GENERAL PRINCIPLES

ON EXTERNAL REVIEW
Introduction

There are two key strands in the European approach to quality assurance. The first is *internal*, based on the core principle that QA is the responsibility of the individual institution. The second strand is *external*, organized and managed by an external agency.

The AVEPRO statute spells out the Agency’s obligations in the areas of internal and external evaluation of ecclesiastical institutions as follows:

- In common with the academic institutions involved, it defines, develops and updates procedures for the internal and external evaluation and assessment of quality, in compliance with ecclesiastical and civil, judicial and practical requirements at regional, national and international levels;
- it plans the external assessment of quality in single academic institutions
- it carries out such assessment through the visits of experts
- it drafts the final reports
- It elaborates and suggests improvements after external assessment
- It favours the circulation of information in the academic field
- It chooses and prepares experts for site visits.

AVEPRO has developed instruments to define its approach to quality assurance in general, and in particular to aid the ecclesiastical institutions in developing robust procedures for internal quality assurance. These include

- Briefing Note for Ecclesiastical Universities and Faculties - The Nature, Context and Purpose of Quality Assurance
- Internal Quality Assurance – Guidelines for Ecclesiastical Universities and Faculties
- Notes of Guidance - The Self-Evaluation Report, Two Examples
- Notes of Guidance - Quality Improvement Plan.
- Notes of Guidance - Site Visit
- Time Scale for Quality Review.

The purpose of the present document is to set down the Agency’s procedures for the external evaluation of large ecclesiastical institutions. Like the documents listed above it has been designed to follow best practice in accordance with

- Standards and Guidelines for Quality Assurance in the Higher Education Area (2009) (ESG);
- The Bologna Declaration;
- Graz Declaration: Forward from Berlin – the Role of the Universities (EUA, 2003).

Aims and Objectives

In accordance with international best practice AVEPRO will

- operate an external review process consistent with Part 2 Standards outlined in ESG
- support each institution in meeting its responsibility for the operation of internal procedure and reviews
- provide evidence that each institution continues to engage with national, European and
international guidelines and standards, particularly in accordance with the Bologna process

- support institutional strategic planning and ownership of quality assurance and enhancement – a vital condition for the development and maintenance of
- internal quality cultures across ecclesiastical institutions
- support the availability of consistent and timely information on the effectiveness of quality assurance and enhancement processes operating within ecclesiastical institutions
- provide accountability to external stakeholders in relation to the overall quality of the system and thereby in still confidence in the robustness of the AVEPRO quality process

To achieve these, the AVEPRO external review process will seek to:

- be open, transparent and evidence-based
- reinforce institutional diversity by remaining flexible and adaptable
- be consistent and operate in a collaborative spirit – reinforcing an institution’s continuous quality assurance processes
- communicate the review process clearly and in a manner easily understood by a wide range of external stakeholders, including students
- support the sector in its commitment to quality enhancement through its developmental approach
- identify, encourage and report good practice and innovation
- provide an efficient and cost-effective process.

The External Review Process

In keeping with the European Standards and Guidelines, which state that “external quality assurance of institutions and/or programmes should be undertaken on a cyclical basis” (Standards and Guidelines, 2.4.7 Periodic Reviews, p.21) AVEPRO will organize and manage approximately every five years an external evaluation of each ecclesiastical university to review the success and effectiveness of the internal quality systems in place.

The actual schedule of reviews will be agreed between each institution and AVEPRO within this timeframe. This flexibility is proposed to reinforce the connectivity between internal and external continuous quality assurance and strategic planning processes. The institution will appoint a liaison person who will be in charge of all contacts with the review team and AVEPRO throughout the period of the review.

Once a date for review has been agreed and published, the institution will participate in the four integrated elements of the process, namely:

- The production of an institutional self-evaluation report using a methodology agreed beforehand between AVEPRO and the institution
- An external assessment and site visit by a group of reviewers
- The publication of a review report including findings and recommendations
- A follow-up procedure to review and implement recommendations for improvement.

An indicative timeline for the process is outlined in the Annex.
The review will normally be conducted by a 4-person Peer Review Group (PRG), and will include a Chair, a Coordinator, who will act as the review secretary, and two international reviewers. It will include an experienced academic from a non-ecclesiastical higher education institution. This will provide benchmarking of facilities and procedures against standard European practice. The PRG, appointed by the AVEPRO Board, in line with ESG, and in accordance with published criteria, will consist of carefully selected and trained/briefed reviewers who have appropriate skills and are competent to perform their tasks. For this purpose AVEPRO will maintain a Register of Reviewers, updated at appropriate intervals.

Steps in the Process  There are four key steps in the process:

Step 1. Institutional Self-Evaluation Report (ISER)
The Institutional Self-Evaluation Report (ISER) should be about twenty five pages long (plus appropriate annexes). It is a self-reflective and critical evaluation completed by the university outlining how effectively it assures and enhances the quality of its teaching, learning, research, governance, management and service activities. The ISER will be used as the core document by the team of reviewers. It will provide the review team with the evidence or references to the evidence available to support claims that the university is operating effective quality assurance and enhancement processes. Given the diversity of the ecclesiastical institutions the precise structure and emphases of the ISER should be agreed beforehand between the university and AVEPRO. In particular the nature of the relationship between the university and its affiliati, aggregati and incorporati, and the number of these institutions, may vary greatly from one ecclesiastical university to another. A suggested generic format is set out in Annex 2.

Institutions are encouraged to use the ISER to highlight the approach they have taken to the management of quality to support the institutional mission statement, goals, priorities and strategic plans. Explicit linkages should be made in the ISER between the quality assurance and enhancement practices employed or proposed and the institutional strategic management and planning process.

The ISER provides an institution with an opportunity to show that the methods employed to ensure internal quality management processes are in keeping with national, European and international best practice, and to demonstrate how it evaluates the effectiveness of:
- policies and procedures for quality management and enhancement
- outcomes of internal and external quality assurance and enhancement processes
- procedures to identify strengths and weaknesses in its teaching, learning, research and service areas, and to inform decision-making and enhance a culture of quality within the institution
- the accuracy, completeness and reliability of its published information in relation to the outcomes of internal reviews aimed at improving the quality of education and related services.

Preparing the ISER
• The university designates a group among its members to form a coordinating committee with responsibility for preparing the ISER. The committee should be representative of all staff, and should include the rector, who will play an active role in the self-evaluation. It should include a student, preferably a postgraduate research student who is a recent graduate of the university and thus familiar with its procedures. The committee should be operational and therefore not too large. A member of the staff, normally the rector, will chair the committee and liaise with the director of quality assurance. A member of the committee will serve as secretary, take minutes of meetings, and have responsibility for collating and editing the SER.

• It is important that all members of the university be kept fully informed about the details of the self-evaluation as it progresses, especially at the initial planning stage. Thorough consultation with all staff is advised; they should be encouraged to study these guidelines and to discuss the detailed operation of the exercise. All staff may not be equally enthusiastic, but as far as possible a willingness to cooperate should be developed. The more often the self-evaluation process is discussed among colleagues the more effective it will be in raising awareness of issues of quality and in encouraging staff and students to develop and sustain a quality culture and a questioning attitude about routine procedures.

• Some of the data for the ISER is collected via questionnaires completed by students, staff, graduates, employers and other users of the university. However, when writing the report the coordinating committee should bear in mind the importance of providing a critical analysis of all facets of the university’s work as opposed to a mere listing of factual information and of opinions obtained from questionnaires. Since the goal is quality improvement the formulation of strategies and recommendations for improving the work of the university should be highlighted. The subsequent external validation provided by the review will become an important element in the follow-up discussions within the university.

**Step 2. Review Site Visit**

The PRG will visit the institution over a period of at most three days and will follow a programme agreed between the Chair and the institution. The visit will be used by the group to confirm the processes employed by the university for assuring the effectiveness of its quality management process in accordance with national and European requirements.

**Objectives**

The objectives of the PRG are to:

• Clarify and verify details of the ISER
• Verify how well the mission, aims and objectives of the university are being fulfilled, having regard to the available resources, and comment on the appropriateness of the university’s mission, objectives and strategic plan
• Confirm the university's strengths, weaknesses, opportunities and threats as outlined in the self-evaluation report, and discuss any perceived strengths and weaknesses not identified
• Check the suitability of the working environment
• Comment on the recommendations for improvement proposed in the ISER
• Make any additional recommendations for improvement, as deemed appropriate, but with due consideration for resource implications.

**Function**

The PRG will:

• Study the ISER
• Visit the university
• Clarify and verify details in the self-evaluation report, and consider other relevant documentation
• Review the activities of the university in the light of the self-evaluation report
• Prepare a draft report and present their main findings in an exit presentation to staff and students
• Write the peer review group report and deliver it to the University within six weeks.

• In the course of the site visit the PRG will receive and consider evidence on the ways the university is regularly evaluating its learning, teaching, research and support service activities measured against national, European and international best practice
• information published by the university, on the programmes and awards it is offering and the outcomes and follow-up activities arising from internal and external quality assurance processes
• university’s approach to managing and maximising the outputs of internal and external quality assurance and enhancement activities
• ways in which teaching effectiveness is appraised, improved and rewarded
• role of support services in enhancing the quality of education provided by the university
• systematic engagement of external peers, students and employers in internal quality processes

**Step 3. Peer Review Group Report**

In the interests of equity and reliability, the PRG’s findings and recommendations presented in the review report will be based on recorded evidence. The report will recognise the importance of institutional enhancement policies as a fundamental element in the assurance of quality.

In keeping with the formative nature of the process the review group express their recommendations in a positive manner that encourages quality improvement. Such an approach is in keeping with the spirit of a process in which an ethos of partnership and trust ensures that real enhancement can result.

As part of the report the PRG will:

• Confirm and comment on the details of the ISER
• Provide an overview of the present state of the university
• Comment briefly on each aspect of the university’s activities
• Acknowledge achievements and quality where they exist
• Point out unambiguously any deficiencies or inadequacies in management and operations that might be eliminated or ameliorated
• Identify critical resource limitations (if any) that bar the way to achieving improvements
• Comment on all plans for improvements that the university has made in the ISER
• Emphasise the recommendations for improvement that the review group consider appropriate

Thus the group will report on the effectiveness of the quality assurance procedures in the institution and the implementation of findings arising out of the application of those procedures, in the context of the institution’s overall decision-making and strategic planning. These key elements should be placed within an institutional context, allowing the review team to comment on institutional obstacles and success factors for an effective internal quality management in the key areas of teaching and learning, research, governance and management, finances and strategic planning.

Five weeks after the end of the Review Visit, the PRG Chair will submit to AVEPRO the review report, prepared by the Coordinator and signed off by the Chair after consultation with all the other group members. AVEPRO will send the review report to the rector and the institution will be given five weeks in which to comment on factual accuracy and, if they so wish, to provide a 1-2 page institutional response that will be published as an appendix to the review report.

The review will be complete when the review team report is formally signed off by the AVEPRO Board, once it is satisfied that the review process was completed in accordance with published criteria. Review reports will be published thereafter on the AVEPRO website.

Guidelines for the preparation of the review report will be available.

**Step 4. Institutional Follow-up**

Twelve months after the Review Visit, the institution will be asked to produce a follow-up report (incorporating the institutional quality improvement plan). The report should provide a commentary on how the review findings and recommendations have been discussed and disseminated throughout the institution’s committee structure and academic units, and comment on how effectively the university is addressing the review outcomes. The report should identify the range of strategic and logistical developments and decisions that have occurred within the institution since the review report’s publication, and should address each of the key findings and recommendations that the reviewers presented. The follow-up report will be published by AVEPRO.

Guidelines will be available for the preparation of the quality improvement plan, and monitoring of progress on implementation.

AVEPRO will regularly analyse the review reports as the basis of ongoing AVEPRO quality enhancement activities (publications, seminars, workshops etc.) across the sector.

It should be remembered that the ESG insists that “quality assurance is not principally about individual external scrutiny events: it should be about continuously trying to do a better job. External quality assurance does not end with the publication of the report and should include a
structured follow-up procedure to ensure that recommendations are dealt with appropriately and any required action plans drawn up and implemented. This may involve further meetings with institutional or programme representatives. The objective is to ensure that areas identified for improvement are dealt with speedily and that further enhancement is encouraged” (Standards and Guidelines, 2.4.6 Follow-up Procedures, p.21).

Finally it is important to note that accreditation of ecclesiastical universities and faculties continues to be the responsibility of the Congregation for Catholic Education, as well as any administrative decisions related to them. The Congregation reserves to itself the right to take remedial action, if necessary, as a result of issues identified in the institutional review reports.
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<thead>
<tr>
<th>Time Frame</th>
<th>Action Description</th>
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<tbody>
<tr>
<td><strong>8 months before Review Visit</strong></td>
<td>Contact between AVEPRO and Institution’s Liaison Person initiated. Agreement reached on methodology for preparation of ISER</td>
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<tr>
<td><strong>5 months before Review Visit</strong></td>
<td>Review teams appointed</td>
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<tr>
<td><strong>2 months before Review Visit</strong></td>
<td>Review team trained</td>
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<td><strong>4 weeks before Review Visit</strong></td>
<td>Submitted to AVEPRO and sent to review team Institutional Self-Evaluation Report (ISER)</td>
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<td><strong>5 weeks after Review</strong></td>
<td>Review report sent to the institution for comment on issues of factual accuracy</td>
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<tr>
<td><strong>10 weeks after Review</strong></td>
<td>Institutional comments on factual accuracy and institutional response returned to AVEPRO</td>
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<tr>
<td><strong>12 weeks after Review</strong></td>
<td>Review report finalised (including the optional institutional response as an appendix) published on AVEPRO website</td>
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<tr>
<td><strong>12 months after Review</strong></td>
<td>Institutional follow-up report (including institutional quality improvement plan) to be submitted to AVEPRO</td>
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