



The Agency for Higher Education Quality Assurance and Career Development
(AQA)

**Audit Guidelines for the Assurance of Academic Quality in Higher Education
Institutions**

Adopted by the AQA Advisory Council
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The publication shows the aims and objectives of the institutional audit of HEIs, standards for recruitment of consultants and experts, ways and techniques of planning the institutional and program audit procedures, guidelines for making audit report and final judgment. It describes the steps to be taken by the HEIs in order to meet the requirements set by the audit team.

The Guidelines can be used by the HEIs in the course of the institution's self-evaluation and in order to prepare for the examination by external reviewers.

While creating the Guidelines AQA experts considered best practices implemented by international quality assurance bodies.

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1. Mission Statement

The mission of AQA is to support independently on a regular basis Russian public and non-public higher education institutions in the development of educational quality to meet the best national and international quality assurance practices and standards. The Agency contributes to the increase of quality awareness among higher education stakeholders and stimulates the competitiveness of Russian higher education institutions on the international scale.

The Agency performs its mission by:

- fulfilling a pioneering role in the development of quality assurance and accreditation systems in Russian HEA taking into account its national and historical peculiarities;
- evaluating quality systems set by higher education institutions according to the requirements of Russian Ministry of Education and Science in its regulations, ENQA regulations and criteria stipulated by the AQA;
- accrediting and certifying higher education institution at the institutional level and at the level of degrees and programs promoting innovativeness in the teaching process and high quality education culture;
- elaborating and implementing quality assurance approaches based on research findings;
- consulting authorities of higher education institutions in establishing and improving quality assurance systems;
- monitoring the constant higher education institutions feedback;
- facilitating the dialogue between higher education institutions, authorities, students and employers;
- contributing to the public debate on the development in higher education within scope of the AQA's mission.

The AQA key responsibilities are as follows:

- Analysis and assessment of:
 - Higher education programs' content;
 - Effectiveness of technologies applied;
 - Organizational features of an institution;
 - Academic management quality;
 - Sustainability and competitiveness of an institution locally and internationally;
 - Educational network.
- Institution's needs identification and action plan development;
- Analysis of the internal quality management system and the level of its compliance with Russian and international standards.

The following 4 main aspects are considered in the course of the academic audit:

- HEI' programs content and specifications;
- efficiency of the educational technologies used by the HEIs and the way the technologies influence the program quality;
- HEI management and administration, including the level and characteristics of the institutional management;
- the way the HEI organizes its operations, including all sort of activities the HEI is engaged in.

The audit is based on the qualitative and quantitative analysis of data and assessments made by independent external experts provided that the HEIs are interested in submitting objective information to the experts. Special attention is paid to the quality of the program design and teaching methodology. In order to make reasonable judgment, experts compare the intended program learning outcomes with the actual level of competences demonstrated by the students.

In the course of internal quality assurance process higher education institutions should compile and publish all documentation regarding the quality of education, internal standards and principles. External assessment of educational services quality rendered by HEIs is conducted in accordance with the requirements of the Agency and is based on the data and information gathered by the experts.

The experts should scrutinize the way the internal quality assurance system operates both at the institutional and at the program level and consider how the system guarantees the quality of educational programs developed on the basis of the State Educational Standards, with the employers' interests and regional diversity taken into consideration.

Institutional audit procedure is not obligatory. Audits take place on a 5-year cycle. The Agency monitors HEIs' operation every year to review progress since the previous audit and to provide improvement recommendations.

2. Agency Operational Quality Principles and Academic Audit Standards

Institutional audits are organized to serve the interests of students, the public, the employers, state bodies and other stakeholders. That is why the Agency is in contact with all interested parties at all audit process stages: when preparing the experts' visit, during the visit, when discussing the visit outcomes and when issuing recommendations in relation to the quality assurance in the program provision.

The information the Agency provides can be used by:

- state bodies to ensure that the public is guaranteed to have constitutional access to educational services rendered at the appropriate level of quality;

- Russian citizens who want to have guarantees that they can get the knowledge, skills and professional competences in the field of study that can give them the competitive advantages after graduation;
- higher education institutions (HEIs) to maintain and enhance quality of educational services rendered;
- employers who can use the data to make judgments about the quality of teaching in the HEIs and the correspondence between the intended learning outcomes indicated by the HEIs and the actual level of graduates' competences when making decision about employment.

The Agency takes into consideration the diversity of interests the HEIs have and offers different types of academic audit. Audit procedures have been developed taking into account best practices and recommendations of such international QA bodies as ENQA, INQAAHE and APQN.

HEIs have a right to choose among a variety of services rendered by the AQA including:

- external QA audit on the institutional or program level;
- assistance in conducting self evaluation procedures according to the requirements set by the state regulatory bodies and recommendations of the leading foreign accreditation agencies;
- consulting services related to the optimization of HEI accreditation criteria;
- assessment of an internal institutional quality assurance system evaluation of main operational criteria;
- analysis and assessment of indicators showing the level of institutional sustainability supported by the recommendations on how to improve the HEI competitiveness on the educational services market;
- action plan for the time period following the latest audit by the state accreditation bodies;
- testing the graduates' level of knowledge and professional competences level upon graduation.

Academic audit procedures conducted by the Agency are aimed at ensuring that the programs and other educational services rendered by a HEI can compete on the Russian and international markets. That is why the Agency relies on the competences check-based approach broadly used by the international academic community when assessing the graduates' quality of training.

The process of institutional audit requires a high degree of openness, transparency and trust in the partnership between the Agency and each HEI. That is why the Agency guarantees that the audit process is open, unbiased and accurate and in its

strategic planning and everyday operations is guided by the following general principles:

- the needs of all the interested parties are taken into consideration; they are involved into most activities of the Agency;
- the Agency operational activity and methodology used is transparent which serves the basis of trust and consensus in the relationships between all interested parties; the public is informed about the Agency operations;
- all Agency resources are effectively and efficiently used in order to achieve the stated goals;
- systematic, regular and timely actions are taken in regard to all indicated procedures in order to support the decisions taken by the Agency;
- the Agency best practices and the best practices of other organizations are used;
- the information gathered by the Agency is easily assessable and understood and is of use to all interested parties.

The following institutional audit standards were developed on the basis of the above principles:

1. All Agency experts should have a training course and perform their obligations as per the methodology description published. In order to guarantee that, the Agency will:
 - include only the reviewers and specialist advisers who have relevant qualifications for the job into the audit team;
 - train all the reviewers and specialist advisers who are involved in the institutional audit process;
 - do its best to guarantee that the specialists act in accordance with the agreements adopted and that all the individuals who act on behalf of the Agency are unbiased and objective during the whole process of audit;
 - constantly assess the experts' work efficiency and their level of competencies.
2. The information gathered by the Agency and the experts in course of preparation to the audit process and in the course of the audit process is confidential and shall be used for the audit purposes only. In order to ensure the confidentiality, the Agency will:
 - process the information in a way agreed and protect it;
 - request from the HEI the information pertaining to the audit process only;
 - use the information which the HEI has provided to other agencies if the latter use similar audit schemes;
 - provide to the experts the information as per these Guidelines;
 - require that the reviewers and specialist advisers gathering the information observe the confidentiality regime during the audit process.

3. All issues in relation to audit preparation process which arise during the period prior to the date of the audit team visit are solved as per these Guidelines. In order to ensure this, the Agency will:
 - conduct preliminary meetings in strict compliance with the provisions of these Guidelines and the meetings will be conducted to achieve the goals and objectives indicated only;
 - organize the preliminary visit in strict compliance with the provisions of these Guidelines and the visit organized will be aimed at achieving the goals set only;
 - notify the HEI of the draft composition of the expert team not later than 4 months prior to the visit date;
 - reconfirm the team composition not later than 2 months prior to the visit date;
 - make the final selection of the programs to be audited according to the published criteria only and not later than 2 months prior to the date of the visit;
 - reconfirm the visit agenda and the list of the follow-up documents in writing.

4. The reviewers will act in strict compliance with the provisions of these Guidelines. To ensure that, the Agency will:
 - do its best to assure that the audit is conducted in strict compliance with the provisions of these Guidelines and the additional orders made by the Agency, and only the relevant and assessable information is used for these purposes;
 - ensure that the specialist advisers be recruited only in cases provided for in these Guidelines;
 - make sure that the reviewers inform the HEI of the necessity to consult a specialist adviser before the final date of the visit.

5. The audit report and the judgments should be based on the data gathered in the process of the audit. To ensure that, the Agency will:
 - make sure that the audit team's judgments are based on the previously published criteria;
 - within 2 weeks from the date when the audit team finished its work, inform the HEI in writing of the main conclusions made by the experts and their recommendations;
 - make sure that the report constitutes the judgments of the experts who are responsible for the report contents after it is published;
 - provide the draft audit report to the HEI for revision and comments within 4 weeks of the final date of the auditors' work;

- publish the finalized judgment accompanied by a list of its authors within 10 weeks of the final date of the auditors' visit to the HEI.
6. All the follow-up actions taken by the auditors shall comply with the relevant procedure description published. To ensure that, the Agency will:
- make the follow-up audit actions in accordance with the provision of these Guidelines;
 - inform the HEI of the additional evidence needed to make the final audit report and compile the list of the data needed by mutual agreement with the HEI;
 - complete a review in accordance with the previously published procedure description and provide the report to the HEI and to all the interested parties.

3. Aims and Objectives of Institutional Audit in HEIs

The aim of the institutional audit is to meet the public interest in knowing that institutions are providing professional higher education, awards and qualifications of both an acceptable quality and an appropriate academic standard.

The objectives of the academic audit are:

- to contribute to the promotion of high quality in education;
- to ensure that students, employers and other interested parties can have readily access to easily understood, reliable and meaningful information about the extent to which the programs of study, awards and qualifications offered by the institution meet national expectations in respect of academic standards and quality;
- to ensure that if the quality of programs or the standards of awards are found not to be in compliance with the norms set, the Agency immediately forms recommendations to the HEI for ensuring rapid action to improve the programs and standards and supervises the improvement process;
- to secure accountability for the use of funds gathered from different sources and received by institutions.

The scheme of a general accreditation procedure is presented on fig. 1.

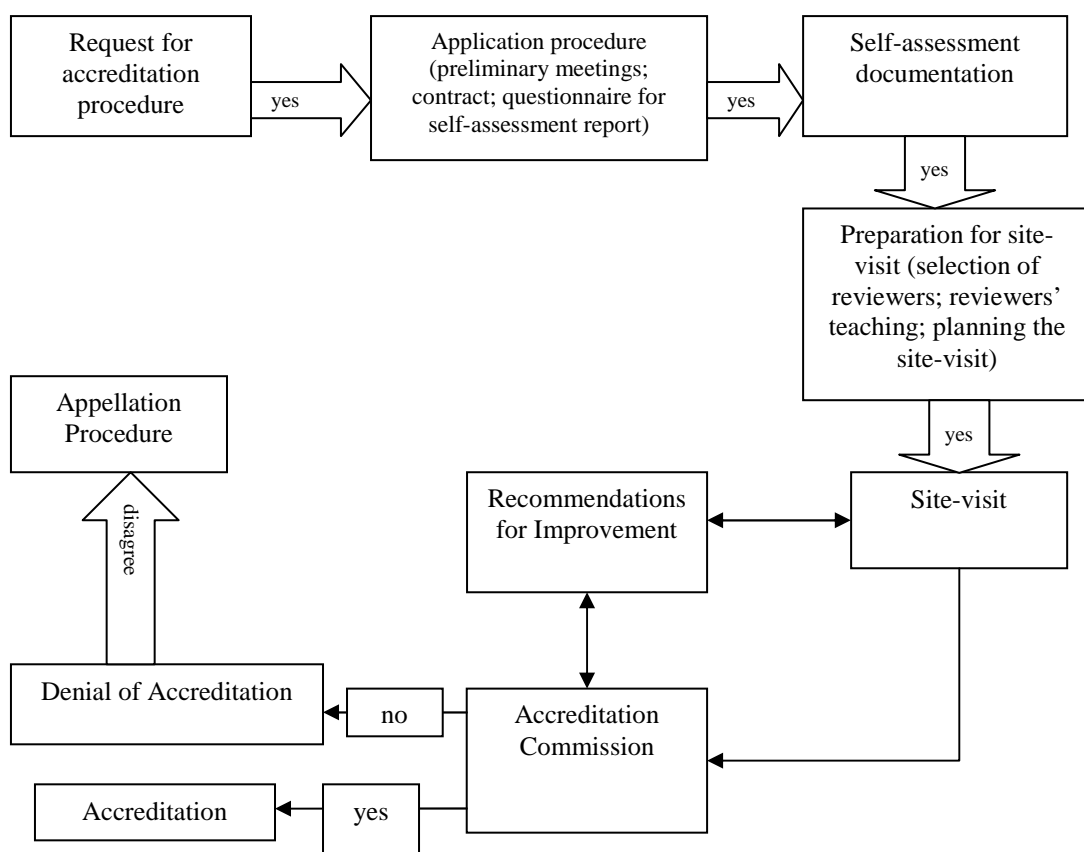


Fig.1 Accreditation Procedure

4. Recruitment and Training of Reviewers and Specialist Advisers

The Agency selects reviewers from the nominees recommended by the Advisory Council of the Agency, regional Agency representative offices, heads of the regional education management bodies, Councils of Rectors of HEIs, and employers' associations.

The Advisory Council or an ad-hoc committee considers all applications on the basis of the equal opportunity policy. The following is done in the process:

- a job advertisement is placed in the media and on the Agency web site. The advertisement is published together with the requirements set for the nominees and the selection procedure description.
- the experts are recruited from the list of individuals who are recommended by the bodies indicated above or from the individuals who possess the necessary qualities and have appropriate employment experience and wish to be engaged in the work.

The successful reviewers will possess the following qualities:

- broad experience in the HE management and quality assurance in the system of HE provision in the Russian Federation;
- personal traits and professional competences needed to perform quality assessment of the HEI educational activity;
- ability to absorb and analyze substantial quantities of various data related to public assessments, make objective judgments, consider documentary and verbal evidence in order to form judgments;
- strong ability to communicate in writing and strong verbal communication skills;
- current or recent (within 2 years) experience of teaching and studies support or examining students if the reviewer is an individual specializing in a certain academic field.

Reviewers are recruited on the basis that they agree to undertake at least three HEIs audits within 2 years. They may continue beyond this period by mutual agreement.

In special cases in order to conduct more in-depth examinations, specialist advisers' contribution may be needed. They should possess the following qualities:

- be individually known to the academic community in their specialism or hold a degree conferred by the HE system in the Russian Federation or be equally known to the professional community members;
- current experience of teaching and studies support and examining students;
- experience in program specifications in their specialism, good understanding of requirements set in programs of study;
- ability to absorb and analyze substantial quantities of various data and make objective judgments;
- ability to identify the task set by the reviewers correctly, plan the actions and arrive at reliable conclusions using the various data available including documentary and verbal evidence.

Specialist advisers make more in-depth analysis of the programs indicated by the experts and participate in the final judgment preparation. They are recruited on the basis that they agree to undertake at least 6 HEIs audits within 2 years. They may continue beyond this period by mutual agreement.

All the selected individuals recruited should be approved at the official level and take a training course for the Agency to be sure that the reviewers and specialist advisers:

- understand aims, objectives, and the audit procedure;

- understand their own aims and objectives, are aware that the expert team should be an integral entity, are familiar with the requirements set by the Agency and the rules of the audit;
- possess the ability to collect and analyze data, form programs of visits, form and check hypotheses, form judgments and suppositions, and prepare reports.

5. Audit Process Planning, Preparation, and Implementation

The Reviewers' team should examine:

1. the effectiveness of the institution's internal quality assurance structures and mechanisms, and the way in which the quality of the HEI programs and standards of awards are reviewed. The experts also examine the way the resulting Agency quality improvement recommendations are implemented. This provides public information on the institution's soundness as a provider of tertiary qualifications.
2. the accuracy, completeness and reliability of the information the institution publishes about the quality of its programs and the standards of its awards. This provides public information on the trust that can be placed in an institution's published descriptions of the quality of its provision; it also makes the description more useful to students and other interested parties.
3. several examples of work (written examination scripts, course papers, diploma papers) which can illustrate the way how the internal quality assurance processes work at the level of programs and the institutional level in order to demonstrate the validity and reliability of the information generated during the internal assessment processes.
4. efficiency of the advanced teaching methodology and innovations used in order to identify their influence on the content and quality of programs of study.
5. the way the HEI provision is organized, assess the financial and operational sustainability criteria and make recommendations for enhancing competitiveness level of the HEI which is competing on the educational services market.
6. the HEI system of management, assess the level and efficiency of the academic management.

The Reviewers' team should focus on:

- quality assurance reviews and their outcomes, especially at the level of the discipline and/or program;
- the understanding and use of such external reference points in the educational area related to education quality assurance as the Russian Law "On Education", the Russian Law "On Higher and Postgraduate Education", the Russian Government Decree No. 264 of 5 April 2001 – "The Russian

Federation Higher Education Institution (HEI) Operational Regulations”; “Performance Indicators and Criteria for State Accreditation of Higher Education Institutions” adopted in Order No. 1938 of 30 September 2005 issued by RF Federal Service of Supervision in the Sphere of Education and Science;

- publicly available information about the quality of programs and the standards of awards;
- the development, use and publication of program specifications;
- the academic standards expected of and actually achieved by students;
- the experience of students as learners;
- the quality assurance of teaching staff, including appointment criteria and the ways in which teaching effectiveness is appraised, improved and rewarded.

When making their judgments, the reviewers’ team expect that the HEI is regularly and consistently attracts independent external examiners to make final judgments about the student knowledge and with equal regularity attracts such examiners to make reviews of disciplines and programs provision. The reviewers are unable make a judgment of broad confidence and reliability of the quality assurance system in an institution if either of these two elements is deficient.

Students are central to the institutional audit process. Reviewers teams scrutinize the matters directly relevant to students, such as, for instance, the quality and quantity of the information provided for them, the ways in which their learning is facilitated and supported, and the academic standards they are expected to achieve, and achieve in practice. An Agency representative during the preliminary visit to the HEI meets the students’ representatives and provides instructions to them as to the way the information should be provided to the Agency audit team. The student representatives are invited to take part in the meeting conducted by the audit team during the reviewers’ visit. As a consequence, the students can be sure that audit team is aware of their needs and the issues will be addressed.

The audit personnel can form a group as appropriate. The size of the team is determined on the basis of the size and complexity of the institution’s provision and other factors. The teams comprise a minimum of 3 and a maximum of 7 auditors. One of the audit team members assumes the responsibilities of the audit secretary. All the auditors should have experience in conducting audits and possess relevant knowledge. One of the auditors in the team is a “core” auditor (a Review Coordinator) who only addresses the matters related to academic activity of the HEI and makes sure the reviewers gather all the evidence needed to make a final judgment. All the other members of the audit team take part in the assessment processes both at the program/discipline and the institutional level.

The institutional audit process is coordinated by the Agency representative who provides consulting services to the HEI on the matters related to the audit team visit preparation. He is also responsible for ensuring the reliability of the information and preliminary analysis of the data gathered by the audit team and ensures that the information in the audit report is succinct and easy to understand.

The audit process begins around 4 months before the audit visit, when the Agency specialists prepare an analytical report about the institution's management of quality and standards. In the course of the report preparation the following documents are used: the institution's self-evaluation documents, and the reviewers' findings on the accreditation status of the institution and any up-to-date information which the HEI and/or other organizations can provide to the Agency prior to the date of the audit.

An Agency representative meets the institution management and the students around 3 months before the audit visit. The purpose of the meeting is to clarify the scope of the audit; to discuss the interactions between the institution, the Agency and the audit team. The representative should also ensure that the institution's self-evaluation documents are filled in correctly and are well-matched to the process of the audit; discuss any matters relating to the published information and to the self-evaluation documents; and confirm the list of disciplines to be audited and the areas for thematic enquiry. Besides, the representative confirms the composition of the audit team. If the institution has conflict of interests related to the composition of the team because of, for instance, a doubt concerning the way the level of the auditor skills corresponds to the level of the discipline taught, the HEI should make its comments in writing and discuss them with the Agency representative. The HEI should reconfirm the list of the disciplines to be audited and the composition of the student representatives group.

The student representatives may discuss their vision of the HEI with the Agency representatives during the meeting and the Agency representative gives instructions to the students on the student contribution to the audit.

Besides, the Agency representative discusses with the institution any areas that require more in-depth review than the review made during the discipline audit process. Usually it is done if the HEI has requested a full subject review for its own purposes and if a professional, statutory, regulatory body or similar body requires a discipline audit as a basis for its own decisions about accreditation. The Agency agrees the reviews timetable. The reviews are not normally integrated chronologically with the institutional audit. The review findings are followed up by the institution and (if appropriate) the Agency, and their reports provide a major contribution to the discussions in the next audit round.

The institution is required to submit the initial documentation for the audit no later than 8 weeks before the audit visit. The documentation comprises the institutional self evaluation documents and other documents the HEI wishes to provide for the audit team. If representatives of students wish to make their submission to the team, the submission should be sent to the Agency at this stage.

On receipt, the documentation and the analysis of relevant data is submitted by the Agency to the audit team. On the basis of the information, the team should select, from the provisional selection, the discipline areas that it intends to pursue during the visit. At this stage, the team also selects possible areas for thematic enquiry.

On the basis of the reviewers' team decisions, and not less than 6 weeks before the audit visit, the Agency confirms the composition of the team and provides the institution with a confirmed list of discipline audit areas to be audited by the team supported by the program specifications and self-evaluation documents.

The institution submits the evaluation documents related to the disciplines selected for audit to the Agency 4 weeks prior to the date of the audit visit, and the Agency submits them to the audit team. The audit team and the Agency prepare the audit visit program and agree the responsibilities to be assumed. The program is provided to the HEI to be confirmed within 2 weeks. The confirmation should be sent to the Agency.

The institutional audit extends for not more than 5 working days, Monday to Friday, as a rule. The detailed program for each visit, which includes meetings with staff and students, is decided by the audit team. The visit program should include the following:

- opportunities for the team to read the documentation provided to support the audit, including the external examiners' reports and documentation relating to the internal quality reviews;
- exploration of the institution's approach to quality assurance;
- exploration of the relationship between institutional procedures and their operation at the program and discipline level, giving particular attention to the effectiveness of internal reviews of quality of programs and awards;
- exploration of the chosen discipline audit processes and thematic enquiries, including targeted discussions with staff and teaching staff and scrutiny of several illustrative examples of students' work;
- exploration of the accuracy, completeness and reliability of the information published for students and other interested parties, with particular attention given to program specifications;
- exploration of the claims made for the quality of programs and the actual achievement of students, focusing not only on academic outcomes, but also

on the ways in which students are treated and their opportunities to learn optimized;

- during the closing stages, meetings with the institution management and, where necessary, staff from the discipline areas selected for auditing, to discuss any matters outstanding and to follow up any matters emerging during the course of the audit.

On the final day of the audit, the reviewers' team considers the findings at both the institutional and discipline level in order to:

- determine how effective the institution's management of the quality of its programs and the academic standards of its awards is;
- determine the accuracy, integrity and completeness of the information that the institution publishes about the quality of its programs and the academic standards of its awards;
- identify features of good practice in the management of quality and standards, in the delivery of teaching and the facilitation of learning;
- compile and agree a list of recommendations.

The Agency representative joins the team for this final stage of the audit process.

If the reviewers' team thinks it is unable to reach a conclusion without a second opinion from specialist advisers, it informs the HEI hereof during the penultimate day of the visit. On the final day of the visit the team agrees a list of the disciplines that need a fuller enquiry and provide the list to the institution. If the team confirms its intention to seek specialist advice, the team's findings, recommendations and judgment made on the final day are provisional.

There is no oral or written report to the HEI at the end of the visit. A letter is sent to the institution within 2 weeks of the final day of the visit outlining the main team's findings and findings and recommendations in the draft report. If specialist is to be sought, the date of specialist advisor visit is agreed by the Agency and the institution. The specialist advisors, an Agency or the audit team representative make a visit to the HEI no later than within 3 weeks of the final day of the audit team visit. The draft report is not submitted to the HEI until after the advisors have reported back to the team and the team has considered the advisors' findings. The timeline of the whole procedure is presented in the Annex 1.

6. Program Audit

The term "program" in the institutional audit is used to mean the program itself, a separate discipline, field of study, department or other object.

The program audit process has the following purposes:

- it provides verification that the institution's quality assurance mechanisms are operating in the manner intended;
- it provides an opportunity for the audit team to determine the aspects of what is actually being achieved by students and the effectiveness of the support offered to assist their learning;
- it provides means of comparing the claims made by the institution for the accuracy, completeness and reliability of the information it provides about quality and standards, with the experience of students and others who have actually used it.

The number of programs under review is determined by the Agency and depends on the institution's size, number of its programs, and the nature of its students. In general, the audited programs are expected to represent some 10% of the institution's programs.

The Agency when making the preliminary list of programs to be reviewed and when determining the scope of each program audit assumes that the institution periodically makes internal audits of its quality assurance and standards of awards. Students' interests are in the special focus of each of the program's audit.

The program can be chosen for audit for the following reasons:

- it provides a reliable and clear illustration of institutional processes for assuring the quality of programs and standards of awards;
- it appears to offer particularly interesting and innovative features;
- there is a lack of clarity in the institutional self evaluation documents about the quality assurance arrangements submitted by the HEI which might be clarified during the process of the program audit;
- there are indications in the reports made by the Agency and other relevant bodies and in other documentation of (possible) weaknesses;
- when taken together with other programs selected, it enables the audit team to sample a range of institution's provision.

The program audit process comprises the following main elements:

1. The auditors get and consider the institutional self evaluation documents 3 weeks prior to the visit. If some point is unclear the auditors may require that additional evidence be gathered but it should be limited in all cases to no more than is necessary to inform the team's proposed line of enquiry.
2. The auditors discuss with the staff and students the ways in which the institution's quality assurance policies are implemented and their perceived and actual effectiveness. The discussions may focus on the topics identified by the auditors and bring other matters identified by staff and students to the

- team's attention. A number of external participants in internal reviews of quality of provision may be asked to participate in the discussions.
3. The auditors scrutinize the extent of accuracy, completeness and reliability of the information that the institution provides to the potential students, employers and other stakeholders about the quality of its programs and standards of its awards. The discussion includes discussions with staff and students about program specifications.
 4. The auditors scrutinize the relationship between the programs offered and the requirements of the State Educational Standards, discuss the quality of teaching and learning and the standards achieved by the students. The discussions mainly draw upon the previously assessed course papers and written examination scripts which were provided by the institution to the external examiners. Some external examiners and/or external independent participants in internal quality reviews may be asked to participate in the discussions.

Each program audit results in a conclusion by the audit team about the extent to which the institution's quality assurance mechanisms are operating in practice at the program level. The normal expectation is that the evidence seen by the team will confirm the information in the relevant program internal audit self evaluation documents. In the event that the self evaluation document indicates a significant weakness in the self evaluation arrangements and mechanism, the auditors will seek to satisfy themselves that the institution is taking appropriate action to address the weakness.

In certain circumstances, the reviewers' team may find itself unable to reach a conclusion within the context of the audit visit. It might occur if there are reasons to believe that:

- the internal quality assurance mechanisms are operating correctly but the auditors are unable to confirm the assumption without advice from specialists in the relevant discipline;
- significant weaknesses have been identified in the internal quality assurance mechanisms, including possible shortcomings in the way the programs are provided and in the effectiveness of the facilitation of student learning, that the team feels unable to confirm without advice from specialists in the relevant discipline;
- significant apparent discrepancies have been identified between the institution's published information relating to the programs and the findings of the team.

In these circumstances, and following the consultation with the Agency representative the reviewers' team informs the institutions at the start of the penultimate day of the visit that it is unable to reach a conclusion without a second

opinion of the specialist adviser. This period of notice provides the institution with an opportunity to supply the team with the information before the final day of the visit. If, on that final day, the team confirms the intention to seek specialist advice, a team of at least two specialists is asked to make a separate visit to the program area as soon as possible. The team will not make a judgment on the program without reference to specialist advisers.

The specialist advisers undertake further study of the program area looking in depth at particular aspects indicated by the reviewers' team. Their work includes scrutiny of primary evidence such as assessed student work, and involves meetings with students and teaching staff, and possibly with external examiners. Where the advice has been sought on possible shortcomings in the effectiveness of the facilitation of student learning, their work includes scrutiny of the interaction between academic staff and students. Their findings are not reported separately but are shared with the audit team so as to inform the judgments made by the team in its final report. The drafting of the report proceeds while the specialist advisers undertake their work, but the draft is not submitted to the institution until the team has considered their findings.

If, during the course of their work, the specialist advisers identify potential areas for concern beyond their terms of reference, the reviewers' team may wish to conduct further discussions with the institution.

The findings of the specialist advisers may result in a recommendation from the audit team to the Agency that a new review within the program concerned should be made. Such a recommendation may be made if the findings of the specialist advisers indicate that:

- it is impossible to reach a conclusion about the program without further, detailed scrutiny;
- there is reason for serious concern that the quality of programs and/or the standards of awards are at risk.

7. Institutional Audit

In essence, institutional audit is assessment of how the institutional quality assurance procedures influence the institutional operation in general. Such assessments are made when the auditors reach a conclusion that some aspect of quality assurance and quality of awards management requires special attention or if it is necessary to audit several programs.

The list of areas to be reviewed during the institutional audit is agreed during the preliminary visit. The HEI then receives a notification of which areas have been selected for review and put on the agenda by the auditors.

Evidence in the academic audit can be collected in the course of program review and during discussions with staff and students. If the audit team has questions about some program which require further enquiry, they can use the above procedure and consult specialist advisers.

When reviewing the institutional internal quality assurance system, the Agency uses the following reference points:

- Russian Federal Law “On Education”;
- Russian Federal Law “On Higher and Postgraduate Education”;
- Russian Government Decree No. 264 of 5 April 2001 – “The Russian Federation Higher Education Institution (HEI) Operational Regulations”;
- State Educational Standards for Higher Education (as per classification of 2005-2006).

The auditors seek to determine the extent to which the institution’s operation is aligned with the reference points and make sure that the institution’s educational operation is guided by their provisions and it makes appropriate arrangements to make amendments in its operation.

When examining the arrangements made by the HEI to determine the extent to which the institution’s programs and standards of awards meet the requirements of the above documents, the auditors may make separate assessments of programs in order to enable better scrutiny of the facts.

The auditors’ aim is not to make sure that the HEI observes all the rules and regulations, but rather to find evidence in the self evaluation documents that the institution has taken measures needed to observe the rules and regulations. Besides, the auditors seek to discuss the key amendments the HEI has made to its operations and the areas which caused the major concern.

The auditors’ aim is to find out to which extent the HEI educational program and standards of awards development and review is aligned with the provisions of these documents, and they may require that the HEI provides appropriate evidence to them.

8. Reviewers’ Judgments, Conclusions and Reports

The auditors’ final report is based on the scrutiny of academic standards undertaken which is based on the consideration of the major evidence gathered by

the audit team during their visit to the HEI. It is also based on the measure and extent to which the auditors are sure that the HEI is successfully managing its quality and standards. Besides, influencing the report preparation procedure are some factors related to the HEI specifics, its aims and objectives, current position, and the extent to which the HEI operation is aligned with the above reference points.

The Agency at the end of the academic audit procedure makes and publishes a report which comprises the auditors' judgments of the following:

- the extent to which the auditors are sure of the current and future quality assurance system functioning and the way the standards of awards are observed;
- the extent of the accuracy, completeness and reliability of the HEI published information about quality and standards of awards. The auditors make their judgments on the basis of the information gathered during the program assessment procedure and augmented where necessary by the data gathered by specialist advisers.

When forming their final judgment the reviewers' team uses the following:

- institutional self evaluation documents, including the documents related to audit of programs, and supporting documentation;
- reports on the institution by the Agency and other relevant bodies within 5 years preceding the audit;
- information submitted by the students;
- information acquired during the audit team visit;
- evidence of student achievement and other information about the areas selected for auditing from the institution and professional organizations and regulatory bodies;
- information from the specialist advisers;
- published and unpublished information the institution submitted at the auditors' request.

The final judgment is accompanied by recommendations to be considered by the HEI. There can be the recommendations marked as follows:

- "the necessary steps". The marking appears when the audit team identifies the weaknesses which significantly affect the quality and standards of awards and require rapid action;
- "the recommended steps". The marking appears when the audit team identifies the weaknesses which can potentially affect the quality and standards of awards and do not require rapid action;

- “the advisable steps”. The marking appears when the audit team identifies the events which can significantly enhance the quality of provision and/or foster the increase of the standards of awards.

The final provisions of the institutional audit report include:

- comment on the characteristics, strengths and limitations of the institution’s internal quality assurance methods;
- comment on the quality of programs and standards of awards and qualifications achieved in practice identified during the program visit;
- findings of the program audits;
- the identification of areas where the audit team considers there is good reason for a full review at the program level to be carried out and the areas where the team considers that an action plan at either the program level or institutional level should be implemented;
- features of good practice in the quality assurance and standard of awards management system at the program and institutional level.

The Agency monitors the institutional audit process as per these Guidelines. The Agency representative coordinates the procedure, but the judgments and recommendations are made by the audit team which conducted the audit. It is the responsibility of the Agency representative to test that the team findings are supported by adequate and identifiable evidence. He also makes sure that the audit report provides information in a succinct and readily accessible form. That is why the finalized report text is edited by the Agency representative.

The draft report is made and submitted to the institution for revision within 4 weeks prior to the last day of the audit team visit. The Agency’s Accreditation Commission coordinates the draft preparation process. The draft report style and structure should be in compliance with the standard report structure. The institution sends the draft report back to the Accreditation Commission within 4 weeks after the date of submission and encloses a list of comments and notes if some errors or inaccuracies have been found. The Accreditation Commission makes the finalized report taking into account the amendments made by the institution.

As the report’s aim is to provide information for academic community and laypersons, it includes a summary which is meant to inform the public, especially, the would-be students and which should be readily accessible as a separate document.

The report should be published within 10 weeks after the audit team visit. The term may be extended if advice should be sought from a specialist adviser.

9. Reviewers’ and Agency’s Follow-up Actions

The last day of work of the audit team shall be considered the end of the audit procedure.

If a “confidence” judgment has been made, the publication of the report shall be the end of the academic audit process. Within a year of the end of audit, the Agency sends an enquiry to the HEI of what actions the HEI has taken in relation to the report published.

If a “limited confidence” judgment has been made, the report is published but the audit process is going on. The HEI must submit an action plan to the Agency within 3 months from the date of publication followed by a report on what has been done. The audit process shall be deemed completed if the Agency within a year’s period of time regards as satisfactory the HEI’s actions within the framework of the action plan. If after a year’s period the Agency doubts that all the necessary measures have been taken by the HEI, the Agency starts another audit visit.

If a “no confidence” judgment has been made, the report is published but the HEI shall submit the action plan to the Agency followed by quarterly reports of what has been done to address the weaknesses identified. The Agency makes a brief visits to the institution in a year to make sure that the necessary measures have been taken. The audit process shall not be deemed completed until the Agency regards the measures taken to be satisfactory. If in a year’s time the Agency has doubts that all the necessary measures to address the weaknesses have been taken by the HEI, the Agency may postpone the date of the next academic audit.

If there are recommendations in the report concerning a program audit or if academic standard of programs is regarded as low, the follow-up actions include additional scrutiny of the HEI operation, and it is possible that the Agency starts another audit visit.

Every year the Agency representatives make a brief visit to the HEI to know the results achieved by the HEI within the period of time following the audit. Besides, the arrangement to enhance the quality assurance and standards of awards are described to the Agency representatives. When preparing for the audit visit, the Agency considers all the institution self evaluation documents within 5 years preceding the audit. If the reports contain evidence suggesting that the HEI has not adequately addressed the important areas for improvement, the Agency may change the date of the next audit.

10. Complaints and Appeals by Higher Education Institutions

The Agency puts the complaints made by the institutions into two classes: the complaints proper and the appeals. It is done in order to make a difference between the discrepancies related to the institutions' reaction to the opinions or decisions made by the Agency experts under certain circumstances and the discrepancies related to the institutions' dissatisfaction with the audit procedure and/or the experts' actions.

By considering the complaints and appeals, the Agency finds the mistakes made during the audit procedure and makes appropriate steps in order not to repeat such mistakes. Thus, the claiming procedure enables the Agency to monitor and assess the efficiency of the procedures involved and maintain the transparency and liability policies that are part of the strategy chosen to enhance the quality of the Agency's work.

10.1 Appeals

The institution receives the draft report, examines it, and submits it to the Agency together with the list of comments and amendments if some mistakes or inconsistencies are found in the report. The institution can make claims against the Agency's resolutions or expert opinions and make an appeal in writing signed by the institution's rector against the Agency. The appeals made in the form other than written shall not be considered. The institution shall indicate in the appeal documentation which expert opinions are erroneous and misleading in describing the state of affairs in the institution. Upon the receipt of the appeal the Agency submits the written confirmation to the institution.

The appeal is considered by the Appeal commission which composition is determined by the Advisory Council Chairman among the Advisory Council members. Appeal Commission consists of the Review Coordinator and designated members of the Advisory Council. None of the commission members should be in any way associated with the subject matter of the complaint. The Agency staff members who render their assistance to the commission members should not be associated with the complaint subject matter. After completing the work, the commission members report to the Advisory Council and submit their opinion and recommendations.

The commission should examine the methodology and the procedures used by the experts and the judgments they made and check whether the judgments are correct in describing the subject matter of the appeal.

The commission should examine the correctness of the procedure used by the experts and decide whether the procedure was legitimate. If the commission identifies the procedural mistakes made, the commission members should decide whether the mistakes made affected experts' judgment, if ever.

The commission should also decide whether the conclusions made by the experts are consistent and reasonable. The expert judgment is considered to be doubtful if the evidence the commission members have suggests that the experts took

insignificant details into account when making their judgment while ignoring significant facts.

The commission should also decide whether the appeal documentation includes the materials that were inaccessible to the experts when they were preparing their judgments before the academic audit final day and the materials that are now suggesting that their findings should be reconsidered. If the materials' availability is identified the institution management should explain to the commission members why the materials were not made accessible to the experts who participated in the academic audit.

After examining all the issues related to the appeal made by the institution, the commission might recommend the following:

- to reconfirm the expert judgments as (1) no evidence has been identified that suggests that any significant procedural mistakes were made; (2) the expert judgments have been considered to be consistent and reasonable and (3) it has been confirmed that the judgment does not contain references to any materials that could have made the expert judgment more objective but have not been made accessible to the experts before the final day of the audit;
- to make amendments to the expert judgment if they indicate that the appeals documentation contains references to the materials that could have helped them make a different conclusion about the better quality of standards and awards in the institution but the materials were not made available to the experts before the audit final day;
- to the experts to make different judgments if some procedural mistakes have been identified that make the whole judgment doubtful and/or unsubstantiated and/or inconsistent. In this case, the commission members will wait for the experts to make their new judgment and, depending on the information they submit, either recommend that they reconfirm their judgment or make a different judgment where better institution grading is indicated or start a new audit procedure.

The commission members shall consider the appeal within 3 months as of the issue date. The Agency Council Chairman approves the commission's opinion and submit the information to the rector of the institution.

10.2 Complaints

It is advisable to consider and make judgments about the complaints immediately after they are made, i. e. on the institution premises, and include as few as possible bureaucratic formalities into the process. At all times the way the complaints are considered should raise no doubt in any disinterested party. If the complaints cannot be considered on the institution premises, the Agency management takes part in the complaint processing and the Agency informs the institution about the composition of the team of those who consider the complaint.

If this contributes to the complaints processing on the institution premises, the complaints can be made verbally. An Agency representative should write down the

information about the discrepancies and the judgments made and approve the exact wording in the institution.

As a rule, complaints are made in writing. The documentation should include copies of the referenced documents. The Agency should confirm the fact of the complaint within 3 working days as of the date of issue. After considering the complaint, the Agency submits its opinion in writing to the institution management with the decision rationale indicated and the measures to be taken described.

The timing of the complaint should be as close as possible to the timing of the events that are the subject matter of the complaint. The complaints made three months after the event as a rule are not considered by the Agency. The complaints are considered on a case-by-case basis and the timescales are different as they depend on the nature of the subject matter and the consultations and recommendations needed to be made by the team of experts or the institution. The Agency should regularly inform the institution of the complaint processing progress. In any case the final decision should be made within 3 months as of the date of issue.

The Agency is of opinion that the fact of identification of the evidence confirming the facts described in the complaint documentation is insufficient for considering the experts' final judgment to be doubtful. In order to make the correct decision, it is necessary to identify to what extent the discrepancies affected the final judgments and their correlation with the database.

If the complaint is associated with the contents of the draft audit report, the draft report shall not be considered finalized unless the complaint processing is completed.

10.2.1 Program Audit

The institution's complaints concerning the program audit preparation, timescale, duration, composition of the expert team, etc. are considered by the Agency representative who is in charge of the audit.

The complaints concerning the program audit should be submitted by the institution representatives to the Appeal Commission representative in the course of the audit or immediately after the audit procedure is over.

The complaints concerning the draft report are usually considered by the Review Coordinator who together with the institution representative verifies the accuracy of the evidence gathered in the report. If the discrepancy is unresolved, the complaint is submitted to the Agency representative.

Any complaint considered where the decision is to the institution's disadvantage can be reconsidered at the institution's request by the commission where there are representatives of the Agency Council. The commission members should be sure that the complaint processing was conducted in accordance with the rules and that the decision made will be correct under all circumstances. Otherwise the commission shall decide to reconsider the complaint.

10.2.2 Institutional Audit

The institution's complaints concerning the institutional audit preparation, timescale, duration, composition of the expert team, the number of disciplines selected for audit, etc., are considered by the Review Coordinator.

The complaints concerning the institutional audit should be submitted by the institution's representatives to the Review Coordinator in the course of the audit or immediately after the audit procedure is over.

The complaints concerning the draft report are considered by the Agency representative who together with the institution's representative verifies the accuracy of the evidence gathered in the report.

Any complaint considered where the decision is to the institution's disadvantage can be reconsidered at the institution's request by the commission where there are representatives of the Appeal Commission. The commission members should be sure that the complaint processing was conducted in accordance with the rules and that the decision made will be correct under all circumstances. Otherwise the commission shall decide to reconsider the complaint.

11. Agency's Collaboration with HEIs

All the effort should be made to construct and maintain close and constructive business relationship with the HEIs beyond the realm of the academic audit and the activities related to it. Each educational institution can appoint its representative to correspond regularly with the Agency representative. The correspondence is not considered part of the audit process and is conducted by the Agency representative who does not take part in the academic audit procedure.

Timeline of the Accreditation Procedure

That depends	The request for the accreditation procedure
2 months	Preliminary Meeting with the leadership of HEI
1 month	Contract for accreditation procedure
Prior to the Visit	
4 months	The Agency specialists make a report on quality assurance and standards in the institution. A copy of the report is submitted to the institution.
3 months	The Agency Officer - meets with the institution's staff and students, - examines the self-evaluation documents and checks whether they meet the Agency's requirements, - gives guidelines to the students as to what evidence should be provided to the Agency. The institution confirms the list of disciplines to be reviewed and the student information.
2,5 months	The Agency informs the institution of: - the draft list of reviewers - the number of disciplines selected for review.
2 months	The institution submits the self-evaluation documents to the Agency. The students submit to the Agency their written evidence.
1 month	The Agency agrees with the institution the following: - the list of reviewers and - the list of disciplines to be reviewed. The Agency requires from the institution to submit its self-evaluation documents on each of the disciplines from the list.
3 weeks	The institution submits to the Agency the self-evaluation documents related to the disciplines.
During the Visit	
The review team visits the site	The review team works for not more than 5 days. The Agency Deputy Director joins the team at the final stage of the audit. The review team meets the students and teaching staff in order to discuss the general review areas and the list of disciplines selected. Two reviewers are engaged in the discipline audit. On the penultimate day of the visit the reviewers inform the institution

	<p>of the necessity to seek specialist reviewers' advice during the review process.</p> <p>On the final day of the visit:</p> <ul style="list-style-type: none"> - the Agency Deputy Director joins the team; the reviewers approve the list of disciplines to be reviewed with the help of the specialist reviewers and examine the evidence gathered - there is no oral or written report to the institution.
After the Visit	
2 weeks	<p>The Agency deputy director sends a letter to the institution and encloses</p> <ul style="list-style-type: none"> - information on the main judgments and recommendations made by the reviewers to be included into the draft report - agrees with the institution management the date of the specialist reviewer visit.
2-3 weeks	(If needed) the specialist reviewers and a review team representative or the Agency Deputy Director visits the institution.
4 weeks or 7 weeks, if the specialist reviewers' contribution is needed	The Agency submits a draft report to the institution.
8 weeks (or 11 weeks)	The institution makes comments on the draft report.
8 weeks (or 11 weeks)	In case of disagreement the HEI initiates an appeal procedure
10 weeks (or 13 weeks)	The final report is published.
FOLLOW-UP	
Depending on the review findings	Performance as per the reviewers' recommendations is analyzed.
HE Quality Monitoring	
Annually	<p>The Agency Officers make a short-term visit to the institution in order to examine:</p> <ul style="list-style-type: none"> - the achievements by the institution after the review - the institution's action plans in regard to the enhancement of quality assurance system.