



Scotland's Tertiary
Quality Enhancement
Framework

Targeted Peer Review (Scotland)

July 2026

Contents

Background.....	1
Introduction.....	1
Method and approach	1
Outcomes and findings	3
Reporting.....	3
Follow-up.....	3
Appendix 1: Schedule for onsite Targeted Peer Review (TPR)	4
Appendix 2: Data protection	5
Appendix 3: Key roles	6

Background

1 The purpose of this document is to provide information about the Targeted Peer Review (TPR) process within the Scottish Quality Concerns Scheme (SQCS). The procedure provides a mechanism through which concerns about academic standards, or the quality of the student experience can be subject to a TPR by QAA Scotland (QAAS).

2 The TPR process is designed to be rigorous, proportionate and provide assurances that matter to students on academic standards, student outcomes and academic experience. TPRs are carried out by a team of trained peer and student reviewers. As outlined in the SQCS, the TPR process will inform consideration as to whether the next external institutional peer review should be brought forward, and judgements on academic standards and the Quality Mark are reserved for external institutional peer review. Because the outcomes of TPR do not result in formal judgements about the academic standards of the providers' awards, HEIs subject to a TPR are unable to appeal against the recommendations but can make representations on grounds of flawed procedure on our part. A complaint of this nature should be raised through QAA's [Complaints procedure](#).

Introduction

3 The TPR procedure is a potential outcome of the SQCS following an assessment of the concern to establish whether there is evidence of a significant issue that requires a TPR. This stage is undertaken by QAA and may result in the case being closed without the need to progress to a TPR. A TPR is a detailed review into the concern conducted by QAA.

4 A TPR takes the form of an onsite (or online) visit by a review team.

5 This document sets out the method and approach to undertaking a TPR and should be read in conjunction with the SQCS and the review plan which sets out the detail of how the TPR will be conducted. The review plan is the definitive document prepared for the TPR which will be agreed by QAA at the start the TPR process.

Method and approach

6 The indicative timings for the TPR process are set out in Appendix 1.

Agreeing the approach

7 For each case, QAA will develop a bespoke review plan.

8 Issues under review will be considered in line with the reference points appropriate to the regulation of higher education providers in Scotland. Some of these reference points will be common to all Scottish institutions, such as the Scottish Funding Council (SFC) guidance to institutions on quality and the Scottish Credit and Qualifications Framework (SCQF). Some reference points will be UK-wide, such as the UK Quality Code for Higher Education (Quality Code), and others will be international, such as those developed through the Bologna process. There are a number of specific references that Scottish higher education institutions are expected to address. These include the Quality Code, incorporating Subject Benchmark Statements and Characteristics Statements, and the higher education qualifications framework that, in Scotland, is established within the SCQF. Institutions will also have regard to Part 1 of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) and to the UK Professional Standards Framework for Teaching and Supporting Learning.

9 Upon submission of a concern to QAA, there is an eligibility review and, if eligible for further consideration, there is an assessment by a QAA Officer. Following the assessment there is a Concerns Assessment meeting to agree the next steps. In the case of a TPR, the scope of the review and the timeframe within which it is to be concluded is agreed.

10 Based on the discussions, a TPR plan is developed to specify the approach to be taken and key milestones within the process. This review plan is shared with the review team. Any deviation from the plan must be discussed and agreed with QAAS. An outline of the review plan detailing the nature of the concern and areas under review will be sent to the provider. If the QAA Officer becomes aware of issues that might affect delivery of the review or other areas of concern outside of the scope of the plan, these should be discussed with senior staff at QAAS.

11 The precise composition of the team is flexible and should address the nature of the matter raised. The minimum team size is three peer reviewers, to include: a student reviewer and two UK-based reviewers. Reviewers will be selected for their expertise in relation to the area of the concern. Providers will be advised on the membership of the review team and will be asked to confirm that there are no conflicts of interest with proposed team members before the team is confirmed.

12 The review team will also include a QAA Officer, known as the TPR Lead Officer, to lead the team and manage the TPR process. The responsibilities of the key roles involved in the process are set out in Appendix 3.

Targeted Peer Review

13 The onsite TPR - whether in-person or online - schedule and activities are summarised separately in Appendix 1.

14 The review team undertakes a desk-based analysis of the case file and evidence base.

15 QAA will normally give providers two weeks' formal notice of a visit date. The review team will draw up a visit schedule which will be shared with the provider. The TPR visit will take the form of meetings with the provider, the purpose of which is to answer any questions that remain from the desk-based analysis. The visit is a useful opportunity for the review team to gain a thorough understanding of the provider's awareness of the concerns being investigated and any action that may have been taken to date. Where the case raises concerns that may impact on the student experience, the team will request to meet with relevant students.

16 For an onsite TPR, the length of the visit is agreed at the start of the process and specified in the review plan.

17 The specific days and details of the schedule for the visit will be for the QAA Officer to agree with the provider in consultation with the review team. The people to be met during the visit will depend on the nature, scope and seriousness of the concerns raised. The schedule will include a private team meeting to discuss and agree the findings for the report, based on the documentary evidence and meetings at the provider.

Outcomes and findings

18 At the end of a TPR, the team will normally make recommendations to address any areas for development or weaknesses.

Reporting

19 After a TPR, QAA will prepare an evidence-based findings report, to include the following:

- description of the issue(s) under review
- brief description of the TPR process and those involved
- findings related to the issue(s)
- recommendations to the higher education institution on areas for development or weaknesses.

20 QAA will send the draft report to the provider, allowing the provider to check the report for factual accuracy. If necessary, the report will be amended before the final version is published on the QAA website.

21 Following the TPR, QAA will undertake an evaluation of the review process, seeking feedback from the QAA Officer, reviewers and the provider.

Follow-up

22 Where the overall outcome of the TPR results in recommendations, the provider will be required to submit an action plan. The action plan should be submitted to QAA for approval four weeks after the publication of the report on the QAA website.

23 QAA will undertake follow-up activity as outlined in the SQCS. This may involve a desk-based review of evidence submitted by the provider for completion of specific actions, or a follow-up visit by a QAA Officer to meet those responsible and accountable for the actions, and to seek feedback from those affected by the actions.

Appendix 1: Schedule for onsite Targeted Peer Review (TPR)

The schedule for each case referred to a TPR will be documented in the review plan and the timeline determined on a case-by-case basis. The table below provides an indicative timeline.

Working weeks	Activity
Week 0	Following Concern Assessment, case referred for TPR
+1 week	QAA writes to the higher education institution setting out the scope and nature of the quality concern and asking for a (further) response and copies of relevant evidence
+3 weeks	- TPR plan agreed including size and composition of the review team - Review team appointed and conflicts of interest checks made with provider
+4 weeks	TPR team undertakes desk-based analysis
+ 5 weeks	Provider informed of requests for additional information
+6 weeks	- Provider uploads additional evidence - The review team continues its desk-based analysis - The provider is formally notified of the review date
+7 weeks	- TPR team holds virtual pre-visit meeting and submits interim text; this meeting is chaired by the QAA Officer; it also includes confirmation of the schedule and participants - The provider is informed of the schedule for the visit - The team continues with its preparations for the onsite visit
+8 weeks	The onsite visit to the provider takes place
+9 weeks	TPR team completes draft findings report
+10 weeks	Report for moderation within QAA Scotland
+11 weeks	Draft report to provider for factual accuracy checks
+12 weeks	Provider's comments on factual accuracy are returned to QAA
+13 weeks	- Review team reviews report in response to provider's comments - Report sent to QAA publications team for proofing
+16 weeks	A copy of the final report is published and sent to the provider
+20 weeks	The provider submits an Action Plan to QAA

Appendix 2: Data protection

QAA complies with the General Data Protection Regulation (GDPR) (EU) 2016/679, the *Data Protection Act 2018*, and any other applicable data protection legislation in relation to personal data. QAA only processes personal data for the purposes of conducting its review activities and, in this case, ensuring data shall only be accessible to those who require access to carry the requirements of the Targeted Peer Review.

QAA is committed to ensuring and maintaining the security and confidentiality of personal and/or special category data, and all members of staff are responsible for handling data in accordance with QAA's Data Protection Policy so that personal and special category information is processed compliantly. All QAA staff and reviewers undergo GDPR training on an annual basis. How QAA gathers and processes personal information, the individual's rights and QAA's obligations are set out in QAA's [Privacy Notice](#). There is a Data Protection Incident Reporting Policy and procedure for reporting, assessing and managing incidents.

QAA stores personal data and non-personal data securely and ensures the data is only accessible to those who require access to it to carry out the Targeted Peer Review. No data or information extracted from it will be passed to any party unless agreed in writing by QAA. All data or all copies or extracts made from it will be destroyed in line with QAA's records retention policy.

QAA is ISO27001 certified for information security management.

Appendix 3: Key roles

Scottish Quality Concerns Scheme Manager

A Senior QAA Officer at QAA Scotland is responsible for overseeing the delivery of the TPR. The Senior QAA Officer is the TPR team's first point of contact for queries relating to the process. Key responsibilities of the role include:

- liaising with the provider to agree details of the TPR
- developing training and guidance material to support team members in fulfilling their roles effectively
- selecting reviewers for the investigating team to ensure an appropriate match between areas of expertise and the nature of the concern
- providing support to the QAA Officer in handling complex or difficult cases
- monitoring, evaluating and enhancing the method used to carry out TPRs.

TPR Lead Officer

A TPR Lead Officer is a QAA Officer assigned to each case referred to QAA. This is the person appointed by QAA to manage the process and the review team for a specific TPR. Key responsibilities of the role are:

- acting as the primary contact for the provider during the TPR
- coordinating the team's activities throughout the process, including an appropriate division of responsibilities among team members
- ensuring the TPR is conducted in accordance with the process and the agreed review plan
- supporting the reviewers in identifying evidence and maintaining an ongoing record of the evidence
- attending the visit to support the review team
- maintaining a record of the team's decisions, and its discussions with staff and students
- ensuring the team's conclusions are evidence-based
- editing and finalising the report.

The TPR Lead Officer is responsible for maintaining an overview of the TPR process and its outcomes.

Reviewers

In addition to the TPR Lead Officer, the team will include at least three reviewers depending on the scope and complexity of the case. Key responsibilities of the role are:

- reading and analysing the documentation provided
- participating in the review visits

- reaching conclusions on the basis of the information gathered during the review
- contributing to and commenting on the review reports (and action plan as appropriate).

The Student Reviewer brings a learner perspective to the review.

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