender equality in access.
  - The diversity of social origins and genders in access.
  - Academic progression and graduation according to sex.
  - Differences in satisfaction between male and female students.
  - The number of subjects that incorporate the gender perspective and specific training on the prevention of gender-based violence and their typology.
  - Application of the gender perspective in teaching materials (inclusive images, language, and free of sexist, violent or discriminatory content, etc.).
  - Mechanisms to ensure that teaching materials incorporate the gender perspective.
  - Satisfaction of students with the presence of the gender perspective in the programme.
  - Satisfaction of students with the study programme according to sex.

## 2. Relevance of public information

The study programme may examine the following information with regard to the public information it offers, specifying whether this information is adequately inclusive:

- Data disaggregated by sex.
- Inclusive graphic and written language making it possible to combat stereotypes and bias in study programmes.
- Incorporation of the gender perspective in teaching guides.
- Equality plan.
- Protocol for the prevention, detection and management of situations of sexual harassment or harassment on the basis of sex and other forms of gender-based violence.

## 3. Efficacy of the internal quality assurance system

The study programme may examine the existence and impact of the following information relating to the internal quality assurance system implemented:

- Procedures to guarantee the inclusion of the gender perspective in teaching materials.
- Equality Policy: goals and implementation.
- Situation and monitoring reports.
- The incorporation of the gender perspective in the processes for the design, monitoring and accreditation of study programmes.
- The compiling and examination of indicators relating to the gender perspective.
- Training in gender mainstreaming for the person in charge of the internal quality assurance system.

## 4. Suitability of teaching staff

For the analysis of the teaching staff on the study programme, the statistical data and indicators set out below may be taken into consideration. This information may be provided broken down by gender and, similarly, it would be useful to be able to examine this data not only within the study programme, but also by comparing it with all other similar programmes in Catalonia and even study programmes from the same branch.

- Teaching staff profile:
  - 3-year research periods.
  - 1st generation (parents without higher education).

- Age.
- Category.
- Contractual situation: permanent/non-permanent.
- Potential accreditation.

- Teaching allocation
  - Subjects.
  - External training placements.
  - Bachelor's degree final year project /Master's degree final year project.
- Training in gender mainstreaming.
- Satisfaction of students.

The analysis to be carried out by the study programme should address:

- Equality within the teaching staff structure.
- Equality in the assignment of teaching schedules.
- Training of teaching staff in gender mainstreaming (teaching and research).
- Consideration of gender bias in mechanisms for assessing teaching staff.

## 5. Effectiveness of learning support systems

When it comes to analysing the extent to which the gender perspective has been incorporated, the degree programme may consider the following aspects:

- Presence of the gender perspective in the tutorial plan of action.
- Documentary resources devoted to the gender perspective in the study programme discipline (CRAI).
- Inclusion of stipulations ensuring non-discrimination on the grounds of sex in agreements with training placement centres.
- Non-sexist and/or non-discriminatory images and signage in the institution (changing rooms, toilets, signs, etc.).
- Student mobility according to sex (students admitted to the programme and students departing for other programmes).
- Mobility of teaching and research staff.

- Professional guidance incorporating the gender perspective (pay, salary negotiation, motivation letters, recognition of stereotypes in the profession).
- Training of administrative and services staff in gender mainstreaming.

- Existence of protocols for the prevention and detection of situations of sexual harassment or harassment on the basis of sex and other forms of gender-based violence and for the care and protection of victims.
- Existence of equality observatories or units with sufficient human and material resources to carry out the functions of prevention and detection of situations of gender-based violence and of care and protection of victims.

## 6. Quality of outcomes

The study programme may take into consideration the gender perspective, especially in the following aspects:

- Academic outcomes from the study programme.
- Satisfaction of graduates with the overall educational experience of the programme.
- Student satisfaction with teaching activity.
- Access to the labour market.

The analysis to be carried out by the study programme should address:

- Equality in the duration of study programmes according to sex.
- Equality in progression within study programmes.
- Equality in graduation.
- Differences between the genders in terms of access to the labour market
- Differences between the genders in terms of satisfaction with the study programmes followed.

# ANNEX II. ADDITIONAL ASPECTS IN THE ACCREDITATION OF BACHELOR'S DEGREES IN MEDICINE

In order for accreditations of Bachelor's degrees in Medicine conducted by AQU Catalunya to receive recognition from the World Federation of Medical Education (WFME) it is vital for the Agency's accreditation methodology to incorporate the fundamental standards of Basic Medical Education (BME).[6] The methodology implemented by AQU Catalunya meets most of the aforementioned standards with the exception of certain standards specific to medical education. Consequently, AQU Catalunya incorporates the assessment of the aspects set out below into the accreditation of Bachelor's degrees in Medicine. In turn, medical schools must include these aspects in their self-assessment reports.

## 1. Quality of the training programme

In accordance with WFME assessment criteria, medical schools must define their mission and educational outcomes for study programmes in Medicine (BME 1.1). The study programme stakeholders must participate in defining the mission (BME 1.4). Accordingly, sub-standard 1.6 is added:

**1.6. The study programme has a formally established mission in medical education.**

According to the WFME, the mission provides the overarching framework to which all other aspects of the educational institution and its programme have to be related. The mission statement would include general and specific issues relevant to institutional, national, regional and global policies and needs. The mission in this document includes the institutions' vision in terms of education in Medicine.

The mission and learning outcomes envisaged must:

- be publicly available
- outline the following minimum aspects:
  - the aims and the educational strategy resulting in a medical doctor:
  - competent at a basic level; with an appropriate foundation for future careers in any branch of medicine; capable of undertaking the roles of doctors as defined by the health sector; prepared and ready for postgraduate medical training; committed to life-long learning;

[6] https://wfme.org/download/wfme-global-standards-for-quality-improvement-bme/?wpdmdl=831&refresh=5f76cd9e5a1a01601621406

- the health needs of the community;
- the needs of the healthcare delivery system and other aspects of social accountability in keeping with the UN Sustainable Development Goals (SDGs);

- be formulated based on input from key stakeholders.

In addition, the faculty will need to ensure that the mission encompasses **medical research** attainment and aspects of **global health**.

## Evidence

- Mission document.
- Educational outcomes linked to the mission.
- Indicators linked to the educational outcomes and the degree of achievement.

## Assessment

- Existence of the institutional mission in medical education.
- Relevance of the mission to medical education.
- Objectives, actions, indicators and degree of achievement of the outcomes.

## Rubrics

| **1.6. The study programme has a formally established mission in medical education.** | |
|---|---|
| ***Progressing towards excellence*** | The study programme has a formally established mission in medical education which has been prepared with the engagement of key stakeholders. |
| | The mission is highly relevant to the nature of the study programme, and objectives and actions are derived from it which are regularly analysed and reviewed. |
| ***Compliant*** | The study programme has a formally established mission in medical education which has been prepared with the engagement of key stakeholders. |

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|---|---|
| | The mission is relevant to the nature of the study programme, and objectives and actions are derived from it which are analysed and reviewed. |
| ***Compliant with conditions*** | The study programme has a formally established mission in medical education although it has been prepared without the engagement of key stakeholders. |
| | The mission is not suitably relevant to the nature of the study programme, and/or no objectives and actions are derived from it which are analysed and reviewed. |
| ***Non-compliant*** | The study programme has no formally established mission in medical education. |
| | The mission is not relevant to the nature of the study programme. |

## 2. Relevance of public information

All the WFME requirements are present within the dimension that assesses the relevance of public information. Nevertheless, as a result of the incorporation of the assessment of the mission, the HEI must make publicly known its mission and the educational outcomes stemming from it (BME 1.1.2 and BME 1.3.8). This assessment is incorporated into sub-standard 2.1.

## 3. Efficiency of the internal quality assurance system

In addition to the remaining criteria in this dimension that must be met by the HEI, it is necessary for the medical school to consider the opinion of key stakeholders in reviewing, monitoring and assessing the training programme (BME 7.4).

Aside from internal stakeholders (management team, teaching staff, students, graduates, administrative and services staff, etc.), the medical school must also take into consideration external stakeholders (the medical and education authorities, professional bodies, medical scientific societies and postgraduate medical educators, representatives from other healthcare professions, patients and patient organisations, and the general public).

As a result, the HEI must comply with the following additional sub-standard:

**3.4. The HEI involves its key stakeholders in the monitoring, review and improvement of its medical education programme.**

## Evidence

- Review reports/documents.
- Study programme improvement plans.
- Mechanisms/instruments for compiling information on the satisfaction and opinion of key stakeholders.

## Assessment

- Level of implementation of instruments for compiling information.
- Degree of participation of stakeholders in the review and improvement of the study programme.

### Rubrics

| 3.4. The HEI involves its key stakeholders in the monitoring, review and improvement of its medical education programme. | |
|---|---|
| ***Progressing towards excellence*** | At all times, the HEI takes into consideration the opinion and benefits from the engagement of its key internal and external stakeholders for the review and improvement of the training programme in Medicine. |
| ***Compliant*** | On a regular basis, the HEI takes into consideration the opinion and benefits from the engagement of its key internal and external stakeholders for the review and improvement of the training programme in Medicine. |
| ***Compliant with conditions*** | Only on occasions and/or to a partial extent does the HEI benefit from the engagement of internal and external stakeholders for the review and improvement of the training programme in Medicine. |
| ***Non-compliant*** | The HEI's stakeholders are not engaged in the processes for the review and improvement of the training programme in Medicine. |

## 4. Suitability of teaching staff for the training programme

The WFME stipulates the need for the HEI to have a policy governing the incorporation of knowledge in medical education into its training programme (BME 6.5.2) and into the teaching methodology and the assessment (BME 6.5.3), while guaranteeing that it has sufficient expertise in medical education (BME 6.5.1). To ensure these developments are incorporated into teaching, it is vital for the HEI's teaching staff to be given suitable training in medical education and for this training to be refreshed on a regular basis (BME 5.2; and referred to in sub-standard 4.3 of this guide).

Here, the WFME considers that educational expertise would deal with processes, practice and problems of medical education and would include medical doctors with research experience in medical education, and educational psychologists and sociologists. It can be provided by an education development unit or a team of interested and experienced teachers at the institution or be acquired from another national or international institution. In order to assess this aspect, an additional sub-standard is included:

**4.4 The HEI incorporates developments in medical education into the training programme.**

### Evidence

- Policy for educational innovation and its incorporation into the training programme.
- Training activities for teaching staff focussed specifically on teaching in Medicine.
- Percentage of the HEI's teaching staff who have been given training in medical education over the past six years.
- Research unit on medical education.
- Medical education publications.

## Assessment

- Level of training of the teaching staff in medical education.
- Review of the teaching methodology to include developments in medical education.
- Extent to which developments in medical education are incorporated into the training programme.

## Rubrics

| **4.4. The HEI incorporates developments in medical education into the training programme.** | |
|---|---|
| ***Progressing towards excellence*** | The HEI has a research group or unit that conducts research on medical education and the results are published in indexed journals. |
| | The HEI has implemented a policy for the teaching-based review of the training programme, which is carried out on a regular basis. |
| ***Compliant*** | The HEI has teaching staff who conduct research on medical education and the results are published in indexed journals. |
| | The HEI has implemented a policy for the teaching-based review of the training programme. |
| ***Compliant with conditions*** | The HEI has teaching staff who conduct research on medical education, although the results are not published in indexed journals. |
| | The HEI occasionally incorporates teaching developments into the training programme. |
| ***Non-compliant*** | The HEI does not have teaching staff who conduct research on medical education. |

| | |
|---|---|
| | The HEI does not incorporate teaching developments into the training programme. |

## 5. Effectiveness of learning support systems

In relation to the achievement of sub-standard 5.2 (the available physical resources are adequate for the number of students and the characteristics of the programme), according to WFME standard 6.2, the HEI must demonstrate that it has the necessary resources for giving students adequate clinical experience, including sufficient numbers and categories of patients (BME 6.2.1) and a sufficient number of clinical training facilities (BME 6.2.2). Sub-standard 5.2 from AQU Catalunya embraces this demand from the WFME but the HEI must provide evidence showing that it complies with this requirement.

### Evidence

- List of clinical institutions hosting students on training placements, the type and the number of individuals who can attend.
- Indicators regarding the average student/patient ratio.

### Assessment

- Sufficient number and suitability of clinical facilities.
- Sufficient number and suitability of patients.

## 6. Quality of programme (learning) outcomes

With regard to the assessment of learning outcomes, aside from the remaining criteria it must comply with in sub-standard 6.2, the HEI must ensure that the assessments are open to scrutiny by external expertise and that the methods and results of assessments avoid conflicts of interest (BME 3.1.4 and BME 3.1.5). The teaching and assessment methods must incorporate the developments in medical education in accordance with the HEI's policy in this regard (BME 6.5.3).

Likewise, the HEI must demonstrate in its self-assessment report that it ensures timely, specific, constructive and fair feedback is given to students on the basis of assessment results (BME 3.2.2).

The study programme in Medicine must segment student progression indicators according to type. In particular, they should be segmented according to the admission method, distinguishing between students enrolled through university entrance exams and those enrolled based on the transfer of their academic transcript (Q 7.3.1 and Q 7.3.2).

No change is made to the drafting of sub-standard 6.2. However, the HEI must provide the following additional evidence:

### Evidence

- Review reports on the methods and results of assessments, prepared by external expertise.
- Mechanisms/instruments to avoid conflict of interest.
- Complaints procedure and/or assessment exam review.
- Procedure for informing students about the results of assessments.

### Assessment

- Level of involvement of external expertise in the review of the methods and results of student assessments.
- Level of implementation and effectiveness of instruments to avoid conflict of interest.
- Level of implementation and effectiveness of the complaints procedure and/or the assessment exam review.
- Student satisfaction regarding assessment methods, academic outcomes and feedback on them provided to students.

## 7. Governance

This is one dimension that is not present in the model for the accreditation of university study programmes in Catalonia. Although it is more specific to institutional accreditation, it constitutes a dimension that the WFME (BME 8) includes as mandatory in the accreditation of basic training for doctors.

According to the WFME, governance is primarily concerned with policy making, the processes of establishing general institutional and programme policies, and also with control of the implementation of the policies. The institutional and programme policies would normally encompass decisions on the mission of the medical school, curriculum, admission policy, staff recruitment and selection policy, and decisions on interaction and linkage with medical practice and the health sector, as well as other external relations.

The medical school must have **stable academic and management structures with clearly defined functions**. The relationships between the HEI and the university must also be defined (BME 8.1.1).

The HEI must assure:

- Representation from key stakeholders on its governance bodies.
- Transparency.

The **management of the HEI is expected to take the lead in the definition and management of the medical educational programme**. Accordingly, its functions must be perfectly defined and must enable the aforementioned leadership. The management must regularly assess its academic leadership in relation to the achievement of its mission and intended educational outcomes.

According to the WFME, academic leadership refers to the positions and persons who are responsible for decisions on academic matters in teaching, research and service and would include the dean and the associated team, heads of departments, directors of associated research institutes and centres, as well as chairs/directors of the HEI's standing committees.

Lastly, the medical school must have constructive interaction with the health sector (hospitals, primary care, socio-medical centres, etc.) and with the government and other public health bodies. This interaction must involve formal engagement through agreements and other instruments for cooperation, and it must be based on the participation of teaching staff, students, and clinical and care staff from the health sector.

The standard to reach is the following:

**The faculty has an academic and management structure allowing for suitable decision-making concerning the Bachelor's degree in Medicine.**

It is broken down into the following sub-standards:

**7.1. The functions of the governance bodies are unambiguously defined.**

**7.2. The structure of the governance bodies and academic management of the HEI allows for suitable decision-making.**

**7.3. The management team of the HEI takes the lead in the teaching and learning process in Medicine, reviews its actions and offers accountability.**

**7.4. The administrative and technical staff enable the educational programme to be implemented and assure excellent resource management.**

**7.5. The HEI has a suitable system for interaction with the health sector and health authorities.**

## Evidence

- Organisational chart.
- Administrative, services and technical staff.
- The HEI's internal regulations.
- Resolutions issued by governance bodies.
- Cooperation agreements.

## Assessment

- Suitability of the HEI's governance structure.
- Agreements signed with the health sector and interaction with healthcare authorities.

## Rubrics

| | |
|---|---|
| **7.1. The functions of the governance bodies are unambiguously defined.** | |
| ***Compliant*** | The functions of the governance bodies are unambiguously defined. |
| ***Non-compliant*** | The functions of the governance bodies are not unambiguously defined. |
| **7.2. The structure of the governance bodies and academic management of the HEI allows for suitable decision-making.** | |
| ***Progressing towards excellence*** | The structure of the governance bodies and the academic management allows for highly suitable decision-making. |
| ***Compliant*** | The structure of the governance bodies and the academic management allows for suitable decision-making. |
| ***Compliant with conditions*** | The structure of the governance bodies and the academic management exhibits certain shortcomings in allowing for suitable decision-making. |
| ***Non-compliant*** | The structure of the governance bodies and the academic management is not suitable for decision-making. |
| **7.3. The management team of the HEI takes the lead in the teaching and learning process in Medicine, reviews its actions and offers accountability.** | |
| ***Progressing towards excellence*** | The management team delivers stringent leadership, offers accountability and reviews its actions and results. |
| ***Compliant*** | The management team of the HEI takes the lead in decision-making in the education in Medicine, offers accountability and reviews its actions and results. |
| ***Compliant with conditions*** | The leadership of the management team exhibits shortcomings with regard to decision-making, accountability or the review of its actions and results. |
| ***Non-compliant*** | The management team of the HEI does not take the lead in the decision-making process. |
| **7.4. The administrative and technical staff enable the educational programme to be implemented and assure excellent resource management.** | |

| | |
|---|---|
| ***Progressing towards excellence*** | The administrative and technical staff are highly adequate and suited to enabling effective implementation of the educational programme and they assure excellent resource management. |
| ***Compliant*** | The administrative and technical staff enable correct implementation of the educational programme and assure excellent resource management. |
| ***Compliant with conditions*** | The administrative and technical staff exhibit shortcomings and deficiencies in enabling correct implementation of the educational programme and excellent resource management. |
| ***Non-compliant*** | The administrative and technical staff are not suitable for correct implementation of the educational programme and do not assure excellent resource management. |
| **7.5. The HEI has a suitable system for interaction with the health sector and health authorities.** | |
| ***Progressing towards excellence*** | The HEI engages in highly suitable interaction with key institutions from the local health sector and with the health authorities. |
| ***Compliant*** | The HEI engages in suitable interaction with key institutions from the local health sector and with the health authorities. |
| ***Compliant with conditions*** | The HEI engages in interaction with certain institutions from the local health sector and/or its interaction with the health authorities exhibits some shortcomings. |
| ***Non-compliant*** | The HEI does not engage in interaction with institutions from the local health sector and/or its interaction with the health authorities exhibits some shortcomings. |

AQU CATALUNYA

## Link between the standards of the WFME and those of AQU Catalunya

| WFME standards | AQU standards 1.1 | 1.2 | 1.3 | 1.4 | 1.5 | 1.6 | 2.1 | 2.2 | 2.3 | 3.1 | 3.2 | 3.3 | 3.4 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1.1 | B111-117 | B114 | | B114 | | B111 **Q111** B115 **Q112** B116 B118 | B112 | | | | | | |
| 1.2 | | B121 | | | B121 Q121 | | | | | | | | |
| 1.3 | B131 Q131 B132 Q132 B133 Q133 B134 B137 | Q131 Q132 Q133 | | B134 | | | B138 | | | | | | |
| 1.4 | | B141 | | | | **Q141** | | | | | | | |
| 2.1 | B211 B212 **Q211** | B212 B211 **Q211** | | | B213 | | | | | | | | |
| 2.2 | B221 B222 B223 Q221 | B221-222 **Q221** | | | | | | | | | | | |
| 2.3 | B231 B232 **Q231** | B231-233 **Q231-232** | | | | | | | | | | | |
| 2.4 | B251-255 **Q241-243** | **Q241 Q242 Q243** | | | | | | | | | | | |
| 2.5 | **Q251-254** | B251-255 **Q251-254** | | | | | | | | | | | |
| 2.6 | Q261 Q262 Q263 Q264 | B261 Q261 Q262 Q263 Q264 | | B261 | B261 | | | | | | | | |
| 2.7 | | | | | | | | | | B271 | | | B272 Q272 |
| 2.8 | | B281 | | | | | | | | | Q281 | | **Q282** |
| 3.1 | B311 B312 B313 | | | B311 B312 B313 | | | B311 | | | | | | |
| 3.2 | | | | | | | | | | | | | |
| 4.1 | | | | B411 B412 B413 **Q413** | | **Q411** | | | | | | **Q412** | |
| 4.2 | | | B421 | | | | | | | | | | **Q421** |
| 4.3 | | | | | | | | | | | | | |
| 4.4 | | | | | B442 B443 B445 | B441 | | B444 | B444 | B442 B443 B444 B445 | | | |
| 5.1 | | | | | B511 B553 | | | | | B511 B552 B553 | | | |
| 5.2 | | | **Q521** | B523 **Q521** | B521 B522 B523 B524 B525 **Q522** | | | | | | | | |
| 6.1 | | | | | B612 | | | | | | | | |
| 6.2 | | | | B621 B622 B623 | | | | | | | | | |
| 6.3 | | | | | B631 | | | | | | | | |
| 6.4 | | | | | B642 | | | | | | | | |
| 6.5 | | | | B651 B652 B653 | | | | | | | | | |
| 6.6 | | | | | B661 B662 | | | | | | | | |
| 7.1 | | | | | | | | | | B711 B712 B713 B714 B715 Q711 Q712 Q713 Q714 | | | |
| 7.2 | | | | | | | | | | | | **Q721** | **Q721** |
| 7.3 | | | | | | | | | | | | | |
| 7.4 | | | | | | | | | | | | | B741 **Q741 Q742 Q743** |
| 8.1 | | | | | | | **Q813** | | | | | | **Q811 Q812** |
| 8.2 | | | | | | | | | | | | | |
| 8.3 | | | | | | | | | | | | | |

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| | 8.4 | | | | | | | | | | Q841 | | | | |
| | 8.5 | | | | | | | | | | | | | | |
| | 9.0 | | | | | | | | | | B901 B902 B903 **Q901-Q9012** | | | | |

## Link between the standards of the WFME and those of AQU Catalunya (cont.)

| WFME standards | AQU standards: 4.1 | 4.2 | 4.3 | 4.4 | 5.1 | 5.2 | 6.1 | 6.2 | 6.3 | 6.4 | 7.1 | 7.2 | 7.3 | 7.4 | 7.5 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1.1 | | | | | | | **Q111** | | | | | | | | |
| 1.2 | **Q121** **Q122** | | **Q121** **Q122** | | | B122 | | | | | | | | | |
| 1.3 | | | | | | | B131-138 **Q131-133** | | | B133 B134 | | | | | |
| 1.4 | | | | | | | | | | | | | | | |
| 2.1 | | | | | B212 | | | | | | | | | | |
| 2.2 | | | | | | | | | | | | | | | |
| 2.3 | | | | | | | | | | | | | | | |
| 2.4 | | | | | | | | | | | | | | | |
| 2.5 | | | | | | B255 **Q253** | | B251 B252 B253 B254 B255 | | | | | | | |
| 2.6 | | | | | | | | | | | | | | | |
| 2.7 | | | | | | | **Q271** | | | | | | | | |
| 2.8 | | | | | | | | | | **Q281** | | | | | |
| 3.1 | | | | | | | | B311-B316 **Q311-313** | | | | | | | |
| 3.2 | | | | | | | B322 B324 | B321 Q321 Q322 B322 B323 B324 | | | | | | | |
| 4.1 | | | | | | | | | | | | | | | |
| 4.2 | | | | | | | | | | | | | | | |
| 4.3 | | | | | B431 B432 B433 B434 **Q431** **Q432** | | | | | | | | | | |
| 4.4 | | | | | **Q441** | | | | | | | | | | |
| 5.1 | B511 B512 B513 | | | | | | | | | | | | | | |
| 5.2 | B521 B524 **Q522** | | B522 B524 B525 | | | | | | | | | | | | |
| 6.1 | | | | | | B611 B612 **Q611** | | | | | | | | | |
| 6.2 | | | | | | B621 B622 B623 **Q621** | | B623 | | | | | | | |
| 6.3 | | | | | | B631 B632 | | B631 B632 Q631-635 | | | | | | | |
| 6.4 | | | | B641-B643 Q641Q642 | | B643 | | B642 Q641 Q642 | | | | | | | |
| 6.5 | **Q651** **Q652** | | B653 | B653 **Q651** **Q652** **Q653** | | | | B653 | | | | | | | |
| 6.6 | | | | | B661 Q661 B662 Q662 | | | | | | | | | | |
| 7.1 | | | | | | | | | | | | | | | |
| 7.2 | | | | | B721 | | | | | | | | | | |
| 7.3 | | | | | | | | | B731 B732 B733 **Q731** **Q732 Q733 Q734** **Q735** | | | | | | |

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| | 7.4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 7.4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8.5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 9.0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| WFME standards | AQU standards | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 1.1 | 1.2 | 1.3 | 1.4 | 1.5 | 1.6 | 2.1 | 2.2 | 2.3 | 3.1 | 3.2 | 3.3 | 3.4 | 4.1 | 4.2 | 4.3 | 4.4 | 5.1 | 5.2 | 6.1 | 6.2 | 6.3 | 6.4 | 7.1 | 7.2 | 7.3 | 7.4 | 7.5 |
| B 111 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 112 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 113 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 114 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 115 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 116 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 117 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 118 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 111 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 112 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 121 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 122 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 121 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 122 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 131 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| B 137 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 138 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 131 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 132 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 133 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 141 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 141 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 211 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 212 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 213 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 211 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 221 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 222 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 223 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 221 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 231 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 232 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 231 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 232 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 241 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 242 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 243 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 244 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 241 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 242 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 243 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 251 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 252 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 253 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| WFME standards | AQU standards (cont.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 1.1 | 1.2 | 1.3 | 1.4 | 1.5 | 1.6 | 2.1 | 2.2 | 2.3 | 3.1 | 3.2 | 3.3 | 3.4 | 4.1 | 4.2 | 4.3 | 4.4 | 5.1 | 5.2 | 6.1 | 6.2 | 6.3 | 6.4 | 7.1 | 7.2 | 7.3 | 7.4 | 7.5 |
| B 254 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 255 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 251 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 252 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 253 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 254 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 261 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 261 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 262 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 263 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 264 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 271 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 272 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 271 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 272 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 281 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 281 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 282 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 311 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 312 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 313 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 314 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 315 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 316 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 311 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 312 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 313 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 321 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 322 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 323 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 324 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 321 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 322 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 411 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 412 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 413 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 411 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 412 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 413 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 421 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 421 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 431 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 432 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 433 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 434 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 431 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 432 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 441 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 442 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 443 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 444 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 445 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 441 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 511 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 512 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 513 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 511 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 512 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 521 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 522 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| WFME standards | AQU standards (cont.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 1.1 | 1.2 | 1.3 | 1.4 | 1.5 | 1.6 | 2.1 | 2.2 | 2.3 | 3.1 | 3.2 | 3.3 | 3.4 | 4.1 | 4.2 | 4.3 | 4.4 | 5.1 | 5.2 | 6.1 | 6.2 | 6.3 | 6.4 | 7.1 | 7.2 | 7.3 | 7.4 | 7.5 |
| B 523 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 524 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 525 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 521 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 522 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 611 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 612 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 611 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 621 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 622 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 623 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 621 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 631 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 632 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 631 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 632 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 633 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 634 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 635 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 641 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 642 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 643 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 641 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 642 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 651 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 652 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 653 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 651 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 652 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 653 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 661 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 662 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 661 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 662 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 711 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 712 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 713 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 714 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 715 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 711 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 712 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 713 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 714 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 721 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 721 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 731 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 732 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 733 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 731 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 732 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 733 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 734 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 735 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 741 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 741 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 742 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 743 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 811 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 811 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 812 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| Q 813 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 821 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 821 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 831 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 832 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 831 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 832 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 841 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 842 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 841 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 851 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 851 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 901 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 902 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B 903 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 901 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 902 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 903 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 904 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 905 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 906 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 907 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 908 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 909 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 9010 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 9011 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Q 9012 | | | | | | | | | | | | | | | | | | | | | | | | | | | |

# ANNEX III. RECORD OF CHANGES

| Date of approval | Changes included |
|---|---|
| CAIP 12.07.2021 | - Reference to article 17 of Law 5/2008, of 24 April, on the right of women to eradicate gender-based violence, amended by Law 17/2020, of 22 December, has been included.<br><br>- Reference to RD 620/2021, indicating that the teaching staff of private universities and private higher education centres affiliated with universities may not be civil servant staff of a university teaching body in active status and assigned to a public university, nor may they be full-time teaching and research staff in the same situation, has been included.<br><br>- Revision of 6.4 rubrics related to labour market.<br><br>- References to RD 420/2015 are eliminated and substituted with RD 620/2021.<br><br>- Se eliminan las referencias al Real Decreto 1393/2007 y se sustituyen por el Real Decreto 822/2021.<br><br>- References to Winddat are eliminated and substituted with EUC. |

Agència per a la Qualitat del Sistema Universitari de Catalunya

December de 2021 · AQU-67-2021

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