ENQA AGENCY REVIEW

The DANISH ACCREDITATION INSTITUTION (Al)

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EXECUTIVE SUMMARY

This report analyses the compliance of the Danish Accreditation Institution, AI (Danmarks Akkrediteringsinstitution, AI Danmark) against the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). It is based on an external review conducted in I2 months, between February 2020 and May 2021.

Al was established by law in 2007 and the subsequent revision of the Accreditation Act in 2013 and 2018. Its main purpose is to contribute to the assurance and enhancement of quality at public Danish higher education through accreditation of institutions and a limited number of either new programmes that the institutions wish to establish or existing programmes. As this is Al's third review, the panel was expected to provide clear evidence of results in all areas and to acknowledge progress from the previous review. The panel has adopted a developmental approach, as the *Guidelines for ENQA Agency Reviews*¹ aim at constant enhancement of the agencies.

Al elaborated a self-assessment report (SAR) which was comprehensive, with numerous and detailed appendixes, and that provided a substantial portion of the evidence that the panel used to draw its conclusions in this report. The SAR devoted attention to the recommendations presented in the report of the previous ENQA Review of 2016 and the follow-up of 2018 and to the steps taken by Al since then to address those recommendations and suggestions. Nonetheless, the elaboration of the SAR should have been more carefully prepared to avoid some misunderstandings in the communication between the panel and the agency. However, the panel has taken into consideration extensively the feedback for factual accuracy provided by Al.

The 2020-2021 external review of AI was conducted in line with the process described in the Guidelines for ENQA Agency Reviews and in accordance with the timeline and scope set out in the Terms of Reference. The following external quality assurance activities were addressed by the ENQA review panel:

- Accreditation of public higher education institutions (HEIs) Institutional accreditation (IA);
- Accreditation of public higher education programmes (PA), which covers accreditation of new and of existing programmes;
- Quality assessment of foreign programmes.

SUMMARY OF THE REVIEW PANEL'S ASSESSMENT OF THE DEGREE OF COMPLIANCE AGAINST ESG

PART 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 Activities, policy, and processes for quality assurance - Panel conclusion: substantially compliant

Panel recommendations

The panel recommends the agency to address the peculiarities of the dual accreditation system, namely by reflecting on how to consolidate the interdependence of the relationship between Al and the AC.

The panel also recommends the agency to consider the establishment of an advisory body or similar that could institutionalize and strengthen the dialogue with the relevant stakeholders, namely with the MHES, the AC and with HEIs.

ESG 3.2 Official status - Panel conclusion: fully compliant

ESG 3.3 Independence - Panel conclusion: substantially compliant Panel recommendations

 $^{1}\ https://www.enqa.eu/wp-content/uploads/Guidelines-for-ENQA-Agency-Reviews.pdf$

The agency should reflect about the understanding of independence between Al and the AC and how to balance between their statutory independence and the necessary coordination and congruence between these two bodies.

ESG 3.4 Thematic analysis - Panel conclusion: fully compliant

Panel suggestions for further improvement

The panel suggest the agency to strive for a clearer definition of its strategy and better division of labour with other organisations that play a role in this area (area of analysis in the field of HE).

Panel commendation

The panel commends AI for its significant efforts both in the production of thematic analysis as well as the involvement of stakeholders regarding their topics.

ESG 3.5 Resources - Panel conclusion: fully compliant

ESG 3.6 Internal quality assurance and professional conduct - Panel conclusion: substantially compliant

Panel recommendations

The agency should consolidate its processes of internal reflection and devote more attention to self-reflection, namely by using in a more systematic way the contributions of internal and external stakeholders.

ESG 3.7 Cyclical external review of agencies - Panel conclusion: fully compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 Consideration of internal quality assurance - Panel conclusion: substantially compliant

Panel recommendations

The agency should reconsider its approach condensing to 3 standards and to evaluate on whether these 3 standards are effective and comprehensive in addressing the whole of Part I of ESG.

ESG 2.2 Designing methodologies fit for purpose - Panel conclusion: substantially compliant

Panel recommendations

The panel recommends that the agency should develop a continuous monitoring to its comprehensive approach, especially regarding the idea of differentiation and fitness for purpose. In particular, the agency should reflect on how to make the current system of IA effective for large and comprehensive institutions.

ESG 2.3 Implementing processes - Panel conclusion: substantially compliant Panel recommendations:

The agency should strive to improve the degree of coordination with the AC regarding guidelines and decision-making processes in order to ensure greater clarity of the whole review process in IA 2.0.

ESG 2.4 Peer-review experts - Panel conclusion: fully compliant Panel commendations

The panel considers that the agency should be commended for its degree of international experts and for the strong involvement of students in their review procedures.

ESG 2.5 Criteria for outcomes - Panel conclusion: substantially compliant Panel recommendations:

The panel recommends that the agency should devote greater efforts to design clearer and consistent criteria regarding decision-making and review processes in a coordinated way with AC to avoid any uncertainty.

ESG 2.6 Reporting - Panel conclusion: substantially compliant Panel recommendations

The agency should devote more attention to the consistency of reports to avoid the perception among some stakeholders that these reflect the quality and commitment of the reviewers.

ESG 2.7 Complaints and appeals - Panel conclusion: substantially compliant Panel recommendations

The agency should consider the establishment of a separate body that could analyse the institutions' complaints within the remit of the agency.

INTRODUCTION

This report analyses the compliance of the Danish Accreditation Institution, AI (Danmarks Akkrediteringsinstitution, AI Danmark) with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). The review was commissioned in view of the agency's wish to renew its membership in ENQA and listing on the European Quality Assurance Register for Higher Education (EQAR). The report is based on an external review conducted in 12 months, between February 2020 and May 2021.

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

BACKGROUND OF THE REVIEW

ENQA's regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in substantial compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015.

As this is Al's third review, the panel was expected to provide clear evidence of results in all areas and to acknowledge progress from the previous review. The panel has adopted a developmental approach, as the Guidelines for ENQA Agency Reviews aim at constant enhancement of the agencies.

MAIN FINDINGS OF THE 2016 REVIEW

The previous review considered that Al was a consolidated quality assurance agency, recognized by all stakeholders. The shift to institutional accreditations was regarded as an important step in emphasising the higher education institutions' (HEIs) own responsibility in ensuring the quality assurance of their programmes. This had also led to a reduction of the workload placed upon institutions, even though the agency was still trying to find the adequate balance in its approach, namely regarding the amount of documentation required in those accreditations. The previous review also commended Al for its vision to support and contribute to the further enhancement of the institutions' own quality work, though the review panel identified room for improvement in order for that approach to attain its full potential. Moreover, the panel underlined increased stakeholder engagement as an important step in that direction.

Based on the evidence provided by the documentation and the interviews at the site visit, the review panel at that time considered that Al's overall performance against the ESG was high. The panel was particularly appreciative of the high level of commitment showed by the staff and management. Furthermore, it commended the agency for its measures to assure consistency in conducting the reviews and preparing the reports (ESG 2.3), for the high-quality support to the work of the panels (ESG 2.4), and for the setup of STAR, Students Accreditation Council (ESG 3.1.).

In summary, its main conclusions were the following:

- Al was considered fully compliant with ESG 2.4, 2.5, 3.2, 3.3, 3.4, 3.5, and 3.7;
- Al was considered substantially compliant with ESG 2.1, 2.3, 2.6, and 3.6;
- Al was considered partially compliant with: ESG 2.2, 2.7, and 3.1.

Overall, the panel concluded AI to be fully or substantially compliant on the majority of ESG. Given those assessments, the panel at that time made several recommendations. Namely, it recommended to the agency the following:

- 2.1: advocate for integrating all aspects of part I of the ESG into the accreditation criteria when the envisaged reform of the accreditation system is going to take place
- 2.2: further reduce workload and the amount of documentation gathered in the institutional accreditations, making clear what data to require and for what purposes, introduce follow-up procedures in all accreditations, play the lead role in the discussions about designing new

procedures and to intensify stakeholder involvement, in particular in the design of Al methodologies.

- 2.3: introduce follow-up procedures in all accreditations
- 2.6: consider giving recommendations in all reports and to add a summary in reports
- 2.7: formalise and make transparent to all HEIs when and how opportunities are given to complain
- 3.1: further elaborate on stakeholder involvement in order to fulfil Al vision to contribute to the enhancement and further development of the quality work at institutions
- 3.4: clarify the purpose of their analysis, especially in relation to the analysis of EVA and to communicate this to stakeholders, consider setting up formal feedback mechanisms on the relevance and usefulness of their analysis
- 3.6: supplement the memo on the quality assurance policy by adding descriptions of the various internal quality assurance procedures including responsibilities, timing etc.

REVIEW PROCESS

The 2021 external review of AI was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of AI was appointed by ENQA and composed of the following members:

- Maria E. Weber (Chair), Head of Department Accreditation & International Affairs, Agency for Quality Assurance and Accreditation Austria; Austria;
- Pedro Teixeira (Secretary), Professor, Faculty of Economics, University of Porto and Director, Centre for Research on Higher Education Policies (CIPES), Portugal - EUA nominee;
- Luna Lee Solheim, Senior Adviser, Norwegian Agency for Quality Assurance in Education (NOKUT), Norway;
- Francisco Joaquin Jimenez Gonzalez, Student of Master in Science and Technology in Architecture, Universidad Politécnica de Cartagena, Spain - Member of the European Students' Union Quality Assurance Student Experts Pool;

The review panel was initially provided with all relevant background information by November 2020, including the self-assessment report prepared by AI (which included a long list of appendixes). After a preliminary analysis based on the information provided in the SAR, the panel requested for additional information, which was promptly and extensively provided by the agency.

The panel conducted an online review in January 2021 to deepen the portrait presented in the self-assessment and in the additional information provided and to clarify any outstanding issues. After the visit, the review panel produced this final report based on the self-assessment report, site visit, and its findings. In doing so, it provided an opportunity for Al Denmark to comment on the factual accuracy of the draft report. The review panel confirms that it was given access to all documents it wished to consult and all people it aimed to interview throughout the review. Not all relevant documentation was available in English and some was available only in Danish, but the review panel could understand all the documents provided since one of the panel members was fluent in Danish and could translate the relevant parts for the panel. The review panel as a whole was able to consult all necessary information.

The review panel is very grateful to Al and its management and staff for the supportive and open attitude throughout the review, which contributed significantly for the work of the panel.

Self-assessment report

As described in the SAR, the process was launched in the beginning of 2020 with the appointment of a project team to draft the report, which included four people from different units in the organisation. In the preparation of the SAR, the team has benefited from the input and knowledge of both colleagues and management during feedback sessions, with all the units of Al having contributed to the content of the report. In the initial phase, the project team met with the Executive Director and one of the

Directors of Operations to outline the process of the SAR. The project team involved others within the AI to contribute, such as inviting senior staff and specialist consultants to two separate feedback sessions and facilitating a workshop open to all staff who wanted to contribute to the SWOT analysis. The workshop included participants from across the organisation. The two feedback sessions and the internal SWOT workshop were regarded by the team in charge of the SAR to have contributed to useful discussions and reflections across the AI. Different sections of the draft SAR were sent to different staff members of the agency for fact-checking and clarification of central themes. The management also provided feedback on the overall draft SAR. The review panel was told that the Ministry of Higher Education and Science (MHES) was also sent for comments the parts referring to ESG 2.1 and those dealing with the general HE framework in Denmark. The Accreditation Council (AC) was informed about the content, but was not involved in the preparation of the SAR.

Regarding the process of elaboration of the SAR, the review panel learned that the management of Al had selected the members of the team elaborating the SAR in order to represent the various operating units within the agency. They had also decided to include younger staff members in order to have a more detached perspective by those that had been less involved in the activities of the agency. This approach has certainly some advantages, though the panel perceived it posing some challenges. Notably, the degree of analysis of the SAR on certain aspects was limited and this may have been due a lower degree of reflection about the procedures and methodologies put in place by the agency. This was apparent to the review panel in the discussions with the members of the team in charge of the SAR during the online review.

Apart from some limited self-analysis, the panel considers that AI elaborated a SAR that provided a substantial portion of the evidence that the panel used to draw its conclusions in this report, together with the evidence collected during the online visit from the various groups of stakeholders. The SAR devoted significant attention to the recommendations presented in the report of the previous ENQA Review of 2016 and the follow-up of 2018 and to the steps taken by AI since then to address those recommendations and suggestions.

Nonetheless, the review panel considers that the SWOT analysis could have been developed in a more robust way that reflected more intensive engagement of the agency's various internal and external partners. The review panel perceived some difficulty from the SAR team in identifying and justifying some of the aspects of the SWOT analysis, namely the weaknesses, which could suggest that more attention should be given to the practice of self-reflection, which is very important for learning organisation aiming for continuous improvement.

Finally, in the agency's feedback to the draft report, it was questioned several instances drawn literally from the SAR. This suggests that the elaboration of the SAR should have been prepared even more carefully to avoid those misunderdstandings.

(Online) Site visit

Given the current circumstances faced in many countries related to the Covid-19 pandemic, the review panel has agreed with ENQA and with the agency that the review should be pursued in an online format. Thus, though a visit was provisionally scheduled for the $20^{th}-22^{nd}$ of January 2021 in Copenhagen, Denmark, it was agreed later that it should take place in an online format on the same dates. The only adjustament was in the date of the preliminary meeting of the team, which took place on the 15^{th} of January, taking advantage of the flexibility of the format. This was considered as beneficial by the review panel since it allowed extra time for preparation between the panel's kick-off meeting and the meetings with representatives of the agency.

The agency was sent an initial draft programme for the online review by the team in December 2020 and it provided some suggestions for improvement, which were considered as pertinent by the review panel and included in the final version. Most of this process was defined in close cooperation between the agency (namely through its Head of Sections, Analysis and Council Management) and the secretary

of the panel. The online review was well planned and organised. The programme included interview sessions with members of the AC and the Executive Director, the senior management team and a number of staff members, and members of the review panels. The panel also met various stakeholders, including representatives of the MHES, leaders of higher education institutions from the different sectors, quality managers from different higher education institutions, student representatives, and external stakeholders. An overview of the meetings is available in Annex I.

The staff of the agency demonstrated significant professionalism during the entire review process and provided excellent assistance to the panel regarding all matters. At the end of the online review, the review panel held an internal meeting where it agreed on the preliminary conclusions relating to the level of compliance of AI on each of the standards in part 2 and 3 of the ESG. The secretary of the review panel then drafted the report in cooperation with the rest of the panel. The draft report was submitted to AI for factual verification in April 2021 and with reference to ENQA guidelines AI was given two weeks to comment on the factual accuracy of the report.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

The Danish system is a diverse system, with Universities, University Colleges, and Business Academies. The first group of institutions are more research-based. In principle, University Colleges and Business Academies are two parallel sectors (with the same legal basis and right to offer the same types of programme). The division of responsibilities between them concerns the academic aspect: Business Academies are entitled to offer programmes within the technical and mercantile fields of study, University Colleges (not to be confused with Universities) are entitled to offer programmes within professions, such as nursing, primary school teaching, social education and social work. Moreover, the system is dominated by public provision with a small presence of private institutions, which offer private programmes in areas such as adult and continuing education and MBAs. These activities do not lead to any officially recognized Danish degrees and they are not regulated by law. Thus, this limited private provision is not subject to regulation or quality assurance.

The regulation of Danish Higher Education is a responsibility of several ministries, though the main regulatory authority is the MHES, that regulates most of the (public) higher education institutions in Denmark (as stated in the SAR, pg. 6). The higher education system under the MHES includes thirty-four HEIs, i.e. eight Universities, seven University Colleges, eight Business Academies, three HEIs within the Fine Arts and five Maritime Educational Institutions. In addition, there are seven HEIs under the Ministry of Culture and a number of higher education's programmes under the Ministry of Defence (available primarily to employees of the Danish Defence) and the Ministry of Justice (available primarily to employees of the Danish Police).

Danish higher education programmes are divided between research-based and professionally based programmes. Research-based programmes are offered by Universities and regulated in the Danish University Act. The professionally oriented programmes are predominantly offered by University Colleges and Business Academies. These programmes are regulated by the Danish Act on Academy Profession and Professional Bachelor's Programmes. As for terminology, it is important to note that these institutions distinguish between programmes and provisions of programmes. A University College may have several provisions of the Bachelor's Degree Programme in Education. This means that the same programme is available on several different campuses under the same institution and in the same recruitment area. Furthermore, a group of maritime education programmes is offered by the Maritime Educational Institutions, which are regulated by the Danish Act on Maritime Educational. The HEIs within the Fine Arts offer programmes that are based on recent research, artistic research and close contact to artistic practice. These programmes are regulated by the Danish Act on Higher Education Institutions within the Fine Arts under the MHES and the Ministry of Culture (cf. SAR, pg. 8).

The Danish higher education system is organised into four qualification levels with a number of both ordinary and adult further education degree types at each level. The Danish Qualifications Framework systematically describes the different degree types within the Danish higher education system. Furthermore, it describes the knowledge, skills and competences students must acquire in each degree type. General access to higher education in Denmark requires an Upper Secondary School Leaving Certificate or comparable qualifications. Admission to some particular programmes requires entrance examination or submission of a portfolio of artistic work. Holders of an Academy Profession degree can obtain a Professional Bachelor's degree within the same field of study through a top-up programme. Completion of a first cycle degree qualifies students for admission to the second cycle.²

Higher education programmes are offered at three levels: short-cycle, medium-cycle and long-cycle programmes. The short- and medium-cycle programmes are the academy profession programmes primarily offered at the Business Academies, while the professional bachelor's programmes are primarily offered at the University Colleges. The long-cycle programmes such as the bachelor's and master's degree programmes are research-based programmes offered by University. A short-cycle higher education programme lasts between eighteen and thirty months (90-150 ECTS points). Shortcycle higher education programmes include academy profession programmes that address various professionals and typically involve periods of work placement. Short-cycle higher education programmes qualify students for relevant further education, such as diploma programmes or top-up bachelor's programmes. Medium-cycle higher education programmes last between 3-4 years (180-240 ECTS points). These programmes usually address a given profession and include periods of work placement. Medium-cycle higher education programmes cover professional bachelor's programmes. There are more than thirty such programmes. These are large public welfare programmes, educating, for example, nurses, primary school teachers, social educators and social workers. Professional bachelor's programmes entitle students to take certain relevant postgraduate and master's programmes. Long-cycle higher education programmes include three-year bachelor's programmes at Universities and two-year master's programmes, which are both academic-oriented and researchbased. Bachelor's degree programmes at Universities (180 ECTS) provide students with broad academic knowledge as well as methodological and theoretical qualifications within one or more disciplines. Master's degree programmes at Universities (120 ECTS) help develop the knowledge and qualifications acquired by students through bachelor's degree programmes. The objective of the master's programme is to ensure that students develop their competences through a more comprehensive coverage of subjects. PhD programmes (180 ECTS) are offered by the Universities and some university level institutions offering degrees in the artistic and cultural field.

QUALITY ASSURANCE

The Danish system of quality assurance has undergone relevant changes in the last two decades. Until 2007, the Danish Centre for Quality Assurance and Evaluation in Higher Education, later called the Danish Evaluation Institute (EVA), performed systematic evaluations of all higher education programmes, though the results were non-legally binding.

In 2007, the first Danish Act on the Accreditation of Higher Education Institutions was introduced, following Denmark's adoption of the Bologna Declaration in 1999 and its implementation in Danish higher education Between 2007 and 2013, the accreditation system was based in two external quality assurance entities: ACE Denmark and EVA. According to the SAR, during that period, programme accreditation was the only external quality assurance activity, with 85 % of the programmes achieving a positive accreditation. At that time, HEIs

 $^{^2\} https://ufm.dk/en/education/recognition-and-transparency/transparency-tools/europass/diplomasupplement/danish-higher-education-system-short-description$

criticised the existing system, claiming it was unnecessarily bureaucratic and resource-intensive compared to the high number of programmes that achieved a positive accreditation.

In 2013 was approved a new Accreditation Act, which has led to a reshaping of the Danish quality assurance system. As explained in the SAR (pg. 11), this new law led to a reorganisation of the two operators ACE Denmark and EVA in 2013. ACE Denmark and one unit from EVA merged into one organisation under the new name: the Danish Accreditation Institution (AI), the entity being reviewed in this report. As part of the legal reform in 2013, the AC, formerly a body of AI, was transformed into an independent unit outside the AI organisation, with both entities being regulated under the same law. The AC makes all decisions concerning the final outcomes of accreditation (as explained in the SAR, pg. 12). The AC defines its procedures and methods independently from any political or institutional interests. These aspects were already described in the previous report of the ENQA Review of 2016.

The Accreditation Act of 2013 awarded to AI full responsibility for the accreditation procedures and processes of all types of HEIs and programmes (previously performed by ACE Denmark and EVA), though not the decision-making roles, which, as clarified by AI during this report's factual accuracy check, remained as the responsibility of the Accreditation Council since the first Accreditation Act in 2007. This new Law also introduced institutional accreditation (IA). Since 2013, EVA has not performed any activities in relation to the ESG's. EVA receives a small grant by the MHES to, among other things, perform research and conduct general analyses within the higher education area.

Some role in quality assurance matters is also played by RUVU (the Advisory Committee to Assess the Range of Higher Education Study Programmes Offered), which was also established by the legal reform of 2013. RUVU is an advisory committee within the MHES with no organisational affiliation to the Al. RUVU issues a pre-qualification recommendation based on its assessment of labour market relevance, academic relevance, and/or regional relevance of the proposed new study programmes. According to the SAR, this is a requirement for new programme proposals by HEIs which have not received an IA, which must first receive a pre-qualification from RUVU.³ However, in its response to the draft report, Al clarified that RUVU performs that role for all new programmes, regardless of the result of IA. (Al and the Council are only involved in the case of new programmes of HEI that have note received a positive IA.) On the basis of RUVU's assessment, the MHES decides if a proposed new programme should be prequalified and then allowed to apply for accreditation.

Accreditation is mandatory for all public HEIs. Accreditation is a precondition for attaining public funding for all institutions and programmes. Government funding is based on three basic elements. Most funding is based on student activity grants (67.5 % of all funding), i.e. funding per student passing of examinations. The rate varies according to subject field and level of education. In addition, the institutions receive basic grants (25 %) and result-based grants (7.5 %). There are a very limited number of private providers of private courses in Denmark, mainly focused on lifelong training, but these are not official programs. These are not regulated by law and therefore not covered by the accreditation system.

HEIs are required to set up their own internal quality assurance procedures. The Danish University Act specifies the role of deans, heads of department and study boards, respectively, in assuring and developing the quality of education and teaching. Self-evaluation, in which students normally participate, is an integral mandatory part of any evaluation. The other Acts regulating other types of

 $^{^3\} https://ufm.dk/uddannelse/videregaende-uddannelse/kvalitetssikring-og-akkreditering/kvalitetssikring-og-akkreditering$

HEIs such as University Colleges mention explicitly the Accreditation Act and defer to that legislation regarding the provisions for quality assurance in those parts of the HE sector. 4

The most recent amendments to the Accreditation Act from 2013 came into force on the 1st of January 2018 and included minor changes concerning IA. These included, for example, the validity period for a conditionally positive IA and the deadline for institutions to complete their IA.

DANISH ACCREDITATION INSTITUTION - AI

Al was established by law in 2007 and the subsequent revision of the Accreditation Act in 2013 and 2018. Its main purpose is to contribute to the assurance and enhancement of quality at public Danish higher education through accreditation of institutions and a limited amount of either new programmes that the institutions wish to establish or existing programmes.⁵

According to the Accreditation Act there are two main entities in the Danish accreditation system: The Accreditation Institution (AI) and the Accreditation Council (AC). All and the AC are responsible for all types of HEIs and study programmes in Denmark that are subject to accreditation. Although the latter is an independent body that makes all decisions concerning accreditation, and it operates outside the agency, there is some operational and organisational interdependence. The agency recognizes that this dual system is not easy to understand, especially for those less familiar with it, but it considers that there is a clear division of labour.

According to the Accreditation Act, the AC may, on its own initiative or following a request from an HEI, base its accreditation decision fully or partly on a review report from another internationally recognised institution, to the extent that such a report is prepared in accordance with the same criteria as other accreditations within the field in question. Hence, a foreign QA agency would need to work in line with the criteria (as of the law) and the AC could always use the services of another agency. So far, this option has not been exercised.

Al'S ORGANISATION/STRUCTURE

Al is composed of four internal units that have separate duties:

- I. Management Secretariat:
 - a. This unit assists the other secretariats with their work, manages finances and handles internal and external communication.
- 2. Areas of Reviews

2.1. The Area for Professional, Vocational and Maritime Institutions (PEM) – this unit handles reviews regarding University Colleges, Business Academies and Maritime Education Institutions as well as a limited number of reviews of new and existing programmes and provisions of programmes within the same areas.

- 2.2. The Area for Universities and Educational Institutions of Arts and Culture (UNIK) this unit handles reviews regarding Universities and HEIs within the Fine Arts and a limited number of reviews of new and existing programmes within the same areas.
 - a. Each of these two areas facilitate the review process, recruitment and training of expert panels, dialogue with the HEI in question and drafting the accreditation report of the expert panels.

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⁴ The Danish Act on Academy Profession and Professional Bachelor's Programme, Danish Act on Maritime Educational Institutions (lov om maritime uddannelser) and The Danish Act on Higher Education Institutions within the Fine Arts (lov om videregående kunstneriske uddannelsesinstitutioner).

⁵ https://akkr.dk/en/about-us/about-the-danish-accreditation-institution/

- b. They also contribute to thematic analyses based on their review results.
- c. They continuously develop methodologies and accreditation processes.
- d. They document and communicate activities and results.
- e. Finally, they take part in Danish and international collaboration and development projects.
- 3. Council Management and Analysis:
 - a. This unit serves the AC in connection with meetings and decisions and is responsible for the AC's communication with the AI and other operators.
 - b. This unit produces thematic analyses.
 - c. This unit also handles legal matters.
 - d. Finally, this unit is responsible for the Al's accreditation database and the Council's decision database.

This organisational structure was presented by AI in its SAR in the following manner:

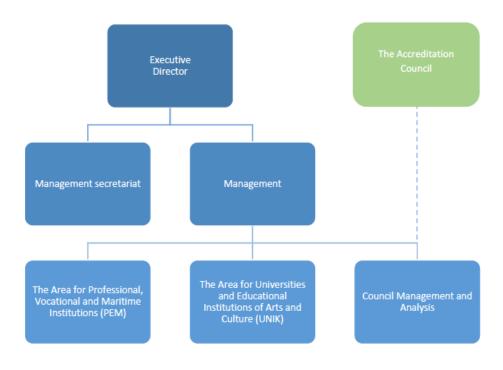


Figure 4: Al organizational chart

(Source - SAR - AI)

The Accreditation Council

Although Al and the AC are formally independent bodies, it is relevant to present here the AC and its role, given the interdependency between these two entities. This is reflected in several aspects and illustrated in the organisational chart presented above (and included by Al in the SAR). Not only do these two entities cooperate closely in the several stages of the accreditation process, but also one of the aforementioned operational units integrating Al supports the AC in its activities.

The AC has a Chairperson, a Vice Chairperson, and seven other members, including two student members. The MHES appoints the Chairperson. Central stakeholders such as Rectors' Conferences and labour market organisations are invited by the MHES to nominate qualified member candidates during a formal hearing. Based on the suggestions, the Minister for Higher Education and Science formally appoints the members of the AC and the Chairperson. The two student representatives are appointed upon nomination by HEI student bodies. The AC members are appointed based on their

experience and knowledge of QA, higher education, research and development and labour market conditions. At least one of the members must have international accreditation experience. The AC must be composed of an equal number of women and men. The Chairperson and the members are appointed for a period of four years and are eligible for reappointment once. However, the two student members may be appointed for a maximum of three years. The AC holds approximately four meetings a year. At its meetings, the AC makes decisions regarding accreditation and considers a number of different issues of relevance to the accreditation task. The AC makes its decisions regarding accreditation based on the panel's review reports, which the Al assists in drafting. The AC has authority to award (with or without conditions) or deny accreditation to all HEIs and their programmes. Both the decisions and the review reports are published on the AC's website and there is a link to the decisions and reports on the front page of the Al's website.

The AC is responsible for the legality of the accreditation decisions, but the AI (including the panels) is independently responsible for drafting reports that provide sufficient empirical evidence and for the review processes and assessments to be consistent in relation to previous assessments and decisions. The AC is supported by the unit "Council management and analysis", including a legal adviser within AI's management secretariat. Through the AC's decision-making practices and more general thematic discussions at AC meetings, the AC sets out some overall expectations for the quality and content of the review reports and the preparation and presentation of cases at the AC meetings. The AC can communicate and inform HEIs about accreditation matters and it has its own website.

The AC and the Al are both subject to general administrative law. The requirements of the administrative law stipulate certainty of habilitation, i.e. safeguarding against conflicts of interest, the requirement of ensuring HEIs and public insight into the work of the AI, rules of professional secrecy, requirements for clarity of the actual basis for the decisions involving the institutions and requirements for justification of the decisions. The general administrative law also includes the requirement of equal treatment (the equality principle), i.e. following the same procedures for all institutions considering their size and nature and that the same standards apply and are applied uniformly for all institutions.

Al'S FUNCTIONS, ACTIVITIES, PROCEDURES

The Accreditation Act sets out the responsibilities of the AI, which are to carry out EQA in the higher education sector. The Al's role is to monitor and support the internal QA and quality development of HEIs.

The main tasks of AI are as follows:

- Accreditation of public HEI Institutional accreditation (IA);
- Accreditation of public higher education programmes (PA), which covers accreditation of new and of existing programmes;
- Thematic analyses and summary reports of relevance to higher education;

Institutional Accreditation

The first cycle of institutional accreditation (IA I.0) introduced in 2013 has a focus on QA practice at institutional level, paying special attention to written procedures and written documentation. IA I.0 consisted of five criteria, which have been reduced to three criteria in the second cycle of institutional accreditation (IA 2.0). The new version was implemented in 2020 and in the same year four institutions have started their IA 2.0. A rotation plan of IA has been established prior to the first cycle of institutional accreditation in collaboration with HEIs, which need to undergo IA 2.0 no more than six years after the first positive decision on IA I.0 made by the AC. All institutions follow the same model for IA, though the model gives the institution a free hand to organise its own quality assurance system, as long as the system lives up to the criteria for quality and relevance laid down in the ministerial order.

In the initial stages of the review, and alongside an initial dialogue with the HEI, the agency recruits and sets up the expert panel that includes both Danish and international members as well as a student from a comparable institution. Al trains the expert panel with the main purpose of the panel members being able to carry out assessments regarding the quality of higher education within the IA accreditation concept. At the onset of the process, each HEI prepares an institutional report that consists of a system description and a self-assessment. The purpose of the institutional report is to lay the foundations for the accreditation panel's first site visit. The expert panel visits the HEI twice, meeting with the management team, professors, students and other employees at the institution, whenever relevant. Based on the first site visit, the expert panel selects audit trails that are at the focal point of the second visit. Typically, this visit is of a longer duration and the focus is on giving the accreditation panel the information needed to assess how the institutional quality assurance activities function in practice on the basis of the selected audit trails. After the site visits, the panel carries out the assessment of the HEI. The team of accreditation consultants, responsible for facilitating the IA process, drafts the panel's accreditation report based on the panel's assessments, followed by an iterative process with the expert panel. The Al submits the accreditation report for written consultation and comments from the HEI in the form of a written hearing, where the HEI has the opportunity to make corrections and comments on factual conditions. The final accreditation report is then submitted to the AC for a formal decision.

The possible outcomes and consequences of IA decisions are presented in the following table:

Decision	Assessment	Consequence
Positive accreditation	With the exception of a few, clearly defined problems, the QA system is well-described, well-argued and well-functioning in practice. The accreditation period is six years.	An opportunity to establish new programmes and new local provisions of programmes when these have been prequalified and approved and to adjust existing programmes.
Conditionally positive accreditation	Most of the QA system is well-described, well-argued and reasonably well-functioning in practice. In its decision, the AC will point out less well-functioning areas that the institution must subsequently follow up on within a given time frame (typically two to three years).	All new programmes and local provisions of programmes must be externally accredited before they are established.
Refusal of accreditation	There are several significant shortcomings in the structure or function of the institution's QA system in practice.	The institution cannot set up new programmes or new provisions of programmes. Existing programmes must be accredited in accordance with a rotational plan.

For institutions receiving a conditional positive accreditation by the AC, there is a follow-up accreditation process 2-3 years later to ensure that identified critical shortcomings have been rectified. This could be done by Al or by another agency. In most cases, the expert panel will only have one site visit for these so-called "re-accreditations" that corresponds to the nature and agenda of the second site visit.

Programme Accreditation

Since the introduction of IA in the first cycle in 2013, the number of PAs has decreased significantly. By now, IA is the main activity and PA will only be carried out for new programmes for institutions receiving a conditionally positive IA. If an institution receives a refusal of accreditation, then both new and existing programmes have to undergo PA. This has only been the case for two institutions since the introduction of IA in 2013. In 2020, the AI has conducted 11 PAs. In the years 2009-2013, where

PA were at the highest, the Al had between 200-300 PAs per year. A clear outcome of achieving a positive IA is that it allows the HEIs the option to set up new programmes and adjust existing programmes.

The main steps for PA are somewhat similar to IA but simpler. All receives the application material from the institution on the programme and possibly supplementary documentation about selected subjects and input from the visit to the programme. For each PA, All sets up an accreditation panel, which is composed of: one or more academic experts with expertise in the relevant field of study, one potential employer representative, and one student representative. The panel's task is to assess the quality and relevance of the programme. There is one accreditation consultant responsible for the overall review process and for the training of panel members. The expert panel and the accreditation consultant visit the programme once to talk with the management team, professors, students, and other employees at the institution. In the case of new programmes, there is no visit since the programme does not exist yet, and, therefore, the added value of arranging a visit has been considered to be limited. After the visit, the expert panel carries out the assessment of the programme in accordance with the accreditation guide and the criteria for PA laid down in the ministerial order.

Similar to the IA process, all assessments are gathered in a report, which is sent to the institution for a formal hearing before a final version is submitted to the AC for a formal decision. The AC has three options:

- In the case of programmes that do meet all of the criteria, they are awarded positive accreditation.
- In the case of programmes that they do not fully live up to all of the criteria, they are awarded conditionally positive accreditation. In these cases, the AC considers that the institution in charge of the programme will be able to remedy its shortcomings within a short period. The AC specifies a timetable within which the shortcomings must be remedied and the programme has to undergo accreditation again.
- In the case of programmes that are considered to not live up to the accreditation criteria, they are refused accreditation and must be closed down.

In the case of programmes offered abroad by a Danish HEI, they are accredited by AI following the same procedures as for programmes offered in Denmark, but with special attention to the Danish HEI's responsibility and assurance of the quality of the study programme abroad. Very rarely, and most recently in 2015, AI accredited a Danish programme offered abroad, which followed the Danish Ministerial Order on Provisions of Danish Professional and Vocational Higher Education Programmes Abroad.

Other Activities outside the scope of the ESG

Al also develops certain activities outside the scope of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). These revenue-funded activities were introduced in 2018 with the latest amendments to the 2013 Accreditation Act and involve a very limited number of programmes and represent a small portion of Al activities.

One of the amendments to the law stated that the AI could carry out assessment tasks as revenue-funded activities in two areas: assessment of private programmes that qualify for the State Educational Grant and assessment of the qualifications level of programmes in relation to the national Qualifications Framework. The former concerns a limited number of private programmes that do not lead to a formal degree and is a process that AI has taken from EVA in early 2019 and that is shared with MHES, which uses the outcomes to decide whether a certain programme is admissible to students receiving the State Educational Grant in Denmark. The other type of activity involves assessing the intended learning outcomes of programmes (i.e. knowledge, skills and competences). These assessments are usually requested by different forms of short- or long-term private education providers wanting to make visible the level of the intended learning outcomes of the learning activity or course in question. The assessments are meant to provide potential users and others with a better

overview of the private education sector as well as to strengthen the relation and interaction between private and public education.

International Activities

Al is considering the possibility of offering quality assessment of foreign programmes. However, the concept is at a very preliminary state and the plans regarding the concept is unsettled. According to the SAR, no steps have been taken yet to discuss how such an activity may be defined. If Al decides to go ahead to develop a quality assessment methodology for foreign programmes or foreign institutions, it would notify ENQA and EQAR and present a substantive change report.

Al has awarded significant importance to the international dimension of its mission and has tried to integrate that in its activities. Thus, the agency is an active participant in ENQA and has developed a strategy for international activities. The main strategic objective for Al is to develop its participation in the solution of international professional tasks and, at the same time, profile the Al as an attractive partner in international collaboration. A major part of its international activities has taken place through Al's participation in activities in the collaborative organisations Nordic Quality Assurance Network in Higher Education (NOQA), ENQA and International Network for Quality Assurance Agencies in Higher Education (INQAAHE). Al regularly participates in visits to other agencies with the aim of sharing knowledge or general experience with external quality assurance. Al also regularly participates in broader international conferences, such as the annual conferences of European Quality Assurance Forum (EQAF) and INQAAHE.

Al is also a partner in the project "Effective involvement of stakeholders in external quality assurance activities" (ESQA). The aim of this project is to improve stakeholders' commitment by making it more efficient with enhanced QA practices in project partner countries and beyond. The project is led by the Romanian Ministry of National Education and involves three European stakeholder organisations as well as five agencies, including the Al. As part of the project, the Al hosted a workshop in December 2019, discussing how stakeholders are involved in external quality assurance activities. The workshop included, among other things, a presentation about stakeholder involvement in the work of Al, namely its experience on student involvement.

Al's funding

The finances of AI are secured in a specific budget line in the Budget Law adopted by the Danish Parliament and is set for a four-year period. The plan for IA and PA is made in accordance with the resources and as a result of dialogue with the HEI. The budget covers all costs for activities and staff.

A smaller income is derived from the aforementioned other activities outside the scope of assessment of the ESGs, namely those assessment of private programmes that qualify for State Educational Grants and the assessment of the qualification levels of programmes in relation to the national Qualifications Framework. Those programmes pay for the associated costs incurred by the AI when carrying out individual assessments.

According to the information provided by the agency in the SAR, its funding structure over the last five years was the following (in Million Danish Kronen):

Year	Budget Transfer	Other Income	Total Income
2016	32.4	0	32.4
2017	34.3	0	34.3
2018	38.5	0	38.5
2019	36.2	0.7	36.9
2020	32.8	1.3	34.1

FINDINGS: COMPLIANCE OF AI DENMARK WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG)

ESG PART 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE

Standard:

Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

2016 review recommendation – To further elaborate on stakeholder involvement in order to fulfil Al vision to contribute to the enhancement and further development of the quality work at institutions.

Evidence

The Accreditation Act defines the function and activities of the Al, stipulating, among other things, that the Al is an independent public authority performing accreditation of HEIs. According to the SAR, its mission is to create value for society through a strong commitment to the task of enhancing the quality and relevance of higher education in Denmark. This is mainly accomplished through institutional accreditations that:

- Identify concrete issues with the quality assurance work
- Provide knowledge of and incentive to quality improvements
- Inspire the continued development of the institution and the entire higher education sector.

Regarding the vision defined for AI, the SAR states that it should aspire to be a strong and recognised organisation which makes a crucial contribution to ensuring better and more relevant higher education programmes for students and the business community. Thus, the Accreditation Institution should:

- Continuously strive to develop the accreditation task
- Bring both new and existing knowledge of quality assurance and educational quality into play
- Develop the institution's expertise and knowledge as well as uncover new areas of importance to quality assurance and educational quality.

Al undertakes accreditation activities on a regular basis, since the Accreditation Act demands that HEIs renew their IA every six years. Moreover, Al conducts PA until HEIs receive their first positive IA. As a means of ensuring public transparency regarding the accreditation activities, the AC always publishes the plan for upcoming IAs on its website.

In the period between 2014 and 2020, Al reported 43 IA 1.0, distributed in the following way: Universities (13), Business Academies (11), University College (8), Maritime Educational Institution (7), and HEIs in the Fine Arts (4). Regarding the decisions of the AC for IA the period 2014-2020, the SAR reported the following outcomes: Positive (26), Conditional Positive (15), and Refusal (2). Regarding PA, the SAR reported the following outcomes of the decisions of the AC for existing programmes during the period 2014-2020: Positive (239), Conditional Positive (38), and Refusal (3). The number of decisions by the AC on PA for new programmes in the same period was the following: Positive (105), Refusal (19).

Following the comments made in the previous ENQA Review, Al has aimed to strengthen the participation of stakeholders in its activities. Al has involved stakeholders in specific initiatives such as

the development of new strategies, the designining of new processes and methodologies, the planning of conferences on relevant topics for accreditation, and finally in sharing knowledge internationally. All has attempted to develop a systematic dialogue through regular meeting with key stakeholders such as the sectoral representatives namely, the Rectors' Conferences of the Universities, University Colleges and Business Academies. Moreover, the management of Al holds regular meetings with representatives from Universities Denmark, an organisation consisting of the eight Universities. At these meetings, the participants discuss selected strategic issues and general themes of relevance to the Danish accreditation system. These discussions feed into the internal reflection and definition or adjustment of procedures.

The involvement of stakeholders has become an important aspect in the continuous development of the agency and as instrumental to consolidate and improve its work. This involvement of stakeholders was particularly relevant in the development of IA 2.0 at various levels. (This will be discussed in detail under ESG 2.2.)

Al also has been promoting the regular participation of students in its activities. Prior to the 2016 ENQA Review the agency had already established the Students' Accreditation Council (STAR). This body operates mainly as a discussion platform and has no formal role in the agency's procedures. However, it has been very important in strengthening the agency's dialogue with students and their representative organisations. Relevant recent examples of its pertinence have been the discussions about IA 2.0 and the integration of a student perspective in it. Moreover, STAR has launched the initiative "Coffee Caravan" in which representatives from the Al visit an HEI in the very beginning of an IA process, inviting students for a free cup of coffee. The purpose is to create awareness of the current review process through a rather informal framework for talking with students about their experience and views on QA matters in a general sense. Although this event is an independent initiative that has no impact on the accreditation, it is contributing to greater awareness about Al's activities and about the relevance of accreditation.

Nevertheless, in the previous ENQA review it was also stated that AI had no inbuilt stakeholder involvement which is related with the fact that AI has no board or any kind of advisory committee and therefore no stakeholders are involved in the governance of AI. Nevertheless, stakeholders are not formally involved in the governance of AI, although higher education institutions and students are present in the Accreditation Council as Board members. Moreover, since AC and AI are supposed to be independent from each other, their participation in AC cannot be relevant for AI. The agency does not have any Board or Advisory Body that could discuss with the management strategic issues or reflect about existing processes and procedures since, as aforementioned in the presentation of the agency, there is no body above its management level.

As it was aforementioned, Al also develops certain activities outside the scope of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), namely assessment of private programmes that qualify for the State Educational Grant and assessment of the qualifications level of programmes in relation to the national Qualifications Framework. The former concerns a limited number of private programmes that do not lead to a formal degree and that is shared with MHES, which uses the outcomes to decide whether a certain programme is admissible to students receiving the State Educational Grant in Denmark. The assessments, that do not involve any external experts (as explained in the SAR, pg, 16), follow a set of predefined processes and criteria and concern aspects related to teaching and learning (i.e. the organisation of the education programme and content, teaching methods, admission requirements, etc). The other type of activity involves assessing the intended learning outcomes of the programme (i.e. knowledge, skills and competences). These assessments are usually requested by different forms of short- or long-term private education providers wanting to make visible the level of the intended learning outcomes of the learning activity or course in question. The assessments are meant to provide potential users and others with a better overview of the private education sector as well as to strengthen the relation and interaction between private and public education. The outcome of those assessments does not lead to any form of official

recognition nor official qualification. Hence, it should be noted that the AC is not involved in these activities, since no formal decisions are taken.

Analysis

Al undertakes activities on a regular basis, since the Accreditation Act demands that public HEIs renew their institutional accreditation every six years. The Accreditation Act defines the function and activities of the AI and its mission in the higher education system, which is mainly accomplished through institutional accreditations. Since the introduction of institutional accreditation AI performs fewer programme accreditations. Institutions receiving conditionally positive institutional accreditation must undergo programme accreditation of new programmes. If an institutional accreditation results in a refusal of accreditation new and existing programmes must undergo programme accreditation (cf. SAR, pgs. 14 and 18). According to the opinion of all stakeholders participating in the review, AI's role is widely recognized as a relevant one, though it may be less known among students, despite its important contribution to quality enhancement in public higher education.

The Danish Accreditation System is characterized by a dual structure in which the design and implementation of assessment procedures is awarded to Al and the decision powers to the AC. The agency considers that there is good collaboration with the AC, which Al regards as a close partner. Although during the site visit the various stakeholders tried to underline the clear division of labour between Al and the AC, it was not always obvious to the panel to draw the line in the interaction between these two entities and how to combine cooperation and solidarity with independence. In fact, the budget transferred from the MHES is common to Al and the AC. Moreover, several stakeholders expressed the view that, though they consider that in general the system operates effectively, more dialogue between the agency and the AC could be beneficial. In the discussions that took place during the review, the representatives of the agency have pointed out, there are regular discussions with the AC (e.g., regarding the development of the new version of IA) and that AC is highly committed to the accreditation process, though the AC is not responsible for the review procedures (as stated in the agency's clarification for factual checks). This poses some challenges that will be elaborated in more detail below in the context of other specific ESGs to which they are considered relevant.

Regarding the current framework, the panel considers that it would be beneficary for Al's professional work to strive for an inbuilt stakeholder involvement within its structures. One possibility would be to establish an Advisory Body that could support the management in its role of designing and implementing assessment procedures. This body could also be a way of institutionalizing the dialogue with external stakeholders, namely with the AC and with HEls. Given the extensive international links of the agency, it would not be difficult to envisage that some of its members would be international, which could also provide relevant insights to the agency, namely in placing the activities of the agency in the wider international trends. The main concern would be to facilitate the dialogue with relevant stakeholders and to consolidate the work of the agency, without making the system more complex or cumbersome. It would be up to Al to find the most effective way to attain that.

Panel recommendations

The panel recommends the agency to address the peculiarities of the dual accreditation system, namely by reflecting on how to consolidate the interdependence of the relationship between AI and the AC.

The panel also recommends the agency to consider the establishment of an Advisory Body or similar that could institutionalize and strengthen the dialogue with the relevant stakeholders, namely with the MHES, the AC and with HEIs.

Panel conclusion: substantially compliant

ESG 3.2 OFFICIAL STATUS

Standard:

Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

2016 review recommendation - none

Evidence

Al was established by law in 2007, as a professionally independent body within the state administration, under the Danish Ministry of Science, Innovation and Higher Education. This was reconfirmed in the Accreditation Act of 2013. The Ordinance from the Ministry sets out the criteria used in Al accreditations. The institution is subject to state regulations, including the Danish Public Administration Act, the Danish Access to Public Administration Files Act and the Ministry of Finance's Budget Guidelines. The organisation and responsibilities of Al have been presented in more detailed in initial part of this report, namely regarding the agency's organisation, functions, activities, and procedures.

Analysis

The status of the agency has not suffered any significant change since the previous review and the comments made at that time were confirmed by the review panel.

Al is recognized as a legal entity under public law and its responsibilities are laid down in the Accreditation Act, which also sets out a framework for the different accreditations of higher education institutions and its programmes. The Accreditation Act also includes a legal framework for the AC, which makes decisions based on Al accreditation reports. This formal legal basis for Al's activities is also confirmed by the overall acceptance among the various stakeholders about the agency's role and mission in Danish accreditation system. The meetings in the online visit have confirmed to the panel that formal and substantive support and recognition exist for the agency's activities.

Panel conclusion: fully compliant

ESG 3.3 INDEPENDENCE

Standard:

Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

2016 review recommendation - none

Evidence

Organisational independence:

According to the Accreditation Act, Al is an independent public authority performing accreditation of HEIs. The Accreditation Act also stipulates the different responsibilities in the accreditation system, where Al has the sole responsibility for the accreditation procedures and the AC takes the decisions based on the accreditation reports prepared by the experts nominated by Al. According to the Accreditation Act the AC is supported by a secretariat which is located within the organisational structure of Al (unit Council Management and Analysis).

The framework presents some relevant features that are important to consider, namely that Al and the AC are 'joint' but 'separate' entities. The Accreditation Act secures independence of Al and the AC, since both work independently from higher education institutions and from the ministry in charge of higher education matters (MHES).

The process of nomination and appointment of AC and AI management is laid down in the Accreditation Act. Regarding the AC, its members are appointed by the MHES based on suggestions by relevant stakeholders and through a formal hearing. They are appointed for a fixed period of four years and are eligible for reappointment once, making it possible for the members and the Chairperson to be appointed for a maximum of eight years. The Accreditation Act also stipulates that the Executive Director of AI is appointed by the minister on the recommendation of the AC.

Operational Independence:

Regarding AI, the agency defines its own procedures and methods regarding the reviews independently from third parties. For instance, in the recent process of development of the new version of IA, the AC did not interfere with this process, though it was consulted and could provide some feedback.

Experts appointed to its panels are nominated solely by the agency and there is no role for other entities (including the AC). An investigation is carried out by the team of accreditation consultants to uncover any potential conflicts of interest.

The AC also takes decisions with total independence from Al and from other entities. Members of the AC are obliged to inform the AC prior to meetings if, in connection with a specific accreditation case, they may be subject to potential conflicts of interest.

Independence of formal outcomes:

Al and the AC act autonomously when fulfilling their role. The Al is responsible for conducting the accreditation procedures. The responsibility for the formal outcome of the accreditation processes rests with the AC. The decision of accreditation is taken by the AC based on the expert panels' review reports, which are briefly presented orally to the AC by the Chair of the expert panel at the beginning of the meeting though the AC is not obliged to follow the recommendations of the expert panel.

Analysis

The evidence presented indicates that there is a significant degree of independence of AI in the various dimensions to be considered in this standard and that there is no evidence of interference from the various relevant stakeholders in the operation and assessment being performed by AI. At the organisational level, this is outlined through its organisational structure, with independence from the decision-making body – the AC.

Al has also developed a strong stakeholder approach, as illustrated through the various settings that supported the development of the new framework for IA 2.0. Regarding operational independence, it is clear that Al follows its defined rules / guidelines for the nomination / appointment of expert panels. This is done with a solid consultation process with HEIs and the AC has no role in this process. Al develops its activity through consistent policy dialogue as well via strong dialogue at the technical level, as in the development of guidelines. During the online review the panel confirmed that all interviewed stakeholders expressed confidence in the independence of the agency, which was combined with intense and fruitful interaction with the various and relevant stakeholders, often phrased as informal dialogue.

Nonetheless, the structure of the Danish accreditation system presents some issues requiring further analysis. The online visit has contributed to clarify the relationship between Al and the AC to the panel. It is clear that the accreditation system implemented in Denmark is based in a relationship of interdependence between these two entities that requires both significant collaboration between the two entities and a clear identification of each entity's responsibilities. The AC should not interfere with Al in its decisions regarding the definition and implementation of its methodologies, namely regarding the appointment of review panels and the content of reports. Nevertheless, it can suggest improvements of procedures, though it is up to Al to decide to carry on those changes.

On the other hand, the Executive Director of Al cannot interfere with the decisions made by the AC regarding accreditation outcomes. The AC has asked in the past for some reports to be revised and improved or clarified. Moreover, the AC does not necessarily follow the recommendations of the review panels. It recognizes that HEIs are not usually happy whenever these differences occur, but it regards it as an indication of its independence.

Hence, there may be a tension between the dimensions of independence to be considered. Each of the bodies may be considered independent from an organisational and operational points of view. Although these two entities are independent, they are inevitably interdependent, since the fulfilment of the accreditation process binds them and the actions of each part has an impact on the other. During the online interviews with AI, AC and with the HEI representatives the panel formed the impression that there was an emphasis on the independence of each of these two bodies that it raised the concern that this could operate in a way that could potentially create unnecessary difficulties and incongruences in the process. Moreover, the agency should strive to leave no shred of doubt among HEIs that this is the case and that the division of labour between the two entities is clear and congruent. An illustration of that risk has been a recent information provided by the AC to HEIs regarding to what degree, HEIs should comply with the expectations stated in the Accreditation Act and criteria in order to receive a positive accreditation, a conditionally positive accreditation or a rejection of accreditation. This communication was issued at a time when the first HEI to go through the recently designed IA 2.0 procedure, was very close to being finalised. This situation has created some uncertainty among some institutions regarding the accreditation process and the final decision to be expected.

This standard was conceptualized to assess the independence of the accreditation process regarding external influences and pressures that could influence the behavior and the assessments of organisations in charge of accreditation. Nevertheless, the Danish system introduces another layer of independence that operates within the system itself and between different entities that have responsibilities in the accreditation process. In the standard organisational framework in most agencies, the decision-making body is independent from review panels, but there is an implicit commitment to procedures and criteria, since these were defined by the same organisation. In the case of AI, its independence means that the AC is not responsible for accreditation procedures (as expressed literally by AI in its response to the draft report), and the independence of the latter means that it could, hypothetically, behave in a way that is not congruent with the procedures and the expectations underlying AI's work.

Although the panel considers that the current system operates in general in an effective and adequate way, the peculiar organisational framework requires that each body operates in an independent way, but with strong communication and solidarity with each other. Thus, the panel considers that there should be some reflection about the underdstanding of independence in this framework and how much independence is needed between the two parts, but that this is sustained in a way that accepts that the two entities are interdependent and cannot operate in a way that disregards the work of the other.

Panel recommendations

The agency should reflect about the understanding of independence between Al and the AC and how to balance between their statutory independence and the necessary coordination and congruence between these two bodies.

Panel conclusion: substantially compliant

ESG 3.4 THEMATIC ANALYSIS

Standard:

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

2016 review recommendations:

The panel recommends AI to clarify the purpose of their analysis, especially in relation to the analysis of EVA and to communicate this to stakeholders.

The panel recommends AI to also consider setting up formal feedback mechanisms on the relevance and usefulness of their analyses.

Evidence

In the beginning of 2020, the Al developed a new analytical strategy, providing an overall framework for upcoming thematic analyses and reports. The development has taken into consideration both internal and external stakeholder views.

Al aims to bring new and existing knowledge on QA, namely through reports and thematic analyses. The results of previous analyses have contributed to internal discussions, adjustments, and improvements in accreditation methodologies. The process of conducting the analyses sometimes creates a more informal setting where the Al gets useful feedback from the HEIs and other stakeholders involved.

The agency develops significant activity in this area. Among recent thematic analyses and reports, mention should be made to the following:

- First Round of Institutional Accreditation differences, common features and consequences (2019)
- Insight: The Knowledge Base of Educations a case compendium on the work on knowledge base at higher educational institutions (2019)
- Calculating Quality: An Overview of Indicators used in External Quality Assurance of Higher Education in the Nordic Countries (2019)
- Principal In Own Learning Student-Centered Learning in a Danish and European perspective (2017)

In 2020, two new analyses have been undertaken, one on gender, gender equality and quality in higher education with an international scope and another on QA of work placement for students.

Analysis

As it was noted in the previous review, Al has been developing a regular and consistent activity regarding the reflection about the results of its activities and its relevance to enform its procedures and methodologies. This has been enformed by a balance between a national Danish perspective and an international perspective.

The agency has a consolidated track record in this respect with several examples of relevant reports and activities. There are several examples of relevant reports and analyses, combining both meta-analysis of the results of the agency's work and discussions of themes that are relevant for the role of quality assurance in the Danish higher education system. The themes are also a combination of system and institutional themes. Moreover, this has been done with clear stakeholder involvement, especially in recent years.

The thematic reports are aimed at a diverse audience, thus are intended to be accessible reports, though each report targets specific stakeholders and topics. All also attempts to adjust the focus due to other projects and initiatives from other organisations and to differentiate their approach from other organisations, notably from EVA.

Nevertheless, the panel considers that the recommendations of the previous ENQA review are still relevant. On the one hand, some of the thematic reports bear a more limited relevance to the

procedures and outcomes of the agency's activities. On the other hand, they could have been developed by other entities, which reinforces the perception of limited specificity of some of the agency's works in this area.

Panel commendation:

The panel commends AI for its significant efforts both in the production of thematic analysis as well as the involvement of stakeholders regarding their topics.

Panel conclusion: fully compliant

ESG 3.5 RESOURCES

Standard:

Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

2016 review recommendation - none

Evidence

Financial Resources

The finances of the AI are secured in a specific budget line in the Budget Law adopted by the Danish Parliament. The budget covers all costs for activities and staff. The Budget is set for a four-year period and adjusted to the variability in the number of review procedures planned. The plan for IA and PA is made in accordance with the resources and as a result of dialogue with the HEIs. Moreover, the agency is able to transfer remaining funds for the following year (to adjust to variations in amount of work), if the MHES agrees with AI that it is necessary.

A smaller income is derived from the assessment of private programmes that qualify for State Educational Grants and the assessment of the qualification levels of programmes in relation to the national Qualifications Framework. This represents a very small share of the agency's total funding.

Human Resources

Al's current staff comprises forty-six employees (41.2 FTEs), distributed between the Management Secretariat (10), the two Professional Secretariats (PEM and UNIK) (22) and the Council Management and Analysis (8). In addition, six part time student assistants handle support functions across the secretariats, namely in supporting the identification of potential panel members for the reviews, doing some desk-research, and supporting the accreditation consultants. Al regards this as sufficient capacity to carry out the daily work in a flexble way. The variability in the volume of reviews means that periods of fewer accreditations are combined with other activities such as thematic analysis, the organisation of events (e.g., with HEIs), or the updating of the Handbook.

The agency is very keen about the motivation and commitment of its staff, though it expressed concerns regarding the career development prospects due to the fact that it has only one major activity (IA). However, the turnover of staff is low, which suggests that this has not been a problem thus far and that the agency has very experienced staff. The planned move to new premises outside Copenhagen does not seem to be a popular change among staff, but the management of the agency expects that it will not pose major difficulties and that it will not affect significantly the current staff. Moreover, recent recruitment processes have attracted a significant and competent pool of applicants. All has in place a development policy for its human resources that aims at continuous learning. There is an annual meeting of performance review with each staff member for individual assessment and planning of the following year and process of mentoring for less experienced staff.

Analysis

During the discussions with AI in the online visit there was the general agreement that the current human resources are regarded by AI as sufficient in number and adequate in their profile and competencies. The panel agrees with this overall assessment and considers that the agency has the quantity and the quality of human resources needed to fulfil its mission adequately. However, the panel considers that the agency should pay attention to ways of renewing the skills and enthusiasm of its staff bearing in mind the narrow range of activities performed by most of its members. Nonetheless, the review panel learned during the online visit that the management is aware of this issue and that is doing efforts to address those concerns.

Regarding financial resources, there were also no major issues and the agency appears to be satisfied by its level of funding. Moreover, since the allocation is planned for several years it provides Al with significant stability and predictability regarding its funding. The panel found no evidence to dispute this conclusion.

Overall, the human and financial resources available to Al contribute to the fulfilment of the agency's mission and a stable and effective development of its activities.

Panel conclusion: fully compliant

ESG 3.6 Internal quality assurance and professional conduct

Standard:

Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

2016 review recommendation -The panel recommends AI to supplement the memo on the quality assurance policy by adding descriptions of the various internal quality assurance procedures including responsibilities, timing etc.

Evidence

Al has adopted an internal Quality Policy, providing an overall framework for internal QA, assuring the integrity of the activities. The Quality Policy is available on the Al's website and emphasises the following areas:

- Professional staff.
- Efficient administration.
- Competent experts and free of conflicts of interest, through recruitment principles and procedures regarding the composition of panels and thorough training.
- Equal treatment of HEIs through consistent application of predefined and published criteria, clear standards, and guidelines.
- Dialogue with relevant stakeholders.
- Internal and external feedback mechanisms.

The Procedure Handbook is the main document that accreditation consultants use on an ongoing basis in the different review processes. It is regularly updated as new processes are introduced and a log is kept of the changes being made. It provides guidelines for accurate, consistent, and systematic review processes. It contains detailed descriptions of the accreditation procedures from start to finish as well as methodologies.

Al regards itself as a small organisation, thus privileging weekly meetings and a close interaction between different staff members from the various units. They also privilege a more informal and adaptive approach depending of the project (length, scope), with a few internal occasions for discussing several issues.

The quality of the review reports of the panels is ensured at several internal feedback meetings. The Al has a practice of using external feedback, including systematic evaluations of review processes. The systematic evaluations are directed at higher education institutions and members of the expert panels. Two types of external feedback are collected: evaluation meetings and experts' panel evaluations. The experts participating in the review processes have several occasions to provide feedback about the procedures, more informally during the process and then in a more formal way, through a written questionnaire, at the end of the review in which they have participated.

Analysis

Al has developed an internal quality policy which addresses various areas of relevance. Moreover, this is supplemented by a Handbook for its procedures. The policy and Handbook have been developed involving staff from all units and improved and supplemented with the procedure handbook.

Al has promoted a strong involvement of various external stakeholders in its efforts regarding continuous improvement. This has clear benefits and the agency should pursue that. Nonetheless, this should also be balanced to keep clear lines regarding the role and responsibility of each side, namely to avoid possible conflicts of interest or intereference.

Despite the benefits of informal and adaptive approach as described above, the panel considers that the size of the agency is not that small and that a more structured approach should be developed regarding the pursuit of internal and external feedback mechanisms.

This need of some more formalization has become even more relevant in the current circumstances, given the effects of the pandemic and the erosion of personal contacts and discussions. Moreover, since the post-covid times may accelerate a trend in working practices towards tele-working and digital interactions, Al should pay attention on how to sustain the level of discussion, sharing, and reflection among its staff and how this can be nurtured by the feedback it collects from internal and external stakeholders in a consequential and systematic way. The agency is aware of some of those concerns and is rethinking some procedures to compensate for the lack of interaction and the more limited sharing among its staff and the various stakeholders.

The need for a more systematic approach to internal quality assurance is important to promote a deeper analysis and an integrated approach of the agency. On several instances the panel considered that there was limited reflection about the Al's organisation and procedures. This was particularly illustrated by the SAR, which was rather short on its analytical and self-reflective dimensions. Moreover, based on the elements collected during the online review, the panel found some difficulties by Al in identifying and justifying certain aspects of its self-reflection, notably its weaknesses, suggests that there is room for improvement. Any organisation has limitations and its identification and analysis is a crucial process for a better fulfilment of its mission and the panel is convinced that the agency has the capacity and competences to address this adequately and effectively.

Panel recommendations

The agency should consolidate its processes of internal reflection and devote more attention to self-reflection, namely by using in a more systematic way the contributions of internal and external stakeholders.

Panel conclusion: substantially compliant

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Standard:

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

2016 review recommendation - none

Evidence

According to the Accreditation Act, and although there is no legal requirement for AI to undergo cyclical external review, AI must comply with international standards regarding accreditation agencies. According to information collected at the online review there is the expectation that the agency system undergoes a review every five years in order to keep its international recognition.

Analysis

Al was reviewed by ENQA in 2010 and 2016. In 2018, a follow-up report was sent on recommendations of the 2016 ENQA review panel. This report is part of its third review for continuous ENQA membership. Furthermore, the law requires a review of the whole accreditation system every five years, which would include Al procedures.

Panel conclusion: fully compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 Consideration of internal quality assurance

Standard:

External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.

2016 review recommendation – The panel recommends Al to advocate for integrating all aspects of part I of the ESG into the accreditation criteria when the envisaged reform of the accreditation system is going to take place.

Evidence

Al addresses the effectiveness of the internal QA processes described in part I of the ESG by means of criteria and by being responsible for implementing these criteria. It does so in three main ways: through the publication of Accreditation Guides that include expectations and guidelines about the criteria; through a continuous dialogue with stakeholders about the criteria; through the reviews in which the criteria serve as the main interpretational framework.

In the first cycle of IA, AI used five main criteria, which were the following:

- I. Quality assurance policy and strategy The institution has a formally-adopted quality assurance policy and strategy for strengthening and developing quality and relevance of the programmes and the local provision of programmes on an ongoing basis.
- 2. **Quality management and organisation** Quality assurance is anchored at management level and is organised and performed in such a way as to promote development and the maintenance of an inclusive quality culture that supports and furthers the quality and relevance of programmes.
- 3. **The programmes' knowledge base** The institution has a practice which ensures that programmes and teaching are always founded on a knowledge base that corresponds to that of programmes of the given type at the given level and provides a firm basis for achieving programme goals.
- 4. **Programme levels and content** The institution has a practice which ensures that programmes have an appropriate level, an academic content and an educational quality that supports students' learning and the achievement of programme goals.
- 5. **Programme relevance** The institution has a practice which ensures that new and existing programmes reflect the needs of society and are continually adapted to social developments and the changing needs of the Danish labour market.

The development of IA 2.0 led to a significant revision of the criteria used, which are nowadays the following:

- I. **Systematic and inclusive quality assurance** The institution has quality assurance that continuously supports the development of the quality and relevance of provision of programmes, including adaptation to societal developments and labour market needs.
- 2. **Knowledge base** The institution has a practice ensuring that education programmes and teaching are always based on a knowledge base corresponding to programmes of the given type and at the given academic level and providing a solid foundation for achieving the goals of the programmes.
- 3. **Level, content and organisation** The institution has a practice that ensures that programmes have the correct level, including academic content, teaching quality, organisation and tests, to support student learning and achievement of the overall intended learning outcomes.

Regarding PA, the criteria used are the following:

- I. **Demand and relevance** The programme is relevant in relation to the demand on the labour market.
- 2. **Knowledge base** The programme builds on the type of knowledge base required by the ministerial rules for the specific type of programme.
- 3. **Goals for learning outcomes** There is a connection between programme content and goals for learning outcomes.
- 4. **Organisation and completion** The organisation and practical completion of the programme supports the achievement of the goals for learning outcomes.
- 5. **Internal quality assurance and development** The quality assurance of the programme complies with the European standards and guidelines for the internal quality assurance at higher education institutions and functions well in practice.

The following table presents the agency's understanding on how part I of ESG has been approached through the criteria established in its procedures:

ESG Part I	Accreditation Criteria		
	IA 1.0	IA 2.0	PA
I.I Policy for quality assurance	I	I	1, 2, 3, 4, 5
1.2 Design and approval of programmes	5	I	5
1.3 Student-centred learning, teaching and assessment	4	3	4
1.4 Student admission, progression, recognition, and certification	4	3	3,4
1.5 Teaching staff	3	2	2
1.6 Learning resources and student support	4	3	5
1.7 Information management	2,3,4,5	I	5
1.8 Public information	I	I	1,2,3,4,5
1.9 On-going monitoring and periodic review of programmes	2,3,4,5	Ī	5
1.10 Cyclical external quality assurance	1,2,3,4,5	1,2,3	1,2,3,4,5

According to the SAR, Al addresses the various items of ESG Part 1 in the following way:

- 1.1. **Policy for quality assurance**: Al reviews look at how the public policies for quality assurance form part of the strategic management of the HEI and how the institutions involve internal and external stakeholders in implementing its policy. How the policy is implemented, monitored, and revised is decided by each institution, as long as it fulfils the accreditation criteria. This is particularly visible in the institutional accreditation procedures, which have become dominant in recent years and will continue to be even more so in the foreesable future.
- 1.2. **Design and approval of programmes**: Al assures whether HEls have processes for the design and approval of their programmes and examines if such processes ensure that programmes meet their intended learning outcomes, the correct level of the Qualifications Framework, and labour

market relevance, among other things. As regards new programme proposals from HEIs, those must first receive a prequalification from RUVU before they are allowed to apply for a PA.6 RUVU issues a prequalification recommendation based on its assessment of labour market relevance, academic relevance and/or regional relevance of the proposed new study programmes. On this basis, the MHES decides if a proposed new programme should be prequalified. If that is the case, Al becomes involved through the PA review to ensure the quality of the proposed programme.

- 1.3. Student-centred learning, teaching and assessment: All reviews assess whether HEIs ensure that students take an active role in the learning process and that their assessments reflect this. As already mentioned, the amendments in 2018 to the Accreditation Act of 2013 meant that All has strengthened this focus further, as IA 2.0 explicitly requires that exams should underpin student-centred learning, that students should be able to achieve the intended learning outcomes of their programmes within the specified time frame, and that the HEIs should use the reporting by external examiners as a QA tool. Regarding the assessment of students, there is a legal requirement that one-third of the exams in each programme uses external examiners. An external examiner should be appointed by and organised in one of the national and sector-specific Censor Corps under the scope of the MHES. Moreover, students can complain to their HEI if they consider that their examinations fail to meet official standards, rules, and procedures. If the complaint is unsuccessful, the student can appeal to a council appeals board.
- 1.4. Student admission, progression, recognition, and certification: Al reviews consider the entire 'life cycle' of students in all review types and ensures that HEIs operate with fit-for-purpose admission, induction, recognition, and completion procedures in a consistent and transparent manner. Any of these activities may be the subject of an audit trail during the IA review. Moreover, a number of by-laws set the requirements for student admission. Complaints regarding admission are handled by the Danish Agency for Science and Higher Education under the MHES. Diploma supplements are issued by HEIs to ensure national and international recognition of higher education qualifications.
- 1.5. Teaching staff: Al reviews examine whether HEIs ensure the competence of their teachers and how an institution demonstrates that its programmes are anchored in relevant academic environments based on updated knowledge of relevance to the programme type and academic level. Procedures for recruitment are regulated by collective bargaining agreements, which impact on the official job structure for teaching staff.
- 1.6. Learning resources and student support: All reviews assess whether all HEIs provide adequate and readily accessible learning resources and student support (e.g., IT, libraries, classrooms, and other study facilities to administrative support systems), and it does so in every type of review, notably by consulting student surveys and interviewing students, teachers, and management during site visits. All Danish HEIs receive government funding, which is primarily a funding per student passing of examinations, thus reflecting the activities of the HEI. Apart from this, there is a basic grant (25 %) and a smaller result-based grant (7.5 %), all of which aim to assure that all HEIs receive adequate resources for teaching and learning activities.
- 1.7. Information management: In AI reviews, HEIs must demonstrate that they collect relevant information and use it effectively in QA and institutional management. Information concerning the provisions of programmes should address knowledge base, study environment, study activity, student evaluations, exam results, dropout rates, graduation time, internationalisation, and employment. To ensure effective QA at institutional and programme level, AI requires HEIs to set standards for both satisfactory and unsatisfactory quality and relevance, to collect the relevant information, to report regularly on the standards, and to implement timely measures.
- 1.8. **Public information**: Al checks whether HEIs publish information about their programmes and other activities and that this information is accurate, up-to date, and readily accessible. In addition, the Act of Transparency and Openness in the Education stipulates that all HEIs publish information about the programmes they offer and the selection criteria associated with them, the intended learning outcomes of these programmes, the resulting qualifications, their teaching, learning and

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⁶ As explained above, RUVU is an advisory committee within the MHES with no organisational link to the Al.

assessment procedures, the graduation and dropout rates, the learning opportunities available to their students, and information on graduate employment.

- 1.9. On-going monitoring and periodic review of programmes: Al requires HEIs to periodically review their programmes for the purpose of ensuring that they achieve the objectives set for them and respond to the needs of students and society. The Al ensures that the institutions use the reviews in a way that improves the quality and relevance of the programmes.
- 1.10. **Cyclical external quality assurance**: The cyclical nature of Al reviews ensures that every HEI becomes subject to an external review process every six years.

Al plays a very important role in fostering the effectiveness of HEIs' internal QA processes. Nonetheless, other entities are involved in regulating certain aspects of part I of the ESG in Denmark. As explained in the presentation of the Danish QA system, important roles are played by the MHES, RUVU, and the External Examiners (Censor Corps).

Analysis

This is usually one of the most challenging ESGs to be addressed by both the agencies and the review panels, given the diversity of aspects covered and the indirect assessment that is often necessary. In the previous review, the ENQA review panel recommended to AI the integration of all aspects of Part I of the ESG in the revised version of the procedures that was then already anticipated.

The SAR described in detail the various aspects of Part I of the ESG and how AI aims to address and seems to cover the main issues. The main change since the previous review was the new format of IA. To a certain extent, it seems that the way that AI has responded to the recommendation to adopt a more integrated manner was to condense the number of criteria in 2.0, when compared to IA I.0. However, the integration seems more apparent, as many aspects that were covered by several criteria were placed under the same, mainly criterion I, which now covers a large number of aspects of Part I of the ESG. The review panel considers that it is rather difficult to encompass such as variety of issues in mainly one criterion and that review panels will have difficulties in assessing the issues covered in ESG Part I with adequate depth with the current framework.

Regarding IA, a relevant change from IA 1.0 to 2.0 was to focus more on the institutions' strategic QA capacity and the need for HEIs to demonstrate their capacity to ensure quality of their programs. Moreover, the agency considers that HEIs that have not passed IA 1.0 cannot go directly to IA 2.0, and they are monitoring the quality of programs through various tools (certain mandatory requirements; other data). There is a monitoring/supervision process, though not yet used.

The teams of experts use examples of programs in the audit trails, though the review panel was not provided with evidence that this done in a systematic way. The choice of audit trails is mainly guided by the needs of the panel and by adopting a more flexible approach that is regarded as fitting the purpose and the differences across HEI.

As the panel learnt during the visit, the perception among HEIs confirms that the procedures have had impact in stimulating the development of greater institutional focus on quality issues. Their representatives acknowledge that the accumulation of experience throughout quality procedures has contributed to the development of a quality culture, a culture of self-knowledge and better organisational understanding in many dimensions. They recognize that Al's role was important for institutional development and that assessment procedures have helped to develop a common understanding about quality and its measurement. This also helped HEIs to develop a more critical and robust attitude regarding different parts of the institution and to assess which ones were stronger and those that are weaker. The amount of information requested has also been very important from a management perspective, as it contributed to highlight strengths and weaknesses that the HEIs have. Nonetheless, during the online visit some representatives of HEIs

expressed the view that there are specific challenges for some HEIs, such as those in Arts, which experience common difficulties to express and measure some aspects of their activities.

Although progress has been made, some stakeholders participating in the review considered that the system should place greater focus on the quality of teaching and research and on outcomes and impacts and less on processes. They also welcome a greater focus on institutional leadership that could ascertain HEI's capacity to be responsible for the enhancement of its quality. One area of particular concern refers to student learning, given the funding system that is in place for some place in Denmark (taximeter), which has led to concerns about the quality and relevance of education, due to the pressure to advance students and nominal success.

Regarding the audit trails, when starting the training of the panel, the content of the report is provided by the HEI and the panel prepares for it by identifying weak/strong points of the report/Institution and the key questions to be placed. As the panel meets before the first visit they select points/questions, they will then decide which ones to pursue deeper. Among the possible themes, mention should be made to issues such as level of dropout or the knowledge base. In the site visit's final meeting, the panel invites the HEI to reflect on audit trails that the panel might consider to include and the management can suggest themes/issues that can be pursued by the panel in the report, though the final decision on the selection of audit trails lies with the panel.

Regarding the depth on programme accreditation, the agency does not look explicitly at the quality of the program and does not set standards, as HEIs are expected to set standards. Al aims to keep the focus of the panel of experts on QA issues and to avoid interfering with other issues that are under the autonomy of HEI (e.g., pedagogical issues). PA is not a relevant procedure for most HEIs currently, since many have been awarded positive accreditation.

Panel recommendations

The agency should reconsider its approach condensing to 3 standards and to evaluate on whether these 3 standards are effective and comprehensive in addressing the whole of Part 1 of ESG.

Panel conclusion: substantially compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

Standard:

External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

2016 review recommendations:

The panel recommends to further reduce workload and the amount of documentation gathered in the institutional accreditations, making clear what data to require and for what purposes.

The panel recommends AI to introduce follow-up procedures in all accreditations.

The panel recommends AI to play the lead role in the discussions about designing new procedures.

The panel recommends AI to intensify stakeholder involvement, in particular in the design of AI methodologies.

Evidence

In the case of PA, the procedure is largely comprised of a fixed set of assessment points that the programme must accommodate. In the case of IA, the institutions are responsible for designing and

applying a system that ensures and develops the quality and relevance of their programmes. The institutions have the freedom to design a QA system that reflects their programmes and any specific features. Hence, in IA there is stronger focus on policies and strategies affecting quality assurance, and holistic assessments are made that consider whether the institution's quality assurance policy and procedures are fit-for-purpose.

In 2013, when the accreditation system was changed, one of the main objectives was to establish a system which put more focus on the need to bolster the internal quality assurance activities that were developing at the institutions. Since 2013, with the introduction of IA, the control perspective on quality assurance was combined with a more developmental perspective. The move from IA 1.0 to 2.0 led to a greater focus on the institutions' strategic QA capacity and the need for HEIs to demonstrate their capacity to ensure quality of their programs. In the online visit the panel learned that this path has been seen as a positive development by various stakeholders, though that the process is still being consolidated through the implementation of IA 2.0 (as very few HEI have experienced most of the process). The current situation combines a stronger focus on achievements and outcomes and some remains of a prior greater focus on the internal procedures regarding QA.

The involvement of stakeholders was particularly relevant in the development of IA 2.0 at various levels. This was reflected in several meetings and regular discussions aiming at a differentiation and simplification of procedures. Thus, prior to developing the new version of IA, there was an external evaluation of the first version. One of the major outcomes of this process of reflection was the preference, especially among HEIs, for a reduction and better clarification of the assessment criteria. The criteria of IA 2.0 cover the same subject matter, but, in terms of content, the agency considers that they are now organised in a more coherent way. Moreover, in IA 2.0 the focus is, among other things, strengthening the capacity and the responsibility of HEI regarding QA and their development. Thus, the Accreditation Guide for the new cycle of IA was developed in dialogue with key stakeholders such as the HEIs, Rectors' Conferences from the different sectors in Danish higher education, national students' associations and representatives from the Danish labour market.

The development of IA 2.0 has provided an opportunity for further institutional differentiation, which has benefited from greater involvement of external stakeholders and in particular of HEIs' contributions. Since the higher education sector is composed of institutions that have different profiles, sizes and institutional frameworks, an important aim of the new cycle of IA is to allow for greater differention regarding the approaches to QA, provided the system was solid and fulfilled the criteria for quality and relevance laid down by ministerial regulations.

Some features have tried to promote greater differentiation, which was one of the main conclusions of the reflection that preceded the formulation of this new cycle of IA. Other relevant aspects were greater simplification, some degree of continuity with the previous cycle, and the emphasis on a developmental approach. The emphasis on differentiation is certainly connected with this developmental approach, as it focuses more on the specificities of each institution and its potential, hence, the emphasis on strategic development. On the other hand, the choice of using audit trails is another way to ensure methodologies are fit-for-purpose, which strengthens the possibility that the panels have to select several relevant areas of interest that they can examine more closely.

Analysis

The development of IA 2.0 with a greater involvement of stakeholders was considered as very positive by the agency and HEIs, and that has underlined the relevance of a continuing relationship and dialogue with the HEIs. The dialogue contributed to a less burdensome process and to some differentiation according to the profile of the institution, e.g., paying attention to the type of degrees awarded by each institution. Also in the guidelines, the agency is perceived as having attempted to show, when relevant, that there is some more flexibility. Nonetheless, this is up to a certain point, as HEIs considered that the main standards and criteria were kept.

The development of IA 2.0 has presented several positive features. However, its implementation is still in its early phases, with no major results. Thus, Al should pay attention to the changes that has been made in 2.0 – if and how it ensures the aims and the objectives that has been set. There is more focus on development and less on control. The question is how much this has actually contributed to simplification and reduced the workload. The audit trails may be a crucial issue in its effectiveness, though it is still too early to make any conclusions regarding on how the changes met its expectations.

The effectiveness of accreditation procedures is clearly related to the level of engagement of HEI, which can be challenging to sustain, especially after some cycles of assessment. Hence, in the involvement of stakeholders it is very important to ensure that they have a real impact in promoting their aim of enhancing the quality of education. Moreover, this requires that the time and dedication of HEIs and their staff is used in a selective way to avoid fatigue. The agency recognizes that its effort to engage with stakeholders, especially regarding the development of the second cycle of IA, was very positive. It helped to improve and change the approach and not merely repeat it. It also contributed to place greater emphasis on quality-enhancement and in promoting a developmental approach and to balance the control and accountability dimensions that were more dominant in the previous cycle of accreditation. Although, the process is still in its initial steps and it may require some fine-tuning, its development was characterized by a strong dialogue with stakeholders.

Regarding the profile of the Institutions, there has been some debate about the issue of size, but not so much about the mission or scope of the individual institution. The panel considers this as an area of concern since the degree of depth attained in an institution can be very diverse when comparing a smaller HEI with a few areas or programs to a large comprehensive HEI. The Accreditation Act has created the possibility for bigger institutions to choose to have IA only for a part (e.g., Department or School), though no HEI has chosen this thus far. This option seems rather unlikely since HEIs do not have a strong incentive to choose it, as it would multiply the number of procedures and increase significantly the amount of work involved. Hence, review panels may face some relevant limitations regarding its adequacy to assess effectively large and comprehensive HEIs and AI should reflect on how to address that in a more robust way.

Panel recommendations

The panel recommends that the agency should develop a continuous monitoring to its comprehensive approach, especially regarding the idea of differentiation and fitness for purpose. In particular, the agency should reflect on how to make the current system of IA effective for large and comprehensive institutions.

Panel conclusion: substantially compliant

ESG 2.3 IMPLEMENTING PROCESSES

Standard:

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:

- a self-assessment or equivalent
- an external assessment normally including a site visit
- a report resulting from the external assessment
- a consistent follow-up

2016 review recommendation: The panel recommends AI to introduce follow-up procedures in all accreditations.

Evidence

Overall, there are three phases in an IA process (cf. figure 1.1. in the SAR):

- 1. Introduction, including start-up meetings, setting up and training the expert panel
- 2. Documentation, including self-assessment and site visits
- 3. Reporting, decision and follow-up including the accreditation report, hearing at the institution, AC decision, and follow-up.

The process for IA reviews in IA I.0 and IA 2.0 is similar, though there are some minor differences. All processes and criteria are pre-defined and published and are described in detail in the Guides (Guide to Institutional Accreditation 2.0, Guide to Institutional Accreditation I,0 and Guide to Accreditation of Existing Programme). The guides include guidance to the HEIs on how to report on each criterion. The guidelines are available in the website, including a step-by-step decription of the review process. Every review process includes a self-evaluation report (term used for Al I.0) or Institution report consisting a system description and a self-assessment (Al 2,0). For Al 2.0, the Institution report lays the foundation of the expert panel's first site visit. Both IA and PA require site visits (except for accreditation of new programmes). The IA review includes two site visits. As for accreditation of existing programmes, there is one site visit, aiming to validate and deepen the institution's written documentation. The expert panels submit their assessments in a report.

As for accreditation of existing programmes, there is one site visit, aiming to validate and deepen the institution's written documentation. Hence, there is no site visit in the process of accrediting new programmes.

A positive IA is valid for six years. For institutions and programmes with a positive accreditation, follow-up by the AI is only carried out once the institution or programme again forms part of the rotation cycle. As regards IA, the HEI will always receive non-binding recommendations from the expert panel. The non-binding recommendations or minor critical factors have no bearing on the formal decision (cf. SAR, pg. 53). It is up to the institutions alone to act on the minor critical factors and the non-binding recommendations. The dialogue with the institutions concerning the most recent revision of the accreditation guidelines also resulted in the institutions indicating that there was no desire to introduce a formal follow-up between a positive accreditation and the next accreditation.

Institutions or programmes with a conditionally positive accreditation fail to meet one or more accreditation criteria. The duration of a conditionally positive accreditation is three years or less. Within a maximum of three years, the AC has to make a follow-up decision. During this time, changes and improvements can be implemented to the institution or programme in the areas that were determining for the conditionally positive accreditation (cf. SAR, pg. 53). Usually, only the criteria stated by the AC to be problematic are subject to assessment in the subsequent review process. However, if major changes covering other criteria have been made at the institution or to the programme to solve the problems, these criteria can also be subject to a follow-up assessment. A key point in a follow-up process is that the institutions need to find their own solutions to the problems pointed out by the panel and the AC. The responsibility rests with the institutions since they must have the autonomy to decide for themselves which alterations and developments are deemed fit for the specific programme or problem at the institution. Institutions that receive a refusal of IA have to return to PA for their existing programmes. Based on dialogue, the institution and the AC determine when the institution can re-apply for IA. Following a refusal of IA, the institution cannot establish new programmes until the AC has made a new decision to either award a conditionally positive or positive accreditation.

Programmes which receive a refusal of accreditation cannot be approved and thus lose the right to public financial subsidies and the institution loses the right to award a degree for the programme in question. The MHES must subsequently lay down a plan for how students enrolled in the study programme can complete their studies in a manner, which is most expedient for them.

Analysis

As it was already mentioned, the development of the current set of methodologies was based upon significant discussion with external stakeholders, namely with HEIs, to make procedures more effective and efficient. Based in the evidences collected during the review, the panel considers that the external quality assurance processes are reliable, useful, and based in pre-defined rules. These procedures also include the main aspects required, namely

a self-assessment or equivalent, an external assessment that normally includes a site visit, the elaboration of a report resulting from the external assessment, and a follow-up (though this is not always implemented, as explained above).

The process is collaborative between AI and the panel of experts, namely regarding the list of documents to be requested. There has been a greater attention to this matter (specially to reduce the burden to the HEIs), though it is still acknowledged that a lot of documentation is required. The HEI acknowledge that the current version (2.0) involves less documentation, but possibly a bigger burden because it is more specific and require that the HEI need to be selective in deciding what information they select. They regarded IA 2.0 as an improvement, namely due to the guidelines, but the actual experience is more mixed and some HEIs feel some uncertainty, namely about the whole process and the information needed. The agency recognizes that it is still working on ways to make it less burdensome, e.g. going through the materials and trying to be selective of the relevant information.

Moreover, HEIs consider that more than the quantity of documentation to be provided, the relevance is to the complexity of the information requested whose collection is time-consumming. This is also reflected in the length of the process, which is expected to last a year from the moment AI receives the report and the AC's decision. However, before the report there is interaction to prepare the SAR by the HEI, which means that for HEIs the process of IA is clearly longer than one year.

Overall, there is the perception that the effectiveness of the procedures has increased over time as the agency has become more experienced. The first round of IA was more uneven, but there was a learning curve that is considered as very satisfactory. Moreover, the second round of institutional reviews is regarded by different stakeholders as demanding, since HEIs need to show that their internal QA system has been effective and that the institution acts effectively. This is also promoted by much more detailed audit trails and the fact that review panels interview more people than in IA 1.0. This evolution was already observable in the last reviews of 1.0, possibly influenced by the model 2.0 being developed.

Moreover, there is the possibility of follow-up procedures in all significant types of reviews. This follow-up is not compulsory in the case of unconditional accreditation, as a result of the dialogue between AI and HEIs, but it is compulsory in relation to conditionally positive accreditation and refusal of accreditation. The review panel considers that this shows that AI has taken seriously into account the recommendations of the previous ENQA review panel and that there are clear provisions in place for the relevant situations requiring a follow-up.

As explained in the SAR (pg. 53), the implementation of the procedures is a shared responsibility between Al and AC. The former is is charge of most of the accreditation process, but AC is the one in charge of the decision regarding accreditation and the definition of which aspects should be covered in a follow-up (if there is one). Hence, there is the need for significant articulation between the two bodies in order to ensure consistency and effectiveness. The panel thinks that there is significant willingness on both sides to cooperate towards that purpose, but that the dual structure of the accreditation system requires attention to that in order to avoid any lack of clarity or inconsistencies in the implementation of the various steps of EQA processes.

Panel recommendations:

The agency should strive to improve the degree of coordination with the AC regarding guidelines and decision-making processes in order to ensure greater clarity of the whole review process in IA 2.0.

Panel conclusion: substantially compliant

ESG 2.4 PEER-REVIEW EXPERTS

Standard:

External quality assurance should be carried out by groups of external experts that include (a) student member(s).

2016 review recommendation - none

Evidence

Al uses external experts as members of the expert panels. The Al has adopted principles (cf. procedure handbook "The accreditation panel" and "Researching individual panel members") for the recruitment of members for the expert panels which ensure international representation as well as participation by a student and an expert with knowledge of relevant labour market conditions (except in accreditation of new programmes the panel does not include a labour market representative). There is communication with other national agencies, namely within Nordic countries, especially since most of reviews are done in Danish, and the agency has built a good network of contacts with other agencies for that purpose.

All experts must fulfil the prerequisites for being able to assess the institution/programme. To ensure this, a number of requirements have been laid down for the individual types of expert panel on which the selection is based. When selecting experts, Al pays attention to the type of procedure, since it considers that the profile adequate for IA is different from PA. This specificity is also relevant in the new version of IA with the audit trails, in which fitness for purpose is also relevant in the selection of experts and the profile of the institution being reviewed. There is as well an assessment of potential conflicts of interest based in the putative reviewers' declarations and the agency's own research.

The IA panel (whether 2.0 or 1.0) typically consists of four to six members, including the Chair of the panel, academics, a labour representative, and a student representative. The Chair of the panel acts as meeting facilitator during site visits and at meetings internally with the panel. Panels includes both Danish and international members, typically from other Scandinavian countries where Danish is understood. The number of panel members depends on how the overall pool of competences can be covered by the experts in the particular situation and on the size and nature of the institution.

In the case of PA, each panel consists of three to four members. The panel is composed in such a way as to cover the disciplines and subject areas of the programme from an academic perspective. The expert panel includes an employer representative, two subject experts and a student. For University programmes, the subject area experts are academics conducting research within the same area at an institution outside Denmark, to get an international perspective. In the case of accreditations of new programmes, the panel consists of two subject area experts and a student. There is no employer representative in the panel, since new programmes to be accredited only include those already approved by RUVU, which decides whether there is a need for the programme on the labour market.

The members of the expert panel in all types of accreditation participate in a training session. In the case of IA, the sessions last one-and a-half days for IA 2.0 and one day for IA 1.0. The main purpose of the training (for both IA and PA) is to enable the panel members to carry out assessments of the quality of higher education within the Al accreditation concept. Thus, they obtain:

- Knowledge about accreditation in Denmark and about the Danish educational system;
- Knowledge of and insight into the review process and the accreditation criteria;
- Training on procedural issues and communication.

In the case of PA, the training of the individual panel members can take place as a physical meeting with all panel members. Mostly, this panel training is performed via telephone or skype. There are modules of training, though the agency trains the experts on specific situations and adjusts the content for specific institutions or evaluations.

Analysis

Based on the evidence provided the panel is conviced that the agency has a robust process for the selection of experts in place and pays visible attention to the issue of conflicts of interest. The training has been perceived by experts as very relevant, namely to calibrate the different reviewers' attitudes and to help them to learn how to decide in a collaborative way.

The agency makes a visible effort to attract international experts, students, and practitioners. Overall, the panel considers that the agency is working with an experienced and diverse pool of experts that combines good knowledge of the Danish system and a regular update on QA issues. This sustains a choice balanced and adequate expert panels that provide a major contribution to the robustness of the QA procedures.

Panel commendations

The panel considers that the agency should be commended for its degree of international experts and for the strong involvement of students in their review procedures.

Panel conclusion: fully compliant

ESG 2.5 CRITERIA FOR OUTCOMES

Standard:

Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

2016 review recommendation - none

Evidence

Accreditation outcomes are based on predefined and published criteria laid down in the Accreditation Act. The criteria and subcriteria are publicly available via the Al's website, the AC's website, and the public legislation website.⁷

In the first cycle of IA, AI used five main criteria, which were the following:

- I. Quality assurance policy and strategy The institution has a formally adopted quality assurance policy and strategy for strengthening and developing quality and relevance of the programmes and the local provision of programmes on an ongoing basis.
- 2. **Quality management and organisation** Quality assurance is anchored at management level and is organised and performed in such a way as to promote development and the maintenance of an inclusive quality culture that supports and furthers the quality and relevance of programmes.
- 3. **The programmes' knowledge base** The institution has a practice which ensures that programmes and teaching are always founded on a knowledge base that corresponds to that of programmes of the given type at the given level and provides a firm basis for achieving programme goals.

⁷ The Guideline is available and published on Al's website and where the sub-criteria can be found: https://akkr.dk/wp-content/filer/akkr/Vejledning-om-institutionsakkreditering 2 0 web.pdf. AC has a link to Al's website.

- 4. **Programme levels and content** The institution has a practice which ensures that programmes have an appropriate level, an academic content and an educational quality that supports students' learning and the achievement of programme goals.
- 5. **Programme relevance** The institution has a practice which ensures that new and existing programmes reflect the needs of society and are continually adapted to social developments and the changing needs of the Danish labour market.

The development of IA 2.0 led to a significant revision of the criteria used, which are nowadays the following:

- I. **Systematic and inclusive quality assurance** The institution has quality assurance that continuously supports the development of the quality and relevance of provision of programmes, including adaptation to societal developments and labour market needs.
- 2. **Knowledge base** The institution has a practice ensuring that education programmes and teaching are always based on a knowledge base corresponding to programmes of the given type and at the given academic level and providing a solid foundation for achieving the goals of the programmes.
- 3. **Level, content and organisation** The institution has a practice that ensures that programmes have the correct level, including academic content, teaching quality, organisation and tests, to support student learning and achievement of the overall intended learning outcomes.

Following the SAR (pg. 59), regarding PA, the criteria used are the following:

- **I. Demand and relevance** The programme is relevant in relation to the demand on the labour market.
- **2. Knowledge base** The programme builds on the type of knowledge base required by the ministerial rules for the specific type of programme.
- **3. Goals for learning outcomes** There is a connection between programme content and goals for learning outcomes.
- **4. Organisation and completion** The organisation and practical completion of the programme supports the achievement of the goals for learning outcomes.
- **5. Internal quality assurance and development** The quality assurance of the programme complies with the European standards and guidelines for the internal quality assurance at higher education institutions and functions well in practice.

Regarding the preparation of expert reports, Al's staff provide regular feedback to expert panels with the aim of achieving a sound level of consistency of various reports by the expert panels. During the online review it was stated that these feedback processes can also include meetings with management offering the review coordinating staff member to discuss challenges arising in report process

Analysis

The dialogue with stakeholders in the preparation of IA 2.0 was regarded as having contributed to relevant differences between the first and second cycles, namely the latter being more explicit about the expectations/boundaries of the review and being more precise about specific criteria and dimensions. This has contributed to greater consistency in the process, being acknowledged by the various participants in the process: panel of experts, HEIs, and AI.

The panel confirmed that HEIs also consider that the process is the same for all, though some expressed the view that the profile and size of the HEI may have some influence in the process. This is more significant given that there is a shared responsibility between AI and the AC, though AI can not interfere with the AC's decision. Even though this has not been considered to be a major problem by HEIs, it is an area to which the agency should devote some attention to dispel any real or subjective perception of inconsistiencies or differences of treatment. Hence, more

robust provisions should be in place to prevent that idiosyncracies of the process may influence the outcome and the way each institution is assessed.

The dual structure of the Danish accreditation system was also highlighted in this respect, with some stakeholders expressing the view that the more robust the process on the side of AI, the fewer the risks of interference from the AC. As it was analysed in ESG 2.3. the implementation of QA procedures is a shared responsibility and that requires substantial coordination between the two entities in order to avoid inconsistencies and unexpected outcomes at the end of the procedures for the HEI. Moreover, and although the AC was perceived as being more interventive in IA 1.0, its recent communication on their understanding of the expectations regarding IA 2.0 was not welcomed by several stakeholders (namely the HEI) since it was seen as an additional layer to what had been provided by AI. Although it may not introduce contradictions in the process, it was recognized during the online visit by several stakeholders as causing some concern. Although all QA processes may face inevitably some minor variability, the panel considers that AI should pay more attention to these concerns and therefore the panel recommends that AI and AC strive to ensure consistency in the implementation and decision-making.

Panel recommendations:

The panel recommends that the agency should devote greater efforts to design clearer and consistent criteria regarding decision-making and review processes in a coordinated way with AC to avoid any uncertainty.

Panel conclusion: substantially compliant

ESG 2.6 REPORTING

Standard:

Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

2016 review recommendation – The panel recommends AI to consider giving recommendations in all reports and to add a summary to the reports.

Evidence

Al organises the reports of its review procedures according to a template. There are various report templates for IA 1.0 and PA and the templates provide a graphic framework and include some guidance intended to assist on the structure, format and content of the report. The process of elaboration of the report is prepared by staff members of the agency involved in that review, who then pass it to the panel for revisions, and subsequent revisions by the agency for fact-checking. This revised version then goes for institutional hearing and after that it is finalized and sent to the AC for a decision. The procedure handbook provides a detailed description of the report writing process, and during the writing process the management through several meetings with the teams gives feedback on the criteria assessment, the recommendation etc.

A summary of assessments in a clear and plain language and the recommendation to the AC on the accreditation decision are placed at the beginning of the report, thus providing an easily accessible summary of the panel findings for interested individuals or the general academic community within the higher education sector.

All review reports, including those that resulted in a negative decision (conditionally positive or refused, are published on the AC's website together with its decision. There is a direct link to these reports and decisions on the Al's website as well.

Since the review in 2016, Al has continued to work on report format in relation to IA. The work on designing the final format for the IA 2.0 report is currently underway and will be used for the first time for the decision taken by the AC in March 2021. The process concerning the development of the IA 2.0 report format included consultation with a broad range of institutions. In this new version of IA, the agency would like to make the reports significantly shorter and clearer. This would mean trying avoid repetitions and to make the conclusions clearer. It would be aimed at making the views of the panel more forceful and to make clearer what is good and not so good in the institution being reviewed. Furthermore, Al also wants to strengthen the developmental part of the report, in line with the approach adopted in this new cycle of IA.

This developmental part needs to be framed in a way that the non-binding recommendations presented do not compromise the autonomy of the institutions. They do not intend either to curtail the institution's capacity to indentify and pursue its own solutions to the problems presented, which is also coherent with the view that HEI should take increasing responsibility for its QA and continuous improvement. This should be the case even in those circumstances where the institution receives a conditionally positive accreditation or a refusal of accreditation.

Analysis

The panel has analysed the templates available for the reports and considers the structure and format of AI reports to be adequate. Moreover, the process of development of the templates for the new cycle 2.0 seems to suggest relevant improvements. On the one hand, there have been visible effort to make the reports clearer and more concise. On the other hand, the emphasis on the developmental approach is also being reflected in the template being prepared. The fact that this template was developed in dialogue with external stakeholders has certainly contributed to improve the process and will be positively reflected in the final version.

The agency has also been trying to make reports more accessible, namely through the summary of the main conclusions of the report. This was one of the recommendations by the previous ENQA review panel. Nonetheless, the fact that many students are still unaware of the work of the agency should stimulate the agency to go further and find creative and effective ways to communicate the mains results of its activity to one of the its more relevant stakeholders. The review panel considers that Al is on the right path to address these issues with STAR projects such as guidelines for Student involvement in Accreditation processes and that Al should pursue these initiatives further.

The panel is conviced that AI is committed to make the reports consistent with the evaluation procedures and criteria and balanced across different panels and reviews, namely through detailed guidelines provided in the procedure handbook. This is also supported by regular communication in the drafting of the report. Nonetheless, during the online meetings, the panel became aware of perceptions among some stakeholders that reports can vary somehow in their robustness and quality. Moreover, they have the view that the more robust the process and reports coordinated by AI, the more predictable and consistent is the decision by the AC. This means that there is a crucial role of being played by staff involved in a specific review and by the Panel Chair in the way the report is written. Although all QA processes may be somehow influenced by the composition of the panels and the specificities of the institutions being reviewed, the panel considers that AI should pay more attention to these concerns and establish more formal processes to ensure greater consistency in reporting.

Panel recommendations

The agency should devote more attention to the consistency of reports to avoid the perception among some stakeholders that these reflect the quality and commitment of the reviewers.

Panel conclusion: substantially compliant

ESG 2.7 COMPLAINTS AND APPEALS

Standard:

Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

2016 review recommendation – The panel would recommend AI to formalise and make transparent to all HEIs when and how opportunities are given to complain.

Evidence

During a review process, the institutions are always given the opportunity of a formal hearing, namely:

- on the composition of all panels and to identify any potential issues on conflicts of interest;
- on the draft report and comment on factual errors or misinterpretations;
- if the AC decides against the panel's recommendation, the institution is invited, in an additional formal hearing, to provide any views and information that it may deem relevant. This only applies in situations where the decision is to the disadvantage of the institution, or if new specific circumstances have to be considered.

If the institution finds that the cooperation with the accreditation panel is not progressing satisfactorily, the institution can contact the project owner from Al. If the institution is not satisfied with the project owner's position on any objections, the institution can always approach Al's Executive Director.

According to the Danish Public Administrative Law, decisions made by administrative bodies such as the AC are final and cannot be referred to other administrative authorities, which means that the Minister or other parties, cannot interfere or reverse the AC's decision concerning accreditation. However, institutions can appeal to the Ministry if they feel the panel's assessment is inconsistent with criteria. If the MHES agrees with the appeal, the AC is forced to reconsider.

It is possible to appeal against legal errors and omissions in the accreditation procedures to the Minister within fourteen days of the AC's decision. The institution may appeal about legal deficiencies in the AC decision, with the concept of legal defects covering a number of issues. HEI's appeal to the MHES may lead to the annulment of the decision if there are legal deficiencies.

Finally, HEIs may also appeal to the Danish Ombudsman if they disagree with the decision of the MHES regarding the institution's appeal. The Ombudsman decides whether s/he will deal with the appeal. The Ombudsman will look at whether the decision is legally deficient, but can also focus on whether AI has acted in accordance with "good governance". The Ombudsman may call on the MHES to reopen the case if deficiencies are discovered.

In recent years there was only one appeal regarding a decision of the AC, with a HEI arguing that the decision was inconsistent. However, the institution was unable to win the argument and the AC's decision prevailed.

Analysis

This ESG was an area of concern in the previous review. The agency has attempted to address the issues raised in the previous review, namely the possibilities of complain and appeal. Thus, Al has provided evidence that a system of complaints and appeals exist, though it tends to be focused on procedural issues. During the review, the representatives of HEIs indicated that they were aware of this process and about the possibilities of appeal and complaint.

The agency has underlined that the hearing process has been taken very seriously and it argued that it is part of an intense dialogue with each HEI. It also argued that the fact that there has been only one formal complaint has been presented as an illustration of the degree of satisfaction and effectiveness of the current system. Moreover, it has indicated that there were many instances in which they have changed assessments of specific criteria based on the feedback by

HEIs. As explained in the SAR and underlined during the online site-visit there is a formal hearing process to comment on the draft report and comment on factual errors or misinterpretations.

The experience of HEIs tend to confirm the views of the agency and corroborate the perspective that there are many opportunities for consultation and that their criticisms (e.g., regarding the composition of the panels and regarding observations in draft reports) have been heard and had consequences. The institutions participating in the ENQA review expressed the view that they had more limited awareness about the appeal procedures in the past, especially regarding more formal complaints, though they considered that there has been a clear effort from the agency in making those possibilities more visible and known among HEIs. This can be seen as a positive improvement and a consequence of ENQA's previous review.

The panel recognizes that the agency has attempted to make the process of appeals and complaints more visible and better known by HEls. Moreover, the panel is also aware that there are also legal limitations that condition the specificities of these procedures in the Danish system.

Nevertheless, the panel considers that the current system presents relevant limitations and that there are improvements that could be made within the current system. One of the most relevant ones would be the establishment of a separate body that could analyse the institutions' complaints within the remit of the agency. This could be composed of individuals knowledgeable of the Danish QA and HE systems and familiar with Danish legal system, but not involved in the specific review procedure. Given the size of the HE system and the potential risk of conflicts of interest, it could be desirable to have at least part of the members of that body coming from other HE systems, which should not be a major challenge given the degree of international collaboration developed by AI.

Panel recommendations

The agency should consider the establishment of a separate body that could analyse the institutions' complaints within the remit of the agency.

Panel conclusion: substantially compliant

ADDITIONAL OBSERVATIONS (optional section)

EXTERNAL QUALITY ASSURANCE IN DENMARK - INTERDEPENDENCY

During the online-site visit the review panel met experts for quality assurance, committed staff, and leaders from public HEIs, representatives from the Ministry and other bodies, and as well open-minded students. All of them were very engaged in promoting quality in higher education in Denmark and Al is a well-considered part of this, being regarded as a key actor in quality assurance in Denmark. In other words, Al is to be considered as a core agent, a key driving force in the implementation of a comprehensive framework (IA 2.0) aiming at fostering the effectiveness of HEIs' internal quality assurance and the nurturing of quality culture in Denmark.

At the core of the review panel's reflections and discussions during the preparatory meetings, the online site visit and the debriefing sessions was the concept/the notion of interdependency, especially between AI as the operator/implementing body of external quality assurance procedures and AC as the decision-making body. Notwithstanding, the panel clearly understood the division of responsibility between the two – independent bodies as defined by the Act on Accreditation.

The concept of independence might be also considered as a concept of interdependency. Without a professional conduct of external quality assurance procedures the decision-making body will not be in the position of taking relevant decisions independently. While doing so reciprocal understanding of each other's remit of responsibility is important. This is even more of importance since the structure of external quality assurance, which was developed over the last years, is following a comprehensive approach/framework.

The IA 2.0 is to be understood as framework, which in its process of implementation requires a well-based understanding of its embedded needs for differentiation regarding the various HEIs (type, size etc.). Beyond the process of implementation, differentiation is as well required for the decision-making. In order to be 'fit for purpose' (fostering the effectiveness of HEIs' internal QA processes) consistency in the implementation should be followed by consistency in decision-making. Al has invested huge efforts to further develop the scheme of IA jointly with its relevant (internal/external) stakeholders, based upon key input from AC.

The framework for IA 2.0 is to be understood as outcome of shared reflections and discussions taking into account experience and expectations of all relevant stakeholders. The framework takes the needs of the stakeholders into account and it aims at the provision of a sound scheme of external quality assurance, supporting and striving for good quality of (public) HEIs' provisions for the needs of labour market and the society at large. Al has demonstrated its commitment to stakeholder involvement not only during the process of further development of the IA 2.0, but with its development of the strategic approach regarding thematic analysis as well.

While AI (and therefore also the AC) plays, as aforementioned, a key role in fostering the effectiveness of HEIs' internal QA processes, other tasks, which are possibly more strongly linked to programme accreditation, are under the remit of responsibility and regulation of e.g. the Ministry, RUVU, and the Censor Corps. There is of course, again, a level of interaction/interdependency between these various bodies.

Interdependency is therefore to be understood as 'shared responsibility' for the implementation of ESG part I and again for good quality of HEIs' provisions. The level of interaction is clearly defined by the various laws and regulations and does finally not hinder AI's required degree of independent operations, nor does it inhibit AC's decision-making. Interaction, interdependent acting in the given scheme of shared responsibilities underlines that 'quality assurance' is not a sole endeavour of a quality assurance agency, but requires a common understanding and a sound openness for dialogue and vice-

versa stakeholder involvement. Thus, we encourage Al to view that interdependence as an opportunity, rather than a hindrance to better fulfil its mission.

EXTERNAL QUALITY ASSURANCE IN DENMARK - PRIVATE PROVISIONS

As stated before, HE in Denmark is dominated by public HEIs and their provisions. Private institutions' programmes do not lead to official degres and are not regulated by law, thus are outside the remit of external quality assurance. Al can offer its services to private institutions in two cases: Assessments of a limited number of private programmes, leading to no formal degree, that qualify for State Educational grant ("SU-vurderinger") and assessments of the qualification level of some private programmes in relation to the national qualifications' framework ("Niveauvurderinger"). In case of the assessments qualifying for State Educational grant, Al's work is preparatory for the Ministry.

The assessments for private programmes to the national qualification framework do not constitute a public recognition neither by Al nor by the Ministry. In both activities, Al operations are not linked to a formal decision taken by the AC, since those activities are outside of the scope of the ESG.

Depending on the future development of private institutions, it might be pertinent for AI to explore possibilities regarding (voluntary) forms of external quality assurance for such providers and their programmes that may address key elements of the ESG.

CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 3.4 Thematic analysis

The panel commends AI for its significant efforts both in the production of thematic analysis as well as the involvement of stakeholders regarding their topics.

ESG 2.4 Peer-review experts

The panel considers that the agency should be commended for its degree of international experts and for the strong involvement of students in their review procedures.

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, AI Denmark is in compliance with the ESG.

PART 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 Activities, policy, and processes for quality assurance - Panel conclusion: substantially compliant

Panel recommendations

The panel recommends the agency to address the peculiarities of the dual accreditation system, namely by reflecting on how to consolidate the interdependence of the relationship between AI and the AC.

The panel also recommends the agency to consider the establishment of an advisory body or similar that could institutionalize and strengthen the dialogue with the relevant stakeholders, namely with the MHES, the AC and with HEIs.

ESG 3.2 Official status - Panel conclusion: fully compliant

ESG 3.3 Independence - Panel conclusion: substantially compliant

Panel recommendations

The agency should reflect about the understanding of independence between Al and the AC and how to balance between their statutory independence and the necessary coordination and congruence between these two bodies.

ESG 3.4 Thematic analysis - Panel conclusion: fully compliant

ESG 3.5 Resources - Panel conclusion: fully compliant

ESG 3.6 Internal quality assurance and professional conduct - Panel conclusion: substantially compliant

Panel recommendations

The agency should consolidate its processes of internal reflection and devote more attention to self-reflection, namely by using in a more systematic way the contributions of internal and external stakeholders.

ESG 3.7 Cyclical external review of agencies - Panel conclusion: fully compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 Consideration of internal quality assurance - Panel conclusion: substantially compliant

Panel recommendations

The agency should reconsider its approach condensing to 3 standards and to evaluate on whether these 3 standards are effective and comprehensive in addressing the whole of Part I of ESG.

ESG 2.2 Designing methodologies fit for purpose - Panel conclusion: substantially compliant

Panel recommendation

The panel recommends that the agency should develop a continuous monitoring to its comprehensive approach, especially regarding the idea of differentiation and fitness for purpose. In particular, the agency should reflect on how to make the current system of IA effective for large and comprehensive institutions.

ESG 2.3 Implementing processes - Panel conclusion: substantially compliant

Panel recommendation

The agency should strive to improve the degree of coordination with the AC regarding guidelines and decision-making processes in order to ensure greater clarity of the whole review process in IA 2.0.

ESG 2.4 Peer-review experts - Panel conclusion: fully compliant

ESG 2.5 Criteria for outcomes - Panel conclusion: substantially compliant

Panel recommendation

The panel recommends that the agency should devote greater efforts to design clearer and consistent criteria regarding decision-making and review processes in a coordinated way with AC to avoid any uncertainty.

ESG 2.6 Reporting - Panel conclusion: substantially compliant

Panel recommendation

The agency should devote more attention to the consistency of reports to avoid the perception among some stakeholders that these reflect the quality and commitment of the reviewers.

ESG 2.7 Complaints and appeals - Panel conclusion: substantially compliant

Panel recommendation

The agency should consider the establishment of a separate body that could analyse the institutions' complaints within the remit of the agency.

SUGGESTIONS FOR FURTHER DEVELOPMENT

ESG 3.4 Thematic analysis

Panel suggestions for further improvement

The panel suggest the agency to strive for a clearer definition of its strategy and better division of labour with other organisations that play a role in this area (area of analysis in the field of HE).

ANNEXES

ANNEX I: PROGRAMME OF THE SITE VISIT

AI DENMARK - ENQA REVIEW - FINAL SCHEDULE FOR MEETINGS (ALL TIMES CET)

Day 0 - 15 January		
TIMING	TOPIC	Persons for interview
15 minutes	Checking the stability of internet connection (review coordinator and the agency's contact person)	
15.00 – 17.00	Review panel's kick-off meeting and preparations for day I	

Day I – 20 january		
TIMING	TOPIC	Persons for interview
15 minutes	Connection set-up	
9.00 - 9.30	Review panel's private meeting	
15 minutes	Connection set-up	
9.45 – 10.30	Meeting with the CEO and the chair of the Council (or equivalent)	Ms Anette Dørge Executive Director
5 minutes	Connection set-up	
10.35 – 11.15	Meeting with the Accreditation Council	Mr Per B. Christensen Chairman
		Ms Hanne Harmsen Vice Chairman
11.15-11.30	Review panel's private discussion (and connection set-up for the coordinator)	
11.30 – 12.10	Meeting with the team responsible for preparation of the self-assessment report	Mr Kristian Frisk Accreditation Consultant
		Ms Emilie Dupont
		Head of Section
5 minutes	Connection set-up	
12.15 - 13.00	Meeting with representatives from the Senior	Mr Henrik Pedersen
	Management Team	Director of Council Management and Analysis (RA)

		Ms Inge Enroth Director of Operations, Professional, Vocational and
		Maritime Institutions (PEM)
		Mr Steffen Westergård Andersen
		Director of Operations, Universities and Educational
		Institutions of Arts and Culture (UNIK)
13.00 – 14.00	Lunch break	
14.00 – 15.00	Review panel's private discussion	
15.00 - 16.00	Meeting with key staff of the agency/staff in charge of reviews (IA and PA $\!\!\!/\!\!\!/$	Area for Professional, Vocational, and Maritime Institutions
	PEM & UNIK) Key staff I	(PEM) and Area for Universities and Educational Institutions of Arts and Culture (UNIK):
		Ms Christel Sølvhjelm
		Senior Advisor, PEM
		Semon revisor, 1211
		Mr David Metz
		Senior Adviser, UNIK
		Mr Jan Vernholm Groth
		Special Adviser, UNIK
		Ms Sofie Bjerg Kirketerp
		Special Adviser, PEM
		Ms Hanne Maria Elsnab
		Special Adviser, PEM
		Mr Lars Pedersen
		Senior Adviser, UNIK
16.00 – 16.15	Review panel's private discussion (and connection set-up for the coordinator)	
16.15 – 16.45	Meeting with key staff of the agency/staff in charge of analysis	Council Management and Analysis (RA) and Area for
	Key staff 2	Professional, Vocational, and Maritime Institutions (PEM):
		Ms Rikke Warming
		Senior Adviser, RA
		Ms Ditte Strandbygaard
		Special Adviser, PEM

		Mr Kevin Gønge Special Adviser, PEM
		Ms Petra Frydensberg Head of Section, RA
16.45 – 17.00	Review panel's private discussion (and connection set-up for the coordinator)	
17.00 – 17.45	Meeting with department/key body of the agency	Management Secretariat(LS), Council Management and Analysis (RA) & Management:
		Mr Sune Asrild Chief Financial Officer, LS
		Ms Sofie Gry Laursen Communications Officer, LS
		Diana Ismail Data Protection Officer Legal Adviser, RA
		Ms Emilie Dupont Head of Section, LS
		Mr Henrik Pedersen Director of RA
15 min	Break	
18.00 - 19.00	Wrap-up meeting among panel members and preparations for day II	

Day 2 – 21 JANUARY		
TIMING	TOPIC	Persons for interview
15 minutes	Connection set-up	
9.00 - 9.30	Review panel private meeting	
15 minutes	Connection set-up	
9.45 – 10.30	Meeting with ministry representatives	Ms Dorthe Høst Sarup Head of Division, Office for Education Supply and Acceptance
		Ms Camilla Badse Special Adviser, Office for Education Supply and Acceptance

		Ms Ina Jakobine Madsen Special Adviser, Office for Education Supply and Acceptance Ms Charlotte Løchte Special Adviser, Legal Department The Danish Agency for Higher Education and Science
10.30 - 10.45	Review panel's private discussion (and connection set-up for the coordinator)	
10.45 – 11.30	Meeting with heads of some reviewed HEI/HEI representatives	Mr Niels Egelund President IBA International Business Academy Mr Bjarne Graabech Sørensen Vice Rector University of Southern Denmark Mr Henrik Sveidahl Principal Rhythmic Music Conservatory Mr Harald Mikkelsen President VIA University College Ms Hanne Leth Andersen Professor of University Pedagogy Rector
11.30 – 11.45	Review panel's private discussion (and connection set-up for the coordinator)	Roskilde University
11.45 – 12.30	Meeting with quality assurance officers of HEI	Ms Miriam Skjalm Lissner Director of KEA HR & QA Copenhagen School of Design and Technology (KEA) Ms Trine Fuglsang Head of Quality Assurance and Analysis University College Copenhagen

		Mr. Frederik Lengling
		Mr Frederik Langkjær Division Manager of Educational Development and Analysis
		Aarhus University
		7.4
		Ms Anette Bache
		Head of Quality Department
		Business Academy Aarhus
		Ms Helene Naur Brochmann
		Senior Consultant in the Communication and Management
		Secretariat
		Royal Danish Academy – Architecture Design Conservation
		Ms Karin Tovborg Jensen
		Educational consultant
		Office of Education and Quality
		Copenhagen Business School
		MAA CONTRACTOR
		Mr Anders Christian Frederiksen, Head of Quality
		Management, Management and Quality Secretariat
12.20 12.20	Lunch break	UCL University College
12.30 - 13.30 13.30 -	Review panel's private discussion (and connection set-up for the coordinator)	
13.30 -	Review panel's private discussion (and connection set-up for the coordinator)	
14.15 – 15.00	Meeting with representatives from the reviewers' pool	Dr Stephen Hwang
	The same of the sa	Vice-Chancellor
		Halmstad University in Sweden
		Ms Cecilie Andersson
		Rector
		Bergen School of Architecture in Norway
		Malara Mariladali
		Ms Inge Mærkedahl
		Former director
		Former Agency of Research and Innovation under the Ministry of Higher Education and Science.
		Finishly of Figure Education and Science.
		Mr Tue Sanderhage
		Director
		Vestegnens HF & VUC
		Mr Jan Beyer Schmidt-Sørensen
		Former Director of Business Development, City of Aarhus

		Former Rector of Aarhus School of Business
		Tormer Rector of Aarnus School of Business
		Dr Cecilia Christersson
		Vice Rector
		Malmö University in Sweden
		,
		Mr Hans Jørn Hansen
		former director
		Insero Science Academy
15.00 –	Review panel's private discussion (and connection set-up for the coordinator)	
15.15		
15.15 – 16.00	Meeting with students	Ms Ditte Marie Thomsen
		Former student member of expert panel
		N T. D
		Ms Tina Raun Lydeking
		Former student member of expert panel
		Ms Jenny Maria Jørgensen
		member
		Accreditation Council
		Accirculation Council
		Ms Signe Tolstrup Mathiasen
		Vice President of Academic Affairs
		National Union of Students in Denmark
		Mr Kristian Nysom Lassen
		Chairman
		Djøf students
		Mr Mathias Jæger
		Vice Chair Person
1 (00		Studenterforum UC
16.00 -	Review panel's private discussion (and connection set-up for the coordinator)	
16.15	Mark the state of	M. M. o. Nich
16.15 – 17.00	Meeting with external stakeholders – representatives from the business	Ms Mette Nielsen
	sector and other relevant partners	Adviser, Competences and Knowledge
		Confederation of Danish Industry – DI
		Ms Camilla Gregersen
		Chairman
		The academic trade union DM
		The academic crade union D11
	1	

		Mr Mads Eriksen Head of Research and Education Danish Chamber of Commerce (Dansk Erhverv) Ms Camilla Thorgaard Head of Division, Higher Education Danish Evaluation Institute (EVA) Ms Jo Kjærsgaard Pedersen Deputy head of secretariat Danske Erhvervsakademier Mr Christian Lund Nielsen Adviserk University Colleges Denmark
		University Colleges Denmark Ms Lena Scotte Senior Consultant Universities Denmark
17.00 - 17.30	Break	
17.30 – 18.30	Wrap-up meeting among panel members: preparation for day III and provisional conclusions	

Day 3 – 22 JANUARY		
TIMING	TOPIC	Persons for interview
15 minutes	Connection set-up	
9.00 - 9.30	Meeting among panel members to agree on final issues to clarify	
15 minutes	Connection set-up	
9.45 - 10.45	Meeting with CEO to clarify any pending issues	Ms Anette Dørge
		Executive Director
10.45 - 12.00	Private meeting among panel members to agree on the main findings	
12.00 -	Final de-briefing meeting with key staff of AI and Council members of the	Ms Anette Dørge
13.00	agency to inform about preliminary findings)	Executive Director
		Mr Henrik Pedersen
		Director of Council Management and Analysis (RA)
		Ms Inge Enroth
		Director of Operations, Professional, Vocational and
		Maritime Institutions (PEM)
		Mr Steffen Westergård Andersen

		Director of Operations, Universities and Educational Institutions of Arts and Culture (UNIK)
		Emilie Dupont Head of Section
13.00 - 14.00	Lunch break (and connection set-up for the coordinator	
14.00 - 15.00	Planning of the next steps — Team (if necessary)	

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

EXTERNAL REVIEW OF THE DANISH ACCREDITATION INSTITUTION (AI) BY THE EUROPEAN ASSOCIATION FOR QUALITY ASSURANCE IN HIGHER EDUCATION (ENQA) MARCH 2020

I. Background and context

The Danish Accreditation Institution (AI) is an independent public authority carrying out external quality assurance in the higher education area. The AI was established in 2007 (under the name ACE Denmark, which later changed to The Danish Accreditation Institution). Its role is to monitor and support the internal quality assurance and quality improvement of the Danish higher education institutions (HEIs). The AI's role is stipulated in The Accreditation Act and its finances are secured through the national budget law.

Drawing on the accreditation activities, the Al produces thematic analyses of relevance to higher education and summary reports based on the results of the accreditations at a more general level.

The Accreditation Council is a separate entity in the Accreditation Act and it makes decisions regarding accreditation based on Al's reporting. The Minister of Higher Education and Science appoints the chair and members of the council based on recommendations from relevant institutions, yet the Accreditation Council defines its procedures and methods independently of political and other institutional interests. Besides delivering the accreditation reports to the Council, the Al provides it with various services, such as the preparation of meetings and public communication.

Outside the scope of the ESGs the AI also carry out certain activities. These include assessments of private programmes that qualify for State Educational grant ("SU-vurderinger") and assessments of the qualifications level of some private programmes in relation to the national qualifications framework ("Niveauvurderinger"). The Accreditation Council is not involved in these activities, as no formal decisions are taken. The assessment of private programmes that qualify for State Educational grant is preparatory work concerning the Ministry of Higher Education and Science and the assessment concerns a limited number of very specific programmes that do not lead to a formal degree. The assessment of private programmes in relation to the national qualifications framework does not constitute a public recognition neither by the AI nor by the Ministry.

External quality assurance activities

The Al mainly conducts institutional accreditations, including steering the accreditation processes and drafting the reports. With the Accreditation Act in 2013, the Al transitioned from accrediting study programmes to accrediting higher education institutions. In a transition phase, the Al continues to accredit a very small number of programmes, which will be phased out within a short period. By institutional accreditation the overall quality assurance system of the HEI in question is assessed, that is whether the quality assurance system is clearly described, based on solid arguments, and functioning well. A key element here is to ensure that the HEI is taking responsibility for the quality of each of its study programmes. A positive institutional accreditation is valid for six years, after which the institution has to undergo a new accreditation.

Al has been a member of ENQA since 2010 and is applying for ENQA renewal of membership.

Al has been registered on the European Quality Assurance Register for Higher Education (EQAR) since 2010 and is applying for renewal of EQAR registration.

2. Purpose and scope of the evaluation

This review will evaluate the extent to which AI fulfils the requirements of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). Consequently, the review will provide information to the Board of ENQA to aid its consideration of whether membership of AI should be reconfirmed and to EQAR to support AI application to the register.

2.1 Activities of AI within the scope of the ESG

In order for AI to apply for ENQA membership and for registration in EQAR, this review will analyse all activities of AI that are within the scope of the ESG, i.e. reviews, audits, evaluations or accreditation of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). This is independent of whether the activities are carried out within or outside the EHEA and whether they are obligatory or voluntary.

The following activities of Al have to be addressed in the external review:

- Institutional Accreditation (IA) of Higher Education Institutions
- Programme Accreditation (PA) of Higher Education Programmes
- Quality assessment of foreign programmes

3. The review process

The review will be conducted following the methodology of ENQA Agency Reviews. The process is designed in line with the Guidelines for ENQA Agency Reviews and the requirements of the EQAR Procedures for Applications.

The evaluation procedure consists of the following steps:

- Formulation of the draft Terms of Reference for the review;
- Finalising the Terms of Reference for the review following EQAR's Eligibility Confirmation (if relevant);
- Nomination and appointment of the review panel;
- Self-assessment by Al including the preparation and publication of a self-assessment report;
- A site visit by the review panel to Al;
- Preparation and completion of the final evaluation report by the review panel;
- Scrutiny of the final evaluation report by the ENQA Review Committee;
- Analysis of the scrutiny by the Board of ENQA and their decision regarding ENQA membership;
- Follow-up of the panel's and/or the Board's recommendations by the agency, including a voluntary progress visit.

3.1 Nomination and appointment of the review team members

The review panel consists of four members: one or two quality assurance experts (at least one of which is currently employed by an ENQA member agency), an academic employed by a higher education institution, a student member, and eventually a labour market representative (if requested). One of the members will serve as the chair of the review panel, and another member as a review secretary. For ENQA Agency Reviews at least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated

reviewers. If requested, the labour market representative may come from the Business Europe nominees or from ENQA. An additional panel member may be included in the panel at the request of the agency under review. In this case, an additional fee to cover the reviewer's fee and travel expenses is applied.

The panel will be supported by the ENQA Secretariat review coordinator who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the process. The ENQA staff member will not be the secretary of the review and will not participate in the discussions during the site visit interviews.

Current members of the Board of ENQA are not eligible to serve as reviewers.

ENQA will provide Al with the list of suggested experts and their respective curricula vitarum to establish that there are no known conflicts of interest. The experts will have to sign a non-conflict of interest statement as regards the Al review.

3.2 Self-assessment by AI, including the preparation of a self-assessment report

All is responsible for the execution and organisation of its own self-assessment process and shall take into account the following guidance:

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-assessment report is broken down by the topics of the evaluation and is expected to contain, among others: a brief description of the national HE and QA system; background description of the current situation of the Agency; an analysis and appraisal of the current situation; proposals for improvement and measures already planned; a SWOT analysis; each criterion (ESG part II and III) addressed individually. All agency's QA activities (whether within their national jurisdiction or outside of it, and whether obligatory or voluntary) will be described and their compliance with the ESG analysed.
- The report is well-structured, concise and comprehensively prepared. It clearly demonstrates the extent to which AI fulfils its tasks of external quality assurance and meets the ESG and thus the requirements of ENQA membership.
- The self-assessment report is submitted to the ENQA Secretariat which has four weeks to pre-scrutinise it before forwarding the report to the panel of experts. The purpose of the pre-scrutiny is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but whether the necessary information, as stated in the Guidelines for ENQA Agency Reviews, is present. For the second and subsequent reviews, the agency is expected to enlist the recommendations provided in the previous review and to outline actions taken to meet these recommendations. In case the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to reject the report and ask for a revised version within two weeks. In such cases, an additional fee of 1000 EUR will be charged to the agency.
- The report is submitted to the review panel a minimum of six weeks prior to the site visit.

3.3 A site visit by the review panel

The review panel will draft a proposal of the site visit schedule which shall be submitted to the agency at least two months before the planned dates of the visit. The schedule is to include an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site

visit, the duration of which is usually 2,5 days. The approved schedule shall be given to Al at least one month before the site visit, in order to properly organise the requested interviews.

The review panel will be assisted by Al in arriving in Copenhagen, Denmark.

The site visit will close with a final de-briefing meeting outlining the panel's overall impressions but not its judgement on the ESG compliance of the agency or the granting or reconfirmation of ENQA membership.

3.4 Preparation and completion of the final evaluation report

On the basis of the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will take into account the purpose and scope of the evaluation as defined under articles 2 and 2.1. It will also provide a clear rationale for its findings concerning each ESG. A draft will first be submitted to the ENQA review coordinator who will check the report for consistency, clarity and language, and it will be then submitted to AI usually within 10 weeks of the site visit for comment on factual accuracy. If AI chooses to provide a position statement in reference to the draft report, it will be submitted to the chair of the review panel within two weeks after the receipt of the draft report. Thereafter, the review panel will take into account the statement by AI and finalise and submit the document to ENQA.

The report is to be finalised within three months of the site visit and will normally not exceed 40 pages in length.

When preparing the report, the review panel should also bear in mind the EQAR Policy on the Use and Interpretation of the ESG to ensure that the report will contain sufficient information for the Register Committee for application to EQAR.

For the purpose of applying for ENQA membership, Al is also requested to provide a letter addressed to the Board of ENQA outlining its motivation for applying for membership and the ways in which Al expects to contribute to the work and objectives of ENQA during its membership. This letter will be taken into consideration by the Board of ENQA together with the final evaluation report when deciding on the agency's membership.

4. Follow-up process and publication of the report

Al will receive the expert panel's report and publish it on its website once the Board of ENQA has made its decision. The report will also be published on the ENQA website, regardless of the review outcome and decision by the Board. Al commits to preparing a follow-up plan in which it addresses the recommendations of the review panel and to submitting a follow-up report to the Board of ENQA within the timeframe indicated in the Board's decision on membership. The follow-up report will be published on the ENQA website, in addition to the full review report and the Board's decision.

The follow-up report could be complemented by a small-scale progress visit to the agency performed by two members of the original panel (whenever possible). This visit will be used to discuss issues, based on the ESG, considered to be of particular importance or a challenge to Al. Its purpose is entirely developmental and has no impact on the judgement of membership and/or judgment of compliance of the agency with the ESG. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

5. Use of the report

ENQA shall retain ownership of the report. The intellectual property of all works created by the expert panel in connection with the review contract, including specifically any written reports, shall be vested in ENQA.

The review report is used by the Board of ENQA for the purpose of reaching a conclusion on whether Al is in compliance with the ESG and can thus be admitted/reconfirmed as a member of ENQA. The report can also be used for registration on EQAR, and is designed to serve these two purposes. However, the review report is to be considered final only after being approved by the Board. Once submitted to ENQA and until it is approved by the Board, the report may not be used or relied upon by Al, the panel, or any third party and may not be disclosed without the prior written consent of ENQA. The approval of the report is independent of the decision of the ENQA Board on membership.

6. Budget

Al shall pay the review related fees as specified in the contract between ENQA and Al.

It is understood that the fee of the progress visit is included in the overall cost of the review and will not be reimbursed in case the agency does not wish to benefit from it.

In the event of a second site visit required by the board of ENQA and aiming at completing the assessment of compliance, and should the agency accept a second visit, an additional fee of 500 EUR per expert, as well as the travel and subsistence costs related to the second site visit will be charged to the agency.

7. Indicative schedule of the review

Agreement on terms of reference	March 2020
Appointment of review panel members	May 2020
Self-assessment completed	30 October 2020
Pre-screening of SAR by ENQA coordinator	Early-November 2020
Preparation of site visit schedule and indicative timetable	November 2020
Briefing of review panel members	December 2020
Review panel site visit	January/early February
	2021
Draft of evaluation report and submitting it to ENQA	End-March 2021
coordinator for pre-screening	
Draft of evaluation report to Al	April 2021
Statement of AI to review panel if necessary	End-April 2021
Submission of final report to ENQA	May 2021
Consideration of the report by Board of ENQA	June 2021
Publication of report	July 2021
	<u> </u>

ANNEX 3: GLOSSARY

AC Accreditation Council

Al Danmarks Akkrediteringsinstitution

ENQA European Association for Quality Assurance in Higher Education

EQA External Quality Assurance

EQAR European Quality Assurance Register for Higher Education

ESG Standards and Guidelines for Quality Assurance in the European Higher Education Area,

2015

EVA Danish Evaluation Institute

HE Higher Education

HEI Higher Education Institutions
IA Institutional Accreditation

INQAAHE International Network for Quality Assurance Agencies in Higher Education

MHES (Danish) Ministry of of Higher Education and Science NOQA Nordic Quality Assurance Network in Higher Education

PA Programme Accreditation

QA Quality Assurance

RUVU The Advisory Committee to Assess the Range of Higher Education Study

Programmes Offered

SAR Self-Assessment Report

ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY AI

- Accreditation Act from 2013 (with with the most recent amendments (LBK nr. 173 of 2nd March 2018)
- Guide to Institutional Accreditation 2.0
- Guide to Institutional Accreditation 1.0
- Guide to Accreditation of Existing Programme*
- List of international activities
- Legislation regarding institutions and programmes for Business Academies, University Colleges and Universities
- Example: Institutional accreditation report (IA 1.0): IT-University of Copenhagen
- Follow-up report in relation to ENQA Agency Review in 2016 (2018).
- Latest version of the Procedure Handbook and Log of the changes being made in the Procedure Handbook
- Summary report on first cycle of Institutional Accreditation: First round of institutional accreditation differences, common features and consequences (2019)
- Evaluation of first cycle of Institutional Accreditation by the MHES: Analysis of experiences with institutional accreditation
- Summary of oral evaluations with HEIs after completed IA process (2017-2018)
- Summary of the meeting with stakeholders to discuss IA 2.0 and Thematic analysis;

OTHER SOURCES USED BY THE REVIEW PANEL

- ENQA Al Review Report of 2016;
- Websites of Al and AC

