



# **International Quality Review**

## **Handbook for Institutions: Stage 5 - Mid-Cycle Review**

**March 2022**

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## 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 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.

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 part of a suite of publications to inform and support those interested in, and going through, International Quality Review (IQR). This handbook will be of particular use to you if you are at Stage 5 - Mid-Cycle Review. If you require information on Stages 1 to 4 - Application, Scoping, Review and Accreditation, please check the documentation on the [IQR webpage](#) on the QAA website, or email [accreditation@qaa.ac.uk](mailto:accreditation@qaa.ac.uk)

## About International Quality Review (IQR)

2 IQR offers 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 is a five-stage process, consisting of **Application, Scoping, Review, Accreditation** and the **Mid-Cycle Review**. Scoping, Review and Mid-Cycle Review each have their own handbooks. Application and Accreditation have their own guidance documents.

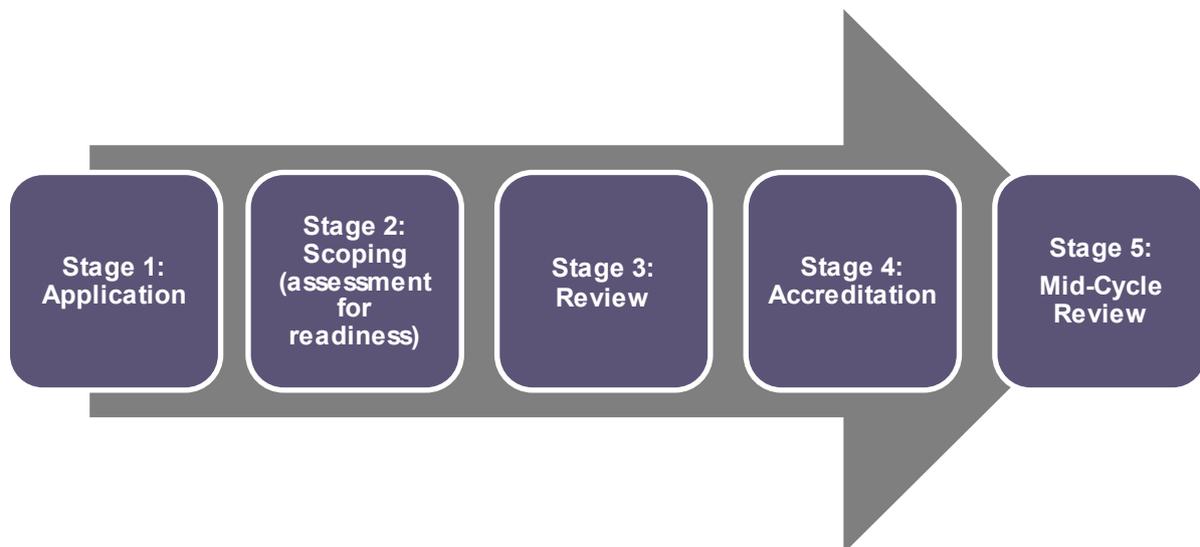


Figure 1: IQR process

## Stage 5: The Mid-Cycle Review

4 The mid-cycle review takes place two to three years after a successful review, as a requirement for the continued validity of your QAA accreditation. It provides an opportunity for your institution to receive feedback on how it is following up on recommendations and features of good practice found during its successful QAA accreditation. It enables QAA to determine whether the accreditation logo is being used properly and is still warranted. The mid-cycle review also helps your institution in its preparations for the next cycle of IQR, five years after the last.

5 The mid-cycle review is usually a desk-based study, unless the scoping and review visits were conducted virtually.

The process of the mid-cycle review stage is:

### Before the mid-cycle review

- Virtual preparatory meeting with QAA Officer to prepare for the submission.
- Prepare and submit your documents.
- Liaison between QAA Officer and your institution to confirm the review visit agenda and who the QAA team will meet if a review visit is required.



### During the mid-cycle review

- A two-person QAA team conducts desk-based analysis.
- The QAA team meets key staff, students and other stakeholders (as appropriate) and considers your facilities and learning resources if a review visit is required.



### After the mid-cycle review

- The QAA team writes a short report.
- QAA makes a decision about whether your institution can continue validity of your QAA accreditation.
- QAA shares the report with you.

6 The process takes place over approximately four months. Further information can be found in Annex 1: An indicative timeline for the mid-cycle review stage.

## Before the mid-cycle review

### The mid-cycle review team

7 QAA appoints a team of two experts, including one QAA Officer and one reviewer to carry out the mid-cycle review.

8 The QAA Officer will coordinate the review 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.

9 If a review visit is required, the QAA Officer is responsible for the logistics of the visit including liaising with your institution, confirming the programmes for the visit, and keeping a record of all discussions. The QAA Officer will accompany the reviewer throughout the visits to your institution.

10 The QAA Officer will advise and guide the reviewer in their deliberations to ensure that decisions and the overall conclusion are securely based on the evidence made available by your institution. The QAA Officer is responsible for editing and producing the report, as well as acting as a reviewer. Further details about the role of the QAA Officer can be found in Annex 2: Roles and responsibilities.

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

### **The facilitator**

12 Your institution must nominate a facilitator to work with the QAA Officer. The facilitator helps to organise and ensure the smooth running of the mid-cycle 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**

13 As part of the preparation for the mid-cycle review, your institution will be asked to submit a brief evidence-based report to QAA, summarising:

- any major changes in the structure and organisation of the institution since the review
- any key strategic developments (for example, in learning and teaching, research or information management) since the review
- where relevant, any developments in collaborative arrangements with partner institutions or other organisations since the review
- actions taken to address the recommendations in the IQR review report
- actions taken to address the recommendations in the reports of professional, statutory and regulatory bodies (PSRBs) and any other relevant reviews by external bodies since the review
- actions taken to further any features of good practices identified in the IQR review
- the institution's intentions for the further development of quality assurance procedures and for the enhancement of learning opportunities.

14 This brief evidence-based report is likely to be the first piece of evidence the review team will encounter in the mid-cycle review process. It will continue to be used throughout

the process, both as a source of information and as a way of navigating the supporting documentation.

15 The report must be accompanied by supporting documentation as evidence. You may also be asked for additional information by the review team following the QAA team's desk-based analysis of your submission.

16 Further details about technical requirements for the provider submission and supporting documentation can be found in Annex 3.

17 QAA may also compile information about your institution from publicly-available sources. This will vary depending on your institution and may include the most recent reports relating to your institution from other national and international agencies and organisations, and other organisations with which your institution works in partnerships, and information that is freely available on your institution's website.

### **Virtual preparatory meeting**

18 The QAA Officer will contact you approximately three months in advance to agree the schedule for your mid-cycle review. Prior to your submission, the QAA Officer will arrange a virtual preparatory meeting with your institution. The QAA Officer will deliver a briefing on the mid-cycle review process which is followed by the opportunity for you to ask questions. If a review visit is required, the QAA Officer will discuss the agenda for the review 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, and the evidence of facilities and resources that will be necessary for this stage.

### **During the mid-cycle review**

19 A QAA Officer and a reviewer then conduct the mid-cycle review to evaluate:

- the institution's response to recommendations and any features of good practices identified in their IQR review
- whether quality assurance and enhancement arrangements appear appropriate in light of evolving institutional priorities and contexts
- whether any changes in your institution might impact on the extent to which the standards are being met.

20 Where a visit is required in the mid-cycle review, the QAA team will hold meetings with a range of your staff, students and other stakeholders according to a schedule agreed with the facilitator in advance. The facilitator will be responsible for arranging the necessary meetings, ensuring they start on time, and that the agreed participants attend. The review team will adhere strictly to the schedule, starting and finishing meetings on time. The schedule will also allow time for the review team to have private team meetings and meals where they can discuss and explore the review themes; the times of these private meetings must also be strictly observed. A protocol for the conduct of meetings can be found in Annex 5: Protocol for meetings for review visit. Institutions are asked to make sure that everyone attending a meeting with the review team are made aware of the protocol.

### **After the mid-cycle review**

21 Following the desk-based analysis and review visit (if required), the review team will finalise its key findings from the mid-cycle review and produce a review report setting out QAA's conclusions about the progress made against the recommendations in the Review

Report and highlighting perceived strengths and weaknesses in current and future plans for quality assurance and enhancement. The report will also propose a conclusion regarding your institution's continuing validity of accreditation.

22 Once the team has drafted its report, it will be reviewed by an independent panel of QAA Officers who were not involved in the review of your institution. The purpose of this QAA internal moderation process is to check whether the review has been conducted in line with the published method and whether the review findings are clearly articulated, evidence-based and consistent.

23 The draft report will then be presented to the QAA Accreditation Panel. The Accreditation Panel will consider the report and reach a decision as to whether or not your institution can continue to use the QAA accreditation logo until the end of the five-year accreditation cycle. The Accreditation Panel meets every three months and meetings are scheduled at least 12 months in advance. All completed IQR reports are presented to the next scheduled Accreditation Panel meeting following completion of the QAA internal moderation process.

24 Approximately two weeks after the Accreditation Panel meeting, your institution will receive the draft report. Your institution has the opportunity to respond within two weeks of receipt of the draft report, telling QAA of any factual errors or any misinterpretations leading from those inaccuracies. The review team will then consider your response and make any changes it deems necessary, incorporating those changes in a revised report.

25 Approximately eight weeks after the Accreditation Panel meeting, the finalised report will be sent to you together with an outcome letter confirming whether your institution is making **satisfactory progress** since the successful International Quality Review and that the period of validity of the QAA Accreditation can be continued to the end of the five-year accreditation cycle.

26 The final report will be published on the QAA website.

27 If the mid-cycle review report indicates the existence of potentially serious difficulties in your institution's management of quality and standards, QAA may decide that further engagement is necessary, or that your institution's licence to display the QAA accreditation logo should be suspended or withdrawn or that the accreditation should end.

## Privacy and disclosure of information

28 An effective IQR 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 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.

29 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 any material they may have personally retained during the review process.
- 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 mid-cycle review stage

Time	Activity
Week -8	Preparatory meeting between QAA Officer and institution Review schedule confirmed
Week -6	Review team agreed with institution
Week -4	Institution uploads a brief evidence-based report with supporting documentation to QAA portal
	Review team begins desk-based analysis
Week -3	QAA requests any additional documentation (if required)
Week -2	Institution uploads additional documentation
Week -1	Review team continues desk-based analysis
Week 0	Review visit takes place (if required)
Week +2	QAA prepares draft report Draft report goes to QAA internal moderation
Week 0	QAA Accreditation Panel Meeting and decision
(Accreditation Panel Meeting is prescheduled quarterly in each academic year)	
Week +2	QAA sends draft review report to institution
Week +4	Institution gives factual corrections
Week +8	QAA sends outcome letter and final report to institution
Week +10	QAA publishes final report and issues press release

## **Annex 2: Roles and responsibilities**

### **Attributes of review team members**

The principal attributes expected of review team members 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
- an ability to produce written commentary on the findings of review activity and to assist in drafting the report
- a willingness to work as a member of a review team and share responsibility for collective decisions and an overall conclusion.

### **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 your institution about the schedule for the review programme
- keep a record of all meetings relating to the review
- oversee the follow-up to the review
- edit and produce the mid-cycle review report.

The QAA Officer is also a reviewer in a mid-cycle review.

### **Role and responsibilities of the institution's facilitator**

The person appointed as facilitator must be willing to become familiar with the IQR 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 English, 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 submission and review visit
- act as the primary contact for the review team during the review visit
- ensure the review team are provided with additional evidence, clarifying evidence requests as needed
- help ensure that the institution has a good understanding of the matters raised by the review team, thus contributing to the effectiveness of the mid-cycle review

- meet the review team on request during the 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 review team's private meetings. However, the facilitator will have the opportunity for regular meetings with them at other times, which will provide opportunities for both the review team and your institution to seek further clarification outside of the formal meetings. This is intended to aid communication between your institution and the review team during the review and enable your institution to gain a better understanding of the review team's lines of enquiry.

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

The facilitator may legitimately:

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

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

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

The facilitator is required to observe the same conventions of confidentiality as members of the review team. In particular, the confidentiality of written material produced by review 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 review team and report back to other staff, in order to ensure that your institution has a good understanding of the matters being raised. This can contribute to the effectiveness of the review, and to the subsequent enhancement of quality and standards.

**The review 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: Technical requirements for the provider submission and supporting documentation

The provider submission and supporting documentation must be uploaded to QAA's secure electronic site. The precise date for doing this will be confirmed in writing. We will also explain by letter how the submission and supporting evidence should be uploaded.

The following table summarises the requirements above and describes other technical requirements, such as file-naming conventions, which the institution should observe in compiling and uploading the submission to QAA's secure electronic site.

Length of submission	<p>The provider's submission (excluding supporting evidence but including any annexes or appendices) may not exceed 20 pages of A4.</p> <p>To ensure the submission is clear and legible for the review team, the following guidelines on formatting must be adhered to:</p> <ul style="list-style-type: none"> <li>• Arial font, 11-point (minimum)</li> <li>• single-line spacing (minimum)</li> <li>• 2 cm margins (minimum).</li> </ul> <p>Tables, diagrams or any non-text content may be included in the 20-page limit.</p>
Structure	<p>The provider submission and supporting evidence should be supplied in a coherent structure:</p> <ul style="list-style-type: none"> <li>• all files together, with no subfolders or zipped files</li> <li>• documents clearly labelled numerically, beginning 001, 002, 003 and so on</li> <li>• ensure that each document has a unique reference number - do not number the same document with different numbers and submit it multiple times.</li> </ul>
File-naming convention	<p>Only use alphanumeric characters (a-z and 0-9); for spaces use the underscore ( _ ) and the hyphen ( - ).</p> <p>Do not use full stops and any other punctuation marks or symbols, as these will not upload successfully.</p>
File types to avoid	<p>Do not upload:</p> <ul style="list-style-type: none"> <li>• shortcut files (also known as .lnk and .url files)</li> <li>• temporary files beginning with a tilde (~)</li> <li>• administrative files such as thumbs.db and .DS_Store.</li> </ul>
<p>For technical assistance with uploading files, please contact your QAA Officer or the QAA service desk on +44 (0) 2829331111, or email <a href="mailto:onedesk@m5servicedesk.ac.uk">onedesk@m5servicedesk.ac.uk</a> The service desk operates from Monday to Friday between 9.00 and 17.00 UK time.</p>	

## Annex 4: Sample schedule for the mid-cycle review visit

A typical schedule for a mid-cycle review visit might look like this. The actual schedule will be determined by the review team, in agreement with the institution.

Times	Day 1
08.30-09.30	Review team arrival and meeting alone
09.30-10.30	<b>Meeting 1</b> with head of the institution
10.30-11.00	Review team meeting alone
11.00-12.00	<b>Meeting 2</b> with the senior management team
12.00-13.30	Review team meeting alone and working lunch
13.30-14.30	<b>Meeting 3</b> with a representative group of students
14.30-15.00	Review team meeting alone
15.00-16.00	<b>Meeting 4</b> with academic teaching staff involved in teaching
16.00-16.30	Review team meeting alone
16.30-17.00	Meeting with facilitator
17.00	Departure of review team

Times	Day 2
08.30-09.30	Review team arrival and meeting alone
09.30-10.30	<b>Meeting 5</b> with staff from academic support teams
10.30-11.00	Review team meeting alone
11.00-12.00	<b>Meeting 6</b> with stakeholders - employers, graduates and any other appropriate interested parties
12.00-13.30	Review team meeting alone and working lunch
13.30-15.30	<b>Site visits</b> including meeting with staff providing support where relevant
15.30-16.30	Review team meeting alone
16.30-17.00	Meeting with facilitator
17.00	Departure of review team

Times	Day 3
08.30-10.00	Review team arrival and preparation for final meeting
10.00-11.00	<b>Meeting 7</b> - final meeting with senior staff with responsibility for quality
11.30-12.30	Review team meets alone to agree key findings
12.30	Working lunch for review team
13.00 onwards	Review team final meeting continues <i>Note: this meeting does not have any time restrictions</i>

## Annex 5: Protocol for meetings for review visit

This Annex sets out QAA's protocol for review team meetings with representatives of your institution when undergoing IQR. The availability of time during a review is always limited and it is important the review teams can make best use of the available time in its meetings with staff and students of your institution. QAA has many years' experience of running review meetings and this protocol is based on that experience. We respectfully ask your institution to abide by this protocol when undergoing IQR.

- A schedule of meetings is agreed in advance of the review visit. Any suggested changes that are proposed during the review visit should be discussed between the QAA Officer and your institutional facilitator at the earliest opportunity.
- The people attending a meeting are agreed in advance with your 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 eight 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.
- Your institution is asked to provide a room for each meeting that can comfortably accommodate the number of people attending sitting at a table.
- It is not usual for there to be presentations during meetings. Meetings are question and answer sessions. An exception may be made in the case of the first meeting the team holds with your institution, but any presentation should be agreed in advance with the QAA Officer and should be brief (for example, 15 minutes).
- All meetings during the review are led by QAA. Each meeting will be chaired on a rotational basis by a member of the review team.
- Meetings will start on time and will not be extended beyond the end time published in the review timetable. A meeting may finish earlier than the published end time.
- Name plates should be provided for all meeting attendees including the review team. These should include name and job title, or course title in the case of students.
- The QAA Officer (or their appointee) will keep the record of the meeting and will be the only person using a laptop.
- No laptops or tablets should be used during in-person meetings. Mobile phones should be switched off prior to attending the meeting. This ensures that everyone's full attention is on the meeting.
- Those attending a meeting should arrange to be available, uninterrupted, for the duration of the meeting and not leave the meeting except through illness, fire alarm or another emergency.
- Staff of your institution should be briefed not to interrupt a meeting when it is in progress.
- No food or drinks, other than water should be served during the meeting. It is important that the review team, institution staff and students should be able to concentrate on the meeting.

- 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 your institution. If a student is also a member of staff, he or she should not attend meetings the review team holds with students.

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