



International Quality Review

Handbook for Institutions: Stage 2 - Scoping

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 for those whose application for International Quality Review (IQR) has been successful and who are now proceeding to Stage 2 - Scoping. Other guidance will be available to you when you proceed to later stages. You could also access the documentation on the [IQR webpage](#) on the QAA website, or email 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 **Mid-Cycle Review**. Scoping, Review and Mid-Cycle Review each have their own handbooks. Application and Accreditation have their own guidance documents.

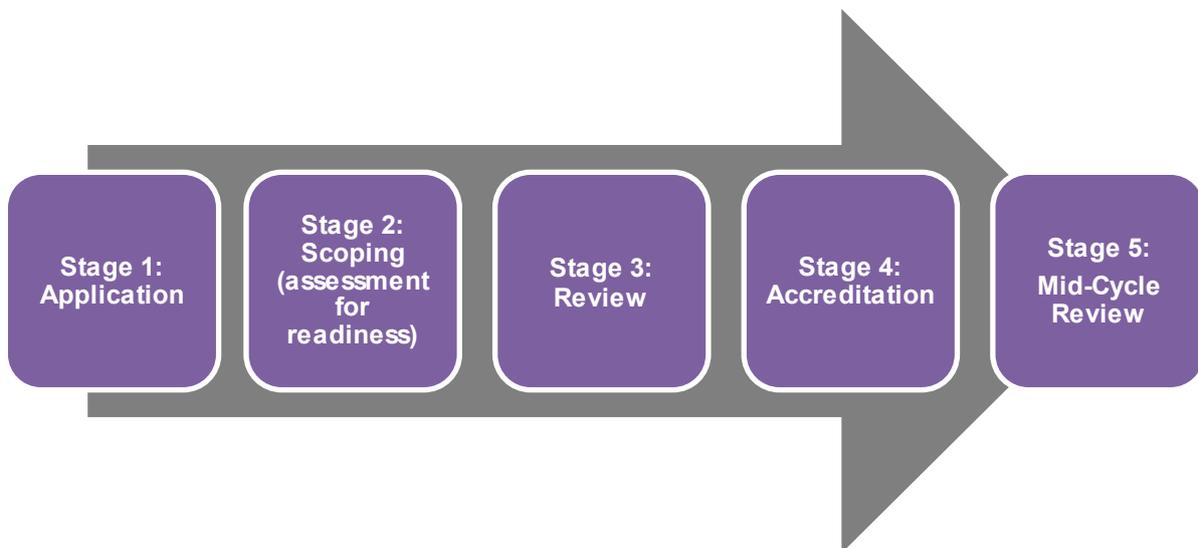


Figure 1: IQR process

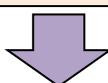
Stage 2 - Scoping

4 The scoping stage is the opportunity for your institution to learn more about IQR and requirements for a review. It also enables QAA to determine whether your institution is suitable to proceed to Stage 3 - Review.

The process of the scoping stage is:

Before the scoping visit

- 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 who the QAA team will meet.
- Prepare and submit your documents.



During the scoping visit

- A two-person QAA scoping team conducts a virtual visit.
- The QAA team meets key staff, students and other stakeholders (as appropriate).
- The QAA team considers your facilities and learning resources.



After the scoping visit

- The QAA team writes a short report.
- QAA makes a decision about the next steps.
- QAA shares the report with you.
- Where QAA recommends that you can proceed to Stage 3, your institution makes a decision about whether it will proceed.

5 The process takes place over approximately two months. Further information can be found in Annex 1: An indicative timeline for the scoping stage.

Before the scoping visit

The scoping team

6 QAA appoints a scoping team of two experts, including one QAA Officer and one assessor to conduct the scoping.

7 The QAA Officer will coordinate the scoping process 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 scoping stage including liaising with your institution, confirming the programmes for the virtual visit, keeping a record of all discussions, preparing 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 scoping team to your institution. Your institution will be informed which institutions or organisations the members of the scoping 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 scoping stage and improve the flow of information between the QAA scoping 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 the scoping visit, your institution will be asked to provide supporting evidence regarding:

- governance, management and committee structures
- the use of external expertise and reference points in designing and approving programmes
- internal monitoring and review systems
- any external accreditation that the institution has, including at programme level
- staffing at the institution
- any general queries arising from the application.

11 Further details about the submission requirements can be found in Annex 3: Scoping stage criteria and evidence. You may also be asked for additional information by the scoping team following their desk-based analysis.

Virtual preparatory meeting

12 Prior to the scoping stage visit, the QAA Officer will arrange a virtual preparatory meeting with your institution. The QAA Officer will deliver a briefing on the scoping 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 evidence, the meeting schedule, the platform to be used, and the evidence of the facilities that will be necessary for this stage.

During the scoping visit

13 A QAA scoping 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 4: Sample schedule for the virtual scoping 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 determine 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 5: Protocol for meetings for virtual visit. Institutions are asked to make sure that everyone attending a meeting with the scoping team are made aware of the protocol.

After the scoping visit

15 Following the virtual visit, QAA will send a scoping report and a letter to your institution stating whether it is able to progress to Stage 3 - Review. The letter will explain how the scoping team reached their decision.

16 Your institution should not take the outcome of the scoping stage as a guarantee that it will achieve a successful accreditation outcome following the review.

17 If your institution is not able to progress, QAA will identify points for consideration about what your institution would need to do to be eligible for the review stage in future. The letter will also explain how your institution can re-engage with the process towards review and accreditation.

18 QAA's decision as to whether your institution is suitable to progress to the review stage is final.

Privacy and disclosure of information

18 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.

19 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 scoping stage

Time	Activity
Week -5	QAA allocates a QAA Officer and an assessor and informs institution
Week -4	Schedule and team confirmed Visit briefing meeting held
Week -3	Institution uploads scoping documentation to QAA portal
Week -2	QAA team reviews scoping documentation QAA team requests additional documentation (if required)
Week -1	Institution uploads additional documentation
Week 0	Scoping visit takes place
Week 1	Draft report to institution
Week 2	Receipt of institution's comments
Week 3	QAA sends letter confirming outcome and next steps

Annex 2: Roles and responsibilities

Attributes of assessors for the scoping stage

The principal attributes expected of assessors for the scoping 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
- 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 the institution about the schedule for the scoping stage
- keep a record of all meetings relating to the scoping stage
- oversee the follow-up to the scoping visit
- edit and produce the scoping 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 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 scoping visit
- act as the primary contact for the review team during the virtual scoping 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 scoping team, thus contributing to the effectiveness of the virtual scoping visit
- meet the scoping 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 scoping team's private meetings. However, the facilitator 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 scoping 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 scoping 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 scoping team.

The facilitator may legitimately:

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

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

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

The facilitator is required to observe the same conventions of confidentiality as members of the scoping 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 scoping 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 scoping stage.

The scoping 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: Scoping stage criteria and evidence

Criteria for progressing to institutional review.

1 Governance

- 1.1 The institution should be able to demonstrate oversight of its strategic development and financial affairs by key stakeholders.
- 1.2 There should be a clear management structure for discharging executive functions.
- 1.3 The committee structure should encourage involvement in the deliberation of key academic issues, including quality and standards. There should be clear reporting lines to senior decision-making bodies.

2 Externality and reference points

- 2.1 The institution should be able to indicate how it makes use of external input and reference points in the management of its academic programmes.
- 2.2 Academic programmes should be mapped against recognised qualifications frameworks.
- 2.3 The institution should show engagement with academic and professional networks and organisations.

3 Internal monitoring and review

- 3.1 The institution should be able to detail how it regularly monitors its academic programmes - including feedback from staff and students.
- 3.2 There should be established systems for annual and periodic monitoring and review, including action planning.

4 External accreditation

- 4.1 If appropriate, the institution should provide information about recent accreditation activities by external agencies or professional bodies.
- 4.2 Students and other stakeholders should be aware of the accreditation status of relevant programmes.

5 Staffing

- 5.1 The institution should employ appropriately qualified staff to deliver its academic programmes.
- 5.2 Staff should be up-to-date and knowledgeable in their academic discipline and should engage in scholarly activity.
- 5.3 The institution should have sufficient professional and administrative staff to support the academic programmes.

6 Any other information

- 6.1 Details of relationships with validating higher education institutions and other organisations - including UK and other partnerships.
- 6.2 Engagement with the European Standards and Guidelines and the Bologna expectations.
- 6.3 Overview of facilities to support higher education provision.

Criteria	Evidence required
1 Governance	<ul style="list-style-type: none"> • Organogram of management structure • A committee diagram with reporting lines
2 Externality and reference points	<ul style="list-style-type: none"> • Evidence of external involvement, including course planning and approval • Confirmation of the official recognition of programmes and qualifications • Evidence of involvement of staff with other institutions and with academic networks
3 Internal monitoring and review	<ul style="list-style-type: none"> • Evidence of systematic monitoring and review of programmes • Evidence of student evaluation of modules and programmes
4 External accreditation	<ul style="list-style-type: none"> • A list of all external accreditation, including dates of approval • Details of accreditation status included in publicity material
5 Staffing	<ul style="list-style-type: none"> • List of staff with details of status (full-time/part-time) and qualifications • Staffing structure • Policies regarding staff recruitment and appointment • Policies regarding staff development/CPD • Policies regarding staff performance review
6 Any other information	<ul style="list-style-type: none"> • Evidence of signed agreements with other institutions or organisations • Examples of programme structure and qualifications, including certificates • A virtual tour of key facilities and resources • Plans of staffing, facilities and learning resources • Policies and procedures regarding the review of facilities and learning resources

Annex 4: Sample schedule for the virtual scoping visit

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

Day 1

Local time	Meeting
09.00 -10.30	Meeting with Head of Institution and Senior Management Team, including senior staff responsible for quality assurance and enhancement - to include a presentation by the institution of no more than 15 minutes
10.30 -11.00	QAA team private meeting
11.00 -12.00	Presentation by the institution on its physical resource provision eg teaching spaces, laboratories, library, self-study spaces, recreational spaces, virtual learning environment
12.00 -12.30	QAA team private meeting
12.30 -13.30	Meeting with current students (all levels and various programmes) and alumni
13.30 -14.00	QAA team private meeting

Day 2

Local time	Meeting
09.00 -10.00	Meeting with a group of staff responsible for the delivery of teaching and academic support
10.00 -10.30	QAA team private meeting
10.30 -11.30	Meeting with group of staff responsible for delivery of support services eg library, IT, counselling
11.30 -14.00	QAA team private meeting
14.00 -15.00	Meeting with main contact and other members of the Senior Team as appropriate to: <ul style="list-style-type: none"> • advise on recommendations regarding progression to review and, if relevant, scope and timing of review • provide general feedback • plan for future activities

Annex 5: 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 scoping and review stages. Time is always limited and it is important that teams make best use of the available time in its meetings with staff and students of the institution.

QAA has many years of experience of running such meetings and this protocol is based on that experience. We respectfully ask institutions undergoing IQR scoping and review stages to abide by this protocol.

- A schedule of meetings is agreed in advance of the virtual visit. Any suggested changes that are proposed during the visit should be discussed between the QAA Officer and the institution's 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 (for example, 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, 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.

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