PACE SIGC

ACPUA Programme for the Certification of Internal Quality Assurance Systems

Framework Document

[Approved by the Commission of Evaluation, Certification and Accreditation (CECA) at its meeting of 16 February 2024]

Content

1. INTRODUCTION

1.1. Legal framework

- Royal Decree 822/2021, of 28 September, which establishes the organisation of university education and the procedure for quality assurance.

- Royal Decree 640/2021 of 27 July on the creation, recognition and authorisation of universities and university centres, and institutional accreditation of university centres.

- Resolution of 3 March 2022, of the General Secretariat for Universities, issuing instructions on the procedure for the institutional accreditation of public and private university centres, and publishing the Protocol for the certification of internal quality assurance systems of university centres and the Protocol for the evaluation procedure for the renewal of the institutional accreditation of university centres, approved by the General Conference on University Policy.

- Royal Decree 1614/2009, of 26 October, which establishes the organisation of higher artistic education regulated by Organic Law 2/2006, of 3 May, on Education.

1.2. Scope and purpose of this document

The purpose of this framework document is to provide the institutions that have ACPUA as an evaluation and certification agency, as well as the different interest groups (students, teachers, evaluators and experts, Administration, professionals, employers, etc.), with a joint reference text describing both the criteria and the procedure that the Agency follows when exercising its competence for the certification of the Internal Quality Assurance Systems (IQAS) of higher education institutions.

The ACPUA PACE Programme implemented in the Aragonese University System since 2019 must now be adapted to the new regulations mentioned in the Legal Framework section.

The most significant normative novelty refers to the possibility for Doctoral Schools to apply for institutional accreditation, for which they must accredit the implementation of an IQAS. To this end, the Resolution of 3 March 2022 of the General Secretariat for Universities includes a new criterion in the IQAS evaluation protocol to be considered specifically by doctoral schools. The REACU, based on this resolution, has published the document "GUIDELINES and ORIENTATIONS for the institutional accreditation of centres offering doctoral programmes, which has also been considered in the drafting of this document.

On the other hand, the centres that offer higher artistic education, in the light of Royal Decree 1614/2009, of 26 October, can begin to implement Internal Quality Assurance Systems to ensure the quality of their training programmes.

Therefore, in this protocol, when reference is made to teaching centre, it should be understood as faculty, school, doctoral school, affiliated centre, or centre for higher artistic education. Likewise, when reference is made to degree (or training offer), it should be understood (as applicable) as bachelor's, master's, doctorate, higher artistic education, own degrees, micro-credentials, specialisation or expert diplomas, among others (the

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centre may include in the scope of the certification, in addition to the official degrees, the rest of its training offer).

This document will be published on the ACPUA website.

2. OBJECTIVES OF ACPUA'S PACE-SIGC PROGRAMME

The certification of higher education institutions' IQAS is nowadays a very important evaluation activity.

This is because the implementation by institutions of quality assurance systems, aimed at the continuous improvement of the training offered to students, and duly aligned with the European criteria and guidelines for quality assurance (ESG, Part 1), is today in our European Higher Education Area the most appropriate and efficient way to generate the necessary confidence in the institution. Confidence that the university is in a position to provide quality education, and confidence in its effective and proven capacity to reflect, innovate, act in the face of difficulties and improve its educational offer.

In order to evaluate the effective implementation of the IQAS, and thus to assess the degree of compliance with the objectives, **higher education institutions** must demonstrate through evidence that:

- The government team:

    - It supports and provides resources for the IQAS implementation process, as a strategy for the continuous improvement of teaching and, in particular, of the student-centred teaching-learning process.

    - It reviews the implementation of the IACS to reflect on the functioning of the system, whether it is adequate and whether the planned objectives are achieved. To this end, it analyses reports (e.g. on internal audits, improvement actions, changes to the system and stakeholder satisfaction) and approves, where appropriate, improvement plans developed.

    - Makes decisions on curricula and programmes based on information provided by the IACS.

- The structure defined for the IQAS and its implementation involves the different stakeholders, especially the student body.

- The indicators included in the IQAS enable and facilitate the monitoring, modification of the academic offer and accreditation of the degrees offered by the centre, and their continuous improvement, based on the analysis of the data obtained. In particular, data relating to the following will be taken into consideration:

    a) the student body enrolled in each degree or programme and modality taught;

    b) a detailed list of students with recognised credits and the procedure followed;

c) data relating to the main indicators of learning outcomes and performance (some of those established in the Integrated University Information System, SIIU, and others established by the quality assurance agencies);

d) the satisfaction indicators of the main stakeholders (at least teaching and research staff, students, graduates and administrative and service staff);

e) indicators relating to teaching staff such as the percentage of PhDs teaching on the degree, percentage of degree credits taught by PhDs, external assessment data on teaching, research and knowledge transfer activity of the teaching staff and percentages of teaching staff in the different performance categories.

- For each of the degrees, the data shall refer to at least the last three years in which the corresponding curricula have been implemented, so that it is possible to analyse trends. It is recommended that the degrees keep the data history between two accreditations.

- For each title, comparisons have been made between the indicators obtained and the quality objectives set.

- The documentation of the IQAS is accessible and describes in an accurate and updated way both the processes carried out in the centre and its measurement, analysis and improvement mechanisms.

- The design of improvement plans includes, at least, a set of actions aimed at meeting the needs detected, those responsible for the development of these actions, a timeframe for implementation, a system for monitoring and measuring their implementation, as well as analysis of the effectiveness of the actions.

- Internal reviews are envisaged to determine whether the system is properly implemented and maintained in an effective and efficient manner.

- Furthermore, higher education institutions should demonstrate that key aspects of the environment (economic, social and scientific) as well as all stakeholders are taken into consideration.

3. CERTIFICATION FRAMEWORK

The framework of the certification shall be agreed between the agency and the institution and shall detail its scope and the facility it covers, always within the applicable standards, laws and regulations in force.

The protocol may be applied to the following higher education institutions:

- o Powers
- o University schools
- o Doctoral schools
- o Centres attached to public and private universities
- o Centres of higher artistic education

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The scope should include the official academic offer for which the institution is responsible.

- o Grade
- o University Master's Degree
- o PhD
- o Degree in Higher Artistic Education
- o Master's degree in arts education
- o Master's degree in lifelong learning

However, the higher education institution may decide to include in the scope of its system other training programmes, such as specialisation diploma, expert diploma, micro-credentials, etc. In short, any higher education training programme has to be under the control of an internal quality assurance system which, taking into account the specificities of each type of degree, is composed of the same elements to guarantee its quality.

The certificate issued by ACPUA will detail this certification framework (centre and type of qualifications), and the dates of issue and expiry of the certificate.

ACPUA will keep a constantly updated register of certified centres, which will be public and accessible on the website.

The evaluation shall be carried out, at the request of the university, when sufficient evidence is available to support the correct implementation of the system and all defined records are systematically collected and analysed.

Certification of the system shall be for a period of 6 years and shall be renewable for successive periods of the same duration.

IQAS certification under ACPUA's PACE programme will have the same consideration as IQAS certification under ANECA's AUDIT programme in degree evaluation processes.

4. EVALUATION DIMENSIONS

The assessment criteria are grouped into the following dimensions, as established in the Resolution of 3 March 2022 of the General Secretariat for Universities, which issues instructions on the procedure for the institutional accreditation of public and private university centres, and publishes the Protocol for the certification of internal quality assurance systems of university centres, and the Protocol for the evaluation procedure for the renewal of institutional accreditation of university centres, approved by the General Conference on University Policy and in the corresponding document "GUIDELINES and GUIDELINES for institutional accreditation of centres offering doctoral programmes", approved by the REACU at its meeting of 11 December 2023.

DIMENSION 1: QUALITY POLICY AND OBJECTIVES

Criterion 1.1: Establishment of a quality culture

Standard:

The centre defines actions, which it reviews periodically, to develop a quality culture involving the different stakeholders. They will be based on its quality policy and the university's strategic objectives.

Guidelines:

- The governing team of the centre and of the university itself supports and provides resources for the IACS implementation process.

- The (formally defined) quality assurance policy is set out in a strategic plan, master plan or similar, the objectives of which have indicators to measure their degree of achievement.

- The centre's quality policy and strategic objectives are public, set out the centre's priorities for continuous improvement, are drawn up with the participation of the different stakeholders, and are reviewed periodically.

- The map of IACS processes and procedures shows the complete set of processes in place and their interrelationships.

- The chain of responsibilities and the stakeholders involved in the processes and procedures are well defined and ensure their proper functioning.

- The IACS documentation management system enables the efficient and systematic control of the documents that are generated, as well as the agile, complete, reliable and representative collection of data and indicators linked to the processes and the strategic plan (or similar), allowing, through their analysis, the improvement of the results of these processes and of the IACS itself.

- There is evidence to show that the IQAS and the quality policy are analysed periodically, contributing both to the improvement of the efficiency of the processes and to the achievement of the centre's quality objectives. This monitoring and periodic review must be included in a system review report which comprehensively analyses all aspects related to each process (those responsible, regulations, documentation, records and results of the management carried out), as well as the achievement of the centre's quality objectives. The review and improvement process includes an internal audit procedure.

Evidence:

- Documentation of the IQAS: map of processes, bodies, procedures relating to the design, review and improvement of the IQAS (centre/university website).
- Published quality policy, strategic plan, master plan or similar (institution/university website).
- Indicators and/or evidence relating to the functioning of the IACS that feed into the review and improvement process.

- Indicators and/or evidence relating to the monitoring of the centre's strategic objectives.

Visit:

- Centre management team: degree of involvement with the IQAS, centre quality policy.
- IACS managers: IACS efficiency, review and improvement of the IACS.
- Stakeholders - administrative and service staff, teaching staff, students, graduates, employers: knowledge and degree of involvement in the functioning of the IQAS and in the quality policy of the centre.

DIMENSION 2: PROGRAMME DESIGN MANAGEMENT

Criterion 2.1: Quality assurance of training programmes

Standard:

The centre has procedures for designing, approving and periodically accrediting its training programmes, guaranteeing the participation of stakeholders, especially the student body, which enables it to maintain and renew its training offer.

Guidelines:

- The institute has procedures in place to design, approve, implement, monitor, accredit and, where appropriate, terminate its training programmes, taking into account the singularities of each one of them. Stakeholder participation is taken into account in the procedures.

- The processes and procedures are in place and guarantee the continuous improvement of the centre's training offer, as well as the training programmes themselves.

- The centre has systems for collecting and analysing information that feed the internal processes of analysis and improvement of the training offer and programmes.

- Monitoring procedures take into account external evaluation reports and take the necessary measures.

- The school's governing body reviews and approves internal monitoring reports on its training programmes and, where appropriate, improvement plans which it develops in a structured manner and may propose transversal improvement actions for the school.

- There is clear and continuous evidence that processes and procedures related to the design, approval, review and improvement of training programmes are analysed and, where necessary, improved.

Evidence:

- Documentation of the IQAS: map of processes, bodies, procedures relating to the design, review and improvement of the training offer and the centre's training programmes (centre/university website).
- Current training offer (centre/university website).
- Evolution of the training offer: extinct and new degrees.
- Degree monitoring reports/improvement plans (centre/university website).
- Actions to disseminate the results of the monitoring of the degrees to stakeholders (centre/university website, documents, dissemination programmes, etc.).

Visit:

- Faculty management team: evolution of the training offer as a result of the monitoring of the degree programmes (new degree programmes, extinct degree programmes and modifications). Improvement plans: mechanisms for implementing actions and monitoring.
- Stakeholders - administrative and service staff, teaching staff, students, graduates, employers -: knowledge and degree of involvement in the processes of monitoring and improvement of the degree programmes. Opinion on the process of monitoring and improvement of the degrees and on the processes of dissemination of results.

DIMENSION 3: DELIVERY OF TRAINING PROGRAMMES

Criterion 3.1: Orientation of their teaching towards the student body

Standard:

The institution has defined procedures that promote student-centred learning. These procedures must take into account the diversity of entry profiles and be based on the use of teaching methods and methodologies, tutorial action plans, assessment systems and other resources that help students to achieve the learning outcomes expected in the degree.

Guidelines:

- The school includes in its quality policy a commitment to student-centred teaching.

- The institution has procedures in place to promote student-centred learning. These procedures provide for the systematic involvement of students. As a minimum, the institution shall have procedures in place relating to:

  o definition of entry/exit profiles
  o admission and enrolment
  o allegations, complaints and suggestions
  o support and guidance
  o teaching and evaluation
  o external placements and mobility
  o career guidance

- The centre has a system in place to obtain, evaluate and contrast information on the development of these procedures.
- The centre analyses the information and proposes improvements to the above procedures.

Evidence:

- IQAS documentation: bodies, procedures relating to this criterion (faculty/university website): at least, the faculty will have the necessary procedures in place to ensure the following aspects included as criteria in the verification of the degrees: definition of entry/exit profiles, admission and enrolment, allegations, complaints and suggestions, student support and guidance, external placements, mobility, professional guidance. In addition, the faculty may include any other procedure designed with the specific aim of ensuring student-centred learning (teaching innovation programmes, teacher training programmes, etc.).
- Evidence of application of the procedures for defining admission/return profiles, admission and enrolment, allegations, complaints and suggestions, student support and guidance, external placements, mobility, professional guidance.
- Degree monitoring reports/improvement plans (centre/university website).

Visit:

- School management team: school policy and objectives aligned with this criterion. Main challenges and achievements.
- Stakeholders - administrative and service staff, teaching staff, students, graduates, employers -: Awareness of the institute's policy on this criterion and of the specific actions related to it. Degree of knowledge/participation in the procedures.

DIMENSION 4. SECURING AND IMPROVING ITS ACADEMIC AND TEACHING SUPPORT PERSONNEL

Criterion 4.1: Assurance and enhancement of its academic and teaching support staff

NOTE: This criterion will be considered fulfilled (and therefore will not be assessed) if the University has a teaching evaluation system whose implementation is certified within the DOCENTIA programme.

Standard:

The faculty has developed mechanisms to ensure access, management and training of its academic and teaching support staff, as well as the periodic and systematic evaluation of its teaching and research activity[1] . The faculty has mechanisms in place to guarantee the

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[1] Institutions may have different levels of responsibility for teaching staff depending on the nature of each institution, but in any case they should ensure that they have processes in place to ensure that staff assigned to teaching, supervising and tutoring activities are competent and have the relevant qualifications.

sufficiency and suitability of its teaching staff in order to fulfil its functions, always respecting their academic freedom and integrity.

Guidelines:

- The centre's quality policy includes a commitment to the quality of its academic and teaching support staff.

- The centre has procedures in place to ensure access, management and training of its academic and teaching support staff.

- The school has procedures in place for the periodic and systematic evaluation of teaching activity and performance.

- The centre has procedures for the periodic and systematic evaluation of the activity and performance of teaching support staff.

- The IQAS includes indicators that facilitate the analysis of academic and teaching support staff, for example:

    - percentage of credits taught by PhD holders.

    - ratios of six-year and five-year periods among the teaching staff teaching the degree.

    - percentage of teaching activity of the teaching staff teaching the degree that is evaluated annually.

    - performance indicators for the evaluation of teaching and teaching support staff.

    - ratios of teacher and support staff participation in training and innovation actions.

- The centre analyses the data on academic and teaching support staff, ensuring that the participation of both groups in the degrees is sufficient, and that they have the dedication to carry out their functions and attend to the students.

- The faculty analyses the data relating to the academic qualifications, experience and teaching and research quality of its teaching staff. As a result of this analysis, and of the degree monitoring reports, the faculty proposes improvement actions such as training plans, innovation actions, etc...

- The faculty analyses data on the qualifications, experience and performance of teaching support staff. As a result of this analysis, and of the reports monitoring the degrees, the faculty proposes improvement actions such as training plans, innovation actions, etc...

- The centre disseminates general information on its teaching and teaching support staff (profiles, suitability, research activity, participation in training activities, aggregate results of evaluations, etc.).

Evidence:

- Quality policy of the centre (centre/university website).

- IQAS documentation: bodies, procedures relating to this criterion (centre/university website).
- Degree monitoring reports/improvement plans (centre/university website).
- Evidence of teacher and support staff evaluation, aggregated results (unpublished).
- Information on teaching and support staff (centre/university website). For example, subject teaching staff, CV, indicators by degree (% of teaching staff by figures, six-year periods, five-year periods...), support staff for the degree/centre...

Visit:

- School management team: school policy and objectives regarding teachers. Main challenges and achievements.
- Stakeholders - teaching support staff, teaching staff, students, graduates -: awareness of the institute's policy regarding this criterion and specific actions related to it. Degree of knowledge/participation in the procedures.

DIMENSION 5: SECURING AND IMPROVING MATERIAL RESOURCES AND SERVICES.

Criterion 5.1: Ensuring and improving material resources and services.

Standard:

The centre has equipped itself with mechanisms that enable it to design, manage and improve its services and material resources for the proper development of the teaching-learning process for students.

Guidelines:

- The centre has procedures in place that enable it to design, manage and improve its services and material resources through regular and systematic evaluation.

- The IQAS includes indicators that facilitate the analysis of the functioning of its services and material resources and collects the opinion of students, lecturers and administrative and service staff on them.

- The centre carries out monitoring reports on its services and material resources, and establishes improvement plans for them if necessary.

Evidence:

- IQAS documentation: bodies, procedures relating to this criterion (centre/university website).
- Evidence of the evaluation of services and material resources.
- Degree monitoring reports/improvement plans (centre/university website).

Visit:

- Centre management team: current state of the centre's services and material resources (strengths, needs, current improvement plans, etc.).

- Stakeholders - administrative and service staff, teaching staff, students, graduates, employers -: awareness of the institute's policy on this criterion and of the specific actions related to it. Degree of knowledge/participation in the procedures.

DIMENSION 6: RESULTS. INFORMATION MANAGEMENT.

Criterion 6.1: Collection of generated information

Standard:

The faculty has mechanisms in place that enable it to continuously collect learning outcomes, job placement and satisfaction of the different stakeholders and other relevant information for decision-making, both in terms of degree enhancement and in non-academic aspects linked to such enhancement.

Guidelines:

- The institution has procedures and systems in place for the collection of information on the results of the learning process, satisfaction and employability. These procedures ensure the participation of all stakeholders.
- The centre has mechanisms in place to collect information on key aspects of the environment (economic, social and scientific).

Criterion 6.2: Analysis of the information and results

Standard:

The centre has defined procedures for the analysis and use of the data and information collected.

Guidelines:

- The institution has defined procedures for the analysis and use of data on learning outcomes, including learning outcomes, labour market outcomes and stakeholder satisfaction.
- The centre carries out a systematic analysis of all these data in relation to the objectives defined for the centre, also taking into account information from the economic, social and scientific environment.

Criterion 6.3: Decision-making

Standard:

The centre makes decisions based on the collection and analysis of the information and results obtained.

Guidelines:

- The results of this analysis feed into the process of improving the overall aspects of the centre: review of the quality policy, review of the training offer and review of the IQAS.

- The governing body of the centre and of the university itself make decisions on the training offer based on the information provided by the IQAS.

- The IQAS facilitates the preparation of internal monitoring reports of the centre (management review report) that lead to the design of improvement plans, which include, at least, a set of actions aimed at satisfying the needs detected, those responsible for the development of these actions, a deadline for implementation, and a system for monitoring and measuring their implementation.

Evidence:

- IQAS documentation: bodies, procedures relating to this criterion (centre/university website).
- Results of the implementation of IACS procedures, their analysis and definition of improvement actions.
- Evidence from the analysis of indicators.
- Monitoring reports/centre improvement plans (centre/university website).
- Accountability documentation: activity reports, performance reports, etc.
- Evolution of the training offer: extinct and new degrees, minutes of meetings or documents where the participation of interest groups can be seen as generators of the necessary information to feed the centre's decision-making process.
- Minutes of meetings or documents reflecting the analysis carried out on key aspects of the environment.

Visit:

- Management team of the centre: general context of the centre, main results and associated improvement plans (improvement of the training offer, improvement of services, improvement of transversal aspects...).
- Stakeholders - administrative and service staff, teaching staff, students, graduates, employers -: awareness of the institute's policy on this criterion and of the specific actions related to it . Degree of knowledge/participation in the procedures.

DIMENSION 7: TRANSPARENCY, DISSEMINATION OF ACTIVITIES AND PROGRAMMES AND RESULTS

Criterion 7.1: Transparency, dissemination of activities and programmes and results

Standard:

The centre has procedures in place for the regular publication of updated information on its activities and programmes and results to ensure decision-making processes, accountability and continuous improvement at all levels of the institution.

Guidelines:

- The centre has established a procedure for reporting on results to the different stakeholders (activity reports, results reports, etc.).

- The centre has procedures in place to ensure the timely publication of up-to-date and accessible information on its activities and programmes. At least the following aspects shall be reported:

  o The training offer, objectives and planning of the degrees.
  o Student access and orientation policies.

- o Teaching, learning and assessment methodology.
- o Mobility policy and external placement programmes.
- o Learning outcomes.
- o The results of labour market integration.
- o Stakeholder satisfaction results.
- o Allegations, complaints and suggestions.
- o Access, evaluation, promotion and recognition of academic and teaching support staff.
- o The use of material resources and services.
- o The results of external evaluations (certifications, monitoring, renewal of accreditation, etc.).

• The documentation of the IQAS is accessible and describes in an accurate and up-to-date manner both the processes carried out in the centre and its measurement, analysis and improvement mechanisms.

• The centre has procedures for the review and improvement of public information that take into account the different stakeholders.

Evidence:

- • Website.
- • IQAS documentation: bodies, procedures relating to this criterion (centre/university website).
- • Results of the implementation of IACS procedures, their analysis and definition of improvement actions.
- • Evidence from the analysis of public information.
- • Monitoring reports/centre improvement plans (centre/university website).

Visit:

- • Centre management team: satisfaction with public information by stakeholders, improvement actions, challenges, etc.
- • Stakeholders - PAS, teaching staff, students, graduates, employers -: knowledge of the website and the information it contains.

DIMENSION 8: R&D&I AND KNOWLEDGE TRANSFER.[2]

Criterion 8.1: R&D&I and knowledge transfer.

Standard:

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[2] This dimension only affects doctoral schools and university centres offering doctoral programmes. It is included in the certification of the IQAS of these centres in accordance with the Resolution of 3 March 2022 of the Ministry of Universities on the procedures for institutional accreditation and certification of internal quality assurance systems.
This resolution places responsibility for the control of funded research programmes and projects and the transfer of knowledge from their doctoral programmes on the doctoral schools. However, given the nature of doctoral schools and other doctoral training centres, all these elements are generally defined to a greater or lesser extent at different levels: university, department and school - just as

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The centre develops mechanisms that ensure a research structure that plans and develops research programmes and projects with internal and/or external funding, so that research results are achieved in line with the lines of research of the doctoral programme in which they participate, with international benchmarks in their corresponding disciplinary fields, and knowledge transfer is carried out in collaboration with entities, companies, institutions and organisations, among others, which generates innovation and progress in society.

Guidelines:

- The processes and procedures linked to R&D&I and knowledge transfer are in place and ensure that research results are achieved in line with the research lines of the doctoral programmes.

- Information is collected for the analysis and improvement of processes and procedures related to R&D&I and knowledge transfer and its results.

- There is clear and continuous evidence that processes and procedures are improved on a regular basis.

The university must develop mechanisms to ensure that its doctoral programmes have a sufficient research structure capable of proposing, planning and developing research programmes and projects that can be funded internally and/or externally and whose results are aligned with the research lines of these programmes. The processes and procedures implemented in the university institutions and their centres must ensure that the research groups and lines of research, and their research projects and programmes, favour the quality training of doctoral students. These research programmes and projects must be at the forefront of their disciplines and aligned with the most important national and international benchmarks.

On the other hand, it is essential that the university and/or centre also have processes and procedures that allow and encourage the transfer of knowledge and collaboration in the generation of this knowledge between the lines of research of the doctoral programmes and entities, companies, institutions, organisations, etc.

In short, the processes and procedures implemented in the university and/or centre must guarantee that the research lines associated with the doctoral programmes carry out research, development and knowledge transfer activities that are appropriate and internationally recognised, enabling the programmes to pass the accreditation process.

Evidence:

- IQAS documentation: bodies, procedures relating to this criterion (centre/university website).
- Results of the implementation of IACS procedures, their analysis and definition of improvement actions.

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certain aspects of faculty management, for example, are defined in departmental or university processes and procedures. In any case, for the certification of IQAS in schools and/or centres offering doctoral training, it must be demonstrated that these processes and procedures are in place - at the level determined by each university - and are effective.

Visit:

- Management team of the centre: assessment of the planning and development of programmes and projects and of the results of transfer and collaboration with companies, entities, institutions.
- Stakeholders - administrative and service staff, teaching staff, students, graduates, employers -: degree of knowledge about the planning and development of programmes and projects and transfer and collaboration activities with companies, entities and institutions.

5. RATING SCALE

The degree of implementation of each of the criteria described above will be assessed according to the scale standardised in the EHEA:

- COMPLETELY IMPLEMENTED (A): There is evidence to support the orderly and systematic implementation of actions linked to the criterion, and they are carried out in an effective and measurable manner and according to clearly defined responsibilities in the IQAS documentation.

- SUFFICIENTLY IMPLEMENTED (B): There is evidence that activities linked to the criterion are carried out in a recurrent and orderly manner, at least in its basic aspects, although there are secondary aspects that are not covered. When a criterion is considered to be sufficiently implemented, it must be associated with a section on aspects of special monitoring.

- INSUFFICIENTLY IMPLEMENTED (C): The documentation provides specific evidence related to the implementation of the different aspects covered by the criterion, but is not fully in line with the guidelines set out in the PACE programme. Procedures are not correctly defined or are not systematically implemented. When a criterion is considered insufficiently implemented, a non-conformity section must be associated with it.

- NOT IMPLEMENTED (D): There is no or inadequate evidence of compliance with the criterion. When a criterion is considered not implemented, a non-conformity section must be associated with it.

In addition, the assessment of each criterion will also include, as far as possible, recommendations and strengths.

6. EVALUATION PROCEDURE

6.1. Requirements to apply for certification[3]

In order to apply for certification of the IQAS implemented, higher education institutions in Aragon must meet the following requirements:

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[3] Those centres that have a current IQAS certification under the AUDIT programme (ANECA) may apply to ACPUA for recognition of the same, without the need to present the documentation indicated in the following section (annex IV). In

a) Have designed an IQAS, at centre level, that complies with the criteria and guidelines established in the Protocol for the Certification of Internal Quality Assurance Systems of ACPUA university centres and which is based on the Criteria and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015).

b) In the event that the IQAS has been defined globally for the whole institution, the institution must have designed its specific procedures associated with the definition, maintenance and continuous improvement of its quality policy, its training offer and the system itself.

c) The institution shall have carried out at least one review of the IQAS prior to the application for certification, so that at least one academic year's results can be presented.

6.2. Application and documentation to be provided

The certification process is voluntary, so the institution that wishes to certify its IQAS and meets the requirements set out in the previous section must send a written request, with the prior approval of the legal representative, addressed to the Agency's management. Bº. of the legal representative of the institution, addressed to the Agency's management.

The application must be accompanied by the following documentation:

• Self-report for the evaluation of the centre.

• Specific IQAS documentation (must be accessible on the institute's website or document repository). The documentation must include the map of processes implemented at the institute, with their description, the people responsible for them, the stakeholders affected in each process and the description of the set of procedures involved in each process.

• Evidence obtained from the implementation of the IQAS (if possible accessible on the centre's website or document repository).

  o The quality policies and objectives of the institution and/or higher education institution, set out in a strategic, master, annual management or similar plan, which has been presented, approved, published and made available to its stakeholders.

  o The set of documentation necessary to carry out each procedure and that which is generated in its development, including process review reports and the documentation that may be generated for external or internal agents of the

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these cases, after due verification, ACPUA will directly issue a certificate with a period of validity identical to that of the AUDIT certificate.

Notwithstanding the above, these centres with AUDIT certification in force may also choose to certify the system with the ACPUA PACE-SIGC programme. Only then can they submit their centres for monitoring and renewal of certification under the PACE-SIGC programme.

university itself (syllabus reports, accreditation self-reports, annual reports, etc.).

- o The key and strategic indicators linked to the processes of the management system and the centre's strategic plan (or similar), the objectives or targets set for each indicator and the results obtained.

- o The management system review report, which comprehensively analyses all aspects related to each process (persons in charge, regulations, documentation, records and results of the management carried out, etc.).

- o The plan of improvement actions to achieve the established goals.

Where appropriate, the centre shall include the following reports in the application:

- Certification report on the implementation of the IACS derived from the AUDIT Programme.

- Report on the certification process of the evaluation models of the teaching activity of university teaching staff derived from the DOCENTIA Programme.

6.3. Appointment and formation of the evaluation panel

The members of the evaluation panel for the certification of the applicant institution's IQAS shall be appointed by the Agency's Management on the proposal of the ACPUA's Evaluation, Certification and Accreditation Committee.

This designation shall be notified to the university for the possible total or partial, and duly motivated, disqualification of the evaluation panel. The institution shall have ten working days to complete this procedure. At the end of this challenge phase, the Agency's management shall proceed to the final appointment of the panel.

The panel shall be composed of **experts in quality management**. Its composition shall be as follows:

- Two academics who preferably belong to the branch of knowledge to which the applicant faculty's degrees are predominantly attached. One of them shall act as chairperson.
- A professional.
- A student.

As far as possible, an attempt will be made to match one of the above profiles with an international expert.

The panel will be accompanied by a technician appointed by ACPUA who will act as secretary of the panel with voice but without vote.

All the members of the panel shall carry out their activity outside Aragon, except for the professional member, who may carry out his or her activity in the autonomous community itself. Gender parity shall be taken into account in the formation of the panel.

The provisions of the ACPUA document "Selection, Training and Principles for Evaluators" shall apply to this panel.

6.4. Proposed certification report

The SEC is the body responsible for certification decisions. Its report proposal will be FAVOURABLE or UNFAVOURABLE to the certification of the IACS implementation.

A proposal for a SUCCESSFUL report will have all the criteria referred to in section 4 of this framework document, with a rating of FULLY IMPLEMENTED OR SUFFICIENTLY IMPLEMENTED. In addition, such a SUCCESSFUL proposal may contain aspects of particular follow-up, recommendations and strengths.

In the event that the proposed report contains "aspects for special monitoring", the university may, during the allegations phase, make the appropriate clarifications regarding the deficiencies detected, as well as present, if required, an improvement plan. This improvement plan must include, as a minimum, the following information:

- Study of the cause(s) of the aspect to be improved
- Action(s) for improvement
- Monitoring indicators
- Timeframe for implementation
- Responsible for its implementation

If the proposed report is UNFAVOURABLE it shall include for each criterion that is assessed as not implemented or insufficiently implemented a "non-conformities" section.

The proposed report shall be sent to the University so that it may submit its observations within 20 days.

6.5. Certification decision making

Once the allegations have been studied, the SEC will issue the final evaluation report, which will be FAVOURABLE or UNFAVOURABLE to the certification of the IACS implementation.

If the report is FAVOURABLE, the agency will issue a certificate of implementation of the centre's IACS.

The reports will be published on the Agency's website, which will keep an updated register of certified sites and the validity of these certifications. In addition, these reports will be published in the DEQAR database.

Of any complaint or appeal resulting from this evaluation process, the Agency's Management will refer it to the Committee of Guarantees for its knowledge and effects according to the general procedure established by ACPUA.

ACPUA will close the evaluation activity by collecting information about the satisfaction of all the people involved in the evaluation, as foreseen in our meta-evaluation processes.

7. FOLLOW-UP

Depending on the results of the IQAS certification, the ACPUA will indicate in its final report the frequency with which the university must send the system monitoring report to the agency. These reports must include the action/improvement plans generated by the IQAS and the actions taken by the centre to respond to both the aspects requiring special

monitoring and the recommendations (if any) of previous ACPUA reports. Therefore, these review reports will be the main evidence for the future renewal of the IQAS certification.

Upon review of the monitoring reports, the SEC may determine the need to continue receiving them, determine the need for a site visit or suspend monitoring until the time of certification renewal.

In the case of a monitoring visit, if the panel detects serious deficiencies, this fact will be noted in the corresponding ACPUA monitoring report, which may lead the Agency to request an express response from the university in the form of a specific action plan. The results obtained from the implementation of this specific action plan will be the subject of special attention in the evaluation process for the renewal of certification. A negative evaluation of these results will lead to the loss of certification.

8. RENEWAL OF CERTIFICATION

Approximately nine months before the expiry of the certificate, the institute must apply for renewal of its IQAS certification.

If the institute is institutionally accredited, the renewal of IQAS certification will be carried out in conjunction with the assessment for the renewal of institutional accreditation, and it is not necessary for the institute to apply for renewal of certification under the PACE Programme.

Normally, the first IQAS certification ends before the end of the institutional accreditation period (from the first renewal of institutional accreditation onwards, both certifications will be simultaneous). In these cases, institutions will apply for renewal of institutional accreditation taking into account the end date of the institutional accreditation and will not need to apply for renewal of IQAS certification.

In those (exceptional) cases where the IQAS certification is more than 9 months prior to the first institutional accreditation, ACPUA will assess with the centre the possibility of renewing the IQAS certification or waiting for the renewal of the institutional accreditation.

DOCUMENT REVISION HISTORY

Rev.	Date	Amendments made
Draft	01/11/2017	First protocol proposal by experts
0.0	06/04/2018	Approval of initial document.
0.1	09/04/2018	Referral to the University of Zaragoza and the University of San Jorge.
1.0	21/06/2018	Final approval of the document by CECA after considering the comments submitted by the universities.
1.1	22/01/2019	Revised typographical errors in the document.

2.0	2/12/2019	ECSC approval of the complete revision of the document based on the meta-evaluation data following the first implementation of the programme in 2019.
		The following changes are made to the document:
		• The Introduction section has been updated to take account of new regulations.
		• Paragraph 4: the wording of the guidelines in criterion 5 is improved.
		• New section "5-Assessment Scale": new scale of assessment of compliance with the criteria with 4 levels (as opposed to the previous dichotomous scale) taking as a reference the assessment scales used in the EHEA.
		• Section 6: the procedure established in the Resolution of 7 March 2018 of the General Secretariat for Universities, which issues instructions on the procedure for the institutional accreditation of public and private university centres, is more clearly stated. This point includes part of the information contained in point 2 of the previous document ("Periodicity and scope", "Assessment bodies", "Resolution period", "Meta-evaluation of the process" and "Complaints and appeals").
		• Annexes:
		  ▪ Annex I: the new rating scale is included and a rating per guideline is introduced in the self-report.
		  ▪ New Annex III with the minimum evidence required.
		  ▪ New annexes are included: application forms, model reports and model certificates.

3.3	17/07/2020	Proofreading for correction of spelling and typographical errors.
4.0	16/02/2024	Adaptation to RD640/2021. Specificities Doctoral Schools. Annexes are deleted from the document (templates and reports will be kept out of this document to facilitate updating). Inclusion of arts education establishments. Training offered by the centre (official and own degrees).
4.1	26/05/2025	An error has been detected in the text of point 6.3 Designation and formation of the evaluation panel.