SQUARE
Self-evaluation and Peer Review Protocol
March 2016

This protocol describes the quality assurance mechanism developed within SQUARE, the 'System of Quality Assurance for the Recognition Networks' project.

This tool is primarily designed to benefit your ENIC-NARIC centre, to improve your centre's practice following the international criteria of the LRC and taking into account your centre's specific mandate. The SQUARE quality assurance mechanism should be regarded as a voluntary exercise.

This document explains how to complete the self-evaluation and the peer review.

The SQUARE instruments

The SQUARE quality assurance mechanism is based on two parts:
1- A self-evaluation tool for ENIC-NARICs to enable an ENIC-NARIC centre to objectively assess their recognition practice according to a set of Standards & Guidelines that are based on the Lisbon Recognition Convention (LRC), the EAR manual and the joint ENIC-NARIC Charter;
2- A peer review mechanism, involving external experts who will review your centre based on your self-evaluation.

You should consider the self-evaluation to be an internal information gathering, critical reflection and analysis on the policies, processes and procedures of your centre, and the peer review as an external assessment of your organization/unit carried out by external reviewers. You could compare the self-evaluation with an internal audit and the peer review as an external audit.

Background

The ENIC-NARIC networks base their work on several key documents that provide recommendations for good practice:

▪ The Convention on the Recognition of Qualifications concerning Higher Education in the European Region (also known as Lisbon Recognition Convention, Council of Europe and UNESCO 1997) and its subsidiary texts provide the legal grounds for recognition policy and practices.

▪ In 2004 the joint ENIC-NARIC charter outlined the terms of operation of the ENIC-NARIC networks including the tasks, activities, resources, level of expertise and staff requirements.

▪ The European Area for Recognition (EAR) manual, based on the Lisbon Recognition Convention, outlines good practice for international recognition and provides clear recommendations for fair recognition of qualifications. The manual was

published in January 2012 and in April 2012 its use was endorsed in the communiqué of the Bucharest Ministerial EHEA Conference.

SQUARE enables ENIC-NARICs to assess the extent to which they work according to this internationally agreed good practice, and to improve their practice where needed. As such SQUARE contributes to fair and smooth recognition and towards further cooperation in the recognition area.

Part 1 - Self-evaluation

The self-evaluation is developed to enable ENIC-NARICs centres to critically reflect to which extend they comply with the good practice agreed upon within the networks, and to improve where necessary and to enhance where possible.

The self-evaluation tool is intended to help analyse your current practice, identify strengths and weaknesses and suggest the action points needed to improve the quality of your centre.

Below you will find:
- A description of the self-evaluation tool;
- Instructions on how to undertake the self-evaluation.

The self-evaluation tool consists of:
- 6 standards and guidelines to evaluate your ENIC-NARIC centre;
- A template to perform a short SWOT analysis.

1. Description of the self-evaluation tool

The self-evaluation tool consists of two steps:

1. **Analysis of compliance with the standards and guidelines for good practice**
   The purpose is to gather data, reflect and establish the extent to which the existing practices and procedures of your centre comply with the standards and guidelines for good practice. These standards are based mainly on the EAR Manual, combined with some elements of the ENIC-NARIC Charter.
2. **A short *Strengths Weaknesses Opportunities and Threats (SWOT)* analysis**
   The aim of the SWOT analysis is to enable your centre to indicate its strengths, weaknesses and areas for improvement, and furthermore to formulate action points for the near future.

Depending on the situation, your centre might opt to only perform the first part of the self-evaluation, which would result in documentation and verification of your compliance with the standards and guidelines. The second part (the SWOT analysis) would result in a critical self-assessment of your centre's recognition practice, leading to an action plan to improve the performance of your centre. It is highly recommended to conduct both parts of the self-evaluation.

1.1 Frequency
Both steps can be completed regularly providing your centre with a robust and evidence-based internal quality assurance system. In general it is recommended to conduct the self – evaluation every 3 to 5 years. However, this timeframe can change depending on:

- Goals set in a previous SWOT analysis or action points resulting from a peer review. Depending on the time needed to complete those goals, one can decide on the appropriate time to conduct the next self-evaluation.
- A change in mandate of the centre. If your mandate is going to change, you might postpone the next self-evaluation until you have gained sufficient experience with the new processes and procedures.

2. How to complete the self-evaluation tool?

It is advisable to involve various members of your centre into the self-evaluation, preferably a combination of at least one employee who is active in the primary process of your centre (information provision and/or the evaluation process) and at least one manager and/or the head of office. The total number of staff involved in the self-evaluation should reflect the total number of staff and variety of tasks of your centre. It will take approximately one to three working days to complete the full self-evaluation. Please notice that you might need to spread the hours over several days.

2.1 - Step 1 – Compliance to standards

Part 1 of the self-evaluation consists of 6 standards (annex 2), including a text-box with guidelines on how to comply with each of the standards:

1. Procedures, Criteria and Quality Assurance
2. Applicant-centred Recognition
3. Quality, Legitimacy and Authenticity
4. Evaluation Tools and Resources
5. Transparency and Information Provision
6. (Inter)national Cooperation and Presentation

Relevance of the standards and level of compliance may be influenced by the role and remit of individual centres. Therefore, before doing the self-evaluation, the centres are invited to complete the typology form (see annex 1).

2.1.1 Describing compliance to standards

You will be asked an open question to elaborate on how your centre complies with each of the standards, taking into account the specific issues raised in the guidelines accompanying the standards. This has several functions, it:

- is the basis upon which you rate your overall compliance to the standard (see following paragraph);
- gives you the opportunity to describe your practice in relation to the standard, which forms valuable input for the second part of the self-evaluation (the SWOT analysis);
- is very useful to review this information the next time your centre is going to fill in the self-evaluation tool, to see whether your practice has improved or whether the circumstances under which your centre operates have changed (see also frequency section above).

For a few standards, it is explicitly requested to provide evidence for how the standard is met. If this is the case the text is highlighted in yellow. Please note:

- You are strongly encouraged to also include this type of evidence to support your description of compliance to other standards. Apart from including physical examples, this also can also be done by referring to practice(s).
- Especially when you aim to undertake a peer review of your centre, providing evidence is crucial as the peer review team may ask you to support your statements with this type of evidence.

These support documents are very useful for future reference and therefore you are advised to keep them on file (hard copy or electronic). Further note that one document (e.g. a copy of your standard evaluation form) may contain evidence for more than one standard.

2.1.2 Rating compliance to standards

After describing and analysing your compliance, you are expected to indicate to which extent your centre complies with the standard on a scale from one to four:

1. No compliance

   The centre fails to comply with the standard.

2. Partial compliance

   Some aspects or parts of the standard are met, while others are not. The interpretation of the standard is correct, but the manner of implementation is not effective enough.

3. Substantial compliance
   The centre is to a large extent in accordance with the standard, the spirit/principle of which is followed in practice.
4. Full compliance

   The centre acts entirely in accordance with the standard, and its implementation is effective.

2.2 Step 2 - SWOT analysis

Part 2 of the evaluation tool consists of the SWOT analysis, for which a template is provided (see annex 3).

A SWOT analysis is a structured method to evaluate the <u>S</u>trengths, <u>W</u>eaknesses, <u>O</u>pportunities, and <u>T</u>hreats of an organisation. It involves specifying the objectives of the organisation and identifying the internal and external factors that are favourable and unfavourable to achieving those objectives.

In a SWOT analysis you should investigate two things:

- is your compliance to a particular standard mainly influenced by internal or external causes?
- are these causes helpful or harmful to achieving your objectives?

By combining these two answers, you will find out if that particular standard represents a strength, weakness, opportunity or threat for your centre (see table below)

SWOT ANALYSIS

	Helpful to achieving the objective	Harmful to achieving the objective
Internal origin (attributes of the organization)	Strengths	Weaknesses
External origin (attributes of the environment)	Opportunities	Threats

It may be wise to prioritize the standards which you feel are most important for your centre before undertaking the SWOT, in order to make the SWOT analysis as relevant as possible and not too extensive.

Action points

As a result of this analysis you formulate action points in order to convert internal weaknesses of your centre into strengths, and external threats into opportunities. On the other hand, strengths and opportunities that already exist at present may lead to action points that enable your centre to capitalize on them.

The analysis itself should be no longer than two pages and the action points should be clearly formulated.

Example of a SWOT analysis

Your centre has scored quite low (*2 – partial compliance*) on standard 2 (procedures, criteria and quality assurance). Since this standard represents an essential aspect of the performance of your centre, you decide to give it a high priority and take it to the SWOT analysis.
You conclude that recognition criteria are not consistently applied by the staff of your office, because your centre is lacking in internal guidelines and written procedures to ensure consistency. This is an *internal cause* which is *not beneficial* to the performance of your centre, and thus constitutes a *weakness*.
To turn this *weakness* into a *strength* you define the following *action point*: based

on the recommendations of the EAR manual your centre will develop a practical internal guide with good practice on how to deal with cases that are typical for your own daily practice.

Another centre might conclude that their partial compliance to standard 2 is mainly due to the fact that national legislation makes it difficult to apply certain criteria in line with the Lisbon Recognition Convention. That would be an *external cause* which is *not beneficial* and therefore constitutes a *threat*. To turn this *threat* into an *opportunity* the centre defines the following action point: the head of centre will initiate a regular biannual meeting with relevant policy makers at the Ministry of Education in which recognition issues will be discussed with respect to the correct application of international legislation (the LRC) and with the aim to bring national recognition practice in line with the relevant action points of the most recent EHEA Ministerial Communiqué.

3. Publication of the self-evaluation

Publication of the self-evaluation is on discretion of the ENIC-NARIC centre.

Part two – Peer Review

This part outlines the purpose, process and outcomes of the peer review exercise.

1. Purpose of peer review

A peer review is defined as an evaluation of scientific, academic, or professional work by others working in the same field. A peer review can enhance and add value to an ENIC-NARIC's self-evaluation by introducing an external and international perspective. In addition, it can support and enhance the Centre's development and needs nationally and internationally. For example, if it is agreed that certain aspects of the Centre's performance need to be addressed at policy level, the suggestions for improvement made in the context of an external review can send a convincing message to the relevant policy makers.

It should be further emphasised that the aim of the peer review is <u>not</u> to verify or prove compliance with the standards, but to build further on the self-evaluation of the Centre and contribute to the Centre's compliance of its practices by holding fruitful discussions with peers in the spirit of mutual trust and support.

In summary, peer review serves the following purposes:
- Ensuring comprehensive understanding of all the steps and standards within the self-evaluation procedure;
- Validating and enriching the outcomes of the self-evaluation procedure through discussion with peers;
- Enhancing the national role, visibility and status of the Centre;
- Adding an international dimension to the quality assurance procedure;
- Providing feedback and recommendations regarding current practices.

2. The Peer Review Process

This protocol puts forward a framework for the coordination of a peer review procedure. It ensures that both parties (the ENIC-NARIC under review and the reviewers) have a shared understanding of the process and enables them to stay focussed and manage their time effectively.

2.1 Frequency

In general it is recommended to carry out a peer review of your Centre every 5 years. However, this timeframe can depend on a change in mandate of the centre your centre. If your mandate is going to change, you might postpone the next peer review until the changes have been fully implemented. On the other hand, if discussions

about changing the mandate are on-going, the peer review can give new impetus and ideas for discussions.

2.2 The Review Panel

The peer review panel consists of three persons. Two persons from one or (if feasible) two different ENIC/NARIC centres and one national recognition expert from the country under review. The review panel should meet the following requirements:

- The panel should include:
  - o One person in a management position at an ENIC-NARIC;
  - o An experienced credential evaluator from an ENIC-NARIC;
  - o A national expert with a good understanding of the national recognition structure as well as with an international outlook.
  - o At least one person (out of the three persons listed above) with experience in quality assurance processes.
- All panellists should have a good understanding of the Lisbon Recognition Convention and/or the EAR manual;
- If the country under review has specific points it wants to be reviewed following the SWOT analysis, it is preferred to include a panellist with expertise in these particular fields (in addition to the above mentioned criteria);
- The selected individuals for the review panel are expected to undertake their task with a critical and constructive view;
- There should be no conflict of interest between the members of the panel and the centre under review (e.g. the panel should not include persons working within the centre under review).

2.1.2 Constitution of the review panel

The two ENIC-NARIC experts are nominated by their respective Head of Centers following a request from the centre under review. Their resumes/CVs are forwarded to the centre under review who selects the experts based on the criteria mentioned above.

Next, the centre under review proposes an external national expert to the two selected ENIC-NARICs experts, who will check whether the person meets the abovementioned criteria. Upon a positive confirmation, the expert joins the peer review team as an equal member. If the proposed external national expert does not meet the requirements, the centre needs to present another expert.

Once the review panel is created, the panel chooses one person to be its chair. To avoid conflict of interest between the centre and the external national expert, the chair has to be a representative from the ENIC-NARIC. The chair:

- is the main point of contact of the centre under review;
- should take care that all members of the review panel are up to date about the communication between the panel and the centre under review;

- is responsible for coordinating the preparations of the peer review visit, as well as the preparation of the final report;
- should have experience with quality assurance processes.

2.3 The site visit

This section contains guidance on the key steps and timeframes for conducting a site visit.

2.3.1 Preparing the site visit

The centre under review submits the following documents to the review panel at least one month prior to the date of the site visit:

- a self-evaluation report (completed using the self-evaluation tool[1]),
- proposed site visit agenda,
- resumes/role descriptions of the staff members involved in the preparation of the self-evaluation report,
- resumes/role descriptions of individuals (internal and/or external) to be interviewed by the peers during the site visit.

The members of the review panel acknowledge receipt to the centre under review and familiarise themselves with the documents. The review panel holds a preparatory (pre-visit) meeting/teleconference:

- to share first impressions regarding the report;
- to check if there is any information missing
- to check if there is an additional need for background information on the education system and/or the legal framework;
- to discuss the programme of the visit and finalize the agenda;
- to agree on the main questions to be raised at each interview;
- to identify whether the staff included in the programme meets their expectations, and, if not, which staff needs to be additionally included in and/or omitted from the programme;
- to ensure mutual understanding of the objectives of the site visit.

If any additional information is required from the centre, or a change in programme is proposed, the review panel notifies the centre in due time before the site visit.

2.3.2 During the site visit

The site visit is conducted according to the established agenda. The site visit is supposed to be conducted during one working day and involves the following key stages:

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[1] Recommendations on completing the self-evaluation report can be found in the introduction and instructions to the self-evaluation tool.

Time (max)	Action	Who
20 min ('20)	**Welcome and short introduction** from the centre under review.	▪ Peer review team ▪ Centre under review
15 min ('35)	**Closed meeting**	Review panel only
45 min ('80)	**Meeting with management of centre** to clarify parts of the report related to the national and international context such as regulatory frameworks, policy matters and concerns which regular staff cannot change or influence.	▪ Review panel ▪ Management team of Centre (including Head of Centre)
15 min ('95)	**Closed meeting**	Review panel only
'45 min ('140)	**Meeting with the members of staff responsible for the self-evaluation** to clarify any questions and issues the peer review panel has in regards to (parts of) the self-evaluation.	▪ Review panel ▪ Staff responsible for self-evaluation
15 min ('155)	**Closed meeting**	Review panel only
45 min ('200)	**Meeting with other members of staff** (no overlap allowed with previous points)	▪ Review panel ▪ Selected staff by review panel
90 min *('290)*	**Lunch:** used to discuss morning outcomes (closed meeting)	Review panel only
60 min *('350)*	**Reflection on findings, formulation of feedback and preliminary recommendations for improvement**	Review panel (closed meeting)
30 min *('380)*	**Final meeting with management** for the review panel to check they understood everything correctly and to validate their findings and considerations.	▪ Review panel ▪ Management team of Centre (including Head of Centre)
15 min ('395)	**Closed meeting**	Review panel only
15 min ('410)	**Feedback meeting** to present main outcomes to the centre.	▪ Review panel ▪ Staff ENIC NARIC under review

2.3.3 After the site visit

Within two months after the visit, the peer reviewers finalise the conclusions and recommendations and forward these to the Centre in the form of a peer review report. The Centre can report factual mistakes to the review panel with two weeks. If feedback is received, the review panel finalises the report within six weeks.

3. After the Peer Review

After receiving the peer review report, the centre under review should carefully consider and prioritise the recommendations, formulating concrete follow up actions in order to address the most pertinent issues. The action points resulting from the peer review can supplement and/or reinforce the action points formulated previously during the self-evaluation phase and internal SWOT analysis.

The subsequent progress report should provide an account on actions taken and impact observed. The next self-evaluation and peer review procedures can help to assess whether the action points have been implemented properly and what improvements have been made and are desirable for the future.

Annex 1 - Typology

1. ABOUT THE CENTRE

- What is the name of your centre?

  [please provide a) name in original language, b) its official abbreviation and c) English translation]

- When was your Information centre established?

  [please provide a) month, b) year]

- Are you an ENIC or ENIC-NARIC?
  - □ ENIC
  - □ ENIC-NARIC

2. LEGAL POWERS AND STATUS

Legal powers

- The activities of your centre are:
  - □ regulated by national law *[please explain how and to which extent]*
  - □ defined in a mandate given to your centre *[please provide a general and short description]*
- Are there any contractual requirements to be met for the services your centre offers?
  [please provide details]
- How independent is your centre in setting its own recognition policies?
  [please provide details]

Legal status

- What is the legal status of your centre? Your centre is:
  - □ a public body
    - □ part of the ministry responsible for higher education:
      - □ a separate unit;
      - □ not a separate unit[2]
    - □ accountable / answerable to any other ministry or government department
    - □ independent institution
    - □ part of another larger public organization[3] *[please describe]*
  - □ a private body
    - □ not for profit

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[2] Functions assigned to staff alongside other functions.
[3] E.g. national rectors' conference, university, etc.

        □ independent institution

        □ part of another larger private not-for-profit organization[4] *[please describe]*

    □ profit-oriented

        □ independent institution

        □ part of another larger private for-profit organization *[please describe]*

3. REMIT AND SCOPE OF SERVICES

- What services are offered by your centre?
  - □ Evaluation of international qualifications.
    - ✓ Are your statements/evaluations:
      - □ legally binding:
        - □ Recognition for further study
        - □ Recognition for access to regulated professions
        - □ Recognition for access to non-regulated professions
        - □ Recognition for employment[5]
      - □ a recommendation/ advice:
        - □ Recognition for further study
        - □ Recognition for access to regulated professions
        - □ Recognition for access to non-regulated professions
        - □ Recognition for employment [6]
  - □ Information on international qualifications[7]
  - □ Statements on international qualifications[8]
    - ✓ Which applicants are requesting your statements/evaluations?
      - □ Individuals
      - □ Education institutions:
        - □ tertiary
        - □ post-secondary non-tertiary
        - □ Upper secondary
      - □ Employers
      - □ Ministries
      - □ Other: *[please specify]*
  - □ Online database for your applicants.
    [please describe what type of databases: a) what information, b) for which target group and c) if free of charge]
  - □ Provide training to third parties.

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[4] E.g. educational exchanges support office, international education foundation, etc.

[5] In case of formal requirements to the level of a qualification for access to non-regulated professions.

[6] Idem.

[7] E.g. information on generic level, including e.g. references to websites and databases.

[8] Objective information without evaluation, e.g. accreditation status, level, workload, purpose and/or learning outcomes, without evaluating/comparing them.

[please describe what kind of training, to which target groups?]
- □ Research,
- □ Projects
- □ Conferences and seminars
- □ Publications
- □ Other: *[please specify]*

4. STATISTICS

Number of enquiries

- How many enquiries, statements and/or evaluations does your centre process annually?[9]

  [please include number]
- Do you expect significant increases or decreases in the numbers, or changes in the type of enquiries/evaluations in the upcoming 3 years?[10] *[please describe]*

Human resources

- How many members of staff are employed by your centre?
  - ✓ Total numbers of persons and full time equivalent (FTE) of staff: *[please include a - numbers and b - fte]*
  - ✓ Total persons and fte working for your centre:
    - Leadership[11]: *[please include a) number and b) fte]*
    - Policy advisor(s): *[please include a) number and b) fte]*
    - Credential evaluator(s): *[please include a) number and b) fte]*
    - Administrative staff[12] *[please include a) number and b) fte]*
    - Other[13]: *[please specify and a) include number and b) fte]*
  - ✓ From the above categories, how many persons and fte are officially employed outside your centre[14]? *[please include a) number and b) fte]*

Finances

- How are the services of your centre financed?
  - □ Public funds
  - □ Private funds[15]
  - □ Both. Please specify:
    - □ % of funds from public funding:

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[9] Provide an indication, e.g. based on the average of last 5 years.

[10] E.g. level of education/qualification, country of origin of education/qualification, specific aspects of education/qualifications.

[11] Head of Organization, Deputy Head.

[12] E.g. Finance, law, Public Relations and Human Resources

[13] E.g. maintenance, IT support, etc

[14] E.g. elsewhere in organization, or contracted outside centre

[15] E.g. through fees to individuals and/or clients for services provided

□ structural: *[please specify %]*

□ non - structural[16]: *[please specify %]*

□ % private funding: *[please specify %]*

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[16] E.g. tenders

Annex 2 - Standards and Guidelines

Standard 1 – Procedures, Criteria and Quality Assurance

The ENIC/NARIC office aligns its recognition criteria and procedures with established good practice, reviews its procedures on a regular basis, and ensures that the criteria are consistently applied.

Guidelines

- Recognition criteria and procedures are in line with the Lisbon Recognition Convention and subsidiary texts[17] (especially the (revised) Recommendation on Criteria and Procedures for the Assessment of Foreign Qualifications), as well as with other good practice as collected in the European Area of Recognition manual[18];
- Recognition criteria and procedures are reviewed on a regular basis in order to adapt to developments in the educational field and in the field of recognition (e.g. the introduction of new tools such as the national qualifications frameworks). Sources of input for reviewing recognition practice are applicants, clients and stakeholders;
- The ENIC/NARIC office has tools (e.g. internal guidelines, written procedures and internal handbooks for its employees) to ensure the quality of its procedures. Mechanisms are in place to check whether the information and evaluations provided to applicants and clients is appropriate and to guarantee that recognition criteria are applied consistently from one case to the next and from one employee to the next.

Please provide your answer to standard 1 in this box, using the guideline followed by an indication of the overall compliance

COMPLIANCE STANDARD 1

1. □ No compliance
2. □ Partial compliance
3. □ Substantial compliance
4. □ Full compliance

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[17] See for full Convention and Subsidiary texts: enic-naric.net: http://www.enic-naric.net/the-lisbon-recognition-convention-97.aspx
[18] http://www.enic-naric.net/ear-manual-standards-and-guidelines-on-recognition.aspx

Standard 2 - Applicant-centred Recognition

> **Foreign qualifications are evaluated based on the purpose for which recognition is sought and recognized unless there is a substantial difference. Learning outcomes take precedence in the evaluation. An alternative form of recognition is granted if possible where full recognition cannot be granted. There should be a process in place that enables the applicants to appeal against the recognition decision. All persons in a refugee (like) situation holding a qualification without documentation are able to have their qualifications assessed.**

Guidelines

- The purpose of recognition (academic, occupational/professional) is taken into account and the qualification is assessed in a flexible manner, focusing on the requirements that are relevant for this specific recognition purpose. Ideally the evaluation or statement issued includes the purpose of recognition.
- Foreign qualifications are recognized unless there is a substantial difference, by:
  - focusing on the five key elements that together make up a qualification (level, workload, quality, profile and learning outcomes)
  - comparing the foreign qualification to the relevant national qualification required for the desired activity
  - determining whether the main requirements relevant for the desired activity are sufficiently covered by the outcomes of the foreign qualification.
- Qualifications are assessed against learning outcomes as much as possible. In the absence of clear statements of learning outcomes, the following may be consulted as an indicator of the output of a qualification: purpose, content, rights attached and orientation (e.g. research-based or professionally oriented).
- Where substantial differences are identified, provide a well-founded statement outlining the substantial differences between the foreign qualification and the home one and seek to offer alternative, partial or conditional recognition of the qualification.
- The applicant is informed about the possibility to appeal against the recognition decision. In the case of an appeal, the originally provided application together with new information - if provided by the applicant - is re-examined.
- With insufficient documentation, the assessment of a qualification of a person in a refugee (like) situation is based on a background paper. If deemed necessary, interviews are conducted with staff of higher education institutions and special examinations or sworn statements before a legally competent authority are arranged. Refugees are exempted from paying any assessment fees.

NB: Please provide an example of how your office reports the existence of substantial differences to an applicant or admissions officer.

Please include this information as an Annex to your self-evaluation document.

> *Please provide your answer to standard 2 in this box, using the guideline followed by an indication of the overall compliance*
>
> **COMPLIANCE STANDARD 2**
>
> 1. □ No compliance
> 2. □ Partial compliance
> 3. □ Substantial compliance
> 4. □ Full compliance

Standard 3 – Quality, Legitimacy and Authenticity

> **The quality and legitimacy of a qualification is assessed by verifying that it is quality assured and awarded in accordance with applicable provisions and requirements. Quality assurance and accreditation systems are considered as sufficient evidence of compliance with quality standards. The authenticity of submitted documents, in case of reasonable doubt, should be checked using internal and, if necessary, external verification methods.**

Guidelines

- The status of the awarding institution and programme is checked with the appropriate authorities to ensure that the programme is of sufficient quality and to link it to a national education system. The following information is taken into account:
    - which national authorities are responsible for accreditation/quality assurance;
    - whether the accreditation is at institutional or programme level;
    - what is the accreditation status of the institution and/or programme when the qualification was awarded.

    The information supplied by institutions and individuals is cross-checked with other official sources.
- Qualifications based on non-traditional learning (such as flexible learning paths, recognition of prior learning (RPL), open/distance learning) are treated in the same way as traditional qualifications. If qualifications are based on transnational learning, additional provisions and/or requirements may be taken into account, such as whether transnational providers have permission to operate by both receiving (host) and sending (home) countries and adhere to other principles outlined in the legislation of both countries and the *Code of*

Good Practice for the Provision of Transnational Education[19] and in the *Guidelines for Quality Provision in Cross-border Higher Education[20].*

▪ Since the procedures for quality assurance and accreditation of joint programmes are still being developed, a certain amount of flexibility is exercised in assessing the status of joint programmes. In the European context, a single accreditation of the entire joint programme is considered to be sufficient evidence for the quality [ref 6 = European Approach for Quality Assurance of Joint Programmes (October 2014)]. In other cases, it may be necessary to investigate the status of the institutions involved in the joint programme and status of the joint programme in all participating countries.

▪ In case a qualification or the awarding institution is non-recognised, it may still be useful to investigate its legitimacy by taking into account any information of a third party's quality assessment. If relevant information is found, a statement or an advice may be issued explaining the status of the institution/qualification in cases where it is confirmed legitimate (but not officially recognised by the national educational authorities).

▪ The authenticity of submitted documents is checked using internal and, if necessary, external verification methods. The internal information management could include a database of samples of both genuine and fraudulent documents, a glossary of common terms, information on the formats and contents of educational documentation and internal records of country-specific verification procedures. External information management might consist of checking with relevant authorities/awarding bodies and requesting and examining original documents if not provided initially.

NB: Please provide an example of how your office verified the quality and legitimacy of a qualification. Examples with qualifications, which required additional research and/or considerations, are preferred.

Please include this information as an Annex to your self-evaluation document.

Please provide your answer to standard 3 in this box, using the guideline followed by an indication of the overall compliance

COMPLIANCE STANDARD 3

1. □ No compliance
2. □ Partial compliance
3. □ Substantial compliance
4. □ Full compliance

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[19] See for full Convention and Subsidiary texts: enic-naric.net: http://www.enic-naric.net/the-lisbon-recognition-convention-97.aspx
[20] See for full Convention and Subsidiary texts: enic-naric.net: http://www.enic-naric.net/the-lisbon-recognition-convention-97.aspx

Standard 4 - Evaluation Tools and Resources

> **Relevant and up to date information on recognition and education systems is actively collected. National Qualification Frameworks where available are used as a transparency tool for understanding the level, learning outcomes and workload of foreign qualifications. Credits are accepted as an indication of the amount of study and the distribution of grades within a particular education system is taken into account when required or appropriate.**

Guidelines

- Up-to-date information is collected on relevant topics, such as education systems, qualifications awarded in different countries and their comparability to the qualifications in the home country, legislation on recognition, officially recognised and accredited institutions, admission requirements, recognition conventions, bilateral agreements, EU Directives, and other relevant bodies.
- A database on previous evaluations is maintained, in order to ensure consistency in future evaluations.
- National qualifications frameworks are used as a key source of information to establish the level, generic learning outcomes and workload of foreign qualifications. Where a national qualification framework has been referenced to a meta framework (e.g. EQF), this is also taken into account.
- Information is collected on the many different types of credit systems that are used by higher education institutions all over the world, which are sometimes limited to an individual institution or may be applied across different national education systems (e.g. ECTS). Credits are especially relevant in the recognition of periods of study.
    - o Foreign credits are accepted for what they represent in their own system.
    - o Credits obtained from various sources (and lacking the framework of a coherent programme) do not have to be added up and accepted as a "qualification".
- The grades obtained by a student may have an impact on the evaluation of a qualification, especially if the average grade of a qualification determines the right of access to further study in the education system where it was awarded. Since the distribution of grades may vary greatly between education systems, the statistical distribution of grades in both education systems should be taken into account when converting foreign grades.

NB: Please provide examples of how your office uses national qualification frameworks, evaluates grades and acknowledges credit.
Please include this information as an Annex to your self-evaluation document.

> *Please provide your answer to standard 4 in this box, using the guideline followed by an indication of the overall compliance*
>
> **COMPLIANCE STANDARD 4**
>
> 5. □ No compliance
> 6. □ Partial compliance
> 7. □ Substantial compliance
> 8. □ Full compliance

Standard 5 - Transparency and Information Provision

> **Information on the recognition procedure and criteria is clear, accurate, up-to-date and readily accessible for applicants, stakeholders and the general public, and clear information on the status of their application is provided to applicants.**

Guidelines

- Information provided is accessible, user-friendly (relevant and designed for non-expert users), available in a variety of forms (website, by phone and e-mail, hardcopy brochures), available in at least one international widely spoken language, regularly updated and free of charge.
- The information consists of:
    - a description of the national education system, recognition system, competent recognition authorities, assessment criteria, roles of the applicant, ENIC/NARIC and higher education institutions, and the rights and obligations of each of the parties;
    - a list of required documents and manner of their submission, time needed to process an application, conditions and procedures for appealing against a decision;
    - an inventory of typical recognition cases and/or a comparative overview of other education systems (or qualifications) in relation to the national ones.
- During the application procedure the applicants are kept informed on the status of their application by providing them with:
    - an acknowledgement of receipt of the application, and an indication of the deadline;
    - information on any lacking documentation (and how to obtain it);
    - information on delays or issues encountered while dealing with the application;
    - information on any updates to the status of the application.

NB: Please illustrate your answer by providing a print-out of the English description of the national recognition system on your website.

Please include this information as an Annex to your self-evaluation document.

Standard 6 - (Inter)national Cooperation and Presentation

The ENIC/NARIC office actively cooperates with national and international stakeholders on recognition issues and provides input in the development and dissemination of new recognition tools. It supports and promotes the activities of the ENIC and NARIC networks and mentions its membership of the networks in publications and branding activities.

Guidelines

- ENIC/NARIC offices are the national centres where all expertise on recognition is available. They make use of this expertise by contributing to higher education policy developments and legislation in the field of recognition at regional, national and European level. They also cooperate with other information centres, higher education institutions and their networks and other relevant actors in the national context;
- In the EU-context, and as far as NARICs have competence in professional recognition matters, they cooperate with the National Coordinator and the competent authorities for the professional recognition of the regulated professions (EU Directives);
- ENIC/NARIC offices co-operate within the ENIC and NARIC Networks on the dissemination and use of the overarching framework of qualifications for the European Higher Education Area and accordingly contribute at national level to the further development and dissemination of the national qualification frameworks;
- ENIC/NARIC offices participate in publications, surveys, comparative studies and other research activities undertaken by the European Commission, Council of Europe, UNESCO and other international organizations;
- ENIC/NARIC offices develop cooperation with relevant organisations in countries in other regions of the world working in the field of recognition and promote the activities of the ENIC and NARIC Networks in countries in other regions of the world.

- They refer to the membership of the ENIC and NARIC Networks in all publications and correspondence and on web sites and make appropriate use of its logo.

Please provide your answer to standard 5 in this box, using the guideline followed by an indication of the overall compliance

COMPLIANCE STANDARD 6

1. □ No compliance
2. □ Partial compliance
3. □ Substantial compliance
4. □ Full compliance

Annex 3 - SWOT

The format for the SWOT analysis *(please mind the footnotes)*:

- **Part 1: Compliance with the standards for good practice**
- **Part 2: SWOT analysis**

The format for the SWOT analysis *(please mind the footnotes)*:

- **Part 1: Compliance with the standards for good practice**
- **Part 2: SWOT analysis**

PART 1		PART 2						
S T A N D A R D	C O M P L I A N C E	**Priority[1]** (tick box)		Internal causes[2]		External causes[3]		Action points[3]
		High	Low	beneficial (Strengths)	not beneficial (Weaknesses)	beneficial (Opportunities)	not beneficial (Threats)	

	*						
1		☐	☐				
2		☐	☐				
3		☐	☐				
4		☐	☐				
5		☐	☐				
6		☐	☐				
7		☐	☐				
8		☐	☐				
9		☐	☐				
10		☐	☐				
11		☐	☐				
12		☐	☐				
13		☐	☐				
14		☐	☐				
15		☐	☐				
16		☐	☐				
17		☐	☐				
18		☐	☐				

* (1) no compliance, (2) partial compliance, (3) substantial compliance, (4) full compliance.

[1] For further analysis please take into consideration only the standards with high priority.

[2] Please base on your answers given in part 1: name the reasons for your compliance or noncompliance with the standards and decide which of them are beneficial, and which are not.

[3] Please indicate how to convert your weaknesses into strengths, and threats into opportunities.