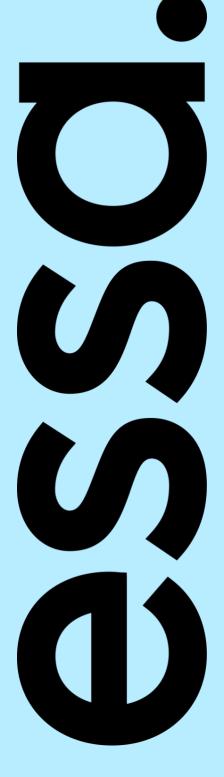
European Software Skills Alliance.

General Criteria &
Procedural Guidelines
for the Accreditation
of Learning
Programmes for
Software
Professionals

ESSA BOOKLET

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ESSA Booklet "General Criteria & Procedural Guidelines for the Accreditation of Learning Programmes for Software Professionals", 2022, DRAFT version.

Related to deliverable D.20: "Accreditation standards and criteria"

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About ESSA

The European Software Skills Alliance (ESSA) is a four-year transnational project funded under the EU's Erasmus+ programme. It ensures the skills needs of the rapidly evolving Software sector can be met — today and tomorrow.

ESSA provides current and future software professionals, learning providers and organisations with software needs with the educational and training instruments they need to meet the demand for software skills in Europe.

ESSA will develop a European Software Skills Strategy and learning programmes for Europe. It will address skill mismatches and shortages by analysing the sector in depth and delivering future-proof curricula and mobility solutions; tailored to the European software sector's reality and needs.

Project partners

The ESSA consortium is led by DIGITALEUROPE. It is composed of academic and non-academic partners from the education, training, and software sectors.

View all project partners: <u>ESSA Partners I ESSA Associated Partners</u>





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List of abbreviations and acronyms

| Abbreviation | Term | | |
|--------------|--|--|--|
| e-CF | e-Competence Framework | | |
| EQA | External quality assurance | | |
| EQF | European Qualifications Framework for Lifelong Learning | | |
| ESG | Standards and Guidelines for Quality Assurance in the European | | |
| | Higher Education Area | | |
| ESSA | European Software Skills Alliance | | |
| HEI | Higher Education Institution | | |
| ICT | Information and Communication Technology | | |
| LO | Learning Outcome | | |
| PLO | Programme Learning Outcome | | |
| SSC | Subject-Specific Criteria | | |



1 Introductory remarks

The following general standards for the accreditation of learning programmes in the ESSA framework are based on the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). These criteria provide an accreditation scheme for learning programmes of EQF levels 4/5–7 and can be applicable to all areas of further education and training. They are therefore also tailored to accredit all qualification profiles for Software Professionals, which have been defined in the ESSA project's framework.

For a full assessment of whether learning programmes related to the exemplary profiles are meeting defined quality standards in the field, these general criteria have to be applied in combination with additional respective Subject-Specific Criteria (SSC), that have also been designed in the framework of the project. They will be validated in pilot accreditation procedures of selected learning programmes.

1.1 Scope and aims of the standards

Next to regular tertiary-level education, lifelong learning in many facets has emerged in the European education markets. While Bachelor, Master and doctoral programmes are by now routinely accredited in all countries of the European Higher Education Area, this is thus far not the case for continuous education/Lifelong learning programmes, which are as of now frequently not submitted to independent (external) quality control procedures. This is even more lamentable, as only external quality reviews can provide the necessary transparency required for recognition of these educational services and corresponding mobility agreements between individual education systems.

The present document offers information on:

- The review approach used to accredit regular third-cycle learning programmes on EQF levels 6 and 7 and (further education) learning programmes on levels 4/5–7 (e.g. further training, certificate studies, combinations of learning units) and individual learning units;
- The requirements to be fulfilled to obtain an accreditation seal for any such education and/or training;
- The principles underlying the accreditation procedure.

The present standards are subject to reviews and adapted to new developments and insights derived from accreditations on a regular basis. The version applicable shall be the one in force at the time.

The present standards incorporate the ESG issued by the European Association for Quality Assurance in Higher Education (ENQA). While the ESG explicitly refer to academic settings and higher education institutions, they can also be adapted to alternative providers of (further) education and training.



1.2 Accreditation Seal

Accreditation seals may thus be awarded for:

- a) Regular third-cycle learning programmes leading to an academic degree of the level 6 or 7 EQF (i.e., bachelor's and master's degree programmes):
- b) (Further education) learning programmes at levels 4/5–7 EQF, which consist of several learning units but do not lead to an academic degree of levels 6 or 7 EQF;
- c) Individual learning units. While such units can be part of a third-cycle or further education learning programme, in this case, they are subjected to an external quality review each on their own.

Any educational provider (HEIs as well as non-HEIs) can apply for an accreditation seal.

1.1.1. Achievement of the intended learning outcomes

An accreditation seal confirms that the learning outcomes intended by the educational provider for an educational programme or an individual unit can be achieved while providing the necessary content, resources, and structural arrangements.

This quality statement should transparently reflect the qualifications profile and -level obtained by graduates after successfully concluding the respective programme or learning unit. They are instrumental in fostering mobility between academic education and vocational further training while supporting the transfer of credits between academic and working experience. Ultimately, the accreditation of an educational offering bases on achieved learning outcomes will promote diversity in (further) education and training and at the same time guarantee the quality, transparency, and comparability of achievements as well as of the required processes and resources.

While a seal confirms that the stated learning outcomes can generally be achieved, it does not guarantee the actual success of individual learners.

1.1.2. Attestation of qualification levels

Additionally, the accreditation process contains a comparison of the defined programme learning outcomes with external sources of reference, e.g., the European Qualifications Framework, the respective National Qualifications Framework and/or subject-specific, disciplinary-oriented professional specifications. The applicable sources of reference will be agreed upon when signing the agreement between the owner of the seal and the applicant educational provider.



The accreditation seal thus will state to which level of the European Qualifications Framework an educational programme is aligned ¹. Accreditation can be awarded to educational offers on level 4/5 or higher.

Accreditation seals have a limited duration of five years; an extension is subject to a new application for accreditation and a new review.

The accreditation approach aims at supporting providers of (further) education and training to continuously improve their learning programmes/units. Once accredited, improvement measures should be continuous and not postponed until the next accreditation date. In the case of reaccreditation procedures, it is essential for the applicant to provide proof that continuous improvement measures have been implemented

If a provider of (further) education and training wishes to make significant and substantial changes to an accredited learning programme/unit the provider must inform the owner of the accreditation seal of any changes and allow for an interim review if deemed necessary.

1.3 Focus on outcomes and a process-orientated review approach

1.1.3. Quality in learning programmes/units and involvement of relevant stakeholders

The understanding of quality underlying these criteria is based on the objectives and outcomes of teaching and learning processes.

Content-wise, the quality of learning programmes/units is determined by the provider's definition of its aims and expectations. Among others, these will be influenced by the legal, political, socio-economic, and cultural setting in which they are planned and established. The quality of a teaching and learning process then results from the combination of its elements and the extent to which its aims are met.

Stakeholders are all groups of persons who participate in or are affected by the learning programmes/units. Core stakeholder groups are direct participants of the learning process, foremost teachers/trainers/lecturers as well as students/learners. External Stakeholders must also be considered, among others labour market representatives and state institutions. The identification of the relevant stakeholders depends on the strategic

¹ The Qualifications Framework for lifelong learning notes the compatibility with the qualification levels of the Qualification Framework for the European Higher Education Area as follows:

The descriptor for the higher education short cycle (within or linked to the first cycle), developed by the Joint Quality Initiative as part of the Bologna process, corresponds to the learning outcomes for EQF level
 5.

[•] The descriptor for the first cycle in the Framework for Qualifications of the European Higher Education Area agreed by the ministers responsible for higher education at their meeting in Bergen in May 2005 in the framework of the Bologna process corresponds to the learning outcomes for EQF level 6.

[•] The descriptor for the second cycle in the Framework for Qualifications of the European Higher Education Area agreed by the ministers responsible for higher education at their meeting in Bergen in May 2005 in the framework of the Bologna process corresponds to the learning outcomes for EQF level 7.

[•] The descriptor for the third cycle in the Framework for Qualifications of the European Higher Education Area agreed by the ministers responsible for higher education at their meeting in Bergen in May 2005 in the framework of the Bologna process corresponds to the learning outcomes for EQF level 8.



position of the institution offering programmes as well as its respective guidelines and development targets.

1.1.4. The review approach

The accreditation procedure reviews the logic and effectiveness of the teaching and learning process of an educational programme or learning unit. A learning programme/unit is typically put into practice in three stages:

- 1. **Definition of (intended) learning outcomes:** The learning outcomes to be achieved by learners (in each learning programme/unit) are the main focus. For learning programmes, the focus will also be on the plausible and consistent relation between the overall intended learning outcomes and the objectives of its individual units.
- Implementation: The focus in this stage will be on organisational processes, instruments, and resources needed for the implementation of a programme/module (input) and the achievement of the intended objectives (outcome).
- 3. **Evaluation of the results and further development:** The focus will be on internal quality assurance, which should positively feed back into the system, leading to a continued improvement of the learning programme/unit.

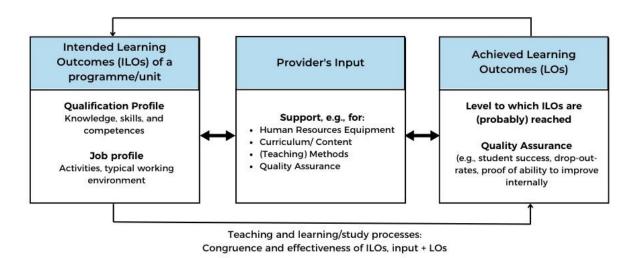


Figure 1: The review approach: a process and outcome-orientated approach

2 Requirements for learning programmes/units

2.1 Learning outcomes

Learning outcomes, which are formulated in a comprehensible and precise way, are the starting point and central framework of reference for the structuring, implementation and accreditation of all learning programmes/units.

The review approach employed here concentrates on the learning outcomes of an **educational programme/unit**.



In accordance with the European Qualifications Framework for lifelong learning, the following definitions will be applied in the requirements for learning programmes/units²:

| | Definition |
|---------------|--|
| Qualification | Formal result of an assessment and validation process in which a competent body has |
| | found that a given person's learning outcomes are in line with the required standards. |
| Learning | What learners know, understand and are able to do after completing a learning process. |
| outcomes | They are defined as knowledge, skills and competences. |
| Knowledge | The result of the processing of information by learning/studying (theory and/or factual |
| | knowledge). |
| Skills | The ability to apply knowledge in order to carry out given tasks and solve problems |
| | (cognitive skills such as logical, intuitional and creative thinking as well as practical skills |
| | such as skilfulness and the use of methods, materials, tools and instruments). |
| Competence | The ability to use knowledge, skills and personal, social and/or systematic abilities in a |
| | working or learning environment as well as for one's own professional and/or personal |
| | development. |

Learning outcomes can be achieved with the aid of different forms of teaching and learning.

The provider must at the outset define the **learning outcomes** to be achieved in the educational programme/unit (knowledge, skills and competences) in a clear manner. Based on the learning outcomes to be achieved, the provider must also state by which means they shall be acquired (contents, teaching and learning/study forms etc.).

If a learning programme is to be accredited, the provider's self-evaluation must also explain the relation between the intended learning outcomes in general (knowledge, skills and competences), and the contribution of individual learning units to the achievement of these outcomes.

2.2 Standards for the accreditation of learning programmes/units

The following table contains a list of the general standards for the accreditation of learning programmes/units. The table shows, which requirements have to be met to receive the accreditation seal.

Accreditation seals are always based on the ESG. The table, therefore, lists analogies between the requirements to be met for the accreditation seal and the ESG.

In the present document, the relevant ESG are only quoted by number; text and guidelines are left aside.

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 $^{^2}$ Cf. European Parliament legislative resolution of 24 October 2007 on the proposal for a recommendation of the European Parliament and of the Council on the establishment of the European Qualifications Framework for lifelong learning (COM(2006)0479 – C6-0294/2006 – 2006/0163(COD)), Brussels 24/10/2007.



| | ESSA Standards for Accreditation | | |
|------|--|-----------------------|--|
| Requ | lirements | Corresponding ESG | |
| 1 | CONCEPT, STRUCTURE, AND IMPLEMENTATION | | |
| 1.1 | Learning outcomes The intended learning outcomes of the educational programme/unit are described briefly and precisely. The learning outcomes reflect the desired level of qualification and are feasible. They reflect currently foreseeable developments in the respective disciplinary field and adjacent disciplines. | ESG 1.2: ³ | |
| | The learning outcomes are transparently anchored and accessible to the relevant stakeholders. Demand for graduates with the desired learning outcomes (competences) exists in the labour market or can be predicted. If applicable (e.g. in the case of short-cycle continuing education and training offers), the benefit of the learning programme for the aspired academic or professional education is demonstrated. | ESG 1.8 | |
| | Quality assurance The intended learning outcomes are continuously reviewed and further developed, taking into consideration the development of the labour market and involving the relevant stakeholders. | ESG 1.9 | |
| 1.2 | Contents and structure Contents The contents of the educational programme/unit enable learners to achieve their intended learning outcomes within the designated time. Overall, the educational programme/unit includes an appropriate connection to professional practice in the respective field. The name of the programme/unit is in line with its intended learning outcomes and contents. Structure The structure of the educational programme (e.g., full-time, part-time, face-to-face and distance learning) is defined, documented and suitable for achieving the intended learning outcomes. | ESG 1.2 | |
| | achieving the intended learning outcomes. For learning programmes/composite learning units: The objectives and contents of the learning programmes/units are coordinated; undesired overlaps are avoided. Each educational programme/composite learning unit represents a well-matched unit of teaching and learning. The educational programme/composite learning descriptions show, which knowledge, skills and competences the learners acquire in the respective programme/composite learning unit. Where applicable, compulsory and elective subjects are clearly defined. The intended learning outcomes of the educational programme can be achieved with all offered options. If applicable, periods of practical training are appropriately integrated into the curriculum and are supervised by the education provider in terms of subject matter, content and organisation. | | |
| | Quality assurance The content and structure of the educational programme/composite learning unit are periodically reviewed with regard to the achievement of the | ESG 1.9 | |

³ "ESG x.y" refers to the relevant standard and corresponding guideline within the "Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)", European Association for Quality Assurance in Higher Education (ENQA), Yerevan, 2015; available at: https://www.enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf.





| Didactics | ESG 1.3 |
|--|--|
| 2.000 | |
| The teaching methods and didactic means used support the achi | |
| | ipate in the teaching/learning process. The ratio of classroom-based learning and |
| independent learning contributes to the achievement of the learn | ang outcomes. |
| To be checked additionally, if necessary: | |
| Digital teaching | |
| | ote the achievement of the intended learning outcomes. The established digital |
| infrastructure supports the use of e-learning concepts and the dig | |
| Teaching and learning materials for digital teaching are made ava | ilable securely and reliably (electronically). |
| Quality assurance | ESG 1.9 |
| It is regularly checked whether the didactic methods and the s | supporting infrastructure contribute to the achievement of the intended learning |
| outcomes. Teaching and learning materials are regularly updated | |
| Admission requirements | ESG 1.4 |
| | gramme/composite learning unit are defined in a transparent and binding way. |
| | the learning outcomes. In particular, they ensure that admitted learners have the |
| necessary prerequisites for the learning programme/unit. | |
| | quirements. The compensation of missing requirements may not be made at the |
| expense of the educational quality of the learning programme/un | it. |
| To be checked additionally, if necessary: | |
| Digital teaching | |
| Applicants are informed about the e-learning and digital competer | nces required to participate in the learning programme/unit and about the necessary |
| technical requirements. | |
| Quality assurance | |
| It is regularly reviewed whether the admission regulations ensure | the required prior knowledge to a sufficient degree. |
| Workload | ESG 1.2 |
| The estimated time budgets are realistic so that the learning out | comes of the learning programme/unit can be achieved at the desired level in the |
| designated time. | |
| The workload of the learners can be estimated by interested person | ons even before registration. |
| If credit points (ECTS/ECVET) are allocated, the allocation is transp | arent and adequately reflects the learners' workload. |
| Quality assurance | ESG 1.9 |
| | s corresponds to the estimated workload and whether it allows the achievement of |
| | tments are made to the content or to the time budget/the allocated credits. |
| EXAMINATIONS: SYSTEMS, POLICY, AND IMPLEMENTATION | |
| | ually and comparably for all learners. The type, design, assessment criteria and ESG 1.3 |
| I disability at the state of th | nent of the intended learning outcomes. |
| | recodure and include rules for make up evams non attendance cases of illness as |
| The relevant provisions for examinations are made in a regular p | |
| The relevant provisions for examinations are made in a regular p well as compensation of disadvantages in the case of students wit | th disabilities or special needs. |
| The relevant provisions for examinations are made in a regular p well as compensation of disadvantages in the case of students wit | |



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| Skills Alliance | |
|--|---------|
| If examinations are carried out by external service providers, it is ensured that the aforementioned requirements are met. | |
| To be checked additionally, if necessary: | |
| Digital teaching | |
| Forms of online examinations have been developed and established. They are suitable for determining whether and to what extent the intended | |
| learning outcomes have been achieved. | |
| The learners are informed about the technical and organisational requirements as well as the procedural rules for the online examinations. | |
| For learning programmes/composite learning units: | |
| The number and distribution of examinations ensure a tolerable examination load. | FCC 10 |
| Quality assurance | ESG 1.9 |
| It is regularly checked whether the forms of examination and the requirements demanded reflect the intended learning outcomes and the desired level of qualification, and to what extent they measure the achievement of the learning outcomes. | |
| RESOURCES: STAFF AND INFRASTRUCTURE | |
| Staff | ESG 1.5 |
| The composition and expertise of the teaching staff ensure that the learning outcomes are achieved at the desired level. The lecturers have appropriate didactic competences for the intended target group of learners. Quality standards and procedures are defined for their appointment. | 250 1.5 |
| Lecturers are offered didactic and professional development opportunities and these are made use of. The lecturers have sufficient time for the implementation of the learning programme/unit and for offering support to the learners. Sufficient staff are available for individual counselling and support of learners. | ESG 1.6 |
| To be checked additionally, if necessary: | |
| Digital teaching | |
| Teachers have the educational and technical qualifications to meet the requirements of digital teaching. There is corresponding training in didactics and technology. | |
| A code of conduct for digital teaching and learning has been developed and is communicated appropriately to learners and teachers. | |
| Quality assurance | ESG 1.9 |
| It is regularly reviewed whether the human resources are sufficient for the implementation of the learning programme/unit and whether the professional and pedagogical qualification of the teaching staff is appropriate for the achievement of the learning outcomes. | |
| Institutional environment, financial and material resources | ESG 1.6 |
| The available resources form a sustainable basis for achieving the intended learning outcomes. | |
| The funding of the learning programme/unit is secured at least for the accreditation period. | 1 |
| The infrastructure (e.g., laboratories, library, IT equipment) meets the qualitative and quantitative requirements of the learning programme/unit. | |
| Any internal and external cooperations required for the learning programme/unit are sustainable and bindingly regulated. The organisation and decision-making structures are suitable for implementing the learning programme/unit. | |
| | |
| To be checked additionally, if necessary | |
| To be checked additionally, if necessary: | FSC 17 |
| To be checked additionally, if necessary: Digital teaching The necessary technical infrastructure for digital teaching and online examinations is in place (e.g. online library and virtual laboratories). This also | ESG 1.3 |



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| | S Skills Allidrice | | | |
|-----|---|----------|--|--|
| | Quality assurance | ESG 1.9 | | |
| | The education provider is able to respond to and resolve problems and to compensate for shortages (e.g., related to staff, finances, numbers of students) | | | |
| | without compromising the learners' ability to complete the learning programme/unit in the designated time. | | | |
| | The laboratory, library, and IT infrastructure are maintained and further developed according to the requirements of teaching and learning. | | | |
| 4 | QUALITY MANAGEMENT: MONITORING AND CONTINUOUS IMPROVEMENT | | | |
| | Quality assurance and enhancement | ESG 1.1 | | |
| | A quality assurance concept for the learning programme/unit is implemented as a basis for its (further) development and implementation. It is regularly | | | |
| | revised and geared towards the continuous improvement of the learning programme/unit. | | | |
| | Mechanisms and responsibilities are defined for the continuous improvement of the learning programme/unit. Learners and other stakeholders are | | | |
| | involved in quality assurance. | | | |
| | The learning programme/unit is periodically reviewed within the framework of an external quality assurance procedure. | ESG 1.10 | | |
| 5 | DOCUMENTATION AND TRANSPARENCY | | | |
| 5.1 | Learning unit descriptions | ESG 1.8 | | |
| | Unit descriptions are published and contain information on the following points: | | | |
| | Unit name | | | |
| | Person responsible for the unit | | | |
| | Teaching methods | | | |
| | Credits and workload, if applicable | | | |
| | Intended learning outcomes | | | |
| | Unit content | | | |
| | Participation and examination requirements | | | |
| | If applicable, types of examinations and composition of the unit grade | | | |
| | Recommended literature | | | |
| | Date of last modification | | | |
| | Date of last modification | | | |
| | Quality assurance | | | |
| | Unit descriptions are periodically reviewed and updated. | | | |
| 5.2 | Relevant Documents | ESG 1.4 | | |
| | Regulations | | | |
| | The statutes, contracts etc. on which the learning programme/unit is based contain all relevant regulations for admission, study process, graduation | | | |
| | and retention period. | | | |
| | In particular, the legal relationship between learner and education provider is bindingly defined and documented. The mutual rights and obligations | | | |
| | of learners and education provider are defined and known to all relevant stakeholders. | | | |
| | The relevant regulations have been legally reviewed and, where necessary, put into effect and published. | ESG 1.8 | | |
| | Certificate of completion | | | |
| | The certificate is suitable and ideally encompasses additional information giving interested parties an insight into the structure, content and level of | | | |
| | the completed learning programme/unit and the individual performance (e.g., by way of Transcript of Records, Diploma Supplement). | | | |
| | It provides information on how the final grade was determined so that it is transparent which achievements are included and in what form. | | | |
| | To provide 3 information on flow the infat grade was determined so that it is transparent which achievements are included and in what form. | | | |
| | Quality assurance | ESG 1.9 | | |
| | The document management includes the regular review and, if necessary, adjustment of the relevant regulations and documents. | L30 1.J | | |
| | The document management includes the regular review and, it necessary, adjustment of the relevant regulations and documents. | 1 | | |



3 Procedural principles

3.1 Procedure steps

The accreditation procedure of a learning programme/unit is divided into three stages:

| 1. Preparation | Applying body | An application is sent to the accreditation agency (hereafter agency). A request form to apply for an accreditation can be sent via |
|--------------------|-------------------|---|
| (application and | | electronic mail. The applying body is asked to suggest areas of expertise for the experts. |
| offer) | Agency | After receiving the request, the agency will determine the necessary number of experts. |
| | | Based on this information, the agency will draw up a quote for the accreditation procedure (costs) which the applying body will have |
| | | to confirm. At the same time, the applying body will receive a proposed schedule for the procedure, which can be adapted as required. |
| | Agency + | The accreditation procedure will be contracted once the applying body agrees in written form to the quote provided by the agency |
| | Applying body | or, upon request, with the closing of a separate agreement signed by both parties. |
| 2. Application for | Applying body | Submission of the application for accreditation to the agency, i.e., the self-evaluation and documentation proving that |
| accreditation | | the requirements have been met. |
| (self-evaluation | Agency | Formal preliminary assessment by the agency whether the application is complete and sufficiently documented. Meeting at the |
| including | | agency offices, a conference call or online meeting to discuss the results of the preliminary assessment. Alternatively, the results can |
| documentation) | | also be communicated in writing. |
| and examination | Agency (experts) | The agency appoints the expert team . |
| of the | Agency + Applying | On-site at the institution or, where circumstances permit, remote audit (length depending on number of learning |
| documents | body | programmes/units, usually 1 or 2 days. One member of the expert team acts as a chair. |
| | Agency | Delivery of the accreditation report (experts' draft version after the on-site audit) for the applying body to check for formal mistakes and voice their opinion. |
| | Applying body | Statement of opinion by the applying body, corrections and/or additions to the experts' draft version of the accreditation report (where required). |
| 3. Decision | Agency | Final evaluation by the expert team , recommendations for a decision. |
| | Decision-making | Decision on the accreditation by the decision-making authority. |
| | Authority | Delivery of the decision to the applying body. |
| | Agency | Submission of the accreditation report (final version) to the applying body. Award of the accreditation seal. Publication of the accreditation report as set forth by the ESG. |



3.2 Fast-track procedure

Should the educational provider be able to evidence a valid programme accreditation in line with the European Standards and Guidelines, (when applying for the accreditation of parts of that programme) or an institutional accreditation (also encompassing an assessment on issues related to the accreditation of learning programmes/units applied for), the possibility will be considered to conduct the procedure in a time and cost-saving manner.

By matching the standards underlying the current programme/institutional accreditation with the present accreditation criteria, the agency will identify which criteria could be considered as assessed already and which ones still have to be evaluated by the expert team.

Results from a valid accreditation, as far as they can be adopted for the ongoing procedure, will then be taken into account (e.g., conditions, reservations, recommendations). The scope of the actual review will be determined by the agency in coordination with the educational provider upfront. As a result, the auditing process (onsite or remote) might be shortened in terms of the timeframe for the meetings with different stakeholders and/or the group of stakeholders to be met in the auditing process. In addition, the structure and content of the indispensable Self-Assessment Report of the educational provider (see section 3.3) can be specified in accordance with the agreed conditions.

3.3 The application

The entire accreditation procedure is based on the application made by the applying body, i.e., the documentation provided which covers two central aspects:

- 1. A **self-evaluation** on the question of how and to what extent the submitted learning programme/unit meets the requirements for accreditation;
- 2. **Pieces of evidence** to substantiate all such statements and proof. The self-evaluation is an opportunity for the applying body to critically analyse and explain their state of development, to what extent their own targets have been met and to what extent external requirements are being complied with.

It is strongly recommended to only use documents, which the provider also uses for its internal communication and quality assurance purposes. Where necessary, any such document will have to be converted into a form comprehensible to third parties and the reference to the requirements will have to be made clear for the purpose of the accreditation procedure.

In the interest of all parties involved, the self-evaluation should be precise, and short, distinguishing between a description and analysis. The self-evaluation should provide coherent and consistent information for each of the requirements mentioned above.

In case of submission of a cluster of learning programmes, which are jointly examined, an **integrated self-evaluation and documentation should be provided.** Generally applicable



data can be presented only once, whereas all data specific to individual learning programmes/learning units are given in a clearly attributable way (e.g. separate report sections.

3.4 Criteria for the selection of experts

The applying body will be asked to provide an estimate of the technical profile it considers best for the expert team. The agency then decides whom to nominate for a procedure and appoints the experts.

The expert team

An expert team typically consists of:

- 1 full-time teacher/trainer/lecturer (from a higher education institution or an organisation similar to the applying one)
- 1 labour market representative
- 1 representative of learners

Thanks to its composition, the expert team should on all accounts:

- have a good understanding of the technical/subject-specific and teaching aspects of the learning programme/unit,
- be able to identify the needs of the stakeholders concerned by a specific educational programme and include this observation in the evaluation,
- ideally be made up of both experts who already have some experience in accreditation processes and experts who are new to the process.

Experts who work in a setting of teaching/education should have

- notable technical/subject-specific expertise,
- a notable amount of activity in their area of expertise and
- preferably also experience in external quality assurance, teaching skills and competences as well as international experience.

Experts who are labour market representatives should have

- notable technical/subject-specific expertise,
- practical experience in managing staff and
- preferably also experience in external quality assurance, teaching skills and competences as well as international experience.



Experts representing learners should

- be actively studying in a subject or participate in an educational offer in a subject relevant to the accreditation procedure,
- have studying/learning experiences while not having significantly exceeded the normal time taken to complete the education.

Criteria for the exclusion of nominees: Experts may not

- be involved in application procedures at the institution, which is to be assessed,
- primarily be involved in publications or projects at the institution which is to be assessed or
- be employed by the institution which is to be assessed and/or depend on it.

Preparation of the experts

The (accreditation) agency offers regular seminars/workshops/webinars to help experts prepare for an audit as well as, in between audits, reflect and keep their store of knowledge and role perception up to date. The experts are expected to make use of these service or equivalent services with other organisations.

Confidentiality and impartiality

Before an audit, every expert is required to sign an agreement with the agency including a **declaration of confidentiality and impartiality**. The applying body will be informed of how the expert team is composed. If a member is suspected to be biased, an exchange can be requested.

3.5 Role and function of the project manager

A project manager of the agency is in charge of the overall coordination and organisation of all accreditation procedures. Working from the agency's offices, project managers ensure that all procedural requirements are being adhered to, time schedules are being met and all mandatory process steps are being taken. Based on their experience and background, they can provide information and advice to all other parties involved in the procedure. Project managers accompany the experts during the audit and take part in further decision-making processes about the accreditation. They draft reports and resolutions and document the procedure. In addition to that, they are the applying body's contact within agency and accompany them through the procedure.

Project managers are therefore the central link between the applying body, the experts and the decision-making authority involved in the procedure.

Any exchange of information between the applying body, the experts and the decision-making authority is only relevant and can only be taken into account, if it went through the procedure coordinator.



3.6 Deadlines and possible outcomes of a procedure

All accreditation seals are limited in time and, as a rule, have a duration of five years.

The following outcomes are possible within an accreditation procedure:

- An accreditation without any conditions for the full five years.
- An accreditation with reservations, i.e., with conditions and for a shorter amount of time. This case would require certain conditions to be met by an appointed date. If the conditions are met within the agreed time, the accreditation will be extended to the full duration of five years. The expert team checks whether the conditions have been met. The decision-making authority then establishes the outcome.
- The procedure is suspended ("procedure loop"): The decision-making authority may
 once suspend the accreditation procedure if during the audit it was found that
 significant quality requirements have not been met, but the applying body can be
 expected to remedy the shortcomings.

A procedure is always suspended when it is determined during the procedure that the level of the educational offer as requested (level 4/5 or higher of the EQF) is not yet reached. In this case, the decision-making authority will define conditions for the achievement of the requested higher level.

A procedure is suspended either upon request of the applying body or at the initiative of the decision-making authority. If a suspended procedure requires a second audit, the applying body may incur additional costs.

There can be rejection of the accreditation if essential quality requirements have not been met.



3.7 Procedure for fulfilment of requirements

| 1. Proof that requirements are met | Provider | Submission by the provider of evidence that requirements have been met within the time limit as notified by the agency |
|------------------------------------|----------------------|--|
| 2. Decision | Agency | Assessment by experts of whether requirements are met and, where appropriate, questions to the provider. |
| → Recommendation by experts | | Recommendation by expert team for decision on the extension of accreditation to the full period. |
| → Decision by the | Decision- making | Decision by the decision-making authority on fulfilment of requirements and extension of accreditation and, where appropriate, |
| Decision-making Authority | authority | on the award of the seal(s) applied for. |
| → Notification and publication | Agency + Provider | Notification of decision to the provider. In the case of a positive decision, the documents/authorisations containing the extension to use a seal are issued to the provider. |
| | | Publication of the results of compliance with the requirements in accordance with ESG. |

3.8 Procedure relating to suspension and resumption of a procedure

| 1. Resumption of the procedure | Provider | Submission by the provider of evidence that conditions transmitted with the suspension decision have been met within the set time limit as notified by the agency. |
|--|----------------------------------|---|
| 2. Decision → Recommendation by experts | Agency | Assessment by experts of whether conditions are met and, where appropriate, questions to the provider. Recommendation of expert team for decision on resumption of the procedure and accreditation and/or award of the seal/s applied for. |
| → Decision by the Decision-making Authority | Decision- making authority | Decision by the decision-making authority on resumption of the procedure and accreditation and/or award of the seal/s sought. |
| → Notification and publication | Agency + Provider | Notification of decision to the provider. Handover of the accreditation report (final version) to the provider and, if positive, any authorisations to use a seal. Publication of a summary and the accreditation report on the website in accordance with ESG requirements. |



3.9 Changes during the accreditation period

1.1.5. Definition

A significant change means a substantial alteration to the learning programme/unit compared to the version presented for accreditation.

Typical examples of such a *substantial* change are:

- if the targets of the learning programme/unit are redefined beyond what can be described as a complementary update on the grounds of new scientific and practical findings;
- 2. if there is a change to the characteristics listed on the accreditation seal;
- 3. if there is a change to the duration of the programme/amount of work required for the learning unit;
- 4. if there is a change to the registration/enrolment dates;
- 5. if the provider makes changes which have the following consequences:
 - a. the elimination of a compulsory part of an educational programme without substitution;
 - b. the complete alteration of the learning outcomes of several compulsory parts (including practical and final learning units);
 - c. an alteration of the general conditions for individual learning units which are not derived from quality-assurance related improvement strategies;
- 6. if there is a reduction in the number of staff and/or equipment;
- 7. if the alteration would constitute a breach of relevant legislation or any other legally binding specification.

The following are examples of *non-substantial* alterations:

- quality-assurance and quality-management related improvement strategies, provided that they do not constitute a breach of relevant legislation or any other legally binding specification;
- 2. updating learning units to the current state of scientific knowledge within the limits of the programme objectives;
- 3. creating additional optional learning units whose learning outcomes are in line with the objectives of the educational programme;
- 4. updating individual learning units' names to the current state of scientific knowledge;
- 5. modifications to the quality assurance system, provided that they constitute developments/improvements;
- 6. renewal of teachers'/trainers'/lecturers' contracts.

This list is not exhaustive and can be completed as appropriate. In case of doubt, the provider should inform the agency of the alterations.



1.1.6. Procedure

This is how to proceed if any substantial changes are made:

- The experts and the decision-making authority will evaluate all substantial changes announced after conditions for the accreditation were imposed together with the conditions to be met.
- All subsequent changes will require the following procedure:
 - a. The provider submits a request for the alteration to be assessed and the accreditation to be upheld. Any such request must contain a description of the relevant change.
 - b. The decision-making authority assesses the documents submitted and chooses one of the following options:
 - (1) The change is *not* considered to be substantial.
 - (2) Although the change is substantial, it has no negative effect on the accreditation.
 - (3) The change is substantial and the granted accreditation cannot be extended to it. If the provider decides to carry out or uphold the change, a new accreditation procedure will be necessary, i.e. the existing accreditation will be revoked in case the change has already been made and will not be undone.
 - c. In the first case (1), the provider is informed of the decision and the procedure is considered closed.
 - d. In the second case (2), the decision-making authority may ask all experts, part of the expert team or, where necessary due to the contents of a change, new experts for their opinion before it decides whether a new accreditation procedure is required.
 - e. In the third case (3), a new accreditation procedure will be required or the accreditation seal will become void.

A procedure regarding substantial changes can also be initiated based on mere plans of the provider and with the aim of giving the provider, before the change is made, an opportunity to learn, which effects the planned change would have on the accreditation.

Any procedure can include different changes (planned or already implemented), which affect the same learning programme/unit.

3.10 Appeals

Applying bodies directly affected by the decision on accreditation may file an **appeal** against any such decision. All appeals are subject to deadlines. Information about requirements, procedures and deadlines will be disseminated by the agency's offices.



3.11 Contractual basis

All cooperation between the agency and the applying body is based on a **contract**. The contract is closed once the applying body accepts the offer made by the agency.

The details of the conditions for a contractual relation are listed in the offer as well as in the applicable **terms and conditions**.

It is a substantial feature of any contract between the agency and the applying body that the agreement is merely about carrying out the accreditation procedure itself but not about its outcome.

The accreditation procedure begins upon the closing of the contract.



4 Annexes

Annex 1: Example of an audit schedule

| Time | Item |
|-------|--|
| 8:30 | Initial discussion with the persons responsible for the learning |
| | programme/unit and the directors of the institution |
| | |
| | Focus: Resources, quality management, documentation and transparency, |
| | equal opportunities |
| 9:15 | Break, internal discussion |
| 9:30 | Discussion with the persons responsible for the learning programme/unit |
| | |
| | Focus: Content, policy and implementation; structure, methods and |
| 11:00 | implementation; examinations: system, policy and forms |
| 11:15 | Break, internal discussion Discussion with learners of different stages of the learning |
| 11.15 | programme/unit |
| | programme/unit |
| | Focus: Content, policy and implementation; structure, methods and |
| | implementation; examinations: systems, policy and forms; resources; quality |
| | management; documentation and transparency; diversity and equal |
| | opportunities |
| 12:15 | Lunch break, internal discussion |
| 13:00 | Review of exam papers (written exams, coursework and capstone |
| | projects) |
| | |
| | Focus: Structure, methods and implementation; examinations: systems, policy |
| 17.75 | and forms (relating to the level and quality of the samples given) |
| 13:45 | Discussion with the teachers/trainers/lecturers |
| | Focus: Content, policy and implementation; structure, methods and |
| | implementation; examinations: systems, policy and forms; resources; quality |
| | management; documentation and transparency; diversity and equal |
| | opportunities |
| 14:45 | Guided tour of the involved institutions |
| | |
| | Focus: Resources; equipment |
| 15:45 | Expert team final internal discussion |
| 16:30 | Final discussion with the persons responsible for the learning |
| | programme/unit |
| | |
| | Focus: Summary of the day's impression (expert team) |
| 17:00 | End |

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