

**Substantive Change Report**  
**by the Accreditation Organisation of the Netherlands and Flanders**  
**(NVAO)**

**Register Committee**

**Ref.** RC/C19

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Decision of:	25 May 2017
Report received on:	20/02/2017
Agency registered since:	5/12/2008
Last external review report:	September 2012
Registered until:	30/09/2017
Absented themselves from decision-making:	Lucien Bollaert
Attachments:	<ol style="list-style-type: none"> <li>1. <a href="#">Substantive Change Report</a></li> <li>2. <a href="#">Clarification request</a></li> <li>3. <a href="#">NVAO clarification</a></li> </ol>

1. The Register Committee considered the Substantive Change Report of 20 February 2017.
2. The Register Committee requested NVAO to elaborate on the newly established extensive institutional review for Flanders, according to the dimensions noted in the substantive change reporting form (attached: request and response).
3. The Register Committee concluded that the introduction of the extensive institutional review was a Substantive Change and should have been reported already when it was introduced in 2015.
4. The Register Committee understood that, currently, the extensive institutional review is optional and a pilot. At the same time, the Committee also understood that the consequences of the extensive institutional review are real in that institutions participating in the pilot are exempt from external programme accreditation, and that all eligible institutions opted for the extensive institutional review.
5. The Register Committee underlined that all reports should be published in full as required by ESG 2.6. While it is acceptable to only publish the reports once all pilot reviews have been completed, it is expected that, once the pilot phase has ended, the full reports are published immediately after a review has been completed.
6. The Register Committee took note of the explanation by NVAO how the ESG are addressed in the Framework for the Institutional Review – Flanders 2015-2017 and the Quality Code – Flanders 2015-2017.

**Subject:** Substantive Change Report: NVAO**From:** "a.flierman@nvao.net" <form\_engine@fs22.formsite.com>**Date:** 20/02/2017 09:53**To:** substantive-changes@eqar.eu

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<b>Status</b>	Complete
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<b>Agency #1 *</b>	NVAO
<b>Expiry date #1 *</b>	30/09/2017
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<b>Other organisations? *</b>	No
<b>A. Has the organisational identity of the registered agency changed? *</b>	No
<b>B. Has the organisational structure changed? *</b>	No
<b>C.i. Are there new types of activities? *</b>	Yes
<b>C.ii. Are there changes in existing activities? *</b>	No
<b>C.iii. Have some or all existing activities been discontinued? *</b>	Yes
<b>Description new/changed *</b>	The accreditation system in Flanders has changed. In 2016 the Institutional review was implemented. Already 12 HE institutions underwent this review, another six will undergo the review in 2017.
<b>List discontinued *</b>	At the same time the accreditation of programmes in Flanders is set on hold.
<b>Last Update</b>	2017-02-20 09:53:38

NVAO

Anne Flierman

– by email –

Brussels, 27 March 2017

## Substantive Change Report – Clarification Request

Dear Anne,

We wish to thank you for the Substantive Change Report of 20/02/2017. Your report is currently being reviewed by two rapporteurs before it is brought to the attention of the entire EQAR Register Committee.

In your report, you made only brief mention of the changes in the accreditation system for Flanders. We note that the Institutional Review (Flanders) was introduced in 2016 and consequently not analysed in the 2012 external review of NVAO.

In order to prepare consideration by the Committee, we would therefore be obliged if you could clarify the following:

1. For the new Institutional Review for Flanders, please elaborate on the following key aspects, as listed in the EQAR Substantive Change Report form:
  - i. purposes and development of the activity, involvement of stakeholders (ESG 2.2)
  - ii. criteria used, how they were developed, measures implemented to ensure consistency, how ESG 1.1 – 1.10 are reflected in the criteria (ESG 2.1 & 2.5)
  - iii. review team composition, selection, appointment and training of reviewers (ESG 2.4)
  - iv. site visits (ESG 2.3)
  - v. publication of reports (ESG 2.6)
  - vi. follow-up (ESG 2.3)
  - vii. appeals system (ESG 2.7)

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viii. embedding in thematic analyses and internal quality assurance of the agency (ESG 3.4 & 3.6).

Where those aspects are similar or identical to the Institutional Audit (Netherlands), which was analysed in the 2012 external review and found substantially compliant with the ESG, it will be helpful if you indicate that.

While your responses may be brief, given that the activity is being reviewed in full in the current external review of NVAO, please ensure that all aspects are covered.

2. Please clarify whether programme accreditation in Flanders has stopped entirely or is still in place for specific circumstances.

In order to expedite proceedings we kindly ask you for a reply **by 17 April 2017**. Please inform us if any difficulties arise in meeting this deadline. Please also note that this request and your response will be published together with the final decision on your Report.

I shall be at your disposal if you have any further questions or inquiries.

Kind regards,

A handwritten signature in black ink, appearing to read "Colin Tück".

Colin Tück  
(Director)

## Memo NVAOs response to EQARs Substantive Change Report request

date 1. For the new Institutional Review for Flanders, please elaborate on the following key aspects, as listed in the EQAR Substantive Change Report form  
13 April 2017

### 1.1 Purposes and development of the activity, involvement of stakeholders (ESG 2.2)

Between 2004 and 2015, external quality assurance in Flanders was organised through programme assessments followed by programme accreditation. This accreditation system was a further development of the external programme assessments introduced by the universities in the eighties of the 20th century.

In 2010, NVAO proposed to legally introduce an institutional audit. This audit was piloted in 2008-2009 in The Netherlands and Flanders. This concept was then introduced in The Netherlands. In Flanders, the stakeholders agreed to widen the scope of such an institutional assessment which led to the legal introduction of the institutional review in 2012. The intent was to assess the quality of educational policies of universities and university colleges, including their quality assurance and quality culture. All other higher education institutions were exempt from this institutional review.

These reviews were to take place a first time in 2015-2017, a second time in 2019-2021, and a third time in 2025-2027. Programme assessment followed by accreditation would remain mandatory. The legal intent was to diminish administrative burden from 2019 on by giving institutions more or less full responsibility over programme assessments and allowing them to apply for accreditation based on their own reporting (the so-called "programme dossier").

In 2013, universities and university colleges voiced concerns about the burden of this tiered system. They complained that the system would tremendously increase the administrative and financial burden of external quality assurance and pointed out that this double pronged approach to assure educational quality was overkill.

Pagina 2 van 4 Before the elections of 2014, the universities and university colleges published a memorandum for the next government. In it they also demanded a rethinking of the quality assurance system. The newly formed government asked NVAO's opinion and as a result a ministerial taskforce was convened. This taskforce was presided over by the Chief of Cabinet of the minister and composed of representatives of all stakeholders organisations: NVAO, VLIR (for universities), VLHORA (for university colleges), VVS (for students), VLUHR-KZ (for QA) and the ministry of education. All aspects of the QA system were discussed here.

NVAO here proposed the way forward. All issues were discussed and agreed upon among all stakeholders.

In 2015, this resulted in three changes in existing procedures:

- The Accreditation Framework was revised to limit the administrative burden (caused by demanding explicit links to Flemish generic learning outcomes for each qualification) and the financial burden (caused by the actual procedures organised by external QA agencies, for example by including a maximum amount of panel members);
- The Initial Accreditation Framework was similarly revised;
- The Institutional Review Framework was revised to better define the policy to be assessed as clearly educational (and not the more broad policy of an institution as previously included in the Framework).

These new Frameworks were approved by the Flemish government in 2015. In essence, these changes did not constitute a substantive change to the QA system.

In addition, NVAO proposed a roadmap towards a QA system in which institutions would be able to demonstrate the quality of their programmes through an institutional assessment. In this roadmap, NVAO would first pilot an "extensive institutional review". In this review, NVAO would assess the quality of an institution's educational policy (the review as included in the law) and additionally pilot the assessment of an institution's conduct of assuring the quality of programmes. The pilot would take place in 2016 and 2017. If successfully evaluated, NVAO would propose a law in 2018 to introduce a new QA system starting in 2020.

In order to align the conduct of QA at programme level with the Standards and Guidelines for QA in the European Higher Education (ESG), NVAO developed a Quality Code. This is a brief document outlining the context, the conduct pilots, and how the assessment of this conduct would be included in the "extensive institutional review". Here, the review panel only considers those elements from the ESG (Part 1) that relate to the quality of programmes. The other elements, which mainly pertain to QA, are covered by the rest of the institutional review.

- See annex: Mapping ESG part 1 and NVAOs frameworks

Universities and university colleges were invited to take part in NVAO's pilot of the extensive institutional review. These are the institutions in the HE system for whom programme assessments were legally mandatory since the beginning of the nineties. NVAO hoped to be able to have around six institutions in its pilot. Since this type of extensive institutional review required substantive administrative and organisational changes and efforts from the institutions taking part, NVAO wanted to make taking part more attractive. It therefore proposed to exempt institutions taking part in the pilot from continuing to undergo regular assessments for most of their programmes. (See Q2. below.)

Pagina 3 van 4 This exemption is temporary as it the result of taking part in the pilot. This current phase can last either until 2019 or until 2020. If NVAO fails to introduce a new legal framework in 2018, the QA system already in place (with mandatory programme dossiers, as outlined above) will restart in 2019. If NVAO succeeds in introducing a new QA system, the aim is to start a new QA system in 2020.

The hunger for a new QA system was however very high and all potential candidates opted to take part in the pilot and undergo the extensive institutional review.

The whole QA system was developed by NVAO in close collaboration with all stakeholders. In the development phase, NVAO also organised monthly meetings of its Resonance Group. This group is composed of representatives of all stakeholders organisations: NVAO, VLIR (for universities), VLHORA (for university colleges), VVS (for students), the cabinet of the minister and the ministry of education. The Flemish board members and QA coordinator visited all institutions taking part in the pilot in 2015. In addition, NVAO regularly organised (and still organises) so-called SAMENarries to discuss all issues pertaining to the new QA system with representatives of the institutions.

**1.2 criteria used, how they were developed, measures implemented to ensure consistency, how ESG 1.1 – 1.10 are reflected in the criteria (ESG 2.1 & 2.5)**

- See: Mapping ESG part 1 and NVAOs frameworks
- See: chapter 2. *Assessment framework* of the Framework for the Institutional Review - Flanders 2015-2017
- See: Quality Code - Flanders 2015-2017

**1.3 review team composition, selection, appointment and training of reviewers (ESG 2.4)**

- See chapter 4. *Composition of the review committee* of the Framework for the Institutional Review - Flanders 2015-2017

**1.4 site visits (ESG 2.3)**

- See chapter 5. *Assessment process* of the Framework for the Institutional Review - Flanders 2015-2017

**1.5 publication of reports (ESG 2.6)**

"Following completion of all institutional reviews, NVAO will publish a general evaluation report, as well as all the underlying panel reports regarding the institutional reviews on the one hand, and the pilots on the other." (Quality Code - Flanders 2015-2017, page 5)

**1.6 follow-up (ESG 2.3)**

The follow-up is foreseen on an individual basis (NVAO <> institution) and geared towards the actual institutional reviews which we aim to organise starting in 2020.

**1.7 appeals system (ESG 2.7)**

- See chapter 7. *Appeals* of the Framework for the Institutional Review - Flanders 2015-2017

**1.8 embedding in thematic analyses and internal quality assurance of the agency (ESG 3.4 & 3.6).**

NVAO sends out questionnaires addressing three groups:

1. All those actively involved in the actual institutional reviews:
  - a. all panel members (including secretaries),

- b. all people the panel talked to during the site visit (from the institutional side and both internal and external stakeholders), and
  - c. all NVAO's process coordinators.
2. All stakeholder organisations
    - a. VLIR
    - b. VLHORA
    - c. VVS
  3. Foreign stakeholders

NVAO organises seminars with all the chairs of panels and organises focus groups with representatives of institutions involved to interpret the results.

NVAO will publish a general evaluation report (Quality Code - Flanders 2015-2017, page 5). In it, NVAO will present its lessons learned, i.e. an analysis of the overall state of institutional educational policies and the conduct of QA of programmes.

**2. Please clarify whether programme accreditation in Flanders has stopped entirely or is still in place for specific circumstances.**

Programme accreditation is still mandatory.

The programmes provided by the university colleges and universities undergoing the extensive institutional review are currently exempted from programme accreditation. University colleges and universities are however required to organise assessments of their programmes as outlined in the Quality Code and which NVAO will follow-up and review in the near future.

This means that all the other institutions still require accreditation of their programmes.

In addition, this exemption does not apply to the following programmes:

- New programmes (initial accreditation) and their first accreditation;
- Programmes whose accreditation period was limited in time (to 2 or 3 years) because the programme or one of its modes of study did not meet all the standards (i.e. first accreditation after "an improvement period");
- Joint programmes that received "legal accreditation" on the basis of the selection in accordance with the stipulations of a European funding scheme (i.e. first accreditation after "legal accreditation").

# Framework for the Institutional Review - Flanders 2015-2017

20 March 2015



## Inhoud

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# 1 Aim

The institutional review (review) is a periodic assessment of the quality of the educational policy pursued by an institution. The Accreditation Organisation of the Netherlands and Flanders (NVAO) commissions an external review committee (committee) to conduct the review.

The assessment is divided into four inter-related questions:

1. How does the institution view the quality of its education?
2. How does the institution intend to realise its vision of the quality?
3. How does the institution gauge to what extent it is realising its vision of the quality?
4. How is the institution working on improvement?

In the assessment framework (framework), these questions have been translated into four standards: vision and policy, policy implementation, evaluation and monitoring, and improvement policy. The framework thus ties in with the themes in the Flemish Higher Education Codex and the so-called PDCA cycle. The quality culture within the institution serves as a leitmotiv and is considered in each standard of the framework.

The review enables the institution to demonstrate the vision from which it operates, the policy it pursues, the achievements resulting from that policy, the measures for improvement it has taken, and any new policy it has developed. The review comprises all policy domains that support the quality of the education provided, i.e., including policy in the field of research as well as social and academic services provided. The review expressly does not concern the actual quality of the research and/or the social and academic services.

Each institution chooses a structure and quality culture that suit its vision. As a component of an organisational culture, the quality culture is focused on continuous quality improvement. It is reflected in an institution-wide quality assurance system and thus constitutes the foundation of the quality of an institution's educational policy as well as the actual education provided.

The review framework is broad-based and applicable to any institution, regardless of its organisational structure. The review also pertains to any tasks that the institution has outsourced to other bodies.

Regarding each of the standards, the committee gives a weighted and substantiated judgement based on the criteria and the verifiable facts underpinning them. The committee subsequently gives a weighted and substantiated final conclusion.

The institutional review is mandatory for statutory registered institutions. Two or more statutory registered institutions that are engaged in a merger process may opt for submitting a single critical reflection. NVAO bases its assessment on the level of the organisational form as proposed in the critical reflection.

## 2 Assessment framework

### Vision and policy

**Standard 1:** *The institution's vision of higher education and its quality, the policy it pursues with regard to education and the policy it pursues with regard to research and social and academic services in relation to the quality of education, offer an adequate response to the social challenges.*

**Criteria:** The institution has a **broadly supported vision on education** and a **corresponding policy**. The policy comprises, as a minimum: policy regarding education, as well as research and social and academic services in relation to education. The institution has a **vision** on higher education and the quality of its programmes **in relation to the societal challenges in its environment**. The connections may be fleshed out at the regional, national, European or international level. To realise its vision, the institution has formulated an **adequate policy**. One of the key focal points of this policy is providing students with the qualifications necessary to meet the challenges of civil society. It is essential for all those involved to play an active role in the establishment of the vision and policy; this characterises a **quality culture**.

### Policy implementation

**Standard 2:** *The institution has adequate policy measures, processes, procedures, practices and instruments at its disposal to realise its policy in an effective manner, and to optimise the quality of the programmes offered.*

**Criteria:** The institution pursues its education policy in an adequate manner, using among others **policy measures, processes, procedures, practices and instruments**. Adequate policy implementation presupposes **concrete objectives** ensuing from the vision and allocation of sufficient resources to implement the policy. The institution explains what policy measures, processes, procedures, practices and instruments it uses and why it deems those most efficient and effective. The **quality culture** in place is demonstrated by the participation, the process, the results and the manner in which the instruments are deployed.

### Evaluation and monitoring

**Standard 3:** *The institution guarantees the effectiveness of its policy implementation for the benefit of the quality of education by setting up feedback and monitoring systems and, in particular, internal quality monitoring systems.*

**Criteria:** The institution gauges and evaluates the effectiveness of its policy implementation on a regular basis in order to guarantee the quality of the education it provides. To this end, it has an adequate quality assurance system in place. In order to be able to guarantee the effectiveness of its policy, the institution must have **insight into the extent to which its vision of education is realised under the policy it pursues**. To this end, it has a **properly developed evaluation and monitoring system** in place. This system provides the institution with **aggregated information**. This information pertains to all relevant policy domains, including any procedures and instruments the institution deploys to realise its policy objectives and guarantee the quality of education.

The system of regular internal evaluations and external assessments ties in with the management model pursued. Institution-wide uniformity in the evaluation and gauging activities is not required.

In evaluation, an **active role by students, staff, alumni, external and independent experts from the disciplines and the professional field** is essential in a system of quality assurance, and bolsters the further **development of a quality culture**.

#### **Improvement policy**

**Standard 4:** *The institution takes measures to improve the realisation of its policy objectives.*

**Criteria:** The institution can demonstrate that it is **systematically** improving its education policy wherever necessary.  
The institution pursues an **active improvement policy** based on the outcomes of its evaluation and gauging its activities. Among other things, it demonstrates its ability to innovate and adapt in order to improve the education it provides. The **improvement policy** pursued by the institution results in a **quality culture**, in which all those involved contribute to innovation, and to quality improvement.

### **3 Assessment scale and assessment rules**

#### **3.1 Assessment scale for the standards**

Regarding each of the above standards, the committee gives a judgement: “meets the standard”, “partially meets the standard” or “does not meet the standard”. The judgement is based on the underlying criteria, is substantiated in the evaluation report in a verifiable manner, and corresponds to the conditions specified below.

##### **Meets the standard**

The judgement of “meets the standard” means that the underlying criteria are met to an extent that enables the institution to guarantee the quality of the education it provides by means of its education policy. In this context, the committee may formulate recommendations without undermining the judgement of “meets the standard”.

##### **Partially meets the standard**

The judgement of “partially meets the standard” means that the underlying criteria are met to such an extent that the institution can only guarantee the quality of the education it provides by means of its education policy if certain conditions are met. These conditions are specified in the evaluation report.

##### **Does not meet the standard**

The judgement “does not meet the standard” means that the underlying criteria are insufficiently met. This means that the education policy pursued does not enable an institution to guarantee the quality of the education it provides.

#### **3.2 Assessment rules for the final conclusion**

General final conclusion

*The institution pursues an adequate education policy that it implements in an effective and improvement-oriented manner in order to be able, based also on the prevalent quality*

*culture, to guarantee that the quality of the education it provides is at an international and socially relevant level.*

The committee gives a judgement on a three-point scale: positive, conditionally positive or negative.

A judgement of “positive”, “conditionally positive” or “negative” corresponds to the conditions specified below.

**Positive**

The institution will receive a positive judgement if it meets all the standards.

**Negative**

The institution will receive a negative judgement if it fails to meet three or four standards.

**Positive with conditions**

In all other cases, the institution will receive a judgement positive with conditions. The committee explicitly indicates the main conditions and specifies the term within they must be met.

## 4 Composition of the review committee

NVAO convenes and appoints the committee that will conduct the review. The institution to be assessed is entitled to lodge substantiated objections to the composition of the committee within a term of fifteen calendar days from the day following receipt of the notification from NVAO.

The committee must meet the following requirements:

1. The committee is composed of five members, of whom one is a student.
2. The committee commands executive, educational and assessment expertise and is acquainted with developments in the higher education sector at home and abroad.
3. The members of the committee are independent and have had no ties with the institution to be assessed over at least the past five years, with the exception of the student, for whom one year suffices.
4. The majority of the members are employed or have recently been employed abroad and are thus familiar with the international quality requirements from a social point of view.
5. At least one of the members commands sufficient knowledge of the Flemish higher education sector.
6. One of the members with executive expertise will act as Chair and to that end follow a training provided by NVAO.
7. All the members of the review committee will be offered training by NVAO.

The committee is counselled by a trained NVAO process coordinator and supported by a secretary certified by NVAO. Both command sufficient knowledge of the Flemish higher education sector. The secretary and the process coordinator have no ties with the institution to be assessed. They do not sit on the committee.

The stakeholders will report to NVAO any irregularities occurring during the site visit or the assessment process.

## **5 Assessment process**

NVAO bears final responsibility for the manner in which the assessment process is conducted. The Internal Handbook for Institutional Reviews contains a detailed explanation of the assessment process. The various steps are outlined below.

### **5.1 Executive consultation**

NVAO aims for a customised approach, geared to the diversity in organisational forms and the specific nature of each institution. For that reason, the assessment process begins with an executive consultation between the institution and NVAO. In any case, the following issues are discussed during this consultation: the institution's organisational structure and profile, recent developments in a process of change, if any, in the composition of the committee, the language in which the review will be conducted, the timeframe, and the follow-up with possibly a presentation of the outcomes by the committee for a wider audience.

### **5.2 Accreditation portrait**

NVAO draws up an accreditation portrait of the institution for the benefit of the committee. The accreditation portrait provides an overview of all the accreditation decisions for new and existing programmes. Prior to being dispatched to the committee, the accreditation portrait is forwarded to the institution for supplementation and/or correction. Approx. 6 weeks before the first visit, the accreditation portrait is made available to the institution concerned, which is given the opportunity to respond.

### **5.3 Critical reflection**

The institution draws up a critical reflection. In essence, the critical reflection answers the question of how the institution guarantees the quality of the education it provides within the relevant social and international context. Since the review focuses on the institution's education policy at the time of the application, the critical reflection provides a clear picture of its past and present policy as well as the results achieved.

The critical reflection follows the standards of the assessment framework pertaining to the review. The institution is expected to provide an explanation regarding each standard, including the underlying criteria, based on its own vision and policy. The quality culture is expressly factored in. In the explanations, reference should be made to verifiable facts and underpinning documents. The explanations should be based on notable examples. Each standard will conclude with a strengths-weaknesses analysis and state which measures for improvement have been planned. The critical reflection is a self-contained document that can be read separately.

An introductory chapter contains a number of basic data on the institution and its programmes. These enable the committee to gain a global picture of the institution.

When considering standard 1, the institution is expected to outline the choices it has made in terms of the content of its vision and policy. It will describe how its vision and policy have been formulated and how the stakeholders have been involved.

With regard to standard 2, the institution presents an analysis of the procedures followed and the instruments used for the implementation of its policy. It will reflect on the underlying

principles and considerations. It will illustrate the implementation of its policy by reference to concrete results achieved.

The institution discusses its evaluation and monitoring system under standard 3. It provides insight into the manner in which it systematically gauges and evaluates, and into the instruments it uses to that end.

Under standard 4, the institution reflects on the measures for improvement. It provides insight into the measures that have been taken, the results achieved, and the efforts it is making for the purpose of innovation. Special attention is focused on the manner in which the institution deals with negatively assessed programmes, if any.

The critical reflection comprises a maximum of 50 pages. It has very few appendices and any appendices are limited in size. The required appendices are listed in Chapter 7.

The institution is to submit its critical reflection, including appendices, to NVAO no later than six weeks before the first site visit.

## **5.4 Site visit**

The site visit for the purpose of the review comprises two components and takes a total of two to five days. The committee may extend its visit if so required. As a rule, the committee starts off by visiting the institution, followed by a second visit after two to four weeks. The committee may decide to diverge from this set-up by mutual consent.

### **5.4.1 First visit: exploration**

Prior to the first visit, the committee has studied the institution's critical reflection and the accreditation portrait. The first visit to the institution is preceded by a preliminary meeting of the committee. During the preliminary meeting, the committee discusses the critical reflection and the underpinning documents. In addition, it formulates the questions it intends to put to the discussion partners.

The first visit has an exploratory nature. The committee gains insight into the ins and outs of the institution, and the specific points for attention of the board of the institution, and satisfaction among students, teaching staff and other stakeholders.

During the first visit, the committee will, in any case, meet with the following discussion partners: the board of the institution, the managers responsible for education, quality assurance experts and other relevant staff, teachers from representative bodies, students from representative bodies, representatives from the professional field (if relevant). In addition, the committee will set aside time for open consultations. The institution and the committee will make these open consultations widely known, both prior to and during the visit.

At the end of the first visit, the chair of the committee provides brief feedback information to the institution. This feedback presents the panel's first impressions of the quality assurance in place in the institution. In addition, it indicates the review trails to be conducted.

### **5.4.2 Second visit: in-depth study**

During the second visit to the institution, a further discussion takes place between the committee and representatives of the institution regarding the points for attention emerging from the meetings and the documents studied during the first visit. This discussion enables the committee to ascertain whether its initial impressions were correct.

The audit panel needs to demonstrate how it has ascertained whether an institution's quality assurance system works. To this end, it conducts review trails. In a vertical trail, the committee focuses on two or more programmes to examine to what degree an element of the vision and policy referred to in standard 1 is actually put into practice. All standards in

the framework are considered in succession. Horizontal trails focus on the realisation of a single theme, topic or emphasis in the education policy.

At the end of the second visit, the committee chair informs the institution briefly of the committee's general conclusion and its underlying considerations.

### **5.5 Assessment procedure within the committee**

The committee presents a judgement regarding all the standards contained in the assessment framework. This judgement is based on an appraisal of the positive and critical elements in the committee's findings. Options for the judgement are: meets, does not meet, or partially meets the standard. Subsequently, the committee formulates a final conclusion: positive, conditionally positive, or negative.

The stakeholders will report to NVAO any irregularities occurring during the site visit or the assessment process.

### **5.6 Review report**

The committee secretary draws up an evaluation report comprising 25 to 30 pages. The comprehensive report is preceded by a summary advisory report in which the committee presents a general consideration of its final conclusions. This document comprises a maximum of two pages and is expressly intended for a wider audience. The core of the report comprises, for each standard: the committee's findings with factual underpinning, the considerations, the conclusions and any recommendations. The committee bases its substantiation on the critical reflection, the meetings with representatives of the institution and the underpinning facts from the material studied. The evaluation report contains notable and representative examples wherever possible. Separate chapters contain the recommendations of the committee and a score table with the conclusions of the review.

In addition, the report has a number of appendices: brief CV descriptions of the committee members, the schedules of the site visits, information on the review trails, an overview of the material studied and a list of abbreviations.

After all committee members have approved its contents, the committee chair endorses the report. Subsequently, it is submitted to NVAO.

## **6 NVAO decision-making**

NVAO invites the committee to explain its report. If so required, NVAO may also ask the institution for further information. NVAO subsequently takes an independent decision, of which the evaluation report forms an integral part. In exceptional circumstances, NVAO may depart from the committee's recommendation in a substantiated manner. The institution is given a term of fifteen calendar days to respond to any factual inaccuracies in the report. Subsequently, a final decision is taken.

The first round of institutional reviews (2015-2017) does not entail any legal consequences for the institution. However, the outcomes of the reviews are published on the NVAO web site.

## **7 Appeals**

### **7.1 Internal appeals**

Any intended decision by the Board is open to an internal appeal to NVAO. This appeal is lodged in writing by the board of the institution, no later than fifteen calendar days following receipt of the intended decision concerned. NVAO rules on its admissibility. Appeals that are declared admissible and justified, after hearing the parties, are followed by a limited or comprehensive reassessment by the same or another committee.

### **7.2 External appeals**

If an institutional review results in a negative decision, the board of the institution may lodge an appeal against said negative decision with the Flemish government. The appeal is lodged within a term of 30 calendar days, which commences on the day following the service of the negative decision.

## **8 Required documents**

The institution provides the committee with a limited number of documents. NVAO assumes that these are existing documents, available within the institution rather than drawn up specifically for the institutional review. The documents serve as a substantiation and possible verification.

Other material is only required if explicitly requested by the committee, or if the institution wishes to demonstrate a particular profile.

### **8.1 Basic data concerning the institution**

The basic data is incorporated into the appendices to the critical reflection, the evaluation report and the NVAO decision:

1. Name of the institution
2. Location(s)
3. Overview of all programmes, student rolls and staff numbers

### **8.2 Mandatory information in the critical reflection**

The list of information studied is incorporated into the evaluation report.

1. Vision regarding education and, if available, the most recent strategic policy plan of the institution;
2. Organisation chart;
3. Overview of quality assurance system (in diagram form; only if not already clear from the critical reflection or other documents).

### **8.3 8.3. Documents to be perused during the visits**

The list of material studied is incorporated into the assessment report.

- 1) Education policy plan or similar document(s);
- 2) Staff (policy) plan or similar document(s);
- 3) Current examples of relevant management information;
- 4) Documents pertaining to quality assurance.

# Quality Code

- Flanders 2015 - 2017

v.1.0.



**Setting of the Quality Code**

In the period from 2015 to 2017, universities and university colleges will be given the opportunity to demonstrate that they assume full responsibility for assuring and improving the quality of their programmes. In contrast to the institutional review combined with the external assessment of each of the programmes, this entails that the institutions take full charge of the conduct of quality assurance and have this conduct assessed. The Quality Code establishes the general points of departure to be met by this conduct and how the institutions will need to give account.

**Alignment with European reference frameworks**

This approach fits into a broader framework for quality and quality assurance in European higher education. This is why the Quality Code, firstly, ties in with the revised Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). These may be regarded as the current European requirements regarding quality and quality assurance in higher education. Secondly, and in keeping with the ESG, the quality of a programme cannot be assured without the active involvement of internal and external stakeholders, and of independent, external peers and experts. Thirdly, the Quality Code relates to the Flemish Qualification Structure and the European qualification frameworks. A key point for attention in this context is the conditions that apply for admission to certain professions or vocations. Finally, and also in accordance with the ESG, this Quality Code aims to emphasise that public transparency is an essential element in an institution's conduct of quality assurance of programmes.

**Conduct pilots**

In the period from 2015 to 2017, the conduct of quality assurance of programmes will be developed on the basis of pilots. These conduct pilots comprise both the view on and the approach to this conduct, and its concrete application in a number of programmes. The institutions determine which programmes will be incorporated into their conduct pilot. The design of the pilots may range from small-scale (cluster of programmes, department/faculty) to institution-wide. In addition, the conduct may be differentiated, for example, by adopting different assessment cycles, by a specific focus on quality features, or by differentiation in the (extent of) involvement of stakeholders and external parties.

**The extensive institutional review**

This Quality Code constitutes a supplement to the *Framework for Institutional Reviews – Flanders 2015-2017*, and only applies to the extensive institutional review. A regular institutional review assesses the institution's educational policy, quality assurance and quality culture. Within the framework of the institutional review, a review panel will assess processes and procedures that pertain to these elements. To this end, the panel will follow a horizontal and a vertical review trail. However, the regular institutional review will be extended for institutions that choose to assume full responsibility for the quality assurance of their programmes and, in particular, develop conduct pilots. This extension will take the form of a third review trail.

**The third review trail**

The third review trail focuses exclusively on the assurance of programme quality and, in particular, on the conduct of said quality assurance by the institution. In the

third review trail, the review panel focuses on the conduct exerted by the institution rather than assessing the actual quality of the programmes. To this end, the review panel uses the results and outcomes provided by the institution by way of substantiation. These results and outcomes may take various forms, such as, for example, internal reports, reports by stakeholders, feedback provided by peers or experts, benchmarking exercises, outcomes of surveys, etcetera. It is up to the institution to choose the form that best fits (the quality culture of) the institution.

**Features of high-quality higher education programmes**

The ESG contains elements pertaining to both quality assurance and the quality of the education provided. The quality assurance elements are examined on the basis of the *Framework for Institutional Reviews – Flanders 2015-2017*. During the third review trail, therefore, the review panel only considers those elements from the ESG that relate to the quality of programmes. In the Quality Code, these elements have been articulated as the features of high-quality higher education programmes in accordance with the ESG, in other words, *quality features*. These quality features do not constitute standards to be met and therefore they are not assessed separately. As the elements from the ESG that pertain to the quality of the education provided, they constitute guidelines for, on the one hand, the institutions in the development of their conduct of quality assurance, and, on the other, the review panel in its assessment. When assessing that conduct, the review panel verifies how these elements have been embedded in the conduct exerted by the institution. The review panel is expressly not meant to assess the programmes itself on the basis of these features.

The quality features constitute the final component of this Quality Code.

**Involving stakeholders, peers and experts**

Involving internal and external stakeholders on the one hand, and external and independent peers (from the discipline) and experts (with, for example, educational or professional expertise) on the other, enables the institution to demonstrate the quality features of its programmes in an authoritative manner. The institution is free to determine who the relevant stakeholders, peers and experts will be.

Continuous and systematic involvement of the above groups may take various forms. Stakeholders, peers and/or experts may be involved in the substantiation of a single, some, or all of the quality features of a programme. There is no need for every group to provide a substantiation of each of the programme's quality features.

**Conduct pilot report**

Prior to the third review trail, the institution submits a report regarding its pilot conduct of quality assurance to the review panel. This conduct pilot report may be integrated into the critical reflection ("self-evaluation report") as outlined in the *Framework for Institutional Reviews – Flanders 2015-2017*, or forwarded separately. In the report, the institution indicates how it has designed its conduct of quality assurance, whether the conduct is differentiated, which programmes participate in the pilot and to what extent the conduct is implemented in these programmes.

The review panel is guided by the conduct pilot report and, therefore, the conduct concept developed by the institution.

### **The assessment**

The review panel assesses the pilot on the basis of the conduct pilot report and the results and outcomes provided by the institution. The report enables the panel to focus on the conduct and assess it vis-à-vis the extent to which it has been realised. The results and outcomes involved must be provided to the panel during its site visit, rather than be forwarded beforehand.

The review panel will publish a separate report, focusing on improvement regarding its findings in the third review trail. This report will not contain a final judgement and will not be integrated into the assessment report regarding the institutional review.

The institution will be given a term of fifteen calendar days to respond to any factual inaccuracies in the report. Subsequently, NVAO will take its final decision (regarding the report and the recommendations). The institution may lodge an (internal) complaint with NVAO and an (external) appeal against any intended decision.

Following completion of all institutional reviews, NVAO will publish a general evaluation report, as well as all the underlying panel reports regarding the institutional reviews on the one hand, and the pilots on the other.

### **Quality features**

The following quality features have been derived from the ESG to underpin the conduct of quality assurance of programmes:

- The programme's learning outcomes constitute a transparent and programme-specific interpretation of the international requirements regarding level, content and orientation.
- The programme's curriculum ties in with the most recent developments in the discipline, takes account of the developments in the professional field, and is relevant to society.
- The staff allocated to the programme provide the students with optimum opportunities for achieving the learning outcomes.
- The programme offers the students adequate and easily accessible services, facilities and counselling.
- The teaching and learning environment encourages the students to play an active role in the learning process and fosters smooth study progress.
- The assessment of students reflects the learning process and concretises the intended learning outcomes.
- The programme provides comprehensive and readable information on all stages of study.
- Information regarding the quality of the programme is publicly accessible.

## Appendix: Source of the quality features

By way of the quality features, a relationship is established with the revised Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). This particularly concerns the elements of the Standards and the Guidelines that clearly refer to the quality of programmes rather than quality assurance procedures or processes.

- a) The programme's learning outcomes constitute a transparent and programme-specific interpretation of the international requirements regarding level, content and orientation.  
→ ESG 1.2. Design and approval of programmes
- b) The programme's curriculum ties in with the most recent developments in the discipline, takes account of the developments in the professional field, and is relevant to society.  
→ ESG 1.2. Design and approval of programmes  
→ ESG 1.3. Student-centred learning, teaching and assessment  
→ ESG 1.9. On-going monitoring and periodic review of programmes
- c) The staff allocated to the programme provide the students with optimum opportunities for achieving the learning outcomes.  
→ ESG 1.3. Student-centred learning, teaching and assessment  
→ ESG 1.5. Teaching staff
- d) The programme offers the students adequate and easily accessible services, facilities and counselling.  
→ ESG 1.3. Student-centred learning, teaching and assessment  
→ ESG 1.6. Learning resources and student support  
→ ESG 1.9. On-going monitoring and periodic review of programmes
- e) The teaching and learning environment encourages the students to play an active role in the learning process and fosters smooth study progress.  
→ ESG 1.2. Design and approval of programmes  
→ ESG 1.3. Student-centred learning, teaching and assessment
- f) The assessment of students reflects the learning process and concretises the intended learning outcomes.  
→ ESG 1.3. Student-centred learning, teaching and assessment  
→ ESG 1.9. On-going monitoring and periodic review of programmes
- g) The programme provides comprehensive and readable information on all stages of study.  
→ ESG 1.3. Student-centred learning, teaching and assessment  
→ ESG 1.4. Student admission, progression, recognition and certification  
→ ESG 1.8. Public information
- h) Information regarding the quality of the programme is publicly accessible.  
→ ESG 1.8. Public information  
→ ESG 1.9. On-going monitoring and periodic review of programmes

# Mapping ESG Part 1 to NVAO's Assessment Frameworks

## **Context**

This document gives information on the mapping of the ESG standards in Part 1 and the standards of NVAO's frameworks. It consists of three parts which explain this mapping from different perspectives. As such they complement the information in NVAO's Self-Evaluation Report 2017.

**Part 1** gives a summary of the general principles behind the structure of the NVAO frameworks and how this corresponds with ESG Part 1. It continues with a table of the mapping of ESG part 1 on the standards of the NVAO frameworks.

**Part 2** presents an explanation for each of the ESG Part 1 standards of how they relate to NVAO framework standards. This explains which interpretation are made in the mapping presented here.

**Part 3** presents the text of the NVAO framework for the Netherlands and for Flanders, with for each standard the related standards of ESG Part 1.

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## Part 1

### General principles and mapping of ESG standards

#### General principles

Compliance with ESG is a basic principle of the NVAO frameworks for the Netherlands and Flanders. These frameworks are determined by the legislation on the accreditation system in both countries. As indicated in the SAR, NVAO regards compliance with Part 1 of the ESG primarily the responsibility of institutions. Thereby, the guidelines provided in ESG Part 1 provide characteristics, not standards to be met. The Dutch frameworks of 2016 were specifically designed with ESG 2015 in mind. The 2014 frameworks are based on the previous version of ESG. In the following document all frameworks are mapped to ESG 2015.

NVAO uses generic frameworks for all its procedures which indicate the topics that are to be dealt with in an assessment. These do not prescribe how institutions fulfil the requirements of the standards. Institutions are free to choose their own strategies and policies in this respect and assessments take these as their point of reference.

The NVAO frameworks in the Netherlands and in Flanders follow a number of basic questions: what does an institution or programme intended to achieve; how does it want to do this, how does it check whether it achieves its goals, does it reach its intended goals and how is the institution working on improvement and development? These questions are the basis for the standards of the institutional audit/review, programme accreditation and initial accreditation.

A grouping of the ESG Part 1 standards relative to the main questions dealt with in the NVAO frameworks:

ESG Part 1	Domains in NVAO frameworks
(1) Policy and procedures for quality assurance (2) Design and approval of programmes (3) Student-centred learning, teaching and assessment (4) Student admission, progression, recognition and certification	1. Goals: vision, intended learning outcomes
(1) Policy and procedures for quality assurance (5) Teaching staff (6) Learning resources and student support (8) Public information	2. Means to achieve the vision or intended learning outcomes
<b>For programmes</b> (3) Student-centred learning, teaching and assessment  <b>For institutions</b> (1) Policy and procedures for quality assurance (7) Information management	3. System of assessment
<b>For programmes:</b> (3) Student-centred learning, teaching and assessment (4) Student admission, progression, recognition and certification  <b>For institutions:</b> (1) Policy and procedures for quality assurance (7) Information management (10) Cyclical external quality assurance	4. Achievement of the goals or learning outcomes, improvement and further development

In the Netherlands, the institutional audit complements the limited programme accreditation and covers elements of ESG Part 1 primarily at institutional level. These are subject to an audit that takes the institutional perspective and consists of a first visit with a general view, followed by review trails on specific topics. The extensive framework for programme accreditation is used for programmes in institutions that did not apply for an institutional audit or did not pass the audit. It covers all elements of ESG. In the context of an institutional audit, some standards in ESG Part 1, such as 1.1, 1.7, 1.8 and 1.9 apply to the institution rather than to a programme, or have a different meaning than in the context of a programme. This principle has not changed with the new Dutch framework of 2016.

In the Flemish system, the elements of ESG Part 1 pertaining to quality assurance are included in the *Framework for Institutional Reviews – Flanders 2015-2017*. The ESG include elements pertaining to both quality assurance and the quality of the education provided. The Quality Code is a formal supplement to the framework for the institutional review. This review was developed for institutions that choose to assume full responsibility for assuring the quality of their programmes and, in particular, develop a conduct for this. The Quality Code focuses on those elements of the ESG that relate to the quality of education at programme level. When assessing an institution's conduct of assuring the quality of programmes, the review panel verifies how these quality features have been embedded in this conduct. The Quality Code includes an annex that outlines the relationship between the quality features and the ESG.

Table of the mapping of ESG Part 1 standards on NVAO frameworks

	<b>Institutional audit</b> IA-NL/IR-FL	<b>Quality Code</b>	<b>Programme accreditation</b> LPA-NL/EPA-NL/ PA-FL/PA-NL16	<b>Initial accreditation</b> LIA-NL/EIA-NL/ IA-FL/PA-NL16
<b>ESG-Standards</b>	<b>Standards</b>	<b>Standards</b>	<b>Standards</b>	<b>Standards</b>
<b>(1) Policy and procedures for quality assurance</b>	1,2/1,2,3,4 (NL16: 1,2)	-	*/9/4 (NL16: */9)	*/9/4 (NL16: */9)
<b>(2) Design and approval of programmes</b>	1,2/1,2,3 (NL16:1,2)	A,B,E	1,2/1,2,3,4,9/1,2 (NL16:1,2/1,2,3,4,9)	1,2/1,2,3,4,9/1,2 (NL16:1,2/1,2,3,4,9)
<b>(3) Student-centred learning, teaching and assessment.</b>	1,2/1,2 (NL16:1)	B,C,D,E,F,G	1,2,3,4/1,2,3,4,10, 11/1,2,3 (NL16:1,2,3,4/1,2,3, 4,10,11)	1,2,3,4/1,2,3,4,10,12 /1,2,3 (NL16:1,2,3,4/1,2,34, 10,11)
<b>(4) Student admission, progression, recognition and certification</b>	2/2,3 (NL16: 2)	G	1,2,4/1,2,5,9,11/1, 2,3 (NL16:1,2,4/1,2,5,8, 9,11)	1,2,5/1,2,5,9,12/1,2, 3 (NL16: 1,2,4/1,2,5, 8,9,11)
<b>(5) Teaching staff</b>	2/2 (NL16:1,2)	C	2/6/2 (NL16:2/6)	2/6/2 (NL16:2/6)
<b>(6) Learning resources and student support</b>	2/2 (NL16:2)	D	2/7,8/2 (NL16:2/7,8)	2/7,8/2 (NL16:2/7,8)
<b>(7) Information management</b>	3,4/3 (NL16:3,4)		*/9/2,4 (NL16:*/9)	*/9/2,4 (NL16:*/9)
<b>(8) Public information</b>	2/2 (NL16:2)	G, H	2/8/2 (NL16:2/8,9)	2/8/2 (NL16:2/8)
<b>(9) Ongoing monitoring and periodic review of programmes</b>	3,4/3,4 (NL16:3,4)	B, D, F, H	*/9/4 (NL16:*/9)	*/9/4 (NL16:*/9)
<b>(10) Cyclical external quality assurance</b>	3,4/3,4 (NL16:3,4)	**	*/9/4 (NL16:*/9)	*/9/4 (NL16:*/9)

\* Covered in institutional audit. \*\* Falls under the institutional review.

Abbreviations: NL: the Netherlands; FL: Flanders; IA-NL: institutional audit; IR-FL: institutional review; QC: Quality Code; LIA-NL: limited initial accreditation; EIA-NL: extensive initial accreditation; LPA-NL: limited programme accreditation; EPA-NL: extensive programme accreditation; PA-FL: programme assessment; IA-FL: initial accreditation; NL16: x/x: new Dutch framework (limited/extensive).

## Part 2 ESG-Standards related to NVAO standards

The table in Part 1 shows that the ESG Part 1 standards overlap in certain areas and that there is a difference in the way they relate to programmes and to institutions. For each of the ESG Part 1 standards, the following explains in more detail how they relate the standards in the NVAO frameworks. It also presents the interpretations that are behind the mapping presented in the table and in the annotation below.

### (1) Policy and procedures for quality assurance

Policies for quality assurance is the main topic of the frameworks for the Dutch institutional audit (2014 and 2016), especially standard 1 and 2. The other standards deal with monitoring the results and further development, or the organisational structure (standard 5 in the 2014 framework). In the frameworks for limited programme assessments, policies for quality assurance are not mentioned as these fall under the institutional audit. The extensive framework does include them, in standard 9. There they refer primarily to the context of quality assurance around a programme, but also to institutional policies, procedures and structures. The 2016 framework is similar in this respect, but the institutional audit emphasizes the development of a quality culture.

The Flemish framework for the institutional review focuses mainly on the educational vision and its implementation, including the monitoring. Within this perspective, policies for educational quality are covered in all four standards, as these deal with Vision and Policy, Policy Implementation, Evaluation and Monitoring, and Enhancement. The Quality Code lists the quality aspects that are to be followed in the quality assurance of programmes in institutions that fall under the regime of the institutional review. It therefore covers ESG 1.1 in its entirety. The application of this framework is evaluated in a pilot. On programme level, the policy assurance system is only assessed for institutions that fall outside the system of institutional reviews. For this purpose, it is included in standard 4 of the framework for programme accreditation and initial accreditation.

### (2) Design and approval of programmes

On an institutional level, the policies and procedures for design and approval of programmes are close to the central educational philosophy of an institution which is the subject of Standard 1, but are primarily part of the implementation. In the Dutch frameworks for institutional audit of 2014 and 2016, ESG 1.2 is included in standard 2 on the implementation of policies for programme approval at central level. At programme level, ESG 1.2 is covered in standard 1 and 2 of the frameworks for (new) programmes (both limited and extensive), which refer to the formulation of intended learning outcomes and the design of the content of the curriculum. The extensive framework differentiates various aspects of curriculum design: orientation and content, in standards 2 and 3. To a certain extent, Standard 4 is relevant here too, as it focuses on the structure of the curriculum and the learning environment. In the extensive framework ESG 1.2 is also covered in standard 9, as part of the system of quality assurance which encompasses the curriculum.

In the Flemish frameworks for the institutional review, the institutional approach to the design of programmes, and the procedural implementation, is included in Standards 1, 2, and 3. In the frameworks for programme accreditation and initial accreditation, the standards 1 and 2 cover the design and approval of programmes. This element is also explicitly present in standard A,B and E of the Quality Code.

### (3) Student-centred learning, teaching and assessment

ESG 1.3 is present in all standards in the NVAO frameworks for (new) programmes related to defining intended learning outcomes, the development of the orientation, content and structure of the curriculum, assessment, and the evaluation of achieved learning outcomes (see table above). In all of these aspects, the notion of student-centred learning plays a great role. The 2016 framework takes this further than the 2014 frameworks, which is in line with the changes in ESG in 2015. In the institutional audit and review it is part of standard 1 that deals with the vision on education and quality, where student-centred learning is an important element. Standard 2 of the Dutch institutional audit, which deals with policy implementation is also relevant here as it

sees to the implementation of student-centred education expressed in the vision of the institution (Standard 1 of the audit).

In the Flemish framework for the institutional review, Standard 1 regards the educational vision which should support student-centred learning. It is also covered by Standard 2 of the framework for the institutional review as this describes the implementation of the student-centred learning in programmes. In the frameworks for programme accreditation and initial accreditation, ESG 1.3 is covered by Standards 1 defining the intended exit level and 2 relating to the teaching-learning environment, and by Standard 3, which describes the achieved exit level. The Quality Code refers to this explicitly under B,C,D,E,F and G, which makes that it is part of the quality assurance system for programmes.

#### (4) Student admission, progression, recognition and certification

By its composite nature, this ESG standard is covered under several NVAO standards. Admission is explicitly covered in Standard 5 of the Dutch frameworks for extensive programme accreditation and initial accreditation of 2014 and 2016. There it refers to the notion that programmes ties in with expected qualifications. The recognition of the orientation of the programme and its learning outcomes and qualifications is assessed under Standards 1 and 2 of both the limited and extensive frameworks for programme accreditation and initial accreditation. Standard 9 of the extensive framework is relevant as it oversees the level of the curriculum and thus the connection with prior qualifications, the recognition of the qualification in the workfield and international qualification framework, and also the monitoring of student progress. These aspects are also covered in the institutional audit under Standard 2. Certification is directly linked to the achievement of learning outcomes and thereby to Standard 4 in the limited framework for programme accreditation and Standard 5 of the limited initial accreditation, Standard 10 of the extensive framework for programme accreditation, and Standard 11 of the extensive framework for initial accreditation.

In the Flemish framework, the same distribution over several standards applies. Standard 2 and 3 of the frameworks for programme accreditation and initial accreditation primarily see to a correct design of the programme and the achievement of the intended learning outcomes and certification. This includes admission and student progress as part of the learning environment. Evidently, Standard 1 is also relevant here, as far as it sees to the recognition of the learning outcomes. In the framework for the Flemish institutional review, the elements of ESG 1.4 are covered under standard 2, as this sees to the learning environment as a means to effectuate policies and under Standard 3 which sees to evaluation and guaranteeing the obtained qualifications. It is included in standard G of the Quality Code, and thus incorporated in the policies for quality assurances for programmes, in conjunction with the institutional review.

#### (5) Teaching staff

The policies concerning quality and quantity of the teaching staff are covered Standard 2 of the Dutch institutional audit. In the 2016 framework, the policies are also part of Standard 1. On the institutional level, HRM policies, including specific didactic training, follow the educational policy of the institution. In the framework for the limited programme accreditation and initial accreditation teaching staff it is mentioned as aspect of the learning environment (Standard 2). In the extensive frameworks (2014 and 2016) it is mentioned separately in Standard 6.

In the Flemish frameworks, the quality of the staff is included in Standard 2 of the institutional review, which sees to HRM policies as a tool to implement the vision of the institution. In the frameworks for programme accreditation and initial accreditation it is included in the quality of the learning environment under Standard 2. The Quality Code includes the quality of teaching staff under standard C.

#### (6) Learning resources and student support

Learning resources and student support primarily relate to the quality of the learning environment, which is covered at a policy level in the Dutch institutional audit under Standard 2 (2014) and 2016. There, all aspects of the learning resources and student support are mentioned. On a programme level, these elements return in Standard 2 of the limited framework for programme accreditation and initial accreditation. The extensive frameworks for programme accreditation and initial accreditation separate facilities and student support,

adding also the element of information provision, in Standard 7 and 8. In addition to what is mentioned in the SAR, these two standards are relevant here.

In the Flemish framework for the institutional review, learning resources and student support are part of the policies that are relevant for the implementation of an educational vision at policy level, and thereby fall under Standard 2. In the Quality Code, standard D sees to the services, facilities and counselling, as part of the quality assurance system for programmes. In the frameworks for programme accreditation and initial accreditation it is included in the quality of the learning environment under Standard 2.

### (7) Information management

In the frameworks for the Dutch institutional audit, information management is part of the system of monitoring and evaluating the implementation of policies, which is included in Standard 3. Information management underpins the policy for improvement as these need monitoring. Therefore it is also included under standard 4. In the frameworks for limited programme accreditation, information management is not mentioned as a specific topic, as this should be dealt with at institutional level in the institutional audit. In the extensive frameworks for programme accreditation and initial accreditation it is included in Standard 9, which sees to internal quality procedures. These include monitoring and evaluation.

The Flemish framework for the institutional review includes information management in Standard 3, which deals with the evaluation and monitoring of the implementation of policies. This replaces the reference in the SAR. In addition, the framework of the programme accreditation and initial accreditation, it is part of the learning environment, which is the topic of Standard 2, but only specifically included in Standard 4 and only assessed in institutions that fall outside the institutional review.

### (8) Public information

This ESG standard comprises both internal and external communication and information provision. Thereby, it relates to several standards in the Dutch frameworks. In the Dutch framework for institutional audit (both 2014 and 2016), public information is part of the implementation of an educational philosophy (Standard 2), where facilities and practical support is included on an institutional level. This refers also to communication for students in support of their studies. Providing insight to society and external parties on the programmes is part of this. In the frameworks for limited programme accreditation, this is included in Standard 2, but there it refers to the learning environment and the provided facilities to students for an individual programme. In the extensive frameworks for programme accreditation and initial accreditation, it is mentioned separately as an element of tutoring and information provision, under Standard 8. In the 2016 extensive framework for programme and initial accreditation, Standard 9 explicitly states the provision of public information on the quality of education, in extension of the previous framework of 2014.

In the Flemish frameworks, it is also included in Standard 2 of the institutional review, as part of the realisation of policies to produce results. This also refers to the provision of information to students. In the frameworks for programme accreditation and initial accreditation it is therefore part of the facilities and included in Standard 2. In the context of the quality assurance for programmes regulated by the Quality Code, both providing information to students as well as providing public information on the quality of programmes is a major topic and are included under G and H.

### (9) Ongoing monitoring and periodic review of programmes

The Standards 3 and 4 of the Dutch institutional audit of 2014 and 2016 include monitoring and review of programmes. Standard 3 focuses on systematic evaluation of the realisation of policy objectives and the quality of education on an institutional level. Standard 4 focuses more on the improvement measures on the basis of this monitoring and the evaluation of progress in those processes, again at institutional level. On programme level, this element returns in Standard 9 of the extensive framework for programme accreditation and initial accreditation, as part of the quality assurance procedures. It is not present in the limited frameworks, as this aspect is covered in the institutional audit.

In the Flemish institutional audit, monitoring systems to guarantee the quality of education are included in Standard 3. Improvement policies and actions on the basis of the monitoring and assessment are included in

Standard 4. In the Quality Code, the monitoring and review of programmes is a prominent element, as this framework governs the quality assurance of programmes. There, it is included in Standard B, D, F, and H. In the Flemish frameworks for programme accreditation and initial accreditation, the evaluation and review of programmes is included in Standard 4, but only applies to institutions outside the regime of the institutional review. For other programmes, this is included in the institutional review and the Quality Code.

#### (10) Cyclical external quality assurance

The cyclical external quality assurance is built into the Dutch system of accreditation of higher education. Cyclical external review is required for all programmes, whether the institution has passed the institutional audit or not. It is therefore implicit in Standard 3 and 4 of the institutional audit. The framework for the limited programme accreditation and initial accreditation do not mention this aspect as it is covered in the institutional audit. It is covered in the quality assurance system as described in Standard 9 of the extensive framework for programme accreditation and initial accreditation.

In the Flemish framework, cyclical external quality assurance is explicitly included in Standard 3 and 4 of the institutional review. As the institutional review supposes that there are no periodic programme assessments, the quality assurance of programmes, including an external assessment is included in the review framework. Therefore, it is not referred to in the Quality Code. In the Flemish frameworks for programme accreditation and initial accreditation, the cyclical external quality assurance is included in Standard 4, but only applies to institutions outside the regime of the institutional review.

## Part 3 Annotation of NVAO frameworks to show in detail the mapping of the text of the NVAO standards and the ESG Part 1 Standards

### Dutch framework 2016 - institutional audit

Standards of the institutional audit	Standard of ESG Part 1
<p><b>Standard 1: Philosophy and policy</b>            The institution has a broadly supported educational philosophy and pursues a corresponding policy focused on the internal quality assurance of its education.</p> <p>The institution holds a well-defined view of good education which is shared in all its departments. Teachers and students support this philosophy, and develop it in mutual consultation and in concert with external stakeholders. Periodical coordination with the relevant (changing) environment ensures the topicality of this philosophy. The educational philosophy has been translated into explicit points of departure for quality assurance. In accordance with the ESG, the educational philosophy is student-oriented (student-centred learning).</p>	<p><b>(1) Policy and procedures for quality assurance</b>  <b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment.</b>  <b>(5) Teaching staff</b></p>
<p><b>Standard 2: Implementation</b>            The institution realises its educational philosophy in an effective manner, which is demonstrated by appropriate policy actions and processes, particularly relating to staff, student assessment, services and facilities, and students with a functional impairment.</p> <p>The philosophy has been appropriately translated into concrete policy actions and processes. The institution has processes in place for the design, recognition, and quality assurance of its programmes in keeping with the European Standards and Guidelines, and demonstrates the effectiveness and application of such processes by means of a track record. Students and staff co-own the policy and contribute to its realisation on the basis of the shared philosophy. This commitment demonstrates how the institution realises its intended quality culture.</p> <p>Implementation is consistent with the philosophy: staff, student assessment, and services and facilities further the accessibility and practicability of the education provided.</p>	<p><b>(1) Policy and procedures for quality assurance</b>  <b>(2) Design and approval of programmes</b>  <b>(4) Student admission, progression, recognition and certification</b>  <b>(5) Teaching staff</b>  <b>(6) Learning resources and student support</b>  <b>(8) Public information</b></p> <p>ESG 1.8 has been included here, while it is also relevant for standard 3 Evaluation and monitoring. The notion of a track record encompasses also public information on the quality of the education and the realisation of the educational philosophy.</p>
<p><b>Standard 3: Evaluation and monitoring</b>            The institution systematically evaluates whether the intended policy objectives relating to educational quality are achieved. Relevant stakeholders are involved in this process.</p> <p>The institution organises effective feedback that supports the realisation of its policy. To that end, it initiates appropriate evaluation and measurement activities that are stably embedded in the institution. These tools provide insightful information that can be used for the formulation of desired quality development. The tools comprise a transparent method for identifying and reporting risks, taking action where needed, with a focus on improvement.</p>	<p><b>(7) Information management</b>  <b>(9) Ongoing monitoring and periodic review of programmes</b>  <b>(10) Cyclical external quality assurance</b></p>

<p>Reflection on the output forms part of the organisational model, and provides sufficient insight into the effectiveness of the policy implementation in all tiers of the organisation and staff participation.</p> <p>Since the measurement and evaluation activities revolve around effectiveness, they do not need to be uniform across the entire institution.</p> <p>Students, staff, alumni and experts from the professional field are actively involved in the evaluations.</p> <p>The institution publishes accurate, up-to-date and accessible information regarding the evaluation results.</p>	
<p><b>Standard 4: Development</b> The institution has a focus on development and works systematically on the improvement of its education.</p> <p>Feedback and reflection on output constitute the basis for measures targeted at reinforcing, improving, or adjusting policy or its implementation. Following up on measures for improvement is embedded in the organisational structure. The development policy pursued by the institution encourages all the parties concerned to contribute to innovation and quality improvement.</p> <p>Internal and external stakeholders have been informed regarding the developments that are primed on the basis of the evaluation outcomes. The institution pursues continuous improvement, adapts to the (changing) circumstances, and conforms to the expectations of students and employers.</p>	<p><b>(7) Information management</b> <b>(9) Ongoing monitoring and periodic review of programmes</b> <b>(10) Cyclical external quality assurance</b></p> <p>This fourth standard focuses on measures for development rather than measurements of performance. The Institutional audit presupposes that all programmes in an institution are assessed every six years in order to renew accreditation. The standard describes a process of internal policy aimed at development of quality, which transpires in external assessments of programmes.</p>

### Dutch framework 2016 - limited programme assessment

<p><b>General remarks</b></p> <p>These standards apply for accreditation of existing programmes as well as for initial accreditation of new programmes. Standard 4 only applies to initial accreditation if a new programme has already produced learning outcomes.</p> <p>The limited assessment is only available for programmes offered by institutions that passed the institutional audit. Therefore, the framework is complementary to that of the institutional audit. The following standards of ESG Part 1 are covered by the institutional audit:</p> <p>(1) Policy and procedures for quality assurance (7) Information management (9) Ongoing monitoring and periodic review of programmes (10) Cyclical external quality assurance</p>	
<p><b>Standards for the limited programme assessment Dutch framework 2016</b></p>	<p><b>Standards of ESG Part 1</b></p>
<p><b>Standard 1: Intended learning outcomes</b> The intended learning outcomes tie in with the level and orientation of the programme; they are geared to the expectations of the professional field, the discipline, and international requirements.</p>	<p><b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b></p>

<p>The intended learning outcomes demonstrably describe the level of the programme (Associate Degree, Bachelor's, or Master's) as defined in the Dutch qualifications framework, as well as its orientation (professional or academic). In addition, they tie in with the regional, national or international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme. Insofar as is applicable, the intended learning outcomes are in accordance with relevant legislation and regulations.</p>	<p>The use of the term 'learning outcomes' ('leerresultaten' in Dutch) refers to ESG 1.3.</p> <p>In addition to the SAR: this standard also links with ESG 1.4 as this describes the link with (inter)national requirements.</p>
<p><b>Standard 2: Teaching-learning environment</b> The curriculum, the teaching-learning environment and the quality of the teaching staff enable the incoming students to achieve the intended learning outcomes.</p> <p>The intended learning outcomes have been adequately translated into educational objectives of (components of) the curriculum. The diversity of the students admitted is taken into account in this respect. The teachers have sufficient expertise in terms of both subject matter and teaching methods to teach the curriculum, and provide appropriate guidance. The teaching-learning environment encourages students to play an active role in the design of their own learning process (student-centred approach). Programme-specific services and facilities are assessed, unless they involve institution-wide services and facilities already reported on during the institutional audit.</p>	<p><b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b> <b>(5) Teaching staff</b> <b>(6) Learning resources and student support</b> <b>(8) Public information</b></p>
<p><b>Standard 3: Student assessment</b> The programme has an adequate system of student assessment in place.</p> <p>The student assessments are valid, reliable and sufficiently independent. The requirements are transparent to the students. The quality of interim and final examinations is sufficiently safeguarded and meets the statutory quality standards. The tests support the students' own learning processes.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b></p>
<p><b>Standard 4: Achieved learning outcomes</b> The programme demonstrates that the intended learning outcomes are achieved. (Cf. paragraph on initial accreditations, Exception: ex-ante assessment in initial accreditations.)</p> <p>The achievement of the intended learning outcomes is demonstrated by the results of tests, the final projects, and the performance of graduates in actual practice or in post-graduate programmes.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b></p> <p>In addition to the SAR: this standard also links to <b>(4) Student admission, progression, recognition and certification.</b></p>

## Dutch framework 2016 - extensive programme assessment

<b>General remarks</b>	
<p>The extensive framework is available to institutions that did not pass or did not apply for the institutional audit. Some standards overlap with the limited framework, but add the institutional context. It applies to programme accreditation and initial accreditation of new programmes. In the latter case, Standard 11 only applies when a programme has already produced learning outcomes.</p>	
<b>Standards for the extensive programme assessment Dutch framework 2016</b>	<b>Standard of ESG Part 1</b>
<p><b>Intended learning outcomes</b>  <b>Standard 1:</b> The intended learning outcomes tie in with the level and orientation of the programme; they are geared to the expectations of the professional field, the discipline, and international requirements.</p> <p>The intended learning outcomes demonstrably describe the level of the programme (Associate Degree, Bachelor's, or Master's) as defined in the Dutch qualifications framework, as well as its orientation (professional or academic). In addition, they tie in with the regional, national or international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme. Insofar as is applicable, the intended learning outcomes are in accordance with relevant legislation and regulations. The points of departure for the set-up of the programme chime with the educational philosophy and the profile of the institution. The intended learning outcomes are periodically evaluated.</p>	<p><b>(2) Design and approval of programmes</b>            Compared to the limited framework, this standard adds the context of the educational philosophy of the institution.</p> <p><b>(3) Student-centred learning, teaching and assessment</b> The use of the term 'learning outcomes' ('leerresultaten' in Dutch) refers to ESG 1.3.</p> <p><b>(4) Student admission, progression, recognition and certification.</b> In addition to the reference in the SAR: this standard also links with ESG 1.4, as this describes the connection with (inter)national requirements.</p>
<p><b>Curriculum; orientation</b>  <b>Standard 2:</b> The curriculum enables the students to master appropriate (professional or academic) research and professional skills.</p> <p>The curriculum ties in with current (international) developments, requirements and expectations in the professional field and the discipline. Academic skills and/or research skills and/or professional competencies are substantiated in a manner befitting the orientation and level of the programme.</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification</b></p>
<p><b>Curriculum; content</b>  <b>Standard 3:</b> The contents of the curriculum enable students to achieve the intended learning outcomes.</p> <p>The learning outcomes have been adequately translated into educational objectives of (components of) the curriculum.</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b></p>
<p><b>Curriculum; learning environment</b>  <b>Standard 4:</b> The structure of the curriculum encourages study and enables students to achieve the intended learning outcomes.</p> <p>The curriculum is designed in a manner conducive to the achievement of the intended learning outcomes. The teaching-learning environment encourages students to play</p>	<p><b>(3) Student-centred learning, teaching and assessment.</b>            Compared to the limited framework, this standard adds the context of the educational philosophy of the institution.</p>

<p>an active role in the design of their own learning process (student-centred approach). The design of the learning environment chimes with the educational philosophy of the institution.</p>	<p><b>(2) Design and approval of programmes</b> relates to standard 4, as far as it focuses on the structure of the curriculum.</p>
<p><b>Intake</b> <b>Standard 5:</b> The curriculum ties in with the qualifications of the incoming students.</p> <p>The admission requirements in place are realistic with a view to the intended learning outcomes.</p>	<p><b>(4) Student admission, progression, recognition and certification</b></p>
<p><b>Staff</b> <b>Standard 6:</b> The staff team is qualified for the realisation of the curriculum in terms of content and educational expertise. The team size is sufficient.</p> <p>The teachers have sufficient expertise in terms of both subject matter and teaching methods to teach the programme. The staff policy is conducive in this respect. Sufficient staff is available to teach the programme and tutor the students.</p>	<p><b>(5) Teaching staff</b> This replaces the reference to Standard 5 in the SAR.</p>
<p><b>Facilities</b> <b>Standard 7:</b> The accommodation and material facilities (infrastructure) are sufficient for the realisation of the curriculum.</p> <p>The accommodation of the programme and the facilities are in keeping with the intended learning outcomes and the teaching-learning environment.</p>	<p><b>(6) Learning resources and student support</b></p>
<p><b>Standard 8: Tutoring</b> The tutoring of and provision of information to students are conducive to study progress and tie in with the needs of students.</p> <p>Students receive appropriate tutoring (including students with a functional impairment). The information provision of the programme is adequate.</p>	<p><b>(4) Student admission, progression, recognition and certification</b> <b>(6) Learning resources and student support</b> <b>(8) Public information</b></p> <p>The SAR links standard 7 to ESG 1.6, but standard 8 is equally relevant in this respect. ESG 1.8 is relevant for this standard as far as it refers to information for students needed for managing their studies.</p>
<p><b>Standard 9: Quality assurance</b> The programme has an explicit and widely supported quality assurance system in place. It promotes the quality culture and has a focus on development.</p> <p>The programme organises effective periodic feedback that supports the achievement of the intended learning outcomes. Existing programmes implement appropriate improvements based on the results of the previous assessment. They initiate appropriate evaluation and measurement activities to that end. The outcomes of this evaluation demonstrably constitute the basis for development and improvement. Within the institution, those responsible are held to account regarding the extent</p>	<p><b>(1) Policy and procedures for quality assurance</b> <b>(2) Design and approval of programmes</b> <b>(7) Information management</b> <b>(8) Public information</b> <b>(9) Ongoing monitoring and periodic review of programmes</b> <b>(10) Cyclical external quality assurance</b></p> <p>In addition to the SAR, this standard also relates to ESG 1.8. It also refers to <b>1.4 Student admission, progression, recognition</b></p>

<p>to which the programme contributes to the attainment of the institution's strategic goals. Quality assurance ensures the achievement of the intended learning results. The programme committee, examination board, staff, students, alumni and the relevant professional field are actively involved in the programme's internal quality assurance. The programme's design processes, its recognition, and its quality assurance are in keeping with the European Standards and Guidelines. The programme publishes accurate, reliable information regarding its quality, which is easily accessible to the target groups.</p>	<p><b>and certification</b> for the recognition of programmes.</p> <p>This standard adds those elements that are assessed in the institutional audit and are left out of the limited assessments.</p>
<p><b>Standard 10: Student assessment</b> The programme has an adequate student assessment system in place.</p> <p>The student assessments are valid, reliable and sufficiently independent. The quality of interim and final examinations is sufficiently safeguarded and meets the statutory quality standards. The tests support the students' own learning processes.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b></p>
<p><b>Standard 11: Achieved learning outcomes</b> The programme demonstrates that the intended learning outcomes are achieved.</p> <p>The achievement of the intended learning outcomes is demonstrated by the results of tests, the final projects, and the performance of graduates in actual practice or in post-graduate programmes.</p>	<p><b>(3) Student-centred learning, teaching and assessment.</b> <b>(4) Student admission, progression, recognition and certification</b></p> <p>The framework distinguishes between the system of assessment and the achieved learning outcomes.</p>

## Dutch framework 2014 - institutional audit

<p><b>General remarks</b> The frameworks of 2014 contained separate frameworks for programme accreditation and initial accreditation (limited and extensive), although the differences in the text of the standards are minor. These were combined in the 2016 framework. This means that concordance with ESG standards for both forms of assessments is highly similar.</p>	
<p><b>Institutional audit</b></p>	<p><b>Standards of ESG Part 1</b></p>
<p><b>Standard 1: Vision of the quality of the education provided</b> <b>The institution has a broadly supported vision of the quality of its education and the development of a quality culture.</b></p> <p><b>Explanation:</b> This vision pertains to the institution's ambition regarding the quality of its education and its requirements regarding the quality of its programmes. For the purpose of developing a quality culture, the board of the institution encourages the programmes to monitor their quality and implement improvements wherever required. An active role by all those involved in the education provided is vitally important to this end.</p>	<p><b>(1) Policy and procedures for quality assurance</b> <b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment.</b></p>
<p><b>Standard 2: Policy</b> <b>The institution pursues an adequate policy in order to realise its vision of the quality of its education. This comprises at least: policies in the field of education, staff, facilities, accessibility and feasibility for students with a functional disability, embedding of research in the</b></p>	<p><b>(1) Policy and procedures for quality assurance</b> <b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment.</b></p>

<p><b>education provided, as well as the interrelation between education and the (international) professional field and discipline.</b></p> <p><b>Explanation:</b> The policy fields to be assessed are not limited to those stated in the standard but depend on the institution's vision of the quality of its education. Adequate policy presupposes concrete objectives ensuing from said vision and allocation of sufficient resources to implement said policy.</p> <p>Anchoring research in the education provided is important because all higher education institutions have to engage in research to some extent, even if they do not conduct research themselves and only wish to inform students of new scientific developments in the domain of the programme in which they are enrolled. This standard expressly does not involve an assessment of the research itself.</p>	<p><b>(4) Student admission, progression, recognition and certification</b>  <b>(5) Teaching staff</b>  <b>(6) Learning resources and student support</b>  <b>(8) Public information</b></p>
<p><b>Standard 3: Output</b>  <b>The institution has insight into the extent to which its vision of the quality of its education is realised. It gauges and evaluates the quality of its programmes on a regular basis, among students, staff, alumni and representatives of the professional field.</b></p> <p><b>Explanation:</b> The institution has management information with regard to the implementation of policy and the output of its programmes. It also has an adequate system of internal evaluations and external assessments. The evaluation and gauging activities have been set up efficiently and provide the board of the institution with aggregated information. Institution-wide uniformity in the evaluation and gauging activities is not required.</p>	<p><b>(7) Information management</b>  <b>(9) Ongoing monitoring and periodic review of programmes</b>  <b>(10) Cyclical external quality assurance</b></p>
<p><b>Standard 4: Improvement policy</b>  <b>The institution can demonstrate that it systematically improves the quality of its programmes wherever required.</b></p> <p><b>Explanation:</b> The institution pursues an active improvement policy based on its insight into the output achieved. The institution takes action if so prompted by the results of internal and external evaluations. This contributes to the quality culture within the institution.</p>	<p><b>(7) Information management</b>  <b>(9) Ongoing monitoring and periodic review of programmes</b>  <b>(10) Cyclical external quality assurance</b></p>
<p><b>Standard 5: Organisation and decision-making structure</b>  <b>The institution has an effective organisation and decision-making structure with regard to the quality of its programmes, which clearly defines the tasks, authorities and responsibilities and which encompasses the participation of students and staff.</b></p> <p><b>Explanation:</b> The organisation and decision-making structure enables the institution to realise its vision (standard 1), its policy (standard 2), the output (standard 3) and its improvement policy (standard 4) in a coherent fashion. The commitment of staff and students is demonstrated by the manner in which they are consulted and the</p>	<p>The organisation and decision making structure is supportive of all ESG part 1 standards, but not a specific subject of any one of these.</p>

consideration of their recommendations in the programmes. If laid down by law, the assessment of this standard also covers the terms of reference and the positioning of examining boards and programme committees.	
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## Dutch framework 2014 - limited programme assessment

<p>The limited framework is only available to institutions who passed the institutional audit and is therefore complementary to the latter. The following standards of ESG Part 1 are covered in the institutional audit.</p> <p>(1) Policy and procedures for quality assurance  (7) Information management  (9) Ongoing monitoring and periodic review of programmes  (10) Cyclical external quality assurance</p>	
Standard of limited programme assessment	Standards of ESG Part 1
<p><b>Intended learning outcomes</b>  <b>Standard 1: The intended learning outcomes of the programme have been concretised with regard to content, level and orientation; they meet international requirements.</b></p> <p><b>Explanation:</b> As for level and orientation (bachelor's or master's; professional or academic), the intended learning outcomes fit into the Dutch qualifications framework. In addition, they tie in with the international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme. Insofar as is applicable, the intended learning outcomes are in accordance with relevant legislation and regulations.</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b></p> <p>The 2014 framework used the Dutch term 'beoogde eindkwalificaties', translated as 'intended learning outcomes', which refers to the concept of student-centered learning of ESG 1.3.</p> <p><b>(4) Student admission, progression, recognition and certification.</b>  In addition to the SAR: this standard also links with ESG 1.4, as this describes the link with (inter)national requirements.</p>
<p><b>Teaching-learning environment</b>  <b>Standard 2: The curriculum, staff and programme-specific services and facilities enable the incoming students to achieve the intended learning outcomes.</b></p> <p><b>Explanation:</b> The contents and structure of the curriculum enable the students admitted to achieve the intended learning outcomes. The quality of the staff and of the programme-specific services and facilities is essential to that end. Curriculum, staff, services and facilities constitute a coherent teaching-learning environment for the students.</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification</b>  <b>(5) Teaching staff</b>  <b>(8) Public information</b>  <b>(6) Learning resources and student support</b>  (replaces reference in the SAR)</p>
<p><b>Assessment</b>  <b>Standard 3: The programme has an adequate assessment system in place.</b></p> <p><b>Explanation:</b> The tests and assessments are valid, reliable and transparent to the students. The programme's examining board safeguards the quality of the interim and final tests administered.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b></p>
<p><b>Achieved learning outcomes</b>  <b>Standard 4: The programme demonstrates that the intended learning outcomes are achieved.</b></p>	<p><b>(3) Student-centred learning, teaching and assessment.</b>  <b>(4) Student admission, progression, recognition and certification</b></p>

<p><b>Explanation:</b> The level achieved is demonstrated by interim and final tests, final projects and the performance of graduates in actual practice or in post-graduate programmes.</p>	<p>The 2014 framework used the Dutch term ‘gerealiseerde eindkwalificaties’, translated as ‘achieved learning outcomes’. This standard is thereby also linked to ESG 1.3.</p>
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## Dutch framework 2014 - extensive programme assessment

Standards for the extensive programme assessment	Standards of ESG Part 1
<p><b>Intended learning outcomes</b>  <b>Standard 1: The intended learning outcomes of the programme have been concretised with regard to content, level and orientation; they meet international requirements.</b></p> <p><b>Explanation:</b> As for level and orientation (bachelor’s or master’s; professional or academic), the intended learning outcomes fit into the Dutch qualifications framework. In addition, they tie in with the international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme. Insofar as is applicable, the intended learning outcomes are in accordance with relevant legislation and regulations.</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment.</b></p> <p>In addition to the indication in the SAR, this standard can also be linked to <b>ESG 1.4 Student admission, progression, recognition and certification</b>, as it refers to the accordance with relevant legislation and regulations.</p> <p>The 2014 framework used the Dutch term ‘beoogde eindkwalificaties’, translated as ‘intended learning outcomes’, which links the standard also to ESG 1.3.</p>
<p><b>Curriculum</b>  <b>Standard 2: The orientation of the curriculum assures the development of skills in the field of scientific research and/or the professional practice.</b></p> <p><b>Explanation:</b> The curriculum has demonstrable links with current developments in the professional field and the discipline.</p> <p><b>Standard 3: The contents of the curriculum enable students to achieve the intended learning outcomes.</b></p> <p><b>Explanation:</b> The learning outcomes have been adequately translated into attainment targets for (components of) the curriculum. Students follow a study curriculum which is coherent in terms of content.</p> <p><b>Standard 4: The structure of the curriculum encourages study and enables students to achieve the intended learning outcomes.</b></p> <p><b>Explanation:</b> The teaching concept is in line with the intended learning outcomes and the teaching formats tie in with the teaching concept. Factors pertaining to the curriculum and hindering students’ progress are removed as far as possible. In addition, students with a functional disability receive additional career tutoring.</p> <p><b>Standard 5: The curriculum ties in with the qualifications of the incoming students.</b></p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification</b></p> <p>This replaces the reference in the SAR.</p> <p>In addition to what is indicated in the SAR: standard 3 also links to ESG 1.2. Partly, this is also the case for standard 4, as it focuses on the structure of the curriculum.</p> <p>In addition to what is indicated in the SAR: standard 3 and 4 also link to ESG 1.3 as they focus on the content and structure of the curriculum which enable students to achieve the intended learning outcomes.</p> <p><b>(4) Student admission, progression, recognition and certification</b></p>

<p><b>Explanation:</b> The admission requirements are realistic with a view to the intended learning outcomes</p>	
<p><b>Staff</b>  <b>Standard 6: The staff is qualified and the size of the staff is sufficient for the realisation of the curriculum in terms of content, educational expertise and organisation.</b></p> <p><b>Explanation:</b> The factual expertise available among the staff ties in with the requirements set for professional or academic higher education programmes.</p>	<p><b>(5) Teaching staff</b>  This replaces the reference in the SAR.</p>
<p><b>Services and facilities</b>  <b>Standard 7: The accommodation and the facilities (infrastructure) are sufficient for the realisation of the curriculum.</b></p> <p><b>Standard 8: Tutoring and student information provision bolster students' progress and tie in with the needs of students.</b></p>	<p><b>(6) Learning resources and student support.</b>  In addition to what is indicated in the SAR: both standard 7 and standard 8 also cover ESG 1.6.</p> <p><b>(8) Public information</b>  Standard 8 refers also to the information needed for students to manage their studies effectively. This is part of the learning resources (ESG 1.6). This replaces the reference in the SAR.</p>
<p><b>Quality assurance</b>  <b>Standard 9: The programme is evaluated on a regular basis, partly on the basis of assessable targets.</b></p> <p><b>Explanation:</b> The programme monitors the quality of the intended learning outcomes, the curriculum, the staff, the services and facilities, the assessments and the learning outcomes achieved through regular evaluations. The outcomes of these evaluations constitute the basis for demonstrable measures for improvement that contribute to the realisation of the targets. Programme committees, examining boards, staff, students, alumni and the relevant professional field of the programme are actively involved in the programme's internal quality assurance.</p>	<p><b>(1) Policy and procedures for quality assurance</b>  <b>(2) Design and approval of programmes</b>  <b>(4) Student admission, progression, recognition and certification</b>  <b>(7) Information Management</b>  <b>(9) Ongoing monitoring and periodic review of programmes</b>  <b>(10) Cyclical external quality assurance</b>  This replaces the reference in the SAR.</p>
<p><b>Assessment</b>  <b>Standard 10: The programme has an adequate assessment system in place.</b></p> <p><b>Explanation:</b> The tests and assessments are valid, reliable and transparent to the students. The examining board of the programme safeguards the quality of interim and final tests.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b></p> <p>In the SAR ESG 1.9 Ongoing monitoring and periodic review of programmes, and 1.7 Information Management. This replaces the reference in the SAR.</p>
<p><b>Learning outcomes achieved</b>  <b>Standard 11: The programme demonstrates that the intended learning outcomes are achieved.</b></p> <p><b>Explanation:</b> The level achieved is demonstrated by interim and final tests, final projects and the performance of graduates in actual practice or in subsequent programmes.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification</b></p> <p>The 2014 framework used the Dutch term 'gerealiseerde eindkwalificaties', translated as 'learning outcomes achieved', which links the standard to ESG 1.3.</p>

## Dutch framework 2014 - limited initial accreditation

<p><b>General remarks</b></p> <p>The limited framework is only available to institutions who passed the institutional audit and is therefore complementary to the latter. The following standards of ESG Part 1 are covered in the institutional audit.</p> <p>(1) Policy and procedures for quality assurance  (7) Information management  (9) Ongoing monitoring and periodic review of programmes  (10) Cyclical external quality assurance</p> <p>Standard 5 (Achieved learning outcomes) only applies when a new programme has already produced learning outcomes.</p>	
<p><b>Standards for the limited initial accreditation</b></p>	
<p><b>Intended learning outcomes</b></p> <p><b>Standard 1: The intended learning outcomes of the programme have been concretised with regard to content, level and orientation; they meet international requirements.</b></p> <p><b>Explanation:</b> As for level and orientation (bachelor's or master's; professional or academic), the intended learning outcomes fit into the Dutch qualifications framework. In addition, they tie in with the international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme.</p>	<p><b>Standards of ESG Part 1</b></p> <p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment.</b>  <b>(4) Student admission, progression, recognition and certification.</b></p> <p>In addition to the SAR: standard 1 can also be linked to ESG 1.3</p>
<p><b>Teaching-learning environment</b></p> <p><b>Standard 2: The curriculum, staff and programme-specific services and facilities enable incoming students to achieve the intended learning outcomes.</b></p> <p><b>Explanation:</b> The contents and structure of the curriculum enable the students admitted to achieve the intended learning outcomes. The quality of the staff and of the programme-specific services and facilities is essential to that end. Curriculum, staff, services and facilities constitute a coherent teaching-learning environment for the students.</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification</b>  <b>(5) Teaching staff</b>  <b>(8) Public information</b>  <b>(6) Learning resources and student support</b></p> <p>Replaces the reference in the SAR.</p>
<p><b>Assessment</b></p> <p><b>Standard 3: The programme has an adequate assessment system in place.</b></p> <p><b>Explanation:</b> The level achieved is demonstrated by interim and final tests. The tests and assessments are valid, reliable and transparent to the students.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b></p>
<p><b>Graduation guarantee and financial provisions</b></p> <p><b>Standard 4: The institution guarantees students that they can complete the entire curriculum and makes sufficient financial provisions available.</b></p> <p><b>Explanation:</b> The graduation guarantee spans a reasonable period of time that is related to the length of the programme.</p>	<p>Conditions for financial sustainability are not represented in ESG.</p>

<p><b>If applicable: Achieved learning outcomes</b>  <b>Standard 5: The programme demonstrates that the intended learning outcomes are achieved.</b></p> <p><b>Explanation:</b> The level achieved is demonstrated by interim and final tests, final projects and the performance of graduates in actual practice or in subsequent programmes.</p>	<p>In addition to what is indicated in the SAR:  <b>(4) Student admission, progression, recognition and certification</b>  This replaces the reference in the SAR to standard 4 for ESG 1.4.</p> <p>The 2014 framework used the Dutch term ‘gerealiseerde eindkwalificaties’, translated as ‘achieved learning outcomes’. This standard is thereby also linked to ESG 1.3 <b>Student-centred learning, teaching and assessment.</b></p>
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### Dutch framework 2014 - extensive initial accreditation

<p><b>General remarks</b>  Standard 12 is only assessed when the programme has produced learning outcomes.</p>	
<p><b>Standards for the extensive initial accreditation</b></p> <p><b>Intended learning outcomes</b>  <b>Standard 1: The intended learning outcomes of the programme have been concretised with regard to content, level and orientation; they meet international requirements.</b></p> <p><b>Explanation:</b> As for level and orientation (bachelor’s or master’s; professional or academic), the intended learning outcomes fit into the Dutch qualifications framework. In addition, they tie in with the international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme.</p>	<p><b>Standards of ESG Part 1</b></p> <p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment.</b>  <b>(4) Student admission, progression, recognition and certification</b></p> <p>In addition to the indication in the SAR, this standard can also linked to ESG 1.3.</p>
<p><b>Curriculum</b>  <b>Standard 2: The orientation of the curriculum assures the development of skills in the field of scientific research and/or the professional practice.</b></p> <p><b>Explanation:</b> The curriculum has demonstrable links with current developments in the professional field and the discipline.</p> <p><b>Standard 3: The contents of the curriculum enable students to achieve the intended learning outcomes.</b>  <b>Explanation:</b> The learning outcomes have been adequately translated into attainment targets for (components of) the curriculum. Students follow a study curriculum which is coherent in terms of content.</p> <p><b>Standard 4: The structure of the curriculum encourages study and enables students to achieve the intended learning outcomes.</b></p> <p><b>Explanation:</b> The teaching concept is in line with the intended learning outcomes and the teaching formats tie in with the teaching concept. Factors pertaining to the</p>	<p><b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification</b></p> <p>This replaces the reference in the SAR.</p> <p>In addition to what is indicated in the SAR: standard 3 also links to ESG 1.2 Partly, this is also the case for standard 4, as it focuses on the structure of the curriculum.</p> <p>In addition to what is indicated in the SAR: standard 3 and 4 link to ESG 1.3 as they focus on the content and structure of the curriculum which enable students to achieve the intended learning outcomes.</p>

<p>curriculum and hindering students' progress are removed as far as possible. In addition, students with a functional disability receive additional career tutoring.</p> <p><b>Standard 5: The curriculum ties in with the qualifications of the incoming students.</b>  <b>Explanation:</b> The admission requirements are realistic with a view to the intended learning outcomes.</p>	<p><b>(4) Student admission, progression, recognition and certification</b></p>
<p><b>Staff</b>  <b>Standard 6: The staff is qualified and the size of the staff is sufficient for the realisation of the curriculum in terms of content, educational expertise and organisation.</b>  <b>Explanation:</b> The factual expertise available among the staff ties in with the requirements set for professional or academic higher education programmes.</p>	<p><b>(5) Teaching staff</b>  This replaces the reference to Standard 5 in the SAR.</p>
<p><b>Services and facilities</b>  <b>Standard 7: The accommodation and the facilities are sufficient for the realisation of the curriculum.</b></p> <p><b>Standard 8: Tutoring and student information provision bolster students' progress and tie in with the needs of students.</b></p>	<p><b>(6) Learning resources and student support.</b>  In addition to what is indicated in the SAR: both standard 7 and standard 8 also cover ESG 1.6</p> <p><b>(8) Public information</b>  Standard 8 refers also to the information needed for students to manage their studies effectively. This part of the learning resources (ESG 1.6). This replaces the reference in the SAR.</p>
<p><b>Quality assurance</b>  <b>Standard 9: The programme is evaluated on a regular basis, partly on the basis of assessable targets.</b>  <b>Explanation:</b> The programme monitors the quality of the intended learning outcomes, the curriculum, the staff, the services and facilities, the assessments and the learning outcomes achieved through regular evaluations. The programme also collects management information regarding the success rates and the staff-student ratio. Programme committees, examining boards, staff, students, alumni and the relevant professional field of the programme are actively involved in the programme's internal quality assurance.</p>	<p><b>(1) Policy and procedures for quality assurance</b>  <b>(2) Design and approval of programmes</b>  <b>(4) Student admission, progression, recognition and certification</b>  <b>(7) Information Management</b>  <b>(9) Ongoing monitoring and periodic review of programmes</b>  <b>(10) Cyclical external quality assurance</b></p> <p>This replaces the reference in the SAR.</p>
<p><b>Assessment</b>  <b>Standard 10: The programme has an adequate assessment system in place.</b>  <b>Explanation:</b> The level achieved is demonstrated by interim and final tests. The tests and assessments are valid, reliable and transparent to the students.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b>  This replaces the reference in the SAR.</p>
<p><b>Graduation guarantee and financial provisions</b>  <b>Standard 11: The institution guarantees students that they can complete the entire curriculum and makes sufficient financial provisions available.</b></p>	<p>Conditions for financial sustainability are not represented in ESG.</p>

<p><b>If applicable: Achieved learning outcomes</b>  <b>Standard 12: The programme demonstrates that the intended learning outcomes are achieved.</b></p> <p><b>Explanation:</b> The level achieved is demonstrated by interim and final tests, final projects and the performance of graduates in actual practice or in subsequent programmes.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b>  <b>(4) Student admission, progression, recognition and certification.</b></p> <p>This replaces the reference to standard 11 in the SAR. In addition to the SAR: the standard also links to ESG 1.4.</p> <p>The 2014 framework used the Dutch term ‘gerealiseerde einkwalificaties’, translated as ‘achieved learning outcomes’.</p>
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## Flemish frameworks

### Flemish frameworks - institutional review

At institutional level NVAO assesses (1) the quality of an institution’s educational policy (on the basis of the Framework for the Institutional Review - Flanders 2015-2017) and (2) the conduct of assuring the quality of programmes (on the basis of the Quality Code - Flanders 2015-2017. These are the so-called “comprehensive institutional reviews”. Neither the Framework for the Institutional Review nor the Quality Code are now used separately.

<p><b>General remarks</b></p> <p>The institutional review is the periodic assessment of the quality of the educational policy pursued by a university or university college. Within the framework of the institutional review, a review panel will assess whether the model (approach, policy) chosen by the institution actually functions. The panel will use horizontal and vertical review trails to assess implementation and achievement.</p> <p>The ESG include elements pertaining to both quality assurance and the quality of the education provided. The elements pertaining to quality assurance are included in the <i>Framework for Institutional Reviews – Flanders 2015-2017</i>.</p>	
<p><b>Framework for the Institutional Review – Flanders 2015-2017</b></p>	<p><b>Corresponding standards of ESG Part 1</b></p>
<p><b>Standard 1 – Vision and Policy</b></p> <p>The institution’s vision of higher education and its quality, the policy it pursues with regard to education and the policy it pursues with regard to research and social and academic services in relation to the quality of education, offer an adequate response to the social challenges.</p> <p><b>Criteria</b></p> <p>The institution has a broadly supported vision of education and a corresponding policy. The policy comprises, as a minimum: policy regarding education, as well as research and social and academic services in relation to education. The institution has a vision of higher education and the quality of its programmes in relation to the social challenges of its environment. The connections may be fleshed out at the regional, national, European or international level. To realise its vision, the institution has formulated an adequate policy.</p> <p>One of the key focal points of this policy is providing students with the qualifications necessary to meet the challenges of civil society. It is essential for all those involved to play an active role in the establishment of the vision and policy; this characterises a quality culture.</p>	<p><b>(1) Policy and procedures for quality assurance</b>  <b>(2) Design and approval of programmes</b>  <b>(3) Student-centred learning, teaching and assessment</b></p>
<p><b>Standard 2 - Policy implementation</b></p>	<p><b>(1) Policy and procedures for quality assurance</b></p>

<p>The institution has adequate policy measures, processes, procedures, practices and instruments at its disposal to realise its policy in an effective manner, and to optimise the quality of the programmes offered.</p> <p><b>Criteria</b> The institution pursues its education policy in an adequate manner, using policy measures, processes, procedures, practices and instruments, among other ways. Adequate policy implementation presupposes concrete objectives ensuing from the vision and allocation of sufficient resources to implement the policy. The institution explains what policy measures, processes, procedures, practices and instruments it uses and why it deems those most efficient and effective. The quality culture in place is demonstrated by the participation, the process, the results and the manner in which the instruments are deployed.</p>	<p><b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b> <b>(5) Teaching staff</b> <b>(6) Learning resources and student support</b> <b>(8) Public information</b></p>
<p><b>Standard 3 – Evaluation and monitoring</b> The institution guarantees the effectiveness of its policy implementation for the benefit of the quality of education by setting up feedback and monitoring systems and, in particular, internal quality monitoring systems.</p> <p><b>Criteria</b> The institution gauges and evaluates the effectiveness of its policy implementation on a regular basis in order to guarantee the quality of the education it provides. To this end, it has an adequate quality assurance system in place. In order to be able to guarantee the effectiveness of its policy, the institution must have insight into the extent to which its vision of education is realised under the policy it pursues. To this end, it has a proper evaluation and monitoring system in place. This system provides the institution with aggregated information. This information pertains to all relevant policy domains, including any procedures and instruments the institution deploys to realise its policy objectives and guarantee the quality of education. The system of regular internal evaluations and external assessments ties in with the management model pursued. Institution-wide uniformity in the evaluation and gauging activities is not required. An active role by students, staff, alumni, external and independent experts from the disciplines and the professional field is essential in a quality assurance system, and bolsters the further development of a quality culture.</p>	<p><b>(1) Policy and procedures for quality assurance</b> <b>(2) Design and approval of programmes</b> <b>(4) Student admission, progression, recognition and certification</b> <b>(7) Information management</b> <b>(9) Ongoing monitoring and periodic review of programmes</b> <b>(10) Cyclical external quality assurance</b></p>
<p><b>Standard 4 – Enhancement policy</b> The institution takes measures to improve the realisation of its policy objectives.</p> <p><b>Criteria</b> The institution can demonstrate that it is systematically improving its education policy wherever necessary. The institution pursues an active improvement policy based on the outcomes of its measuring and assessment activities. Among other things, it demonstrates its ability to innovate</p>	<p><b>(1) Policy and procedures for quality assurance</b> <b>(9) Ongoing monitoring and periodic review of programmes</b> <b>(10) Cyclical external quality assurance</b></p>

and adapt in order to improve the education it provides. The improvement policy pursued by the institution results in a quality culture, in which all those involved contribute to innovation, and to quality improvement.	
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## Quality Code

<b>General remarks</b>	
<p>The Quality Code is in fact a formal supplement to the <i>Framework for Institutional Reviews – Flanders 2015-2017</i>. The comprehensive institutional review was developed for institutions that choose to assume full responsibility for assuring the quality of their programmes and, in particular, develop a conduct for this. The Quality Code focuses on those elements of the ESG that relate to the quality of education at programme level. These elements have been articulated as the features of high-quality higher education programmes in accordance with the ESG, in other words, <i>quality features</i>. When assessing an institution’s conduct of assuring the quality of programmes, the review panel verifies how these quality features have been embedded in this conduct.</p> <p>The Quality Code includes an annex that outlines the relationship between the quality features and the ESG. This annex in fact demonstrates how the quality features need to be interpreted.</p>	
<b>Quality Code – Flanders 2015-2017</b>	<b>Corresponding standards of ESG Part 1</b>
<b>The following quality features have been derived from the ESG to underpin the conduct of quality assurance of programmes:</b>	
<b>(A)</b> The programme’s learning outcomes constitute a transparent and programme-specific interpretation of the international requirements regarding level, content and orientation.	<b>(2) Design and approval of programmes</b>
<b>(B)</b> The programme’s curriculum ties in with the most recent developments in the discipline, takes account of the developments in the professional field, and is relevant to society.	<b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b> <b>(9) Ongoing monitoring and periodic review of programmes</b>
<b>(C)</b> The staff allocated to the programme provide the students with optimum opportunities for achieving the learning outcomes.	<b>(3) Student-centred learning, teaching and assessment</b> <b>(5) Teaching staff</b>
<b>(D)</b> The programme offers the students adequate and easily accessible services, facilities and counselling.	<b>(3) Student-centred learning, teaching and assessment</b> <b>(6) Learning resources and student support</b> <b>(9) Ongoing monitoring and periodic review of programmes</b>
<b>(E)</b> The teaching and learning environment encourages the students to play an active role in the learning process and fosters smooth study progress.	<b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b>
<b>(F)</b> The assessment of students reflects the learning process and concretises the intended learning outcomes.	<b>(3) Student-centred learning, teaching and assessment</b> <b>(9) Ongoing monitoring and periodic review of programmes</b>
<b>(G)</b> The programme provides comprehensive and readable information on all stages of study.	<b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b> <b>(8) Public information</b>
<b>(H)</b> Information regarding the quality of the programme is publicly accessible.	<b>(8) Public information</b> <b>(9) Ongoing monitoring and periodic review of programmes</b>

## Flemish frameworks - programme accreditation

Programme Accreditation – Flanders 2015-2021	Corresponding standards of ESG Part 1
<p><b>Standard 1 : intended learning outcomes</b> The determination of the intended learning outcomes of the programme is based on the manner in which the level descriptors have been translated into programme-specific learning outcomes that meet the international requirements with respect to content, level and orientation.</p> <p><b>Criteria</b> As for level and orientation (bachelor’s or master’s; professional or academic), the intended programme-specific learning outcomes fit into the Flemish qualifications framework and, if available, relevant domain-specific learning outcomes. They tie in with the international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme.</p>	<p>(2) Design and approval of programmes (3) Student-centred learning, teaching and assessment (4) Student admission, progression, recognition and certification</p>
<p><b>Standard 2: teaching-learning environment</b> The teaching-learning environment enables the students to achieve the intended learning outcomes.</p> <p><b>Criteria</b> The content and the design of the programme, including the programme-specific teaching and learning formats, the staff deployed and the facilities enable the admitted students to achieve the intended learning outcomes. Curriculum, staff and facilities form a cohesive teaching-learning environment for the students.</p>	<p>(2) Design and approval of programmes (3) Student-centred learning, teaching and assessment (4) Student admission, progression, recognition and certification (5) Teaching staff (6) Learning resources and student support (7) Information management (8) Public information</p>
<p><b>Standard 3 : achievement of learning outcomes</b> The programme has an adequate assessment, testing and examination system in place and demonstrates that the intended learning outcomes are being achieved.</p> <p><b>Criteria</b> The level realised is apparent, on the one hand, from the validity, reliability and transparency of the assessment, and on the other, from the results of the testing and examination of the students, and the job prospects for graduates or their opportunities for transferring to subsequent study programmes.</p>	<p>(3) Student-centred learning, teaching and assessment (4) Student admission, progression, recognition and certification</p>
<p>The fourth generic quality guarantee does not apply to programmes provided by universities and university colleges. These institutions are subject to the extensive institutional reviews.</p> <p><b>Standard 4: set-up and organisation of the internal quality assurance</b> The set-up and the organisation of the internal quality assurance are aimed at systematically improving the programme with the involvement of the relevant stakeholders.</p>	<p>(1) Policy and procedures for quality assurance (7) Information management (9) Ongoing monitoring and periodic review of programmes (10) Cyclical external quality assurance</p>

<p><b>Criteria</b> The programme is periodically evaluated, based in part on testable objectives. The outcomes of this evaluation form the basis for verifiable measures for improvement that contribute to the realisation of the objectives. Staff, students, alumni and the relevant (professional) field of the programme are actively involved in the internal quality assurance.</p>	
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## Flemish framework - initial accreditation

Initial Accreditation – Flanders 2015-2021	Corresponding standards of ESG Part 1
<p><b>Standard 1 : intended learning outcomes</b> With respect to level, orientation and content, the intended learning outcomes reflect the current requirements that have been set for the programme by the professional field and/or discipline from an international perspective.</p> <p><b>Criteria</b> As for level and orientation (bachelor’s or master’s; professional or academic), the intended learning outcomes fit into the Flemish qualifications framework and, if available, relevant domain-specific learning outcomes. They tie in with the international perspective of the requirements currently set by the professional field and the discipline with regard to the contents of the programme.</p>	<p><b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b></p>
<p><b>Standard 2: teaching-learning environment</b> The teaching-learning environment enables the students to achieve the intended learning outcomes.</p> <p><b>Criteria</b> The content and the design of the programme, including the programme-specific teaching and learning formats, the staff to be deployed and the facilities will enable the admitted students to achieve the intended learning outcomes. Curriculum, staff and facilities will form a cohesive teaching-learning environment for the students. The planned investments are sufficient to create the programme and to be able to offer the complete educational route.</p>	<p><b>(2) Design and approval of programmes</b> <b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b> <b>(5) Teaching staff</b> <b>(6) Learning resources and student support</b> <b>(7) Information management</b> <b>(8) Public information</b></p>
<p><b>Standard 3: achievement of learning outcomes</b> The programme has an adequate assessment, testing and examination system in place to ascertain whether the intended learning outcomes are actually achieved.</p> <p><b>Criteria</b> The programme formulates a policy with respect to assessment, testing and examination that shows how it ensures that the evaluation is valid, reliable and transparent, and how the assessment, testing and examination of the students will show (or has shown) the level achieved. The intended evaluation formats are congruent with the different forms of teaching.</p>	<p><b>(3) Student-centred learning, teaching and assessment</b> <b>(4) Student admission, progression, recognition and certification</b></p>

<p><i>(For a programme that has already been organised by the institution, the level realised will be included in the assessment by the assessment panel. This involves, in particular, the testing and examination results, the job opportunities for graduates or transfer rates to subsequent study programmes.)</i></p>	
<p>The fourth generic quality guarantee does not apply to programmes provided by universities and university colleges. These institutions are subject to the extensive institutional reviews.</p> <p><b>Standard 4 : set-up and organisation of the internal quality assurance</b></p> <p>The set-up and the organisation of the internal quality assurance are aimed at systematically improving the programme with the involvement of the relevant stakeholders.</p> <p><b>Criteria</b></p> <p>The programme will periodically be evaluated, based in part on testable objectives. The outcomes of this evaluation will form the basis for verifiable measures for improvement that contribute to the realisation of the objectives. Staff, students, alumni and the relevant (professional) field of the programme will be actively involved in the internal quality assurance.</p> <p><i>(For a programme that has already been organised by the institution, evaluations already conducted will be included in the assessment by the assessment panel.)</i></p>	<p><b>(1) Policy and procedures for quality assurance</b></p> <p><b>(7) Information management</b></p> <p><b>(9) Ongoing monitoring and periodic review of programmes</b></p> <p><b>(10) Cyclical external quality assurance</b></p>