



Institutional Accreditation / Certification / Evaluation Criteria for the ASIIN System Seal

Requirements for Good Teaching and Successful Learning

Version: 18.06.2021

Status: adopted

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Last update: 20.06.2016

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1 ASIIN system seal: review approach and questions

The following table shows the different **areas which are reviewed** during an application for the ASIIN system seal. It also contains **questions** according to which the institution may structure its self-evaluation.

Ideally, the institution should document its self-evaluation. That way, it can serve as the basis of a later assessment by the ASIIN auditors since in their assessment, the auditors also work through the questions.

The **framework requirements** are defined as follows:

- *Institutional* requirements include the organisational setting, structures and/or material and human resources (static requirements).
- *Procedural* requirements include all methods which convert mere inputs into the intended outcomes.
- *Cultural* requirements include the predominant values and methods which guide most actions.

The answers an institution provides to these questions serve to determine how and to which extent the requirements have been met. This helps to structure the results of an assessment.

Levels of maturity (to be assessed per framework dimension: institutional, procedural, cultural):

0 = non-existent

1 = defined

2 = implemented

3 = established and controlled

4 = predictive and proactive (best practice/ideal solution has been presented)

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
I. Definition of quality			
I.1 Objectives	a) institutional	Which quality objectives of the institution have an influence on the quality of teaching and learning? Which of these quality objectives have a high priority, which have a lower priority? Which of the quality objectives reflect existing strengths of the institution? Which of the quality objectives are oriented towards institutional development and are future-oriented? What are the biggest challenges to maintain the achievement of the quality objectives?	1.1 Policy for quality assurance
	b) procedural	Which of the objectives related to the quality of teaching and learning have last been <i>amended</i> ? What were the reasons for amendment? What are the processes to define, to implement, and to review these objectives on a regular basis?	1.1 Policy for quality assurance
	c) cultural	Which values and behavioural patterns have the biggest influence on the quality objectives of the institution? Which objectives are of particular importance for the internal stakeholders? Which groups within the institution particularly relate to which of the objectives? Which objectives are rejected by some stakeholders within the institution? Which possibilities exist to discuss among the internal stakeholders different opinions about the quality objectives of the institution?	1.1 Policy for quality assurance

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
I.2 (Quality-) management systems/ governance	a) institutional	<p>What works well with regard to the organisational settings (responsibilities), structures, physical and human resources of the quality-management of the institution? Who is involved, who is responsible, and who is informed? Which changes are planned for the near future with regard to the set-up, structure and resources for quality management – and why? How is the collaboration between the different organizational units (teaching, research, administration) assessed by the different departments, faculties, etc., and by the central management? Which facets of the collaboration are considered useful, which are considered obstructive?</p>	<p>1.7 Information Management 1.9 On-going monitoring and periodic review of programmes 1.10 Cyclical external quality assurance</p>
	b) procedural	<p>Which procedures (processes) for the implementation of the quality-related policy work well? Which processes for the implementation of quality policies need to be improved by the responsible actors? Are further changes in the processes planned? If yes, why?</p>	<p>1.7 Information Management 1.9 On-going monitoring and periodic review of programmes 1.10 Cyclical external quality assurance</p>
	c) cultural	<p>Which typical values and behavioural patterns of the internal stakeholders have a positive effect on the quality management for teaching and learning? Which stakeholder groups particularly support the quality management for teaching and learning? Which groups are less involved? What are the reasons for higher or lower levels of involvement? What are typical situations leading to changes in the structures and procedures of the quality management system? Who is involved in such changes?</p>	<p>1.7 Information Management 1.9 On-going monitoring and periodic review of programmes 1.10 Cyclical external quality assurance</p>

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
II. Educational Programmes / Courses / Trainings			
II.1 Creation and development of programmes / courses / trainings	a) institutional	Which aspects in terms of organisational settings (responsibilities), structures, physical and human resources have an impact on the effectiveness of creation or further developing programmes ¹ ? Who normally initiates the further development of programmes? What challenges exist with regard to the further development of the full portfolio of programmes? Which educational offers are considered fit for the future and why?	1.2 Design and approval of programmes 1.9 On-going monitoring and periodic review of programmes
	b) procedural	Are the processes to create and further develop educational offers considered effective and efficient? What works well and what should be improved? Where does the incorporation of external requirements (legal, social, professional) work well; where could it be improved? What are the reasons? Which processes exist in order to systematically collect stimuli for the further development of programmes?	1.2 Design and approval of programmes 1.9 On-going monitoring and periodic review of programmes
	c) cultural	What is expected from the stakeholder groups involved in the design and further development of educational offers? Who is expected to participate? Does the involvement take place as expected? What happens if conflicts between involved stakeholders occur? To which extent are the relevant stakeholders willing to participate and what is their level of information?	1.2 Design and approval of programmes

¹ Programmes include different forms of educational provision at higher education level, not always leading to a formal degree. Examples include short-term courses, trainings or modules.

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
II.2 Implementa- tion of pro- grammes / courses / train- ings	a) institutional	What are the strengths with regard to structures as well as to physical and human resources in the <i>implementation</i> of educational offers? What are the weaknesses with regard to the structures (e.g. organisational set-up, decision-making paths) and to the resources in the day-to-day work?	1.2 Design and approval of programmes 1.4 Student admission, progression, recognition and certification
	b) procedural	Which procedures in the implementation of programmes (i.e. the delivery of programmes, i.e. the teaching processes) work well? Which can be considered good practice? Which processes need the particular attention of those responsible? What are the reasons? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.2 Design and approval of programmes 1.4 Student admission, progression, recognition and certification 1.9 On-going monitoring and periodic review of programmes
	c) cultural	How does the collaboration between the different units work in the day to day implementation of teaching? Do typical areas of conflict exist and how are they dealt with? Do all stakeholder groups involved in the implementation of teaching provide the expected input? What are the reasons if expectations are not met?	1.2 Design and approval of programmes 1.4 Student admission, progression, recognition and certification
II.3 Cooperations	a) institutional	How is the cooperation with other institutions and between different internal units organized with regard to the implementation of programmes (structures and regulations)? What works well in the case of internal or external collaborations, what could be improved?	1.2 Design and approval of programmes

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
		How do such collaborations for programmes usually come into being within the institution?	
	b) procedural	Which factors are critical for the smooth organization and implementation of collaborations? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.2 Design and approval of programmes 1.9 On-going monitoring and periodic review of programmes
	c) cultural	What principles does the institution have in place for internal and external cooperation for educational offers? Are the existing rules and standards accepted by those affected by them? How are conflicts dealt with? What are the challenges with regard to collaborations?	1.2 Design and approval of programmes
II.4 Examination systems and organisation of exams	a) institutional	Which rules and structural provisions have an effect on the design of exams in the programmes? What works well, what should be improved?	1.3 Student-centred learning, teaching and assessment
	b) procedural	Which procedures for the exam methodology and exam organisation (including assessment criteria) work well? Which procedures do those responsible have to take particular care of? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.3 Student-centred learning, teaching and assessment 1.9 On-going monitoring and periodic review of programmes
	c) cultural	Which principles do those responsible have to take into account when designing and organizing exams? Are these principles accepted by all involved stakeholders?	1.3 Student-centred learning, teaching and assessment

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
		<p>What role does the institutional tradition have in the design of exams? Are new assessment methodologies taken into account?</p> <p>Which values and behavioural patterns have the highest influence on the exam system and organization? How do these influence the achievement of the objectives for exams?</p> <p>Do typical conflicts exist among those involved with regard to exam methodology and exam organization? How are such conflicts dealt with?</p>	
II.5 Recognition of achievements	a) institutional	Do the rules, structures and responsibilities for the recognition of achievements obtained from other institutions or in a non-academic setting work as expected?	1.4 Student admission, progression, recognition and certification
	b) procedural	<p>Do the procedures for the recognition of achievements obtained from other institutions or in a non-academic setting work as expected?</p> <p>Are there typical difficulties which regularly occur in the procedures?</p> <p>Which changes are planned for which reasons?</p>	1.4 Student admission, progression, recognition and certification
	c) cultural	<p>What are the guiding principles for the recognition of external achievements? Have the relevant members of the institution and interested students and teaching staff been informed of them and do they accept them?</p> <p>How are conflicts dealt with?</p>	1.4 Student admission, progression, recognition and certification
II.6 Assistance and support	a) institutional	<p>Which elements of the assistance and support services offered for students are successful? Which changes are required? What are typical challenges to be overcome?</p> <p>Are the physical and human resources adequate and sufficient to implement the expected assistance and support services? How is this verified?</p>	1.6 Learning resources and student support

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
	b) procedural	How do the processes to provide assistance and support work? Which processes are considered to work well, which need to be improved? Do the members of the institution who are involved in the assistance and support have sufficient information and resources? Are the target groups for assistance and support reached as intended? How is this verified? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.6 Learning resources and student support 1.9 On-going monitoring and periodic review of programmes
	c) cultural	Are the offers of assistance and support available used by the intended target groups? If not, why not? How satisfied are the individual target groups with the assistance and support on offer?	1.6 Learning resources and student support
III. Management of resources			
III.1 Material and human resources	a) institutional	Which elements particularly support the achievement of the quality objectives in this area as defined by the institution? What are typical difficulties and how are they dealt with?	1.5 Teaching staff
	b) procedural	Do the processes for the allocation and administration of physical and personnel resources, specifically for teaching and learning, within the institution work according to the expectations of the different groups and units? How does the institution integrate external (legal and economic) requirements? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.5 Teaching staff 1.9 On-going monitoring and periodic review of programmes

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
		Which changes are planned or will become necessary based on such stimuli?	
	c) cultural	How can the members of the institution, e.g. teaching staff and students, participate in managing physical and human resources for teaching and learning? Do all members of the institution feel adequately informed about the management of physical and financial resources? Which values and methods are supported or expected of the people involved in terms of the use of resources? What are the guiding principles at the institution to avoid misuse or waste of resources? Are the set rules and guidelines accepted by those affected by them? How are conflicts dealt with?	1.5 Teaching staff
III.2 Human resources development	a) institutional	Which challenges have to be mastered with regard to staff development? Do the existing concepts take these challenges adequately into account?	1.5 Teaching staff
	b) procedural	How does the implementation of the staff development concept work? What are typical difficulties? How are they dealt with? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.5 Teaching staff 1.9 On-going monitoring and periodic review of programmes
	c) cultural	Which of the concepts and offers for staff development – specifically those with a focus on subject-relevant and didactic development – are particularly well received by teaching staff? Which are not? Why?	1.5 Teaching staff

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
III.3 Interaction with research	a) institutional	Are there any challenges at the points of interaction between teaching and research? Do the existing concepts take these challenges adequately into account? What are the strengths of the existing concepts and arrangements?	1.5 Teaching staff
	b) procedural	How are the processes to link teaching and research designed? Who is involved, who is responsible, and who is informed? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.5 Teaching staff 1.9 On-going monitoring and periodic review of programmes
	c) cultural	Which values and modes of behaviour are expected from the members of the institution when it comes to combining teaching and research? How is the expected mode of behaviour supported? To which extent do the different members of the institution share and accept the expected values and behaviour?	1.5 Teaching staff
III.4 Interaction with administration	a) institutional	What are the guiding principles and rules for the role and function of the administration linked to teaching and learning? Which elements of support for teaching and learning by the administrative units of the institution work well? What areas can be improved? What are typical challenges for the administration in order to effectively support the quality objectives for teaching and learning? How are these challenges dealt with?	1.6 Learning resources and student support
	b) procedural	How are the administrative units involved into the design, (further) development and implementation of educational offers and their quality assurance work?	1.6 Learning resources and student support

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
		Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.9 On-going monitoring and periodic review of programmes
	c) cultural	Which values and methodologies are characteristic for the role of the administration in the processes of introducing, (further) developing and implementing educational offers as well as in their quality assurance? Which attitudes and behaviour are expected? How are they promoted? Are the set rules and guidelines accepted by those affected by them? How are conflicts dealt with?	1.6 Learning resources and student support
IV. Transparency and documentation			
IV.1 Rules and regulations for programmes / courses / trainings	a) institutional	Which rules and regulations for educational offers have been defined? Whom do they address? Which units of the organisational setting are responsible? What works well?	1.8 Public information
	b) procedural	How are the documents that define the rules for studying at the institution developed? How are they published and updated? How does the institution integrate external (e.g. legal) requirements into the processes? What are typical challenges with regard to the draft, update and dissemination of rules? How are they dealt with? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.8 Public information 1.9 On-going monitoring and periodic review of programmes

Areas to review		Questions for assessment per parameter	ESG 2015
		Range of parameters: 0, 1, 2, 3, 4	
	c) cultural	Do the members of the institution – specifically students and teaching staff – feel adequately informed about the rules and regulations for programmes that affect them? Are the rules accepted by the respective members of the institution affected by them? Are the rules transparent and understandable for all stakeholders?	1.8 Public information
IV.2 Documenta- tion	a) institutional	How does the system for the documentation, document management and filing of information work? What are typical difficulties and how are they dealt with?	1.8 Public information
	b) procedural	Do the processes with regard to the documentation and filing of information about teaching and learning / about programmes work as expected? What are typical challenges and how are they dealt with? How are the external requirements for transparency and documentation which are relevant to the institution (e.g. disclosure obligations and voluntary publication) embedded into internal processes? Where do stimuli for changes or for improvement come from? How can they be fed into the system and what are the processes to deal with such stimuli?	1.8 Public information 1.9 On-going monitoring and periodic review of programmes
	c) cultural	Do the members of the institution – specifically students and teaching staff – feel adequately informed about the educational offers and their general conditions? Which attitudes and behavior are expected from the members of the institution with regard to internal and external information policies, also in terms of achieved quality objectives and need for improvement?	1.8 Public information

Areas to review	Questions for assessment per parameter	ESG 2015	
		Range of parameters: 0, 1, 2, 3, 4 Are these expectations accepted by the different stakeholder groups within the institution?	

2 Principles of the procedure

2.1 Application and documents required

Step 1:

To **initiate a procedure** and receive an offer from ASIIN, the applying body must provide basic data about the institution and its quality management in electronic form (e.g. foundation date, legal status, type of organisation, public or private, size, education and/or training programmes offered, structure and internal organisation, existing certifications or authorisations for awarding degrees etc.). The data should be as compact as possible and provide an overview. Ideally, the application should contain documents which are already in use at the institution. The purpose of this application is solely to demonstrate the existence of a quality management system. It can consist of either the following:

- a) If available, provision of a certification of the quality management system by a third party.
- b) Alternatively, an external evaluation report of the quality management system can be submitted.
- c) In case the internal quality management system has not yet been externally assessed, the following documents should be submitted (if available):
 - aa) graphic representation of the quality management system (1 page)
 - bb) organisation chart of the institution (1 page)
 - cc) quality objectives of the institution as a whole (1 page) and overview of past, current and planned quality management projects (1 page)

The Accreditation Commission decides about the admission of an institution to the accreditation procedure, by electronic voting where applicable.

Step 2:

The assessment that follows is based on the documentation provided which covers two central aspects:

1. a **self-evaluation report** (SER) on the question of how and to what extent the criteria are met as well as the institution's own assessment about the level of maturity reached (maximum 50 pages);
2. **Evidence** for the evaluation of criteria.

The self-evaluation is an opportunity for the institution to critically analyse and explain its state of development, to what extent its self-defined objectives have been met and to what extent external requirements are complied with. An institution that can prove its ability to critically evaluate its own organisation has already mastered a central challenge of its application for a seal.

The self-evaluation report should not contain more than 50 pages (excluding annexes). Wherever the current status-quo is described, tables and graphics are preferable to text. In

particular the description of the quality management system on one page, the own assessment of the maturity level, the quality objectives and quality management projects, role of stakeholders, organization chart or process charts should be presented in the form of graphics.

With the exception of self-evaluations, the documentation for a procedure should not be created especially for the procedure. **ASIIN assumes that mainly documents which are also used for internal communication and quality assurance purposes will be presented.** Where necessary, any such document will have to be converted into a form comprehensible to third parties and the relation to the criteria for the system seal will have to be made clear for the purposes of the accreditation procedure.

In the interest of all parties involved (both at the institution and the agency), simple descriptions should be kept as short as possible. The self-evaluation should be precise and short. For all information included in the application, there should first be a critical analysis of whether it is relevant for the criteria.

If the accreditation or certification is to be renewed, it is crucial to include information on all changes made during the expired accreditation duration.

ASIIN can provide suggestions on how to structure the self-evaluation (available upon request from the ASIIN offices).

The application should be as compact as possible. All applications must be submitted in an electronic version and in paper form (one print-out per auditor and one for the ASIIN office).

2.2 Procedure steps

The accreditation procedure is divided into the following **stages**:

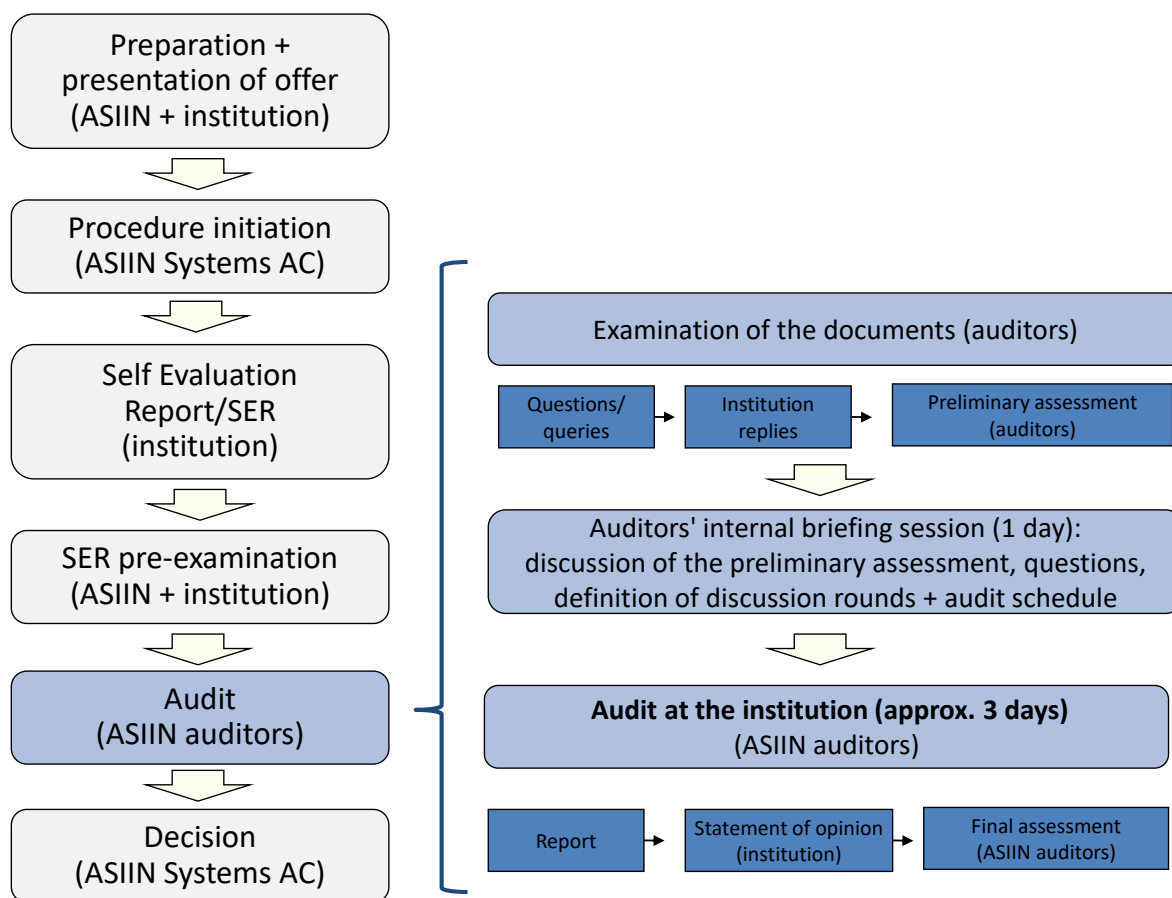


Fig. 2: Procedure steps of an application for the ASIIN system seal

This includes the following **steps**:

1) Preparation	Higher education institution	Contacts the agency ASIIN requires basic data (summary or overview) about the higher education institution (e.g. foundation date, legal status, type of organisation, public or private, size, education and/or training programmes offered, structure and internal organisation, existing certifications or authorisations for awarding degrees etc.) and its quality management.
	Higher education institution + ASIIN	Preparatory discussion to explain the seal(s) aspired to, the procedure and the criteria
	ASIIN	Makes an offer (for a combined procedure with several seals/certificates, where applicable)

2) Conclusion of contract	Higher education institution (+ ASIIN)	Conclusion of the contract upon acceptance of the offer by the higher education institution The higher education institution agrees to assume the costs as stipulated in the contract (proportional costs).
3) Initiation of the procedure	(ASIIN)	The ASIIN Systems Accreditation Commission decides about the initiation of the procedure. → Negative: Closure of the procedure and pro-rata calculation of the costs. → Positive: The procedure is launched and step 4 is initiated
4) SER preliminary examination	Higher education institution	Submission of a self-evaluation including supporting documents which prove that the requirements for an ASIIN system seal have been met (internal documents and data)
	ASIIN	The ASIIN procedure managers check the documentation for its informative value and whether it is complete.
	Higher education institution + ASIIN	Before the self-evaluation is submitted, a meeting with ASIIN to discuss the results of the preliminary check can be arranged. A meeting place will be suggested in the ASIIN offer.
	Higher education institution	Opportunity to add or revise data contained in the self-evaluation and supporting documents
	ASIIN	Appoints an audit team
	Higher education institution	Submission of the final version of the self-evaluation including supporting documents for the ASIIN auditors
5) Audit	ASIIN (auditors)	Examination of the documents; room for potential questions/queries
	Higher education institution	Provides answers to the auditors' questions/queries

	ASIIN	Internal briefing session of the auditors in order to consolidate: the preliminary assessment a set of questions for the on-site visit a schedule for the on-site visit the speaker of the audit team → Negative preliminary assessment: Closure of the procedure and pro-rata calculation of the costs. → Positive preliminary assessment: next step is initiated
	ASIIN + Higher education institution	Coordination of the on-site visit schedule by ASIIN and the higher education institution according to the procedural principles
	ASIIN + Higher education institution	On-site visit at the higher education institution including discussion rounds between the audit team and different groups based on the documents supplied
	ASIIN	Presentation of the audit team's report about the audit and notification whether/which additional documents are needed for the procedure to continue
	Higher education institution	Statement and comment of higher education institution regarding the audit report
	ASIIN	Integration of the results in the audit report and final assessment by the audit team Recommendations for the Accreditation Commission's decision
6) Decision	ASIIN	Decision on the accreditation by the ASIIN Accreditation Commission for Quality Management Systems Delivery of the decision to the higher education institution Submission of the accreditation report to the higher education institution Online publication of the results as set forth by the ESG (European Standards and Guidelines)

2.3 Possible outcomes of a procedure and deadlines

All seals are limited in time. If awarded for the first time, they are valid for six years. The following outcomes are possible within an accreditation procedure:

- a) An accreditation for the full six years.

- b) A conditional accreditation for the full six years (but compliance with the conditions must be proven within 9 months).
- c) The Accreditation Commission does not (yet) issue a final decision. The procedure is suspended: The agency can suspend the procedure once for typically 12 or a maximum of 24 months.
- d) The seal is not awarded. In that case, the procedure can only be repeated if a new or substantially altered concept is presented. The decision about whether that is the case is up to the Accreditation Commission for Quality Management Systems.

Conditional accreditations (b) or suspensions (c) usually require a second on-site visit in order to assess whether the conditions have been met and for the procedure to be resumed. The Accreditation Commission will in all such cases decide whether a second on-site visit is required and can only forgo it in isolated cases and with due reason.

2.4 Procedure: assessment of the fulfilment of the conditions

Conditional accreditations mean that the higher education institution is only entitled to keep the ASIIN system seal after one year if the conditions have been met.

The competent ASIIN Accreditation Commission will extend the accreditation to its full duration if it has found that the conditions have been met.

The procedure to assess whether the conditions have been met is as follows:

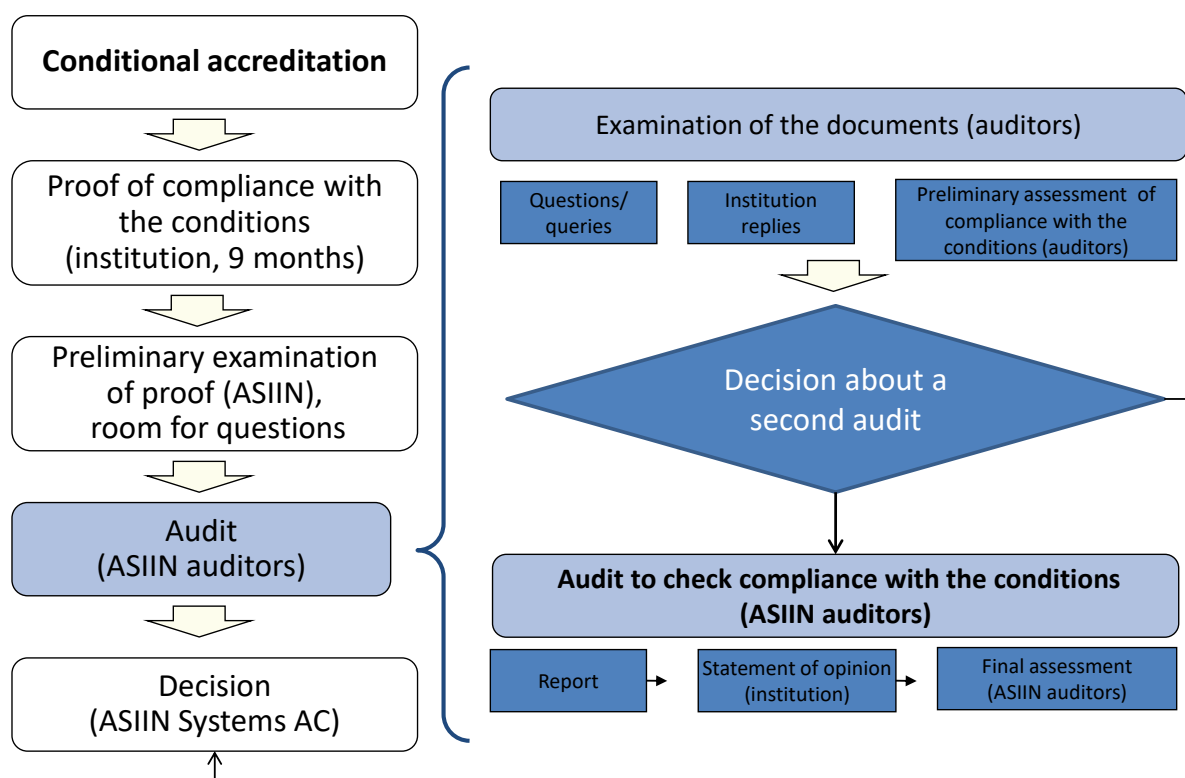


Fig. 3: Procedure: Assessment of fulfilment of conditions

2.5 Procedure: reopening after suspension

If the procedure is suspended, the higher education institution can apply for it to be resumed within the period of time stated in the decision.

Together with a suspension, the competent Accreditation Commission also decides which conditions have to be met for the procedure to be resumed. Upon applying for the procedure to be resumed, the higher education institution must provide evidence of how the conditions have been met.

If the procedure is resumed, a second on-site visit is usually required. The procedure is then closed following the normal steps as set forth in section 5.2.

The assessment whether the procedure can be resumed is structured as follows:

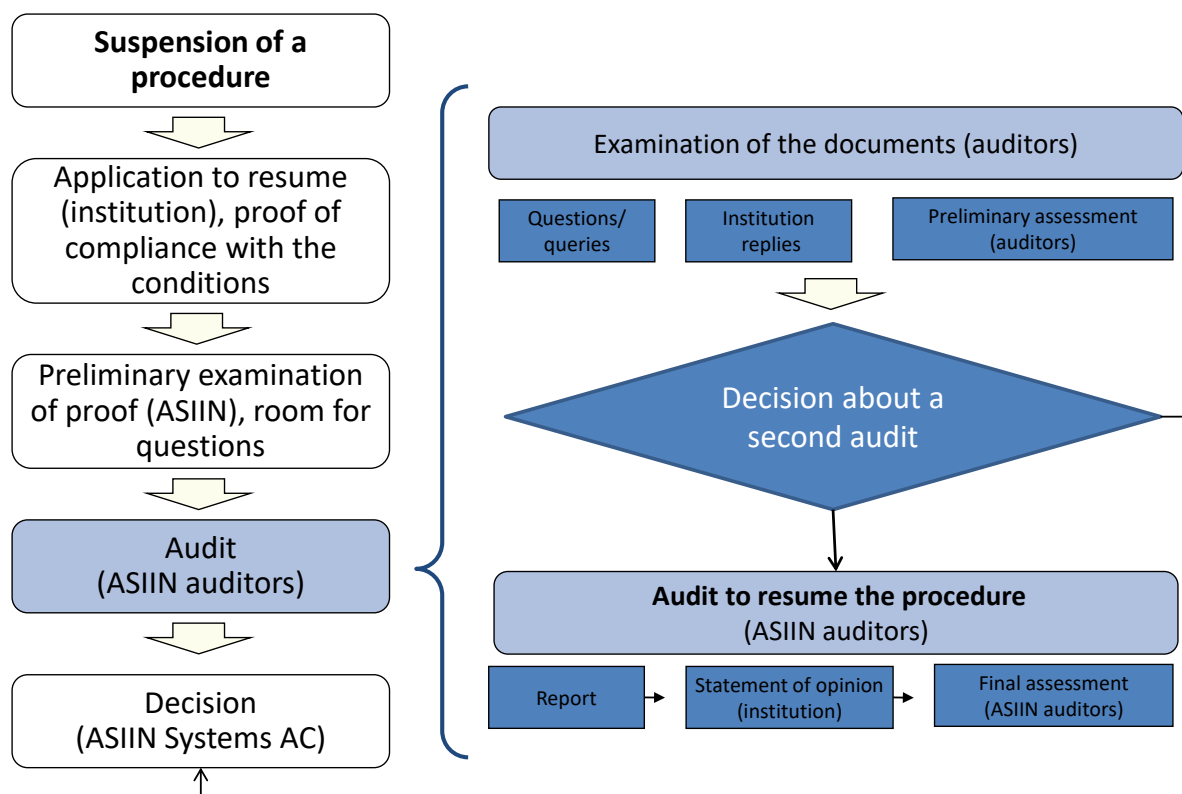


Fig. 4: Procedure: Assessment for reopening after suspension

2.6 On-site visit(s) at the higher education institution

On-site visits are characterised by the following elements:

- discussions with different internal and external stakeholders of the higher education institution (individual discussions or in groups)
- internal stakeholders: higher education institution management, administration, students, teaching staff, academic panels and members of staff in charge of quality management
- external stakeholders: the supervising ministry (where possible and required), labour market representatives, graduates/alumni, the "owners" of the higher education institution
- on-site revision of documents
- inspection of the facilities (rooms, equipment and infrastructure) available for teaching and learning
- audit team final internal discussion

2.7 Criteria for the choice of auditors

The ASIIN Accreditation Commission for Quality Management Systems chooses the auditors.

An ASIIN system seal audit team typically consists of five members:

- experts who are experienced in the management of a higher education institution as well as in its quality management
- a student with experience in accreditation and as a student representative (or a similar position)
- labour market representatives

Thanks to its composition, the audit team should be in a position to:

- gain an overview of and evaluate the different aspects of managing a higher education institution, quality management (especially with a view to teaching and learning) and the methods and structuring used in learning/study processes;
- identify the needs of the stakeholders concerned by specific education and/or training programmes and include this observation in the assessment;
- incorporate their experience with international and/or European standards in the assessment.

ASIIN criteria for auditors from academia:

- notable technical and/or professional expertise in quality management for teaching and learning;
- experience in accreditation, certification or evaluation, skills required for teaching at a higher education institution, international experience and experience in the decision-making processes at a higher education institution (preferable).

They should also make use of training offered for accreditation activities.

ASIIN criteria for auditors from the labour market:

- notable technical expertise and/or professional expertise in quality management;
- practical experience in managing staff and graduates/alumni in the labour market;
- experience in accreditation, certification or evaluation, skills required for teaching at a higher education institution, international experience and experience in the decision-making processes at a higher education institution (preferable).

They should also make use of training offered for accreditation activities.

ASIIN criteria for student auditors:

- where possible: experience in accreditation or evaluation and as a student representative (or a similar position);
- experience in studying (without having significantly exceeded the normal course duration).

They should also make use of training offered for accreditation activities.

Criteria for the exclusion of nominees: Auditors may not be

- involved in application procedures at the institution which is to be assessed;

- involved in any board or panel at the institution which is to be assessed;
- employed by the institution which is to be assessed and/or depend on it;
- representatives working at management level for a higher education institution from the same region.

Before the start of the procedure, every auditor signs a **declaration of confidentiality and impartiality**. The applying body will be informed of the composition of the audit team. If a member is suspected to be biased, the higher education institution may request an exchange stating its reasons. The competent Accreditation Commission will then attend to the request.

2.8 Role and function of procedure managers

The work of ASIIN panel members and the auditors during accreditation procedures is carried out on a voluntary basis. A full-time procedure coordinator at the ASIIN offices is in charge of the overall coordination of all procedures.

The ASIIN procedure managers organise and steer the accreditation procedure. They ensure that all procedure requirements are adhered to, time schedules are met and all mandatory process steps are taken. Based on their experience and background, they can provide information and advice to all other parties involved in the procedure. Procedure managers accompany the auditors during the on-site visit and take part in all panel meetings. They draft reports, propose resolutions and document the procedure. In addition to that, they are the applying institution's contact with ASIIN and accompany them through the procedure.

Procedure managers are therefore the central link between the higher education institution, the auditors and all other panels involved.

Any exchange of information between the institution, the auditors and the panel members is only relevant and can only be taken into account if it was submitted to the ASIIN office.

2.9 Appeals procedure

Higher education institutions directly affected by the decision of the ASIIN Accreditation Commission may file a appeal against any such decision. All appeals are looked into by a separate ASIIN appeals committee. All appeals are subject to deadlines. Information about requirements, procedures and deadlines can be obtained from the ASIIN offices and online at www.asiin.de.

2.10 Withdrawal of an application

Until the decision of the ASIIN Accreditation Commission for Quality Management Systems, the higher education institution is entitled to withdraw its application for the ASIIN system seal at any time. In that case, the costs of the procedure are split proportionately as stipulated in the ASIIN terms and conditions. If the higher education institution wishes to resume the procedure at a later point, the ASIIN Accreditation Commission for Quality Management Systems will decide whether the procedure can be resumed.

2.11 Changes during the accreditation period

Once the accreditation is granted, ASIIN strongly supports further developments for the purposes of quality and continued improvement.

If the structural, procedural and cultural framework for good teaching and successful learning in a higher education institution is changed significantly, an assessment will determine whether the changes allow for the ASIIN system seal to be kept.

Higher education institutions which plan to make changes that they consider significant should observe the following steps:

1. Higher education institution: sends a written notice to the ASIIN offices containing an overview of the change (planned/carried out) stating its reasons
2. ASIIN:
 - a. The Accreditation Commission examines the documents submitted.
 - b. The Accreditation Commission decides whether
 - i. the modification is significant and
 - ii. the accreditation can be upheld under the new conditions. If that is not the case, the Accreditation Commission will withdraw the accreditation or (where necessary) decide further steps to assess the situation before a final decision can be made.

ASIIN nonetheless remains entitled to withdraw the accreditation seal, based on its assessment of the circumstances, if it learns about a significant modification from a different source.

2.12 Accreditation renewal

If the institution applies for another ASIIN system seal up to one year before the accreditation expires, the accreditation can be renewed for a maximum of two years by decision of the competent Accreditation Commission. This helps to avoid "gaps" in accreditation.

If the accreditation is renewed, the duration of all preliminary extensions is deducted from the full accreditation duration.

3 Contractual basis

All cooperation between ASIIN and the higher education institution is based on a **contract**. The contract is closed once the higher education institution or the body applying for accreditation accepts the offer made by ASIIN.

The details of the conditions for a contractual relation are listed in the offer made by ASIIN and in the applicable general terms and conditions related to it.

It is a substantial feature of any contract between ASIIN and the higher education institution that the agreement is merely about carrying out the accreditation/certification procedure itself but not about its outcome.

4 Appendix

ASIIN system seal: assessment criteria

The following table contains detailed descriptions of the maturity levels that can be reached in each area and dimension reviewed. This table serves primarily to the assessment of the auditors. When doing their self-assessment, higher education institutions can use this table as a source of background information for describing their own **reality**. But it **should not be seen as blueprint** of one ideal system to be followed.

The ASIIN system seal confirms that:

"The higher education institution guarantees the institutional, procedural and cultural framework for good teaching and successful learning."

In order to do so, it complies with the requirements listed below to a sufficient extent. They are structured into institutional, procedural and cultural dimensions.

The audit team's assessment is based on the table below. The overall assessment and impression will determine to what extent the criteria for the allocation of the seal have been met. It is **not possible** to simply add the individual results in the single requirements. The individual requirements and dimensions are differently weighed by the Accreditation Commission. The latter is the final decision making body ensuring also a consistent decision practice.

Levels of maturity:

0 = non-existent 1 = has been defined (can be met with conditions) 2 = implemented (it could be relevant to suggest possibilities to optimise) 3 = established and controlled (the requirements have been fully met but the auditors' assessment report indicates potential for improvement) 4 = predictive and proactive (best practice/ideal solution has been presented)

In order to be classified in a higher maturity level category, the requirements of the categories below have to be fulfilled.

The maturity levels of the three requirement dimensions are classified as follows:

<i>Institutional</i> = organisational setting, structures and/or material and human resources (static requirements)

- 0: the required organisational setting, structures and resources are not available
- 1: the required organisational setting, structures and resources have been defined
- 2: the required organisational setting, structures and resources have been implemented
- 3: the required organisational setting, structures and resources have been established and are controlled
- 4: the required organisational setting, structures and resources are developed further in a predictive and proactive way

<i>Procedural</i> = all methods which convert inputs into the intended outcomes

- 0: there are no methods which lead to the intended outcomes
- 1: methods which lead to the intended outcomes have been defined
- 2: methods which lead to the intended outcomes have been implemented

- 3: methods which lead to the intended outcomes have been established and are controlled
- 4: methods which lead to the intended outcomes are developed further in a predictive and proactive way

Cultural = the predominant values and methods which guide most actions...

- 0: have no apparent positive effect on the results of the institutional and procedural provisions
- 1: have a positive effect on the results of the institutional and procedural provisions that becomes evident in some areas
- 2: have a continuously visible positive effect on the results of the institutional and procedural provisions
- 3: support the organisation as a whole in strategically directing the results of the institutional and procedural provisions
- 4: support the organisation as a whole in acting in a predictive and proactive way

Area to review: I. Definition of quality

1. Objectives

a) institutional

Expectations	
0 = not existent	(Quality-related) Objectives do not exist.
1 = defined	(Quality-related) Objectives have been defined
2 = implemented	(Quality-related) Objectives are visibly implemented.
3 = established & controlled	(Quality-related) Objectives for teaching and learning have been consistently embedded in a comprehensive system of objectives for the overall organisation which serves as a long-term basis for the future development of institution. The scope of good teaching and successful learning has been defined and communicated within the institution.
4 = predictive & proactive	(Quality-related) Objectives are updated in a regular basis, taking into consideration expected or potential internal and external future influences and developments. This is also true in the case of the objectives for the overall organisation.

Area to review: I. Definition of quality

1. Objectives

b) procedural

Expectations	
0 = not existent	The processes to define, implement and review objectives do not exist.
1 = defined	Responsibilities, participations and information channels have also been defined.
2 = implemented	The responsibilities, participation and information channels are used as envisaged.
3 = established & controlled	The general objectives of the institution and its teaching and learning units as well as the objectives for individual programmes / courses / trainings on offer are coordinated. The relevant internal and external stakeholders of the institution are included in the process of formulating and developing the objectives on a regular basis.
4 = predictive & proactive	When formulating and developing its objectives, the institution systematically takes into account expected or potential future developments in its social, economic, scientific and education-related environment.

Area to review: I. Definition of quality

1. Objectives

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions have no visible positive effect on the intended outcomes.
1 = defined	In some areas, a positive effect on the intended outcomes that becomes evident.
2 = implemented	The effect on the intended outcomes is continuously visibly positive. The (quality-related) objectives of the overall organisation include teaching and learning.
3 = established & controlled	The institution's orientation is based on the principle of focusing on the student and on the learning outcomes. The institution actively practises a culture of participation ("inclusion"). This includes considering the needs and interests of students and teaching staff in different circumstances or with different social, physical or psychological conditions. All groups are encouraged to participate on a regular basis.
4 = predictive & proactive	Elements obstructing the principle of focusing on the student, learning outcomes and participation are identified and eliminated in acting in a predictive and proactive way.

Area to review: I. Definition of quality

2. (Quality-)management systems/governance

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required for quality management do not exist.
1 = defined	Responsibilities and interaction of different work sections (tuition, research, and administration) are clearly structured.
2 = implemented	The institution has a solid and clear organisational structure. Structures and resources required for defining and implementing quality-related expectations as well as rules and standards have been defined on different levels and are implemented.
3 = established & controlled	The tools, methods and procedures destined for the internal definition of quality-related expectations (objectives) and quality reviews are well-coordinated. The institution's quality management is part of the functions of its panels and management. The tools, methods and procedures destined for internal quality reviews are consequently orientated (among other things) to fulfil the institution's aims of good teaching and successful learning. The institution knows whether its objectives are met on the different levels.
4 = predictive & proactive	Further development is not merely a reaction to deficits but an approach that looks ahead thanks to the analysis of expected or potential internal and external future developments. In terms of good teaching and successful learning, the institution is in a position to identify its state of development and adapt its objectives.

Area to review: I. Definition of quality

2. (Quality-)management systems/governance

b) procedural

Expectations	
0 = not existent	Methods which lead to the intended outcomes in the institution's quality policy do not exist.
1 = defined	Tools, methods, procedures and responsibilities destined for internal quality assurance have been defined.
2 = implemented	Methods which lead to the intended outcomes in the institution's quality policy have been implemented.
3 = established & controlled	All processes to implement the institution's quality-related objectives are guided by the cyclical logic of planning, implementation, analysis of success and deduction of measures. The general requirements for quality in teaching and learning are assessed on a regular basis using only efforts and resources which are reasonable on a sustained basis. Inefficiencies in quality management procedures are identified and eliminated.
4 = predictive & proactive	Further development is not merely a reaction to deficits but an approach that looks ahead thanks to the analysis of expected or potential internal and external future developments. In terms of good teaching and successful learning, the institution is in a position to identify its state of development and adapt its objectives.

Area to review: I. Definition of quality

2. (Quality-)management systems/governance

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions have no visible positive effect on the intended outcomes.
1 = defined	As a general rule, the members of the institution participate in quality assurance activities and the relevant stakeholders are involved in some areas.
2 = implemented	The institution is governed by a systemic understanding of quality management. All relevant stakeholders have been identified and are involved on a regular basis. The people or entities in charge of assessing quality are independent in their decisions.
3 = established & controlled	The institution actively supports the involvement of students and teaching staff. The institution is guided by the principle of openness, transparency and the protection of individuals involved, thus allowing them to participate and evaluate independently and without the risk of personal disadvantage. To increase synergies, the institution supports internal, vertical networks and the exchange of experiences.
4 = predictive & proactive	The institution analyzes, for example, which material and immaterial/cultural barriers obstruct the participation of students and teaching staff in quality management. The institution systematically supports the elimination of any such barrier. Its organisational approach has a deliberate effect on its quality management and is integrated in all further developments in an approach that looks ahead.

Area to review: II. Educational Programmes / Courses / Trainings

1. Creation and further development of programmes/courses/trainings

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required for the creation and further development of course offers do not exist.
1 = defined	Rules, responsibilities and the possibilities for members of the institution and relevant stakeholders (students and teaching staff) to participate have been defined
2 = implemented	There are stipulations as to how the institution decides on the creation and further development of course offers which the institution applies on a regular basis. At the same time, it guarantees up-to-date and precise objectives in the way of intended learning outcomes of all its programmes / courses / trainings on offer. The rules, responsibilities and the possibilities for members of the institution and relevant stakeholders (students and teaching staff) to participate have been defined and the rules in force are applied.
3 = established & controlled	The (further) development of course offers is guided by the institution's quality-related objectives and its idea of good teaching and successful learning. All adaptations to the definition of quality and its objectives are also applied when course offers are developed further.
4 = predictive & proactive	Expected or potential internal and external future developments are the basis for further development.

Area to review: II. Educational Programmes / Courses / Trainings

1. Creation and further development of programmes/courses/trainings

b) procedural

Expectations	
0 = not existent	The processes to create and/or further develop course offers – with the intended objectives – do not exist.
1 = defined	Procedure rules and responsibilities have been defined. The intended learning outcomes of each course on offer are at the root of its development.
2 = implemented	The procedure rules and responsibilities for the creation and/or further development of course offers have been communicated and are known to the target group(s). The intended learning outcomes of each course on offer are in line with the relevant internal and external requirements. Internal and external (legal, social and professional) factors and stakeholders are systematically integrated in the processes.
3 = established & controlled	Course offers are reviewed and developed further on a regular basis. All quality assurance results are integrated in the decision-making and management processes required to further develop course offers. There are regular assessments to check whether the programmes / courses / trainings offered by the institution are in line with the institution's quality-related expectations as to good teaching and successful learning. Quality assurance in programmes / courses / trainings on offer also provides the criteria to evaluate whether and to which extent the set objectives are viable and reasonable or have to be adapted.
4 = predictive & proactive	Expected or potential internal and external future requirements are the basis for further development in a predictive and proactive way (incl. procedures, processes and responsibilities).

Area to review: II. Educational Programmes / Courses / Trainings

1. Creation and further development of programmes/courses/trainings

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions have no visible positive effect on the intended outcomes.
1 = defined	There are some possibilities for members of the institution and relevant stakeholders to participate, whom in turn are informed about their tasks and opportunities from time to time. The management's expectations as to which groups should work together are well-known.
2 = implemented	There is a clear communication approach as to the possibilities and willingness to participate of the members of the institution and relevant stakeholders, whom are continuously informed about their tasks and opportunities. As a general rule, the collaboration between the individual groups works well and would be described as positive by the participants. Any conflicts are moderated and resolved by the persons in charge on a regular basis.
3 = established & controlled	Possibilities for members of the institution and relevant stakeholders to participate which are strategically designed and are used accordingly. The institution successfully combines the different interests of its members in the creation and further development of course offers and aligns them with the development strategy of the overall organisation. The participation of teaching staff and students in the creation and further development of course offers is supported. The institution supports the regular participation of all relevant administrative and academic units in implementing its procedures to assure and improve the quality of course offered.
4 = predictive & proactive	The institution promotes a culture of reflective discussion between everyone involved in teaching and learning/study processes. It encourages constructive criticism and critical thinking as the basis of predictive quality work. Among other things, the institution encourages its members to take part in teaching methodology research and the creation of teaching models.

Area to review: II. Educational Programmes / Courses / Trainings

2. Organisation (implementation of programmes/courses/trainings on offer)

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required for implementing programme / course / training offers are not available, at least not in a strategic way.
1 = defined	The rules and responsibilities (quality-related expectations) for the organisation of the courses are formulated to be binding. The guiding stipulations for the course organisation are in line with the institution's quality-orientated approach in teaching and learning.
2 = implemented	Persons and units involved (management, administration and academic) are aware of and fulfil their functions and responsibilities in implementing programmes / courses / trainings. The infrastructure used for teaching in general and the equipment of student workplaces in particular are sufficient in number and quality to achieve the intended learning outcomes of each course on offer.
3 = established & controlled	Strengths and weaknesses of the organisational setting, structures, material and human resources to implement programmes are promptly identified and eliminated.
4 = predictive & proactive	The competent units within the institution are in a position to anticipate, avert or eliminate problems and elements obstructing the organisation of programmes / courses / trainings without delay.

Area to review: II. Educational Programmes / Courses / Trainings

2. Organisation (implementation of programmes/courses/trainings on offer)

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results when implementing programmes / courses / trainings do not exist.
1 = defined	The processes required for the organisation of the programmes / courses / trainings (e.g. time tables, organisation of exams, student advice services, facility management) have been established and stand on a solid basis. The people and units involved and their responsibilities have been defined.
2 = implemented	The processes required for the organisation of the programmes / courses / trainings are efficient and are used by the units in question on their own authority. The people and units involved are aware of their responsibilities.
3 = established & controlled	The tools, methods and procedures employed also provide information from which the institution gains detailed insight into the quality (strengths and weaknesses) of the course organisation. There is a working participation of teaching staff and students in the creation and further development of course offers.
4 = predictive & proactive	Processes are developed further in a predictive and proactive way.

Area to review: II. Educational Programmes / Courses / Trainings

2. Organisation (implementation of programmes/courses/trainings on offer)

c) cultural

Expectations	
0 = not existent	The implementation of programmes / courses / trainings has a low priority.
1 = defined	When designing programmes, the practicalities of their implementation for all stakeholders are regularly taken into account.
2 = implemented	All members of the institution, stakeholders or units who are necessary for the smooth course implementation are involved in the process of (further) developing these programmes. There is a working cooperation between key units and panels which keeps the course organisation in line with the institution's quality-orientated approach. The institution supports the collaboration and mutual assistance of the different people and units involved.
3 = established & controlled	The institution administration sees itself as an internal service provider, among other things, for teaching and learning. The needs of both students and teaching staff are taken into consideration. This is reflected in their opinion of the course organisation. All parties involved can rely on the consistency of established structures and procedures. The institution or the units/persons in charge settle any conflicts or overlapping interests of different institution members/relevant stakeholders in a reasonable way that is generally acceptable for the institution.
4 = predictive & proactive	The organisation as a whole is supported in acting in a predictive and proactive way.

Area to review: II. Educational Programmes / Courses / Trainings

3. Cooperation

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required for cooperations do not exist.
1 = defined	A concept or set of rules and standards for the use of internal and external cooperations for course offers exists.
2 = implemented	Internal and external cooperations have been arranged and stand on a solid basis. Internal cooperations are guided by strictly defined rules and standards and do not depend on individuals.
3 = established & controlled	As a general rule when implementing programmes / courses / trainings, internal and external cooperations are used in line with the institution's definition of quality, its quality-related objectives and the respective intended learning outcomes.
4 = predictive & proactive	The institution systematically uses cooperation opportunities as part of its development strategy on all levels including teaching and learning

Area to review: II. Educational Programmes / Courses / Trainings

3. Cooperation

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in internal and external cooperations for course offers do not exist.
1 = defined	Internal and external cooperations are taken into consideration and included in the planning for the design of new course offers on a regular basis. The respective responsibilities have been defined. Standards for the effectiveness and rules for carrying out such cooperations have been defined.
2 = implemented	Cooperations are carried out to implement programme / course / training offers and develop them further. The respective responsibilities are met and the rules and standards for internal and external cooperations are applied by all parties involved.
3 = established & controlled	The cooperations are assessed and, where necessary, adapted to suit the programme / course / training course offers and develop them further.
4 = predictive & proactive	The institution or the units/persons in charge anticipate problems and elements which may obstruct the desired effect that internal and external cooperations have on the implementation of the programmes / courses / trainings on offer. They are in a position to avert or eliminate such problems and elements without delay.

Area to review: II. Educational Programmes / Courses / Trainings

3. Cooperation

c) cultural

Expectations	
0 = not existent	The aims and principles of internal and external cooperation are not known to the involved stakeholders.
1 = defined	The involved stakeholders are knowledgeable about the aims and the significance of internal and external cooperation for the offer of programmes.
2 = implemented	When (further) developing programmes, the internal and external cooperations are efficiently made use of.
3 = established & controlled	The institution is guided by the principle of openness which favours the communication and cooperation between students and teaching staff within the institution and with external partners. It ensures that all its members are aware of the standards for cooperations which the institution has defined for itself.
4 = predictive & proactive	The institution supports vertical internal networks between its members with a view to its quality-related objectives. It also favours networks between its members and external partners which support its quality-related objectives for teaching and learning. International best practice standards when dealing with academic freedom, diversity of methods and opinions, transparency and ethics in science are at the basis of its cooperation strategy. In that respect, it supports individual accountability within the institution and assumes its responsibility towards society.

Area to review: II. Educational Programmes / Courses / Trainings

4. Examination systems and organisation of exams

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required for the methodology and form and organisation of exams do not exist.
1 = defined	Rules, responsibilities and the possibilities for members of the institution and relevant stakeholders (students and teaching staff) to participate as well as student assessment criteria are defined. The rules and standards for organising exams include the promotion of academic feasibility, the reliability and the transparency of rules and processes and the ruling out of all manipulation.
2 = implemented	The units/persons in charge at the institution are aware of their responsibilities as well as of the applicable rules and standards and fulfil them. The criteria for student assessment have been communicated. The organisation of exams is generally coordinated and takes into consideration all aspects of academic feasibility.
3 = established & controlled	As a general rule, the methods and forms of assessment used serve to determine whether and to what extent the intended learning outcomes are achieved. The organisation of exams allows for the student progress in individual programmes / courses / trainings on offer to be effectively monitored. It also allows for individual types of student progression and takes into consideration different student needs, dispositions and circumstances.
4 = predictive & proactive	The methodology and form of exams in particular are an integral part of the institution's quality strategy. It is clear who is responsible for developing it further with a view to expected or potential internal and external future requirements (legal, social and professional). The respective responsibilities are met.

Area to review: II. Educational Programmes / Courses / Trainings

4. Examination systems and organisation of exams

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in the methodology and form and organisation of exams do not exist.
1 = defined	Processes to define periods of time, the locations and dates of exams, their evaluation and the required communication channels have been defined. An alignment of the module objectives and/or programme objectives with the intended exam methods takes place.
2 = implemented	The definition and communication of the methods and forms of assessment as well as performance-related expectations are guided by previously established processes. This way, all parties involved and especially the students are informed on time. All assessments are coordinated in a way to grant the students enough preparation time. The results are available without great delay and do not stand in the way of student progression.
3 = established & controlled	Tools, methods and procedures are used to provide detailed information on the quality (strengths and weaknesses) of a) the methods and forms of assessment used and b) the organisation of exams. Based on this information, the institution plans how to continue developing its quality-related objectives.
4 = predictive & proactive	Expected or potential problems and elements which may obstruct the effect and efficiency of the processes are anticipated and eliminated without delay.

Area to review: II. Educational Programmes / Courses / Trainings

4. Examination systems and organisation of exams

c) cultural

Expectations	
0 = not existent	The (quality-related) objectives of the institution for teaching and learning are not taken into account in the methodology and form and organisation of exams.
1 = defined	The (quality-related) objectives of the institution for teaching and learning inform the methodology and form and/or organisation of exams are a subject of discussion.
2 = implemented	The students are assessed on the basis of published criteria, rules and procedures that are applied in a consistent way. The members of the institution agree with the principles of holding transparent, comprehensible and methodically orientated exams. Cheating and giving or accepting any kind of personal advantage on either side is prevented. At least on the level of individual course offers, the units, persons or panels in charge align the planning, implementation and post-processing of exams.
3 = established & controlled	The institution promotes a focus on the student and on the learning outcomes when structuring the exams and student assessment criteria. It also supports teaching staff skills in using different examination forms and methods as well as innovative assessment approaches and the internal exchange of experiences. The units/persons in charge support the cooperation and the internal alignment of the structuring of exams and the organisation of exams on a horizontal level, i.e. within the relevant academic units and between the academic units and the administration. The participation of teaching staff and students is supported with a view to continuously optimising the structuring of exams and the organisation of exams in all programmes / courses / trainings on offer.
4 = predictive & proactive	Among other things, the institution encourages its members to take part in examination methodology research and the creation of exam models.

Area to review: II. Educational Programmes / Courses / Trainings

5. Recognition of achievements

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required for the recognition of external achievements do not exist.
1 = defined	Rules, structures and responsibilities for the recognition of achievements obtained from other institutions or in a non-academic setting have been defined.
2 = implemented	The rules, structures and responsibilities for the recognition of achievements obtained from other institutions or in a non-academic setting are effectively used.
3 = established & controlled	Rules, structures and responsibilities for the recognition of achievements obtained from other institutions or in a non-academic setting are integral parts of the institution's quality strategy or quality management. Divergences are consistently identified and steps to eliminate them are taken. The recognition focuses on learning outcomes and allows for differences in content provided that the outcomes achieved are equivalent.
4 = predictive & proactive	Rules, structures and responsibilities for the recognition of achievements obtained from other institutions or in a non-academic setting are integral parts of the institution's quality strategy or quality management. Divergences are consistently identified and steps to eliminate them are taken. The recognition focuses on learning outcomes and allows for differences in content provided that the outcomes achieved are equivalent.

Area to review: II. Educational Programmes / Courses / Trainings

5. Recognition of achievements

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in recognising external achievements do not exist
1 = defined	Procedures for the recognition of achievements obtained from other institutions or in a non-academic setting. The responsibilities and information channels have also been defined.
2 = implemented	Procedures for the recognition of achievements obtained from other institutions or in a non-academic setting are effectively complied with. The units/persons in charge at the institution fulfil their responsibilities and apply the rules and standards. The procedures for the recognition of external student achievements have been communicated and are applied in a consistent way all throughout the institution.
3 = established & controlled	The procedures are efficient and produce results without great delay, allowing the students to organise their further studies without losing time.
4 = predictive & proactive	The institution has established processes to systematically identify future challenges and gradually adapt in connection with its networking and internationalisation strategy.

Area to review: II. Educational Programmes / Courses / Trainings

5. Recognition of achievements

c) cultural

Expectations	
0 = not existent	The (quality-related) objectives of the institution with regard to the recognition of external achievements are not met.
1 = defined	The (quality-related) objectives of the institution with regard to the recognition of external achievements are met in certain cases.
2 = implemented	The principles which guide the institution's rules and procedures for recognising external achievements have been communicated and are known to the students and teaching staff.
3 = established & controlled	The institution ensures that decisions regarding the recognition of achievements are made without any conflict of interests whatsoever. It promotes the recognition of achievements with a focus on the learning outcomes.
4 = predictive & proactive	Among its members the institution promotes an open attitude towards student mobility, e.g. by looking for solutions to make the recognition of external achievements easier (e.g. by means of co-operations).

Area to review: II. Educational Programmes / Courses / Trainings

6. Assistance and advice

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources required to provide assistance and advice to students do not exist.
1 = defined	The responsibilities and key topics/areas of assistance and advice services for students have been defined. Standards for the quality of assistance, advice and information services are available all throughout the institution.
2 = implemented	The responsibilities and key topics/areas of assistance and advice services for students have been communicated. The students have access to assistance and advice in administrative and course-related questions and make use of the offer.
3 = established & controlled	A consultation concept made to fit the needs of different student groups has been implemented all throughout the institution. The measures and tools required for evaluating and, where necessary, guaranteeing the effectiveness of differentiated consultation concepts for different student groups and potential students are available.
4 = predictive & proactive	Expected or potential future developments within the institution but predominantly with respect to the students and their needs are taken into consideration.

Area to review: II. Educational Programmes / Courses / Trainings

6. Assistance and advice

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in providing assistance and advice to students do not exist.
1 = defined	The responsibilities for structuring the content of assistance and advice and implementing the concept are defined. The procedures, decision-making processes and information channels required to communicate and implement the concept have also been defined.
2 = implemented	The responsibilities for structuring the content of assistance and advice and implementing the concept are met. The procedures, decision-making processes and information channels required to communicate and implement the concept are complied with.
3 = established & controlled	The procedures, decision-making processes and information channels required to communicate and implement the concept of assistance and advice are efficient and have the desired effects. Among other things, they include the needs of different student groups. Information and data obtained from quality assurance (e.g. the target group's satisfaction with the offer, effectiveness) are used to improve the existing assistance and advice services. The required decision-making processes and information channels are already in use.
4 = predictive & proactive	The processes in use also provide those responsible with the information required to identify any expected or potential future developments within the institution but predominantly with respect to future students and their needs.

Area to review: II. Educational Programmes / Courses / Trainings

6. Assistance and advice

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions in providing assistance and advice to students have no visible positive effect on the intended outcomes.
1 = defined	Students are offered information. Those in charge of providing assistance and advice are informed about their responsibilities.
2 = implemented	The institution or the units/persons in charge ensure that all information, assistance and advice services are well-known and easily accessible and that they do not depend solely on individual motivation.
3 = established & controlled	Among other things, the institution supports the advisory skills of the units/persons in charge according to its concept of assistance and advice. It also promotes an approach of providing assistance and advice which focuses on the student and takes into consideration the different needs and interests of different student groups.
4 = predictive & proactive	The predominant values and methods which guide most actions support the organisation as a whole in acting in a predictive and proactive way.

Area to review: III. Management of resources

1. Material and human resources

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources do not exist
1 = defined	The principles, rules, responsibilities and structures required to manage both material and human resources have been defined.
2 = implemented	The principles, rules, responsibilities and structures required to manage both material and human resources (and distribute them within the institution) have been set up effectively. Compliance-related rules and standards are also available.
3 = established & controlled	The institution has a good overview and control of its staff resources destined for teaching and learning as well as of their availability in the short and long run. It has significant influence on how the teaching staff fit to the programmes / courses / trainings offered (both in terms of the subject taught and teaching skills). It has sufficient funds and human resources in all sectors to implement its objectives for teaching and learning at least in the medium term (approx. 8 years). The distribution and safeguarding of both material and human resources is in line with the development aims of the institution. The composition and training of the staff teams, especially among teaching staff, guarantee that the learning outcomes can be reached.
4 = predictive & proactive	As a precondition for further development, the institution must be able to decide independently in matters of choosing/employing, organising and administrating its resources. The institution has a strategy to safeguard its material basis in the long run. Possible risks are known, analysed and documented.

Area to review: III. Management of resources

1. Material and human resources

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in managing material and human resources do not exist.
1 = defined	The responsibilities, possibilities to participate and information channels have been defined. Rules and standards for employing academic staff members have also been defined. The procedures and decision-making processes for allocating and administering funds, managing the buildings and rooms and providing teaching material (e.g. literature, information technology, and laboratories) have been documented.
2 = implemented	The system used to allocate and administer funds, manage the buildings and rooms and provide teaching material works well. The relevant rooms are easily accessible and can be used by the students. There is solid access to relevant literature, materials and data. The institution uses efficient systems to manage funds and material resources which favour long-term documentation as well as reliable resource planning and management. There is a standardised procedure for recruiting academic staff members (especially teaching staff). The procedure is appropriate for choosing the best applicant both in terms of the subjects taught and teaching skills.
3 = established & controlled	The institution reacts to shortfalls in both material and human resources at short notice. Concerning the availability of teaching staff required to implement programme / course / training offers, the institution also reacts to quality-related divergences. Standardised procedures to fill vacancies and reallocate academic employment positions are in use. The procedures to employ part-time or visiting teaching staff are guided by the intended learning outcomes of each course which the candidates are to teach. The funds and equipment are allocated in a way which supports the best possible achievement of the intended learning outcomes in each course on offer. The regular adaptation to internal and external legal and economic requirements is a fixed element in the institution's resource management procedures.
4 = predictive & proactive	Expected or potential internal and external future developments are taken into consideration in human resources planning.

Area to review: III. Management of resources

1. Material and human resources

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions in managing material and human resources have no visible positive effect on the intended outcomes.
1 = defined	There are some possibilities to participate, basic rules for the use of material resources and resource-related information for relevant stakeholders.
2 = implemented	The resource-related information for relevant stakeholders, possibilities to participate and basic rules for the use of material resources have been set up effectively. The institution has rules and guidelines on how to use the resources available, increase their efficiency and avoid misuse or waste.
3 = established & controlled	The institution management, its administration and the academic units cooperate well to eliminate any shortfalls without delay. The institution successfully and without any contradiction applies the principles of academic freedom and how the teaching staff fit to the programmes / courses / trainings offered. The units/persons in charge are able to successfully moderate any conflicts regarding funds and material resources by compensating diverging interests. The institution supports a careful and cooperative approach in using the resources available on all levels. It actively demands adherence to compliance-related rules and standards. The members of the institution agree with the principles of how to use the resources available.
4 = predictive & proactive	The organisation as a whole is supported in acting in a predictive and proactive way.

Area to review: III. Management of resources

2. Human resources development

a) institutional

Expectations	
0 = not existent	The organisational setting, structures, material and human resources for staff development do not exist.
1 = defined	The rules and responsibilities have been defined. This includes programmes for teaching staff to continue developing both in subject-related terms and with regard to teaching skills.
2 = implemented	The relevant concepts are effectively put into practise. The target group (e.g. teaching staff) has been informed about their opportunities and the offers available. The units/persons in charge fulfil their responsibilities on a regular basis.
3 = established & controlled	The offer and development opportunities for teaching staff include developing skills which focus on the student and on the learning outcomes. This requires staff development concepts for all staff groups which are in line with the development aims of the institution.
4 = predictive & proactive	Concepts for staff development are adapted in light expected or potential internal and external future developments in an approach that looks ahead.

Area to review: III. Management of resources

2. Human resources development

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in staff development do not exist.
1 = defined	The responsibilities have been assigned. The possibilities to participate and information channels have been planned. The procedures, decision-making processes and information channels required to implement opportunities for teaching staff have also been defined.
2 = implemented	Those in charge fulfil their responsibilities. There are possibilities to participate and information is available. All teaching staff have access to the information and resources required (e.g. leave of absence, travel funds) to take part in training/further education opportunities.
3 = established & controlled	The tools, methods and procedures employed provide information from which the institution gains detailed insight into the strengths and weaknesses of its staff development approach. This puts the institution in a position to solve problems and plan future activities. Information and data obtained from quality management are used for the development of opportunities according to the institution's needs.
4 = predictive & proactive	Expected or potential internal and external future needs are systematically taken into consideration in the institution's staff development approach.

Area to review: III. Management of resources

2. Human resources development

c) cultural

Expectations	
0 = not existent	Existing opportunities are not made use of. No analysis of the reasons is made.
1 = defined	Existing opportunities are used occasionally. There is some information about the opportunities for personal and subject-related development available to members of staff.
2 = implemented	The target group uses the available opportunities for personal and subject-related development on a regular basis and is informed at regular intervals. The information is readily available.
3 = established & controlled	The institution provides an environment in which its members can critically analyse their own achievements and qualifications and develop further without risking any disadvantages. The institution management takes and communicates a favourable view of the use of development opportunities.
4 = predictive & proactive	As a precondition, the institution considers the continued development and support of its teaching staff's subject-related and teaching skills a key element of its sustainability and compatibility with the developments of the national and international area. This position is reflected in its staff development programmes and the respective policy on providing information.

Area to review: III. Management of resources

3. Interface with research

a) institutional

Expectations	
0 = not existent	The organisational setting, structures and resources required to combine teaching and research do not exist.
1 = defined	A concept to combine teaching and research including the responsibilities of implementing and developing it further. The allocation of the resources has been determined and the possibilities to participate as well as the information channels have been planned.
2 = implemented	A concept to combine teaching and research is implemented. Those in charge fulfil their responsibilities. Research activities lead to stimuli for the planning and further development of course offers or teaching units.
3 = established & controlled	The institution is consistent in aligning its quality-related objectives for teaching and research with those defined for its programmes / courses / trainings. The development strategy and the effect it has on both areas are consistent.
4 = predictive & proactive	Future opportunities and threats for the combination of teaching and learning are taken into account systematically.

Area to review: III. Management of resources

3. Interface with research

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in combining research and teaching do not exist.
1 = defined	The procedures, decision-making processes and information channels required to combine teaching and research have also been defined and documented.
2 = implemented	The expected combination of teaching and research works well.
3 = established & controlled	The results and profiles which the involved academic units obtain from their research are included in the (further) development of programmes / courses / trainings on a regular basis. Findings from research activities are systematically used in teaching. The effect of this approach is assessed in quality management and self-evaluation procedures.
4 = predictive & proactive	Processes are developed further in a predictive and proactive way.

Area to review: III. Management of resources

3. Interface with research

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions in combining teaching and research have no visible positive effect on the intended outcomes.
1 = defined	They have a positive effect on the intended outcomes that becomes evident in some areas.
2 = implemented	Students are made aware of the research activities that are carried out in their academic unit and at the institution in general and how they can participate. The members of the institution and all relevant stakeholders are informed about their tasks and opportunities as well as about the objectives of the institution in terms of combining teaching and research
3 = established & controlled	The institution management and the management staff in general support and communicate an approach of mutual appreciation between teaching and research.
4 = predictive & proactive	All stakeholders consider supporting the combination of research and teaching an important element for the future of the institution.

Area to review: III. Management of resources

4. Interface with administration

a) institutional

Expectations	
0 = not existent	The organisational setting, structures and resources required for the administration to support teaching and learning do not exist
1 = defined	The administration's responsibilities and functions in teaching and learning have been defined. The administrative requirements for meeting the institution's quality objectives for teaching and learning have been established.
2 = implemented	The administration is suitably structured and equipped to act as a service provider of the key processes of the institution.
3 = established & controlled	As for the programmes / courses / trainings on offer, the administration supports their preparation, implementation and quality management both on an organisational level and with the data and information required.
4 = predictive & proactive	Expected or potential internal and external future challenges for the function of the administration in teaching and learning are identified and used as the basis for their continued structural development.

Area to review: III. Management of resources

4. Interface with administration

b) procedural

Expectations	
0 = not existent	Processes required for the administration to support teaching and learning as envisaged do not exist.
1 = defined	It has been defined, i.e. how the individual administrative units are involved in the processes of introducing, developing (further) and implementing programmes / courses / trainings.
2 = implemented	The individual administrative units have successfully been involved in the processes of introducing, developing (further) and implementing programmes / courses / trainings.
3 = established & controlled	In administration, the budget, human resources and staff development activities are also planned according to their efficiency in supporting teaching and learning.
4 = predictive & proactive	Expected or potential internal and external future challenges for the function of the administration in teaching and learning are identified and used as the basis to further develop the processes (decision-making processes and information channels).

Area to review: III. Management of resources

4. Interface with administration

c) cultural

Expectations	
0 = not existent	With regard to the desired supporting role which the administration is intended play in teaching and learning, the predominant values and methods which guide most actions have no visible positive effect.
1 = defined	The expectations as to the administrative staff's role in the creation, implementation, further development and quality assurance of course offers have been defined in some areas.
2 = implemented	The expectations as to the administrative staff's role in the creation, implementation, further development and quality assurance of course offers are coherent and have been communicated. The institution management ensures that the administration is aware of the institution's quality-related objectives for teaching and learning. The teaching staff and students have been informed about the responsibilities and contact persons working in administration.
3 = established & controlled	The institution supports horizontal and independent cooperations between the administration and academic units. The administration and academic units/teaching staff support each other.
4 = predictive & proactive	The administration and academic units/teaching staff communicate on a regular basis in order to improve the quality of services provided.

Area to review: IV. Transparency and documentation

1. Rules and regulations for programmes/courses/trainings

a) institutional

Expectations	
0 = not existent	The organisational setting, structures and resources required for documents containing the rules for programmes / courses / trainings do not exist.
1 = defined	A set of rules and the documentation about programmes / courses / trainings on offer as well as the functions within the organisational setting that are in charge of defining, developing and administering them.
2 = implemented	The documentation available accounts for the access to programmes / courses / trainings, the type, goals and student progression of the programmes / courses / trainings offered and the students' duties as well as responsibilities. It is readily accessible and comprehensible to all relevant stakeholders (especially students). Graduation documents ("Diploma Supplement") are issued in all programmes / courses / trainings on offer at the institution. The issued certificates and diplomas are clear and informative with regard to the aims, intended learning outcomes, structure and level of the course as well as about the student's performance.
3 = established & controlled	Information obtained from quality assurance is also used to further develop these documents.
4 = predictive & proactive	They are developed further in a predictive and proactive way.

Area to review: IV. Transparency and documentation

1. Rules and regulations for programmes/courses/trainings

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in terms of rules and the documentation about programmes do not exist.
1 = defined	The decision-making processes and information channels used to define, change and approve the rules of a course have been established. The definitions include how the documents containing the rules of a course are created and who is involved, responsible and informed.
2 = implemented	The information channels and the collaboration to create and develop the documents containing the rules of a course work well. Those in charge fulfil their responsibilities. External (e.g. legal) requirements are integrated into the process of creating and developing the documents containing the rules of a course on a regular basis.
3 = established & controlled	Relevant information obtained from quality assurance (especially feedback from students and teaching staff) are taken into consideration when creating and developing the documents containing the rules of a course.
4 = predictive & proactive	The institution is in a position to recognize and immediately implement changes, in particular from external requirements, and to feed own experiences into the further development in a proactive way.

Area to review: IV. Transparency and documentation

1. Rules and regulations for programmes/courses/trainings

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions have no visible positive effect on the intended outcomes, e.g. for the rules to be up-to-date, accessible, reliable and comprehensible for all relevant internal and external stakeholders.
1 = defined	A positive effect on the intended outcomes that becomes evident in some areas.
2 = implemented	The teaching staff and students are informed about existing documents containing the rules of a course and any changes to such documents.
3 = established & controlled	The teaching staff and students are involved in the creation or modification of all documents containing the rules of a course.
4 = predictive & proactive	They support the organisation as a whole in acting in a predictive and proactive way.

Area to review: IV. Transparency and documentation

2. Documentation

a) institutional

Expectations	
0 = not existent	The organisational setting, structures and resources required to organise documents and filing systems do not exist.
1 = defined	The organisational setting, structures and resources required to organise documents and filing systems have been defined.
2 = implemented	The organisation of documents and filing systems works as envisaged and in an efficient way. As a general rule, the different units and panels within the institution work with the principle of documentation when planning and implementing programmes / courses / trainings as well as in their quality assurance. The documentation and filing systems work and are in line with the respective legal and functional requirements.
3 = established & controlled	The institution has a system which manages all central documents and supports the processes of planning, implementing course offers and developing them further. The system also provides the units/persons in charge with the information they need to adopt measures.
4 = predictive & proactive	They are developed further in a predictive and proactive way.

Area to review: IV. Transparency and documentation

2. Documentation

b) procedural

Expectations	
0 = not existent	Processes used to achieve the intended results in the organisation of documents and filing systems do not exist
1 = defined	The procedures to create, administrate and archive documents have been defined.
2 = implemented	The management, administration, teaching staff and students involved have access to the documents relevant to them. All decisions are documented. Reasons are given for all decisions which have an impact on teaching staff and students. External requirements for documentation and transparency are continuously taken into consideration in the respective processes.
3 = established & controlled	The institution internally and externally provides target-group specific information about the programmes / courses / trainings on offer and their quality.
4 = predictive & proactive	They are developed further in a predictive and proactive way.

Area to review: IV. Transparency and documentation

2. Documentation

c) cultural

Expectations	
0 = not existent	The predominant values and methods which guide most actions in the organisation of documents and filing systems have no visible positive effect on the intended outcomes.
1 = defined	The minimum requirements as to the form and quality of documents created and used have been communicated.
2 = implemented	The members of the institution are aware of the minimum requirements as to the form and quality of documentation in their area of activity. The target group (especially students and course applicants), other institutions and the labour market receive clear, relevant and useful information.
3 = established & controlled	They support the organisation as a whole in strategically directing the processes used to achieve the intended results.
4 = predictive & proactive	They support the organisation as a whole in acting in a predictive and proactive way.