Africa Higher Education Centres of Excellence (ACE) Project

International Quality Review

Handbook for Institutions: Stage 2 - Gap Analysis

February 2022
About the Quality Assurance Agency for Higher Education (QAA)

The Quality Assurance Agency for Higher Education (QAA) is the independent expert body entrusted with monitoring and advising on the standards of student achievement and the quality of the student learning experience in UK higher education. In the United Kingdom (UK), QAA works with higher education providers, students and all those with a mutual interest in higher education to ensure students working towards a UK qualification get the higher education experience they are entitled to expect.

QAA is recognised for its leading role in international developments in the quality assurance of higher education. QAA works not just to maintain but to enhance the quality and integrity of the higher education sector internationally through its international work, in full alignment with the European Standards and Guidelines.

International recognition of QAA

We are a full member of the European Association for Quality Assurance in Higher Education (ENQA) - the umbrella organisation for quality assurance agencies in the European Higher Education Area. Full membership of ENQA shows that an agency complies with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG).

Compliance with these standards is checked every five years through an independent review. Our last ENQA review took place in February 2018. The review report is published on the ENQA website: External review of QAA (2018) • ENQA.
Purpose of this handbook

1. This handbook is for those whose application for International Quality Review (IQR) under the Africa Higher Education Centres of Excellence for Development Impact Project (ACE Impact) has been successful and are now proceeding to Stage 2 - Gap Analysis. Other guidance will be available to you when you proceed to later stages. You can also access documentation on the IQR for ACE Impact webpage on the QAA website, or email accreditation@qaa.ac.uk

About International Quality Review (IQR)

2. IQR and IQR for ACE Impact offer institutions outside the UK the opportunity to have an independent peer review which may lead to accreditation by the UK’s Quality Assurance Agency for Higher Education (QAA). IQR uses the European Standards and Guidelines for Quality Assurance in the European Higher Education Area (Brussels, 2015; often referred to as the ‘European Standards and Guidelines’ or ESG). Applicant institutions are assessed against ESG Part 1: Internal Quality Assurance.

3. IQR for ACE Impact is a five-stage process, consisting of Application, Gap Analysis, Review, Accreditation and the Mid-Cycle Review. Gap Analysis, Review and Mid-Cycle Review each have their own handbooks.

Figure 1: IQR for ACE Impact process
Stage 2 - Gap Analysis

4 The gap analysis is the opportunity for your institution to undertake a self-assessment of its institutional processes to identify to what extent it can provide evidence that it is currently meeting the 10 standards in Part 1 of the ESG, and where it might need to carry out further development or capacity building to meet those standards. It is also the opportunity for your institution to learn more about IQR for ACE Impact and requirements for a review. It enables QAA to determine whether your institution is at a suitable point to proceed to Stage 3 - Review.

The process of gap analysis

Before the visit
- Prepare and submit your gap analysis/self-assessment using a provided template.
- Virtual preparatory meeting with QAA Officer to prepare for the virtual visit.
- Liaison between QAA Officer and your institution to confirm the virtual visit agenda and whom the QAA team will meet.

During the visit
- A two-person QAA team conduct a virtual visit.
- The QAA team meets key staff, students and other stakeholders (as appropriate).
- The QAA team considers your facilities and learning resources. The QAA team seeks to verify your gap analysis/self-assessment.

After the visit
- The QAA team writes a short commentary on your gap analysis/self-assessment using the provided template.
- QAA makes a decision about the next steps.
- QAA shares the commentary with you.
- Your institution makes a decision about whether it will proceed.

5 The process takes place over approximately four months. Further information can be found in Annex 1: Indicative timeline for self-assessment/gap analysis stage.

Before the gap analysis visit

The gap analysis team

6 QAA appoints a team of two experts, including one QAA Officer and one assessor to assess your gap analysis.

7 The QAA Officer will coordinate the gap analysis visit and act as the primary point of contact with your institution. Your institution will be told who the QAA Officer is and how to
contact them. Your institution is welcome to get in contact to ask questions. The QAA Officer is responsible for the logistics of the virtual visit including liaising with your institution, confirming the programmes for the virtual visit, keeping a record of all discussions, and editing the report, as well as acting as an assessor. Further details about the role of the QAA Officer can be found in Annex 2: Roles and responsibilities.

8 QAA will indicate the membership of the gap analysis team to your institution. Your institution will be informed which institutions or organisations the members of the gap analysis team work for and whether they have declared any other interests (such as membership of a governing body of another provider). QAA will ask your institution to indicate any actual or potential conflicts of interest that assessors might have with your institution and may adjust team membership in light of that information.

The facilitator

9 Your institution must nominate a facilitator to work with the QAA Officer. The facilitator helps to organise and ensure the smooth running of the gap analysis stage and improve the flow of information between the QAA team and your institution. The development of an effective working relationship between QAA and your institution through the facilitator should help to avoid misunderstandings (for example, your institution misunderstanding what QAA requires, or QAA misunderstanding the nature and scope of your institution’s provision). Further details about the role of the facilitator can be found in Annex 2: Roles and responsibilities.

Supporting documentation

10 As part of the preparation for this stage, your institution will be asked to carry out its own gap analysis of its systems and processes against the 10 ESG standards - this can include specific reference to local, regional and national requirements - and compile and provide a set of evidence to support this analysis. As part of the preparation of your gap analysis and for the virtual visit, your institution is asked to provide supporting references to documentary evidence that may demonstrate achievement of the 10 ESG standards.

11 Further details about the submission requirements can be found in Annex 3: Gap analysis stage criteria and evidence. A template is provided for you to record your gap analysis. An example of the gap analysis template can be found in Annex 4: Gap analysis template. An editable version of the template will be supplied to you for completion. You may also be asked for additional information by the gap analysis team following the QAA team’s desk-based analysis of your submission prior to the gap analysis visit.

Virtual preparatory meeting

12 Prior to the virtual visit, the QAA Officer will arrange a virtual preparatory meeting with your institution. The QAA Officer will deliver a briefing on the gap analysis process which is followed by the opportunity for you to ask questions. The QAA Officer will discuss the agenda for the virtual visit and will advise your institution who it would like to meet and when the meetings should take place. The QAA Officer will also explain and agree logistics such as arrangements for the uploading of documentary evidence, the meeting schedule, the platform to be used, and the evidence of facilities and resources that will be necessary for this stage.

During the gap analysis visit

13 A QAA team of two members then conducts the virtual visit. The virtual visit will normally take place over a number of half days, depending on the size and complexity of
your institution and its higher education provision. It follows a schedule agreed in advance with your facilitator (see Annex 5: Sample schedule for the virtual gap analysis visit).

14 During the virtual visit, the QAA team will meet with a range of your staff, students and other stakeholders to gather further information in order to verify the gap analysis and reach conclusions about whether to recommend your institution for review and, if so, what length the review visit should be. Attendance at these meetings will have been agreed with the facilitator before the virtual visit takes place. A protocol for the conduct of meetings can be found in Annex 6: Protocol for meetings for virtual visit. Institutions are asked to make sure that everyone attending a meeting with the gap analysis team are made aware of the protocol.

**After the gap analysis visit**

15 QAA will prepare and submit the gap analysis report to your institution within four weeks of the end of the visit. The report will explain whether your institution is considered ready to progress to the next stage straight away, whether we consider that further development or capacity building is required before your institution is ready to progress, or whether it is unlikely that your institution will be ready for review within the lifetime of the ACE Impact project.

16 If the outcome of the gap analysis is that we consider further development or capacity building is needed, the report will explain what action we consider is required and how long it is likely to take. In this way, the report will provide your institution with a road map towards the next stage.

17 If the outcome of the gap analysis visit is that we consider it is unlikely that your institution will be ready for review within the lifetime of the ACE Impact project, the report will explain why.

18 In all cases QAA's determination of an institution's readiness to progress is final.

19 It is QAA's understanding that once the gap analysis stage is completed, the institution shall be eligible for a financial disbursement under DLR 7.3.

20 A positive outcome from the gap analysis does not guarantee a successful outcome for Stage 3 - the review.

**Privacy and disclosure of information**

21 An effective review requires access to a considerable amount of information, some of which may be sensitive or confidential. Institutions and their staff can be assured that confidential information they disclose to QAA during the various stages of IQR for ACE Impact will not be publicly released or used in an inappropriate manner. QAA is committed to processing personal information in accordance with the General Data Protection Regulation (GDPR) and UK data protection laws. Our [Privacy Notice](#) tells you what to expect when QAA collects personal information.

22 QAA's review policies and procedures provide the following assurances.

- Information provided by an institution is used only for the purpose of review.
- Information marked by an institution as 'confidential' is not disclosed to any other party by QAA or by individual reviewers, though it may be used to inform review findings.
• Staff, students or other people who are invited to provide information may elect to do so in confidence, in which case the information is treated in the same way as confidential information provided by the institution.

• Review meetings are confidential - the review team does not reveal what has been said by any individual, nor are individuals identified in the review report. The institution is encouraged to require the same degree of confidentiality from people whom the review team will meet during the review.

• QAA and its reviewers store confidential information securely.

• Review teams are required to destroy material relating to a review, including the self-evaluation document and any notes or annotations they have made, once the review is complete.

• Review teams make no media or other public comment on reviews in which they participate. Any publicity relating to a review is subject to QAA policy and procedure and will be managed by QAA’s public relations team.
Annex 1: Indicative timeline for self-assessment/gap analysis stage

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>Week 1</td>
<td>QAA allocates a QAA Officer and an assessor and informs the institution</td>
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<tr>
<td>Week 2</td>
<td>Schedule and team confirmed</td>
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<td></td>
<td>Visit briefing meeting held</td>
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<tr>
<td>Week 2 - 6</td>
<td>Institution conducts self-assessment and gap analysis</td>
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<tr>
<td>Week 6</td>
<td>Institution uploads gap analysis to QAA portal</td>
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<tr>
<td>Weeks 6 - 8</td>
<td>QAA team reviews gap analysis</td>
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<tr>
<td>Week 8</td>
<td>QAA requests for any additional documentation</td>
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<tr>
<td>Week 10</td>
<td>Institution uploads additional documentation</td>
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<tr>
<td><strong>Week 12</strong></td>
<td><strong>Gap analysis visit takes place</strong></td>
</tr>
<tr>
<td>Week 14</td>
<td>Draft report to institution</td>
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<tr>
<td>Week 16</td>
<td>Receipt of institution’s comments</td>
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<tr>
<td>Week 18</td>
<td>QAA sends letter confirming outcome and next steps</td>
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Annex 2: Roles and responsibilities

Attributes of assessors for the gap analysis stage

The principal attributes expected of assessors for the gap analysis stage include:

- experience of managing quality and academic standards in higher education
- a clear understanding of the governance and management of higher education institutions
- an ability to assimilate, analyse and synthesise a substantial amount of documentary material
- an ability to engage in discussion and debate with institutional representatives to identify and comment on key issues relating to quality.

Responsibilities of the QAA Officer

The principal responsibilities of the QAA Officer are to:

- ensure compliance with the process set out in this handbook
- liaise with the institution about the schedule for the gap analysis stage
- keep a record of all meetings relating to the gap analysis stage
- oversee the follow-up to the gap analysis stage
- edit and produce the gap analysis stage report.

The QAA Officer is also an assessor.

Role and responsibilities of the institution’s facilitator

The person appointed as facilitator must be willing to become familiar with the IQR for ACE Impact process and should have:

- a good working knowledge of the institution’s systems and procedures, and an appreciation of matters relating to quality and standards
- the ability to communicate clearly in French, build relationships and maintain confidentiality
- the ability to observe objectively
- the ability to provide objective guidance and advice.

The facilitator will be expected to:

- act as the primary contact for the QAA Officer during the preparation for the virtual gap analysis visit
- act as the primary contact for the review team during the virtual gap analysis visit
- help ensure that the institution has a good understanding of the matters raised by the assessors, thus contributing to the effectiveness of the virtual gap analysis visit
- meet the gap analysis team on request during the virtual visit, in order to provide further guidance on sources of information and clarification of matters relating to the institution’s structures, policies, priorities and procedures.

The facilitator will not be present for the gap analysis team’s private meetings. However, they will have the opportunity for regular meetings with the team at other times, which will provide opportunities for both the team and the institution to seek further clarification outside of the formal virtual meetings. This is intended to aid communication between the institution
and the team during the gap analysis stage and enable the institution to gain a better understanding of the team's lines of enquiry.

The facilitator is permitted to observe any of the gap analysis team's other virtual meetings, except those with students. When observing, the facilitator should not participate in the discussion unless invited to do so by the team.

The facilitator may legitimately:

- bring additional relevant information to the attention of the gap analysis team
- seek to correct factual inaccuracy
- assist the institution in understanding matters raised by the gap analysis team.

It is for the gap analysis team to decide how best to use the information provided by the facilitator.

The facilitator is not a member of the gap analysis team and will not make judgements about the provision. The facilitator does not have access to QAA's electronic communication system for gap analysis teams.

The facilitator is required to observe the same conventions of confidentiality as members of the gap analysis team. In particular, the confidentiality of written material produced by team members must be respected, and no information gained may be used in a manner that allows individuals to be identified. However, providing that appropriate confidentiality is observed, the facilitator may make notes on discussions with the team and report back to other staff in order to ensure that the institution has a good understanding of the matters being raised. This can contribute to the effectiveness of the gap analysis stage.

The gap analysis team has the right to ask the facilitator to disengage from the review process at any time if it considers that there are conflicts of interest, or that the facilitator's presence will inhibit discussions.
Annex 3: Gap analysis stage criteria and evidence

The gap analysis is designed to show that the institution can demonstrate it is able potentially to meet the 10 standards set out in Part 1 of the ESG. The gap analysis is a self-assessment, carried out by the institution. The QAA gap analysis team verifies the gap analysis conducted by the institution and makes a recommendation on whether the institution can proceed to Stage 3 - Review.

The criteria for the gap analysis are the 10 standards set out in Part 1 of the ESG. Full details and guidelines are available on the ENQA website.

**Standard 1.1:** Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

**Standard 1.2:** Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of any national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

**Standard 1.3:** Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

**Standard 1.4:** Institutions should consistently apply pre-defined and published regulations covering all phases of the student 'life cycle', for example, student admission, progression, recognition and certification.

**Standard 1.5:** Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

**Standard 1.6:** Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily-accessible learning resources and student support are provided.

**Standard 1.7:** Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

**Standard 1.8:** Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible.

**Standard 1.9:** Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

**Standard 1.10:** Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

The institution should show, by reference to evidence, that there are appropriate policies, procedures and processes in place to enable the standards to be met. A template is
provided for recording the gap analysis. An example of the template is included in Annex 4; a Microsoft Word document of the template will be shared with the institution at the commencement of the gap analysis stage.

By analysing the gap analysis conducted by the institution, the QAA gap analysis team determines whether there is the potential for the institution to be able to demonstrate that it meets the relevant standard in each case at the Stage 3 - Review. The gap analysis team do not assess the effectiveness of the policies and procedures or their implementation. Such assessment takes place during Stage 3 - Review.

Evidence to support the gap analysis might include, but is not limited to:

- institutional and/or departmental strategies
- operational plans
- policies
- procedures and protocols
- handbooks or guidance
- organigrams of committee or managerial structures
- committee terms of reference
- reports of internal and external reviews
- memoranda of cooperation with partner organisations
- public information - for example, website.
Annex 4: Gap analysis template

International Quality Review for ACE Impact: Gap Analysis Stage

Institution:

Name and title of person submitting the gap analysis:

Date submitted to QAA:

Brief overview of the University

[Please briefly describe your university - for example: mission, vision, strategic objectives, range of subjects/degrees offered, level of study (eg undergraduate, postgraduate), number of students, key partner organisations, accreditations and any unique characteristics the University may have.]

Gap analysis

This gap analysis is an opportunity for your organisation to critically evaluate the degree to which it is likely to meet the 10 Part 1 European Standards and Guidelines. The standard statements are included below but the gap analysis will be more reliable if you conduct it while consulting the full standards document where you will find further information about each of the standard statements.
Instructions

• Consider each of the European Standards below and in each case, enter information into the relevant columns, adding more rows as necessary.

• **Current situation**: Explain the policies, procedures, systems and approaches that are in place that contribute to the achievement of the Standard.

• **Evidence**: What evidence do you have that can demonstrate the Standard is met? This can include documents, statistical evidence or links to web pages. You do not have to provide the documentary evidence at this stage.

• **Gap analysis**: Now reflect on the standard and the evidence you have cited and determine what gaps exist and what actions are needed to address the gaps so that the standard can be fully met.

• **QAA Officers’ assessment**: This section will be completed by the two QAA assessors who are working with you. They will evaluate your assessment and their commentary will either verify the institution’s assessment or suggest amendments or additions.

At the end of the process, you will have sufficient information to develop an action plan that will help you prepare for a QAA International Quality Review.

Please delete any instructional text that is between square brackets [ ]
**Standard 1.1: Policy for quality assurance**

*Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.*

<table>
<thead>
<tr>
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**Further information for this Standard**

[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.2: Design and approval of programmes

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

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[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.3: Student-centred learning, teaching and assessment

*Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.*

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**Standard 1.4: Student admission, progression, recognition and certification**

*Institutions should consistently apply pre-defined and published regulations covering all phases of the student "life cycle", e.g. student admission, progression, recognition and certification.*

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**Further information for this Standard**

[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.5: Teaching staff

*Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.*

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[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.6: Learning resources and student support

Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

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[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.7: Information management

*Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.*

<table>
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[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.8: Public information

*Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible.*

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Further information for this Standard

[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.9: Ongoing monitoring and periodic review of programmes

Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

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Further information for this Standard

[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Standard 1.10: Cyclical external quality assurance

Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.

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Further information for this Standard

[Please include information not mentioned above that may impact on achievement of this Standard. For instance, are there other standards that you are expected to meet? Are there any legal or regulatory constraints on the achievement of this Standard?]
Institution's summary assessment of its ability to meet the 10 Part 1 European Standards and Guidelines (2015)
[Insert text]

QAA assessment of the institution's readiness to proceed to Stage 3 - Review
[To be completed by QAA]
Annex 5: Sample schedule for the virtual gap analysis visit

A typical schedule for a virtual gap analysis visit might look like this. The actual schedule will be determined by the gap analysis team, in agreement with the institution.

Two-day virtual visit:

<table>
<thead>
<tr>
<th>UK time</th>
<th>Local time</th>
<th>Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Day 1</strong></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td><strong>09.00-10.30</strong> Meeting with Head of Institution and Senior Management Team - to include a presentation by the institution of no more than 15 minutes</td>
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<td></td>
<td><strong>10.30-11.00</strong> QAA team private meeting</td>
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<tr>
<td></td>
<td></td>
<td><strong>11.00-11.45</strong> Presentation by the institution on its facilities and learning resources, eg teaching space, laboratories, library, self-study space, recreational space, virtual learning environment</td>
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<td><strong>11.45-12.30</strong> QAA team private meeting</td>
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<td></td>
<td></td>
<td><strong>12.30-13.30</strong> Meeting with group of students (all levels, various programmes)</td>
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<td></td>
<td></td>
<td><strong>13.30-15.30</strong> QAA team private meeting</td>
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<tr>
<td><strong>Day 2</strong></td>
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<td></td>
<td></td>
<td><strong>09.00-10.00</strong> Meeting with a group of staff responsible for the delivery of teaching and academic support</td>
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<td></td>
<td></td>
<td><strong>10.00-10.30</strong> QAA team private meeting</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>10.30-11.30</strong> Meeting with group of staff responsible for delivery of support services, eg library, IT, counselling</td>
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<td></td>
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<td><strong>11.30-14.00</strong> QAA team private meeting</td>
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<td></td>
<td><strong>14.00-15.00</strong> Meeting with main contact and other members of the Senior Management Team as appropriate to:</td>
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<tr>
<td></td>
<td></td>
<td>• advise on recommendations regarding scope and timing of review</td>
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<tr>
<td></td>
<td></td>
<td>• provide some general feedback</td>
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<tr>
<td></td>
<td></td>
<td>• plan for future activities</td>
</tr>
</tbody>
</table>
Annex 6: Protocol for meetings for virtual visits

This annex sets out QAA’s protocol for QAA team meetings with representatives of the institution undergoing IQR at gap analysis and review stages. The availability of time is always limited and it is important that teams make best use of the available time in meetings with staff and students of the institutions.

QAA has many years' experience of running such meetings and this protocol is based on that experience. We respectfully ask institutions undergoing IQR or gap analysis to abide by this protocol.

- A schedule of meetings is agreed in advance of the visit. Any suggested changes that are proposed during the visit should be discussed between the QAA Officer and institutional facilitator at the earliest opportunity.
- The people attending a meeting are agreed in advance with the institution. Any changes to personnel or students attending should be notified to the QAA Officer at the earliest opportunity.
- Numbers attending meetings are limited. Experience tells us that smaller meetings are more effective than larger meetings. Meetings with staff are normally expected to include no more than 10 people plus the review team. Student meetings normally involve no more than 12 students plus the review team. This allows for more in-depth discussion and for all to take part.
- The institution is asked to ensure participants are invited to the virtual meetings.
- Meetings are generally question and answer sessions. Institutional presentations are only required in the first meeting with the Senior Leadership Team and in the meeting to discuss facilities. These should be brief (a maximum of 15 minutes). The QAA Officer may give an overview presentation at the opening meeting or this may have been sent out prior to the meeting for participants to view. Any presentation should be agreed in advance with the QAA Officer.
- All meetings are led by QAA.
- Meetings will start on time and will not be extended beyond the end-time published in the schedule. A meeting may finish earlier than the published end-time.
- Those attending a meeting should arrange to be available and uninterrupted for the duration of the meeting, and not leave the meeting except through, illness, fire alarm or another emergency.
- Staff of the institution should be briefed not to interrupt a meeting when it is in progress.
- Staff and students should be encouraged to speak freely during meetings. The record of the meeting does not identify individuals, and neither will they be identified in the published report.
- Meetings with students must not be attended by staff of the institution. If a student is also a member of staff, they should not attend meetings the team holds with students.