Turkish Higher Education Quality Council

INTERNATIONAL INSTITUTIONAL ACCREDITATION PROGRAM GUIDE

Version 1.0a (2024)

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Foreword

The Turkish Higher Education Quality Council (THEQC) International Institutional Accreditation Program Guide has been issued to guide the evaluation teams, who are commissioned to evaluate HEIs within the International Institutional Accreditation Program and its follow-up process conducted by the Turkish Higher Education Quality Council, and the HEIs to be evaluated by evaluation team members, considering the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG-2015).

To realise the International Institutional Accreditation Program (IIAP) objectively to contribute to an institution at the highest level:

i) Pre-visit preparations should be made fully and timely,

ii) Effective communication should be established with the institution during the visit, and

iii) Observation and evidence-based evaluations should be conveyed to the institution concisely and effectively, both in oral and written form.

Within the scope of IIAP, an evaluation team qualitatively and quantitatively evaluates the institution's quality assurance system and the Governance and Quality, Learning and Teaching, Research and Development, and Service to Society activities carried out in the institution. The reference documents to be used in the IIAP evaluations are the THEQC IIAP Directive, the THEQC IIAP Evaluation Criteria, and the Institutional Self-Evaluation Reports that HEIs will submit to THEQC.

All evaluators working in the teams are expected to be in effective communication and cooperation with THEQC and adhere to academic ethics principles. Believing that the IIAP will be an important experience for HEIs and evaluators, THEQC desires that HEIs will contribute to the continuous improvement efforts by establishing a strong internal quality assurance system.

Turkish Higher Education Quality Council

This Guide came into force with the Council decision dated 15.05.2024.

1. Introduction

This guide has been created to supervise the IIAP evaluation team members, the HEIs to be evaluated, and all stakeholders to take part in the evaluation process. The IIAP documents to be used during the evaluation process are:

- IIAP Directive,
- THEQC IIAP Evaluation Criteria,
- IIAP Institutional Self-Evaluation Report (ISER) Writing Guide
- ISERs written by HEIs, and
- The International Institutional Accreditation Report (IIAR) written by an evaluation team.

HEIs are responsible for writing their ISERs following the instructions in the IIAP ISER Writing Guide and submitting them to THEQC within the time specified in the evaluation calendar. The evaluators are expected to read the Directives and the Criteria, on which they will base their evaluation in the IIAP, and the most up-to-date version of the ISER Writing Guide.

The IIAP process is outlined below:

1. Application and Approval,
2. Writing the Institutional Self-Evaluation Report,
3. Determination of Evaluation Teams and Site Visit Dates,
4. Pre-Visit,
5. Site Visit,
6. Completing the Report,
7. Consistency Work and Finalization of the Report,
8. Decision,
9. Follow-up,
10. Complaints and Appeals.

1.1. Definitions

a. **THEQC** refers to the Turkish Higher Education Quality Council,
b. **The Council** refers to the Turkish Higher Education Quality Council,
c. **Commission** refers to the Institutional External Evaluation and Accreditation Commission,
ç. **Institution** refers to a higher education institution operating outside the Republic of Türkiye,
d. **Evaluator** refers to a competent officer assigned by the Council to an international evaluation team,
e. **Evaluator Training** refers to the training given to provide specific competencies to international evaluators,
f. **Evaluator Pool** refers to the THEQC Evaluator Pool, in which evaluators to be assigned to international institutional accreditation evaluation teams are included,
g. **Review Coordinator** refers to the person who is assigned to ensure coordination between the institution and the evaluation team during the evaluation process and to observe the site visit process, without taking an active role in the evaluation and report writing activities of the team,
ğ. **Evaluator System** refers to the internet-based application through which evaluation processes designed by the Turkish Higher Education Quality Council are carried out,
h. **Evaluation Team** refers to the team assigned to carry out the international institutional accreditation process of an institution,
ı. **Contact Person** refers to the person who will be notified to THEQC to ensure communication and coordination throughout the process after signing a contract with the institution,
i. **Improvement Report** refers to the report in which the requested improvement works are documented by the institution after an accreditation decision is postponed,
j. **Decision Letter** refers to the letter sent by the Council to the institutions at the end of the evaluation process, containing the final accreditation decision and suggestions for improvement in the field of quality assurance,

k. **Comparison Chart** refers to the chart that shows the institution's correction requests for draft IIAR including factual errors and the evaluation team's response to these requests,

l. **Guide** refers to the Turkish Higher Education Quality Council International Institutional Accreditation Program Guide,

m. **Institutional Self-Evaluation Report (ISER)** refers to a self-evaluation report written by the candidate higher education institutions before the evaluation period, containing the institution's works on evaluation criteria and the supporting evidence,

n. **Criteria** refers to the THEQC International Institutional Accreditation Criteria,

o. **Pre-Visit** refers to the evaluation team members' visit to the institution before the site visit,

ö. **Team Leader** refers to the team member who is accountable to the THEQC President for the management of the evaluation team,

p. **Draft IIAR** refers to the report written by the evaluation team and forwarded to the institution for its feedback,

r. **Consistency Work** refers to the study in which the Commission checks whether IIAR is written in accordance with THEQC's evaluation methods and tools,

s. **Consistency Report** refers to the report written by the Commission at the end of the Consistency Work,

ş. **Site Visit** refers to the online or on-site visit of the evaluation team to the institution for evaluation,

t. **International Institutional Accreditation Program (IIAP)** refers to the evaluation process, in which an accreditation decision is taken as a result of the external evaluation of higher education institutions operating outside the Republic of Türkiye, within the framework of the criteria created by the Council,

u. **International Institutional Accreditation Report (IIAR)** refers to the report written by the evaluation team for institutions evaluated within the scope of IIAP,

ü. **Follow-up** refers to the process in which higher education institutions, whose IIAP evaluations are ended with the grant of accreditation, are included in the second year following the accreditation decision taken for them,

v. **Follow-up Report** refers to the evaluation report written by a Follow-up Team after an online site visit,

y. **Follow-up Team** refers to the team assigned to carry out the follow-up process of an institution.

z. The THEQC Rubric refers to a rubric-style assessment tool used in the self-evaluation works of higher education institutions, the writing of institutional self-evaluation reports, and the external evaluation processes.

1.2. About the International Institutional Accreditation Program (IIAP)

IIAP is an external evaluation activity carried out by THEQC. THEQC's approach to quality assurance within the scope of IIAP is based on the ESG principle stating that HEIs are primarily responsible for the quality of their teaching and learning, research, and service to society activities. As a result of the IIAP, an International Institutional Accreditation Report (IIAR) is written by the evaluation team and based on this report, a *grant of accreditation*, *postponement of accreditation decision, or refusal of accreditation* is decided by THEQC and the result is shared with the public.

HEIs operating abroad and meeting the eligibility criteria may apply to the IIAP. The HEIs to be included in the program are selected by THEQC among the applicants.

The main features of IIAP are:

- It is a cross-border evaluation process that is carried out by utilising the THEQC IIAP Evaluation Criteria based on the ESG.
- It is an evaluation process based on the internal evaluation (self-evaluation) of the institution.
- It aims to examine and monitor the efficiency of quality assurance work in HEIs.
- It is an evaluation process that focuses on contributing to the compliance of the institution's status with the mission/vision and strategic goals defined by itself and adopts the "continuous improvement" approach.
- It includes a peer review process in which the opinions of the internal and external stakeholders of the institution are taken.

In general, an IIAP evaluation investigates the following aspects:

- How an institution plans and manages the resources and competencies at hand within the processes of governance and quality, learning and teaching,

research and development, and service to society in accordance with its values, mission and objectives,

- How to carry out the practices of follow-up and improvement as to the processes within the scope of the institution,
- How an institution ensures stakeholder involvement and comprehensiveness in planning, doing, checking and acting phases,
- What an institution's strengths and areas for improvement in its internal quality assurance system are,
- What the reasons for failed improvements are,
- How an institution ensures sustainability in its quality assurance system to maintain its competitive advantage within the scope of the rapidly changing agenda of higher education.

The IIAP Evaluation Criteria include 14 criteria and 46 sub-criteria under the headings of Governance and Quality, Learning and Teaching, Research and Development, and Service to Society, with a holistic perspective. The document explaining the sub-criteria of the IIAP Evaluation Criteria and their maturity levels is the THEQC IIAP Rubric. This rubric is a rubric-style assessment tool used in the self-evaluation works of HEIs, the writing of institutional self-evaluation reports, and external evaluation processes; and it was developed to increase clarity, objectivity, comprehensibility, consistency, and transparency levels in external evaluation or decision-making processes.

The quality assurance process or mechanisms for each sub-criterion in the THEQC IIAP Rubric have been defined considering the maturity levels of planning, doing, checking and acting (PDCA) steps and rated on a scale of 1 to 5. The sub-criteria, whose maturity level is determined with this rubric, reveal the level of fulfilment of the relevant criteria. The maturity levels of the sub-criteria associated with the PDCA cycle are summarised in Diagram 1.

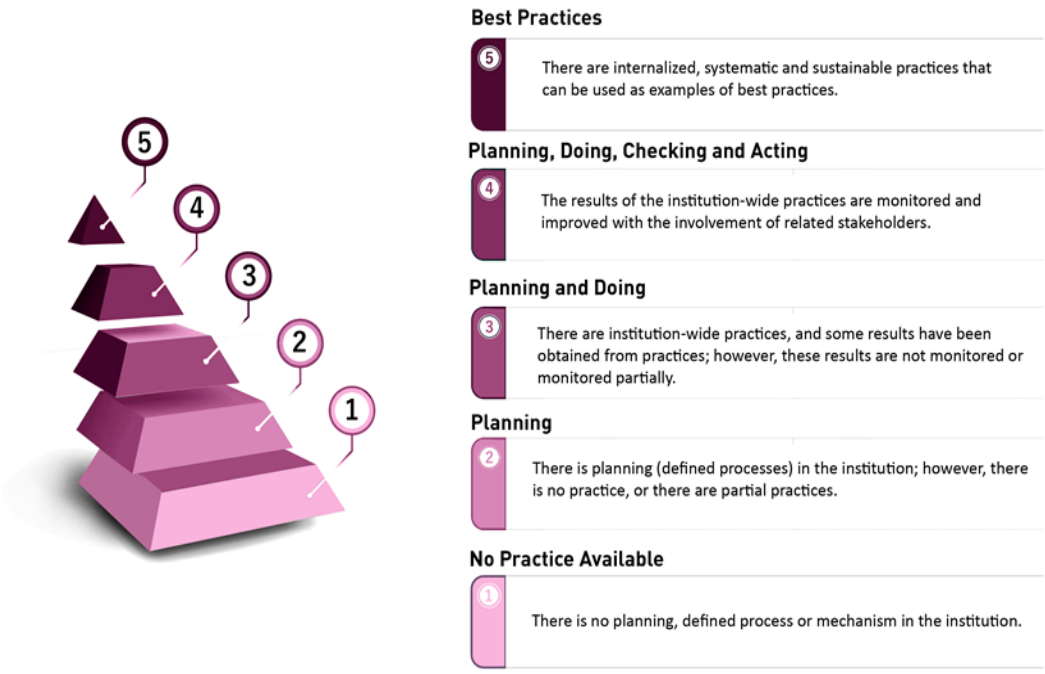

Diagram 1. Rating of the Maturity Levels of Sub-criteria via the THEQC IIAP Rubric

1.3. IIAP Process Timeline

The workflows and deadlines for the evaluation process stages are presented below.

Time	APPLICATION AND APPROVAL
Week 0	Institutions' application to the IIAP in the relevant year
Week 4	Institutions to be included in the IIAP are selected by the Council out of the applicants.
Week 4	THEQC appoints a review coordinator to coordinate the evaluation process.
Week 6	Institution and THEQC sign the International Institutional Accreditation Program Agreement.
Week 6	After signing the agreement, the institution notifies THEQC of its contact person to ensure communication and coordination throughout the process.

Week 10	Institution pays the accreditation service fee within thirty (30) days following the date the agreement was signed.

Time	ISER WRITING
Week 0	ISER writing process starts right after the signing of the agreement.
Week 16	Institution submits its ISER to THEQC within four (4) months at the latest from the signing date of the International Institutional Accreditation Program Agreement.
Week 18	Review coordinator checks the compliance of the ISER content and annexed documents with the Guide and sends feedback to the institution within fifteen (15) days.
Week 20	Institution completes the correction requests on its ISER and returns the report within fifteen (15) days.
Week 21	Institution publishes the ISER on its website.

Time	DETERMINATION OF EVALUATION TEAMS
Week 0	The process of determination of evaluation teams starts.
Week 2	THEQC creates the evaluation teams according to the procedure specified in the Article 6 of the IIAP Directive after the ISER writing process is completed.
Week 2	It is checked through the Evaluator System whether there is any conflict/coincidence of interest between the evaluation team leader, team members, review coordinator and the institution to be evaluated.
Week 4	The evaluation team leader, contact person and review coordinator determine the pre-visit and site visit dates.

Time	SITE VISIT
Week 0	Planning of the site visit schedule

Week 4	Evaluation team examines the ISER.
Week 5	Pre-visit is conducted by the evaluation team as specified in this Guide, and the site visit schedule is created. (1 day)
Week 8	Site visit is performed by the evaluation team as specified in this Guide. (4 days)
Week 9	The evaluation team is expected to fill in the "Form for Team Members' Evaluation" as a part of the 360-degree evaluation survey on QAMIS to evaluate the team leader and their team members, within five (5) working days after the end of the site visit.

Time	WRITING OF THE REPORT
Week 0	Site visit ends with the presentation of the exit statement.
Week 3	Evaluation team writes the draft IIAR considering its consistency with the content of ISER, the information and documents requested from the institution and the interviews held during the site visit, the places seen, the documents examined, the information obtained, and the exit statement; uploads the draft IIAR to the Evaluator System within twenty-one (21) days following the site visit, and forwards it to the review coordinator.
Week 4	Review coordinator checks the draft IIAR in terms of completeness, consistency between the text and the assigned maturity levels, clarity, and language within ten (10) days.
Week 5	Review coordinator forwards correction suggestions, if any, to the evaluation team and ensures that they are implemented within ten (10) days following the report's submission.
Week 6	Evaluation team forwards the draft IIAR agreed upon after the preliminary examination to the institution to receive feedback including factual errors.
Week 9	Institution forwards the correction requests for the draft IIAR, submitted by the evaluation team, to the team within twenty-one (21) days.
Week 12	Evaluation team uploads the draft IIAR and, if any, a comparison chart containing the report text before and after the institution's feedback to the Evaluator System within twenty-one (21) days following the institution's response to the draft IIAR.

Time	CONSISTENCY WORK AND THE FINAL REPORT

Week 0	IIAR and the comparison chart are uploaded to the Evaluator System.
Week 4	Commission submits the final IIAR and a Consistency Report written after consistency checks on the draft report to ensure consistency between evaluations conducted in different institutions in the same evaluation period and/or between years.

Time	DECISION
Week 0	Consistency Report is submitted to the Council.
Week 4	The accreditation decision is taken by the Council, taking into account the IIAR and the consistency report written within the scope of the IIAP.

2. Roles, Duties, and Responsibilities

2.1. Duties and Responsibilities of the THEQC Commission on Institutional External Evaluation and Accreditation

Commission on Institutional External Evaluation and Accreditation (CoIEEA), one of the permanent commissions of THEQC, is responsible for the execution and coordination of the International Institutional Accreditation Program. The duties of CoIEEA in the process are as follows:

- Creating the evaluators pool,
- Carrying out the works to determine evaluator candidates and create evaluation teams,
- Planning and conducting the evaluator training,
- Planning and conducting training/information meetings for higher education institutions,
- Conducting the consistency work on draft IIARs written by evaluation teams and finalising them, and
- Sharing its advisory opinion with the Council for the accreditation decision the Council will take considering the IIAR.

All Commission members involved in the evaluation processes must sign the "THEQC Code of Ethics" (Annex 1) document. The Statement of Confidentiality and Code of Ethics in this document can also be signed through the Evaluator System.

2.2. Duties and Responsibilities of Evaluation Teams

An **evaluation team** refers to the team assigned to evaluate a given higher education institution in the scope of external evaluation programs. The evaluation teams may include academic staff, administrative staff, students, employers/sector representatives, and international experts. Students have the same status as the other team members.

Duties and Responsibilities of the Team Leader: The team leader refers to the member responsible for supervising the team assigned to carry out the external evaluation processes for a higher education institution. Team leader is selected through the Evaluator System from the evaluators in the evaluator pool and submitted to the Council for approval. Team leader is responsible for the fulfilment of the duties defined for evaluation teams in the IIAP Directive. The team leader also ensures that the examinations and evaluations carried out by the evaluators are carried out in accordance with the process specified in the Guide and that an objective and realistic evaluation is made within the scope of the THEQC IIAP Evaluation Criteria. S/he is responsible for completing the reports to be written within the scope of IIAP within the pre-determined calendar.

Duties and Responsibilities of Evaluators: The evaluator refers to someone competent in external evaluation and assigned to an evaluation team. The evaluators are selected through the Evaluator System in accordance with the structure and size of the HEI to be evaluated, and then they are presented to the Council for approval. Evaluators carry out the examination and evaluation process based on the THEQC IIAP Evaluation Criteria following the guide and contribute to the report writing process, using objective and evidence-based findings.

All evaluators involved in the evaluation processes must sign the "THEQC Code of Ethics" (Annex 1) document. The Statement of Confidentiality and Code of Ethics in this document can also be signed through the Evaluator System.

2.3. Qualifications of an Evaluation Team

All team members, who will take part in an evaluation process, must attend and complete the evaluator training program. The parties must submit their statements if there is any conflict/coincidence of interest between a team leader and the evaluation team members and the institution to be evaluated to THEQC within seven (7) days via the Evaluator System after the information related to the team members is conveyed to them.

Qualifications of evaluation team members are as follows:

- Having at least ten (10) years of experience in learning and teaching and research activities carried out in higher education institutions or the administrative processes of the institution,

- Having worked actively for at least three (3) years in the field of higher education quality assurance,
- Ability to effectively use the language to be used in evaluation verbally and in writing and flexibly in social, academic and professional terms,
- Having the qualifications specified in the Directive on the Turkish Higher Education Quality Council Student Member and Students Commission for student evaluators,
- Being open to cooperation and teamwork,
- Having strong communication skills,
- Adopting ethical principles,
- Evaluating an HEI without comparing it with another one, and
- Having time management and effective organization skills.

2.4. Methods to Be Used by Evaluation Teams

Methods to guide the evaluators in the evaluation processes can be grouped under four headings: document examination, observation, focus group meeting/interview, and other methods (team debates, manager-director/employee/student comments, etc.).

Document Examination: The documents including the institution's vision, mission, strategic plan and priorities, activity, performance and self-check reports, the institution's ISERs, and external evaluation reports should be examined before the visit. It is expected that the evaluation team uses the document examination method effectively to have adequate information about the institution. If required, the evaluation team may request additional information and documents from the institution to be examined during and before the visit.

Observation: Issues such as the adequacy of academic and administrative units and shared areas, how the confidentiality and security of files and records are ensured, and how the backup and service provision (server) activities are carried out if the files are kept electronically, can be examined through observation during the visit.

Focus Group Interview: During the visit, important findings can be obtained through one-to-one or focus group meetings along with all internal and external stakeholders

of the institution. In this context, stakeholder meetings with the directors of the institution, academic and administrative staff, administrative unit representatives, for example, from the Registrar's Office and the Department of Personnel, students and the units from where students receive services (Department of Health, Culture and Sports, Department of Library and Documentation, Career Center, Unit for Students with Disabilities, etc.) may be carried out.

Other Methods: Oral/written comments of the institution's staff and students, demonstration of various processes such as recruitment with implementation charts, the current institutional catalogue, introductory documents, the news about the institution, evidence regarding the interaction of the institution with internal and external stakeholders (projects, meetings, exhibition, etc.) or the use of methods such as examining activities within the scope of public relations also significantly contributes to the evaluation process.

2.5. Duties and Responsibilities of Review Coordinator

Duties and Responsibilities of the Review Coordinator: THEQC appoints its staff who are competent in evaluation as the review coordinator to coordinate the process. Review coordinator organises the meetings to be held before and after the visit regarding the evaluation processes, in cooperation with the team leader. S/he communicates with all relevant stakeholders during the evaluation process, and carries out the required controls for the performance of the visit as planned.

1. Duties and responsibilities of review coordinator before site visit are:

    a. To examine and pre-evaluate the applications of HEIs to be evaluated within the scope of the IIAP and present them to the Council,
    b. To coordinate the work on the THEQC side during the evaluation process, preparing and finalizing the contracts to be signed with the institution and carrying out other correspondence with the contact person,
    c. To ensure coordination regarding the legal regulations and the issuance of visas and for obtaining the necessary permits in the country where the HEI to be evaluated is located,
    d. To check the suitability of the content and format of the ISERs, annexes and evidence, if any, to be used in the evaluation process, for the evaluation,

e. To inform the evaluation team about ISER and answer their questions, according to the Guide to be used in the evaluation,
f. To attend the pre-visit meeting where the site visit schedule is determined,
g. To ensure that the travel, transfer, accommodation, food and beverage, and technical needs of the evaluation team are met within the scope of the site visit, in coordination with the institution's contact person.

2. Duties and responsibilities of review coordinator during site visit are:

a. To participate in site visits to observe the integrity and consistency of the evaluation process and to ensure that THEQC's general expectations regarding evaluation are taken into account and met,
b. To deliver THEQC's institutional supplies to be used by the evaluation team,
c. To ensure communication between the team and THEQC during the site visit (supporting the team in terms of implementation and technical regulations),
d. To manage any unusual changes to the site visit schedule,
e. To urgently convey to THEQC any situation that may prevent the site visit from being carried out in line with its purpose, and to act by the instructions of THEQC,
f. To coordinate the online meeting platform in online meetings,
g. To participate in all meetings scheduled by the evaluation team within and outside the institution,
h. To carry out the duty with different groups in each session when the team is divided into groups for focus group interviews, on-site examination and visits,
i. To attend the final meeting,
j. To remind the parties to fill out the 360-degree evaluation survey, which aims to collect feedback regarding the evaluation process.

3. Duties and responsibilities of review coordinator after site visit are:

a. To ensure communication between THEQC and the institution and THEQC and the evaluation team,
b. To check the draft IIAR in terms of completeness, consistency between the text and the assigned maturity levels, clarity, and language, and to forward correction suggestions, if any, to the evaluation team,

c. To keep track of the transactions for payment of the evaluation team's fees and travel and accommodation expenses,
d. To receive feedback regarding the evaluation process and convey it to THEQC,
e. To inform the Commission and the Council of the site visit and final report's compliance with the Guide, where necessary.

Review coordinator may not actively participate in the discussions during the site visit, may not intervene in or make changes to the evaluation team's practices and judgment on evaluation, may not contribute to the writing of the preliminary and subsequent drafts of the report, and may not be assigned tasks by the team leader like a team member.

All review coordinators involved in the evaluation processes are required to sign the "The Statement of Confidentiality and Code of Ethics" given in the "Turkish Higher Education Quality Council Code of Ethics" (Annex 1) document. The statement can also be signed through the Evaluator System.

2.6. Duties and Responsibilities of Contact Person

Duties and Responsibilities of Contact Person: S/he is the person who will be notified to THEQC to ensure communication and coordination throughout the process after signing a contract with the institution. The duties and responsibilities of contact person in the evaluation process are as follows:

1. To ensure communication and coordination between the institution and THEQC and the evaluation team assigned by THEQC before, during and after the evaluation process,
2. To hold an initial meeting with the institution's manager, the evaluation team leader and the review coordinator to determine the draft interview program at the beginning of the site visit,
3. To be present at the institution to provide the requested documents, information and evidence during the site visit.

3. Application

The application documents and supporting evidence that an HEI aiming to be evaluated within the scope of IIAP carried out by THEQC must submit together with a letter of intent explaining why it wants to be included in the program and introducing the institution are as follows:

a. Certification of that it is authorised to carry out higher education learning and teaching activities in the country where it is based,
b. A statement to prove that the institution to be evaluated obtains permission from the authority responsible for higher education or quality assurance in higher education in the country it is based, stating that there is no objection against THEQC's site visit and evaluation work [(Please use Annex 4. Request for Acknowledgement.)],
c. Document showing that the institution carries out learning and teaching activities at ISCED 6 level,
d. Being registered in at least one of the international higher education databases (ENIC-NARIC, World Higher Education Database, WHED, European Tertiary Education Register, ETER),
e. Document showing that at least half of the institution's active bachelor's degree programs have already graduated their first cohorts of students,
f. Document as evidence that the institution established a unit responsible for quality management (quality coordinator's office, quality commission, quality office, and so on).

3.1. Council Approval, Signature of the Agreement, and Commencement of the Process

The stages for the commencement of the IIAP are as follows:

1) THEQC assigns a review coordinator to coordinate the evaluation process.
2) Review coordinator conducts the preliminary evaluation of the application documents and evidence and presents them to the Council.
3) If the Council approves, the institution is included in the IIAP.
4) Institution and THEQC sign [the International Institutional Accreditation Program Agreement] (Annex 2).

5) The agreement includes provisions about the following matters:
    a. Institution's contact person and THEQC's review coordinator,
    b. Accreditation service fee,
    c. Language of the evaluation,
    d. Applicable legislation, standards, and documents,
    e. Confidentiality,
    f. Issues regarding appeals and complaints.

6) Institution pays the accreditation service fee within thirty (30) days following the date the agreement was signed.

> Accreditation service fees are determined by the Council, taking into account the country where the evaluation will be made, the size of the team, and similar issues. All kinds of expenses regarding the evaluation processes to be carried out in HEIs are covered with the accreditation service fee charged under the related article of the International Institutional Accreditation Program Agreement.

7) The international institutional accreditation granted by THEQC does not guarantee that the institution will fulfil its quality assurance obligation within the scope of the higher education legislation in the country where it is located or that it will have the benefits (e.g. equivalence and recognition) to be provided to HEIs determined by the Council of Higher Education of the Republic of Türkiye within the scope of its policies.
8) If the accreditation service fee is not paid, THEQC reserves the right to unilaterally terminate the agreement.

3.2. ISER Writing

Institutional Self-Evaluation Report (ISER) is a self-evaluation report written by a candidate HEI before the evaluation period, containing its works on the evaluation criteria and the supporting evidence. The steps of ISER writing are as follows:

1. The Institution submits its ISER, which was written following the IIAP ISER Writing Guide, to THEQC within four (4) months at the latest from the signature date of the International Institutional Accreditation Program Agreement.

2. Review coordinator checks the compliance of the ISER content, format and annexed documents with the IIAP ISER Writing Guide and sends feedback including correction requests to the institution within fifteen (15) days.
3. The institution finalises the correction requests in the ISER submitted by the review coordinator within fifteen (15) days and uploads the report to the Evaluator System.
4. The Institution also publishes the final version of the ISER on its website before the site visit.

3.3. Formation of Evaluation Teams

Evaluator candidates who want to take part in the Evaluator Pool are expected to have the following competencies:

a) Having at least ten (10) years of experience in learning and teaching and research activities carried out in HEIs or administrative processes of HEIs,
b) Having worked actively for at least three (3) years in the field of higher education quality assurance,
c) To meet the foreign language proficiency requirements specified in the evaluator application announcement,
d) Having the qualifications specified in the Directive on THEQC Council Student Member and Students Commission for student evaluators and meeting the foreign language proficiency requirements specified in the evaluator application announcement,
e) To successfully complete the Evaluator Training given by THEQC.

The following points are taken into account when forming an evaluation team:

1. Evaluation teams are created following the IIAP Directive, with a team leader to be selected through the Evaluator System and some evaluators appropriate to the structure and size of the institution, taking into account sex, nationality, field of study, and the results of the exams to be conducted after evaluator training, surveys and performance data collected about the evaluators in previous evaluation periods. When necessary, the teams are updated.
2. It is checked through the Evaluator System whether there is any conflict/coincidence of interest between the evaluation team leader, team members, and the institution to be evaluated. New evaluators are appointed to replace evaluators if there is a conflict/coincidence of interest.

3. The teams are assigned after Council approval.

4. Evaluation Process

The evaluation process consists of the steps of determining the working schedule of the evaluation team, conducting a preparatory meeting for the evaluation team, ISER examination by the evaluation team, pre-visit, site visit, oral presentation of exit statement to the institution, and writing the IIAR.

> "If needed, the institution hires an interpreter who will work in the required language pair to be used in the focus group interviews during the site visit. (The language to be used in the evaluation may be added after it is determined in the Agreement.)

4.1. Preparations for Evaluation

4.1.1 Determining the Evaluation Team's Working Schedule

The working schedule of the evaluation team is determined in an online meeting where the team leader, review coordinator, and contact person come together. Evaluation team members may also attend this meeting if deemed necessary.

Evaluation calendar includes the following:

a) ISER examination period,
b) Pre-visit date,
c) Site visit dates.

Upon the request of the parties, the determined site visit dates may be updated. The evaluation calendar should be planned to complete the evaluation and write the draft IIAR within one hundred twenty (120) days at the latest, following the determination of the evaluation team.

4.1.2. Evaluation Team's Preparatory Meeting

The evaluation team leader, members and review coordinator organise an online meeting for the following purposes. The team leader chairs the meeting.

1) Team leader, team members, and the review coordinator meet.
2) Duties and responsibilities of team members during pre-visit and site visit are determined.
3) THEQC IIAP Evaluation Criteria are reviewed.
4) The connection between the evidence and information in the evaluation and the analysis and results is established.
5) Site visit schedule is shared with team members.
6) Division of duties is made for IIAR writing.

4.1.3. ISER Examination

The evaluation team can access the ISERs and the evidence provided by the institution to be evaluated through the Evaluator System. The evaluation team members examine the ISERs and their annexes to check to which extent they meet the requirements of the THEQC IIAP Evaluation Criteria. Additional information and documents to be requested from the institution during pre-visit are decided, if needed.

4.2. Pre-Visit

Before the site visit, the evaluation team conducts a one-day visit to the institution on an online platform provided by THEQC, with the participation of the review coordinator. It is recommended that the pre-visit be held two to three weeks before the site visit. The sample pre-visit schedule is presented in Annex 3. Pre-visit steps are as follows:

1) The team members hold a meeting among themselves,

2) The team members hold a meeting to meet the institution's senior managers/directors,

3) The team members hold a meeting with the unit responsible for quality to have brief information about the institution's processes.

Pre-visit is performed to achieve the following purposes:

1) To ensure that the evaluation team has sufficient information about the institution, in addition to the ISER examination, and is ready for the site visit,

2) To inform the HEI of additional evaluations to be made during the site visit and additional information and documents to be requested from the institution before or during the visit,

3) To finalize the previously created site visit schedule.

4.3. Site Visit

4.3.1. Preliminary Work

1) Review coordinator negotiates with the contact person during or after the pre-visit and makes the necessary planning for the transportation of the team members and their accommodation in a suitable place close to the institution during the site visit.
2) If necessary, the review coordinator provides the necessary communication regarding the country-specific rules and legislation, visas and restrictions, and security issues.
3) The scope and details of the site visit are notified by THEQC to the diplomatic missions and embassy of Türkiye in the country where the institution to be evaluated is located, through the Ministry of Foreign Affairs.
4) A private meeting room is provided by the institution for team meetings to be held during the site visit *(Keeping the meeting room open for works that might be extended until night and providing equipment such as computer, projector, and printer as well as food and beverages limited to water, tea, coffee and appetisers in the study room are expected).*
5) The team members prepare the questions to be asked during the site visit by taking into account the Criteria. They also determine the additional information to be requested from the institution and inform the team leader about them.
6) The team leader and members communicate with each other and exchange ideas for the preliminary evaluations of the additional information and documents required and all the details of the visit.
7) The team leader informs the review coordinator of the additional information and documents requested from the institution.
8) Review coordinator communicates with the contact person and requests additional information and documents, which might support the evaluation

process at the beginning or during the visit, *(if possible, during the pre-visit or before the site visit)* to be sent to her/him.

9] During the site visit, the selection of the units to be visited, and the issues related to the interviewees, namely the academic and administrative staff, students, and stakeholders, are shared with the institution before the visit.

4.3.2. Commencement of Site Visit

The site visit commences with the arrival of the evaluation team at the accommodation site and ends with the declaration of the exit statement verbally and the team's departure.

The evaluation team conducts site visits for four goals:

1) To evaluate the factors, which cannot be sufficiently explained in an ISER (for example, the academic environment, motivation of students and the staff, the level of academic staff and students' sense of belonging to the institution, the qualities of the staff and students, and similar factors),
2) To help determine the strengths and areas for improvement of the institution,
3) To examine the documents and information prepared and presented by the institution within the scope of the evaluation process, and to see the physical facilities on site,
4) To contribute to the establishment of continuous improvement and quality culture in institutions with *the "Exit Statement"* to be declared at the end of the site visit.

> "It is recommended for evaluation team members that they review the "*Listen, talk and team-up. Considerations for panel members in external quality assurance*" document published by ENQA for recommendations regarding their behaviours and approach during the visit."

The site visit should be carried out as a cluster of activities that are well integrated with each other. To clarify the process, the sample of an evaluation team's site visit schedule and the activities within this scope are given in Annex 3. The program given

in Annex 3 should be considered only as an example, and the site visit plans should be rearranged for each team and institution to allow the realization of an effective evaluation. **The duration of visits included in this guide may be increased by the evaluation team, if necessary, depending on the size of the institution.** Additionally, if needed, meetings with the institution's senior management may be held remotely via an online platform within the scope of the site visit.

Meetings held within the scope of pre-visit and site visits cannot be recorded by any means. The academic and administrative units to be visited in the evaluation process are decided considering the number of students and staff and the unit's strategic importance for the institution. It is paid attention that the fundamental areas (Sciences, Social Sciences, Medicine, Health Sciences, Engineering, Education, Fine Arts, and so on) depending on the structure of the institution are visited homogeneously.

4.3.3 Evaluation Team's Arrival Day

1) Review coordinator informs the contact person of the arrival of the evaluation team in the country. On the day of arrival, the institution's officials other than the contact person do not meet with the evaluation team and review coordinator.
2) The team leader, team members and the review coordinator come together in the place of accommodation or at the meeting hall reserved for them and the team conducts the first team meeting of the site visit. Discussions at the meeting focus on the following topics:
    a) Revision of the works in the scope of the pre-determined site visit schedule created in cooperation with the institution with the clear expression of the timing and objectives,
    b) Ensuring consistency within the team regarding the evaluation of the institution by considering the THEQC IIAP Evaluation Criteria,
    c) Reviewing the possible questions to be raised by the team members related to the site visit schedule, and
    ç) Sharing the duties and responsibilities of the review coordinator and observers, if any, in the site visit activities with the evaluation team.

4.3.4. The First Day

1) The team leader, team members and review coordinator come together in the meeting room reserved for them and start the site visit.
2) Evaluation team and review coordinator may not visit the offices of the institution's senior management during the site visit. They hold the interviews in the meeting room reserved for them.
3) It is expected that the meeting room reserved for the team has equipment such as internet access, computer, projector, printer, and paper shredder and that the institution provides food and beverages limited to water, tea, coffee and appetisers.
4) The dietary preferences of the team members for meals and appetisers should be notified to the contact person by the review coordinator.
5) Cameras and security devices used for security purposes, if any, in the meeting room, should be physically covered during the evaluation to ensure meeting confidentiality.
6) Evaluation team first holds a short meeting with the contact person and the head of the institution's senior management. The general approaches of the institution towards the THEQC IIAP Evaluation Criteria are discussed in this meeting. In addition, the issues related to the operation of the institution in the general framework that cannot be fully explained or clarified in the ISERs are put on the agenda by the team leader to be clarified. Contact person and the head of the institution's senior management also specify the issues, if any, which they especially regard as a significant point for the site visit. *[Thirty-minute meeting is ideal for this.]*
7) The evaluation team has a meeting with the chairperson of the Board of Trustees at foundation HEIs. *[Forty-five-minute meeting is ideal for this.]*

> "The evaluation team submits requests for supporting information, documents and evidence other than the ISER evidence to the contact person via the review coordinator at the end of each day. During the site visit, evidence is uploaded electronically to the cloud drive provided by THEQC. Additional information and evidence requested during the site visit must be prepared and submitted by no later than noon on the day before the exit statement. The institution's access to the cloud drive is terminated before the final meeting."

8) The evaluation team holds a meeting with the members of the institution's unit responsible for quality. The unit responsible for quality prepares a presentation providing up-to-date information on several factors. These factors include the institution's quality assurance system formed in line with the THEQC IIAP Evaluation Criteria, the role of the unit responsible for quality in the system and decision-making processes, the institution's strategic objectives and the role of these objectives in regional/national development goals, the institution's management approach in the governance and quality, learning and teaching, research and development, and service to society processes, the institution's outlook on continuous improvement, the outcomes obtained in this scope, and other common aspects related to all units in the institution. After the presentation, a questions-and-answers session is held between the evaluation team and the unit members. *[One-hour meeting is ideal for this.]*
9) The evaluation team meets with the members of the senate and the board of directors, if any. In this meeting, the quality assurance system established by the institution taking into account the THEQC IIAP Evaluation Criteria, the strategic objectives of the institution and the place of these objectives in the regional/national development goals, the management approach of the institution in the governance and quality, learning and teaching, research and development, and service to society processes, the institution's continuous improvement approach, and the results obtained within this scope are discussed. *[One-and-a-half-hour meeting is ideal for this.]*

> **"In focus group discussions, attention should be paid not to have subordinate and superior relations between the participants and it should be ensured that the participants represent the differences of the relevant focus group."**

10) In the afternoon, faculty visits take place. When deemed necessary, depending on the institution's size, the evaluation team can be divided into groups of a minimum of two people and simultaneously visit different faculties/academic units. During these visits, the dissemination of the quality processes to the unit(s), the objectives of the unit(s) and the place of these

objectives in the strategic goals of the institution, the involvement of the stakeholders in the processes, the learning outcomes of the programs in the unit(s), activities within the scope of R&D and continuous improvement works are discussed with the unit managers/directors (dean, assistant dean, faculty secretary, and so on). Evaluation team members raise issues that are not clearly understood about the operation of the unit(s) and ask for further clarification. *[Forty-five-minute meeting is ideal for this.]*

11) Evaluation team members meet academic staff members of the faculty. Topics like the relationship of the academic staff with the governing body, their role in the quality assurance system, the recruitment procedures, staff development and motivation are all discussed during the meeting. The focus group of academic staff is expected to include a sufficient number of members (e.g., 8-10 people) and be inclusive enough to represent all parts of the faculty to ensure effective use of the planned time for the meeting. Deans and assistant deans should not attend this meeting. Only the academic staff should attend this meeting. *[One-hour meeting is ideal for the meeting.]*

12) Evaluation team members meet with the faculty's students (associate, bachelor's, master's, doctoral, post-doc). It is ensured that guest students, if any, and international student representatives (preferably at least one student who has come from Türkiye to study) attend the meeting. In the meeting, students are asked to provide information based on their own experiences on issues such as involvement in decision-making processes, quality assurance system, educational services and student support services. The group of students interviewed is expected to have an appropriate number (8-10 people) and inclusiveness to represent all parties in order to ensure effective use of the time planned for the meeting. Students attending the meeting are expected not to have a full, part-time or partial employment relationship with the institution that creates a payment relationship other than their student relationship. *[One-hour meeting is ideal for this meeting.]*

13) The evaluation team conducts a meeting with the stakeholders of the higher education institution. Opinions of various institutions and organisations, non-governmental organisations and graduate representatives, who are among the external stakeholders of the evaluated institution, are taken into account. *[One-and-a-half-hour meeting is ideal for this.]*

14) At the end of the day, the evaluation team leader, members and the review coordinator come together in a meeting for an overall assessment of the day, share their impressions, and assign tasks for the second day. The duration of the meeting may vary depending on the number of members in the team and the number of units evaluated. The team leader chairs the discussions and meetings with effective time management. Evaluator notes from the first day are collected, compiled and recorded. Meeting notes should be carefully preserved in and out of the workplace for confidentiality.

4.3.5. The Second Day

1) Visits to the units selected among the academic units in the institution are continued. In addition to faculties, units that offer associate degree, vocational schools, and graduate schools may be included in the visit at this stage. When deemed necessary, depending on the institution's size, the evaluation team can be divided into groups of a minimum of two people and synchronously visit different units. Review coordinator and observers, if any, continue their duties with a different group in each session of the focus group interviews. During the visits, the team holds meetings with managers/directors to have information on the dissemination of quality processes to the unit(s), the objectives of the unit(s) and the place of these objectives in the strategic goals of the institution, the involvement of stakeholders in the processes, the learning outcomes of the programs within the units, and continuous improvement works. Evaluation team members raise issues that are not clearly understood regarding the operation of the unit(s) and may ask for clarification. *[Forty-five-minute meeting is ideal for this.]*
2) Evaluation team members meet the academic staff of the relevant unit. At the meeting, issues such as the relationship of academic staff with senior management, the role of the quality assurance system in the activities of teaching staff, the recruitment of the new staff, and the policies related to the development and motivation of the academic staff are discussed. The interviewed academic staff group is expected to have an appropriate number (8-10 people) to ensure the effective use of the planned time for the meeting, and it should be ensured that all parties of the academic unit are represented. Deans

and assistant deans should not attend this meeting. Only the academic staff should attend this meeting. *[One-hour meeting is ideal for this meeting.]*

3) Evaluation team members meet with the unit's students (associate, bachelor's, master's, doctoral, post-doc). It is ensured that guest students, if any, and international student representatives (preferably at least one student who has come from Türkiye to study) attend the meeting. In the meeting, students are asked to provide information based on their experience on issues such as involvement in decision-making processes, the quality assurance system, educational services, and student support services. The group of students interviewed is expected to have an appropriate number (8-10 people) and inclusiveness to represent all parties in order to ensure effective use of the time planned for the meeting. Students attending the meeting are expected not to have a full, part-time or partial employment relationship with the institution that creates a payment relationship other than their student relationship. *[One-hour meeting is ideal for this meeting.]*
4) The evaluation team leader, members and the review coordinator meet for a short consultation meeting during the lunch break.
5) The team meets with the managers/directors of the administrative and support services units and exchanges information on the dissemination of quality processes to the units, the objectives of the unit(s) and the place of these objectives in the strategic goals of the institution, the involvement of stakeholders in the processes, and continuous improvement efforts. The evaluation team raises unclear issues regarding the operation of the units and asks for further clarification *[One-hour meeting is ideal for this].*
6) Evaluation team members meet administrative and support services staff of the units. Issues such as the relations of the administrative staff with the managers/directors, their role in the quality assurance system, the professional development and motivation of the administrative staff, and in-house communication are discussed at the meeting. *[One-hour meeting is ideal for this.]*
7) The evaluation team meets with the managers/directors of the research unit(s) to evaluate the research and development activities at the institution. The units' objectives, the role of these objectives in the institution's strategic goals, stakeholder involvement in the processes, quality processes, and continuous

improvement works are discussed. Evaluation team members raise issues that are not clearly understood about the unit(s)' operation and ask for further clarification. *[Ninety-minute meeting is ideal for this.]*

4.3.6. The Third Day

1) The third day is reserved for the evaluation team to hold consultation meetings and prepare for the accreditation report and the final meeting, which will be the final activity of the site visit.
2) During the third day's work, the evaluation team may, if deemed necessary, have a short discussion with the contact person on issues that need to be clarified regarding the overall external evaluation process. In this meeting, the team may request additional evidence and an explanation of the processes from the contact person, or ask her/him to arrange another short meeting with the main responsibles of the unit responsible for quality.
3) As a part of the third-day work, the evaluation team may, if needed, visit places that it did not have a chance to visit in the first two days, but which the team deems necessary to visit.
4) Team leader writes the exit statement to be presented verbally at the final meeting, with the contribution of the evaluators. The exit statement covers the institution's strengths, the processes whose improvement process has been launched but has not yet been completed, the areas for improvement, and explanations about these issues. Any area for improvement should be explained briefly and precisely. Observations and suggestions for improvement may also be included in the exit statement. Care is taken to ensure that the issues to be stated in the exit statement contribute to the development and improvement of the institution.
5) It is recommended that the notes of the team leader and the evaluators are collected regularly at the end of each day during the visit process to facilitate the writing phase of the exit statement. The exit statement should be a text on which all team members agree. The goal, scope, general format, and framework of the evaluation process are briefly mentioned in the exit statement. Due care should be taken to ensure that the issues specified in the exit statement contribute to the development and improvement of the institution and that the language used is clear and understandable. It should not be missed out that the statements to

be included in this document will constitute the basis for the IIAR, which will be written later. In this regard, expressions that will contradict or create an inconsistency with the IIAR should not be included in the exit statement.

> "During and after the final meeting, the evaluation team may not ask for additional evidence and documents. After this stage, any additional evidence and documents submitted by the institution to the evaluation team will not be considered in the evaluation."

4.3.7. The Fourth Day

1) At the end of the site visit, a *final meeting* is held with the participation of the institution's senior management and the internal and external stakeholders to be invited by the senior management before the evaluation team leaves. To increase the contribution of the final meeting to the institution, it is recommended that comprehensive participation in the meeting should be ensured. *The exit statement* includes the general evaluation of the institution within the scope of learning and teaching, research and development, service to society and governance processes based on the impressions of the evaluation team after the ISER examination, pre-visit, and site visit. In this context, the strengths and areas for improvement regarding the existing quality assurance system and how the quality assurance system is operated for each process, improvement suggestions and observations within this scope are shared one by one. At the end of the statement, if there are questions from the institution's senior management, a short questions-and-answers session may also be held. At the end of the final meeting, the process steps to be followed after the site visit are explained and the meeting is concluded jointly by the senior manager of the institution and the team leader. *[One and a half/two hours is recommended for the meeting.]*
2) Upon the completion of the final meeting, the evaluation team leaves the institution.
3) The evaluation team is expected to fill in the "360-degree evaluation survey" on the Evaluator System to evaluate the team leader, team members, and review coordinator within five (5) working days after the end of the site visit.

> "Evaluation teams are not allowed to accept gifts from the institution, except for institutional souvenirs of low monetary value or simple gifts of special cultural significance to the institution."

4.4. Writing of the IIAR and Post-Visit Activities

Post-visit activities start with the completion of the site visit and end with the approval of the IIAR by THEQC and the publication of the accreditation decision based on this report.

After the site visit:

1) Evaluation team writes the draft IIAR considering its consistency with the content of ISER, the information and documents requested from the institution and the interviews held during the site visit, the places seen, the documents examined, the information obtained, and the exit statement; uploads the draft IIAR to the Evaluator System within twenty-one (21) days following the site visit, and forwards it to the review coordinator.

   The team leader is responsible for the completion of the IIAR. However, one of the members may be appointed as a minute-taker for task-sharing purposes among team members and to support the team leader in writing the report. Reports are written through the Evaluator System. The points to be considered in the writing of the IIAR are explained below.

   - Evidence-Based Approach: Evaluations should be supported by evidence, away from assumptions or personal opinions.
   - Accuracy: It is important to use correct and appropriate terms in report writing. Concepts should be used as they are in the legislation. In addition, the definitions and terms, such as faculty, department, main academic discipline, commission, and the course names within the institution should be used accordingly.
   - Impartiality: Findings of the evaluation and the conclusions made as a result of the evaluation should be reflected without exaggeration, distortion or criticism.

- **Format:** A format set for the THEQC IIAP Evaluation Criteria should be followed at every stage of the report writing. Reports should be written between 40 to 50 pages following the format on the Evaluator System.
- **Style:** Constructive criticism should be included in the report, and expressions that will contribute to the development of the institution should be used. Praise and expressions of gratitude for the senior manager of the institution should not be used.
- **Grammar and Spelling**: Grammar and spelling rules should be taken into consideration in report writing and complicated linguistic structures should be avoided. A clear and concise language should be preferred.

2) Review coordinator checks the draft IIAR in terms of completeness, consistency of the text and maturity levels, clarity, and language within ten (10) days, forwards correction suggestions, if any, to the evaluation team and ensures that they are implemented within ten (10) days following the report's submission.

3) The pre-reviewed draft IIAR is forwarded to the institution by the review coordinator to receive feedback including factual errors.

4) Institution submits the comparison chart (Annex 5) containing the correction requests, including factual errors in the draft IIAR submitted by the evaluation team, to the team within twenty-one (21) days. At this stage, the institution may not provide new evidence. If the team does not receive any response within this period, it means that all evaluations in the report are automatically accepted by the institution and the right to ask for correction is waived.

5) Evaluation team uploads the draft IIAR and, if any, a comparison chart containing the report text before and after the institution's feedback and the reasons for changes to the Evaluator System within twenty-one (21) days following the institution's response to the draft IIAR.

5. Consistency Work

1) While conducting the consistency work, the Commission checks the draft IIAR to ensure consistency between evaluations conducted in different institutions in the same evaluation period and/or between years.
2) The Commission checks the IIAR and submits it and a consistency report to the Council within fifteen (15) days.

The final IIAR is sent to the institution by THEQC as an attachment to an official letter and is published on the websites of THEQC and the institution, thereby presenting it to the public. In addition, the decision made by THEQC regarding the IIAP and a reasoned decision letter are also forwarded to the institution and announced on the website.

6. Decision

The accreditation decision is taken by THEQC considering the IIAR written for the institution evaluated within the scope of the IIAP. In the IIAP to be carried out within the scope of the THEQC IIAP Evaluation Criteria, the evaluation will be based on the following scoring system:

- 300 points for Governance and Quality heading,
- 400 points for Learning and Teaching heading,
- 200 points for Research and Development heading, and
- 100 points for Service to Society heading, 1000 points in total.

The maturity level of each sub-criterion will be determined by the evaluation team within the scope of the IIAP. The general approach to the maturity levels of the sub-criteria is as follows: In the evaluation, the maturity level of "5" corresponds to the full score, and the maturity level of "1" corresponds to the lowest score. The Institutional Accreditation Program's Scoring Chart is included in the IIAP Evaluation Criteria document.

As a result of the maturity level evaluation of the sub-criteria, the following decisions may be taken by THEQC:

- Grant of accreditation, if the score is 600 and above,[1]
- Postponement of accreditation decision, if the score is between 550 and 599 points,
- Refusal of accreditation, if the score is less than 550 points.

6.1. Grant of Accreditation

An accreditation granted is valid for five years from the date of the Council decision. IIAR and decision letter are shared with the public.

[1]Grant of accreditation decision may not be taken for institutions that have not yet achieved maturity level 3 for each sub-criterion under the Learning and Teaching heading, even if their total score is 600 or above.

6.2. Postponement of Accreditation Decision

If the accreditation-granting level is partially met with the above-stated score, the Council may postpone the accreditation decision once for a maximum of twelve (12) months. The postponement period starts from the date of the Council decision. Should the accreditation decision be postponed, the institution forwards an improvement report to THEQC until the end of the postponement period at the latest.

In case of the postponement of the accreditation decision, THEQC sends the IIAR, the postponement decision, and a decision letter including the duration of postponement and improvement suggestions to the institution. During the postponement period, IIAR is not published by THEQC or the institution. The institution prepares the improvement report, in which the institution's responses to the sub-criteria and maturity levels specified in the postponement decision of THEQC and the requested improvement works are documented by the institution, and submits it to THEQC within the specified period. THEQC forwards the improvement report to the evaluation team. The evaluation team examines whether the expected improvements have been realised by taking into account the findings in the improvement report through the Evaluator System and finalises the IIAR.

In the improvement report, the institution is only expected to explain the improvements in the areas specified in the decision letter. Improvements included by the institution in the report based on other sub-criteria are not evaluated. Institution should meet the conditions for the grant of accreditation before moving from the postponement of accreditation decision to the grant of accreditation.

The Council decides on the grant or refusal of accreditation, taking into account the decision of the Commission, within sixty (60) days from the date of receipt of the improvement report. The IIAR and the decision letter are disclosed to the public. The accreditation start date is the Council's approval date.

6.3. Refusal of Accreditation

Grant of accreditation decision may not be taken for institutions that have not yet achieved maturity level 3 for each sub-criterion under the Learning and Teaching heading, even if their total score is 600 or above. HEIs for which a refusal of accreditation decision was taken due to scoring less than 550 points may reapply to the IIAP at the end of the second year at the earliest following this decision. IIAR is

published after the appeal period or process against the decision to refuse accreditation or postpone accreditation decision is completed.

7. Appeals and Complaints

Separate processes are carried out for appeals and complaints against THEQC's activities. While appeals may be filed at an institutional level against the Council decisions, complaints may be filed individually or by a representative of the institution. Complaints can be related to dissatisfaction with any issue within the THEQC evaluation processes. Appeals and complaints are lodged with the Commission on Appeals and Complaints within the scope of the "Turkish Higher Education Quality Council Appeals and Complaints Directive". For detailed information about the operation of appeals and complaints processes, please read the "Turkish Higher Education Quality Council Appeals and Complaints Directive".

8. Process Evaluation and Improvement

A 360-degree evaluation approach is used in evaluation processes, in which the team members involved in the evaluation processes evaluate each other and the institution's manager/director evaluates the team members. For this, the forms on QAMIS are filled in by the evaluators and the institution within five (5) working days following the site visit and thus be submitted to THEQC.

In addition, the parties involved in the process are expected to evaluate the activities in all three phases of the process (pre-, during, and post-visit) and to submit their suggestions for improvement in written form to the Turkish Higher Education Quality Council.

In addition, the reports written by the review coordinator assigned by THEQC and the observers, if any, are also used for evaluation and improvement of the accreditation processes.

The information, statistical data, reports and decisions related to the institutions included in the IIAP may be used for THEQC's process improvement works and in institutional and academic publications.

9. Follow-up

Follow-up refers to the process in which HEIs, whose IIAP evaluations ended with the grant of accreditation, are included in the second year following the accreditation decision taken for them to maintain their accreditation.

9.1 Purpose and Scope

The purpose of the follow-up is to evaluate the development process in the relevant HEI after the external evaluation process and support the continuity of the institution's self-assessment. The main evaluation scope of the follow-up consists of the "areas for improvement" mentioned in the IIAR written after the institution's external evaluation.

9.2. Method

The follow-up is carried out through the "follow-up teams" to be formed through the Evaluator System. The follow-up team consists of at least three members, at least two members selected among the evaluators who took part in the accreditation evaluation process of the relevant institution. One of the follow-up team members is a student evaluator. The evaluators in the follow-up team should not have any conflict/coincidence of interest with the HEI to be included in the follow-up process.

9.3. Process

The follow-up process consists of four basic stages: ISER writing, online site visit, writing of the follow-up report, and approval and publication of the report. The activities and processes carried out within the scope of the follow-up process are:

1. Institutions to be included in the follow-up process are submitted to the Council's approval by the review coordinator.
2. An information meeting is held with the institutions included in the follow-up process.
3. Institutions involved in the follow-up process write an ISER, which includes the improvements regarding their areas for improvement and findings communicated to them in the decision letter and the substantive changes in their institution that occurred, within sixty (60) days after the Council decision to include them in the process was submitted to the institution and forwards it to THEQC.

4. Review coordinator stylistically examines whether the ISER is written in accordance with the IIAP ISER Writing Guide and performs spelling checks within ten (10) days.

5. Follow-up teams are formed through the Evaluator System.

6. Statements regarding the absence of conflict or coincidence of interest between the relevant HEIs and the follow-up team members are received via the Evaluator System.

7. Follow-up team's online site visit schedule, including the participants, is determined by the evaluation team leader, review coordinator, and contact person.

8. An online site visit is conducted.

9. The follow-up team writes a follow-up report after the online site visit. Commission submits the final report to the Council for approval.

10. Follow-up report is published by THEQC on its website and shared with the related stakeholders and the institution.

9.4. Follow-up Report

Follow-up report is written through the Evaluator System by the follow-up team. Within ten (10) days following the completion of the site visit, the follow-up report is written by the follow-up team and then forwarded to THEQC. The follow-up report includes evaluations on the following issues:

- Improvement work carried out in the institution regarding the areas for improvement specified in the IIAR,
- If there are no improvement practices regarding areas for improvement, the reasons for them,
- Evaluations made by the follow-up team, except for the matters included in the IIAR,
- Any substantive change in the accredited institution that affects its legal entity, administrative structure, educational system and methodology, and its compliance with the Criteria.

10. Renewal of Accreditation

Institution that wants to renew its accreditation must reapply twelve (12) months before the end of its accreditation validity period by following the international institutional accreditation process specified in this guide.

During the evaluation work for the institution whose application for renewal of accreditation is accepted, the previous IIAR and Follow-up Report and, if any, the substantive changes made by the institution during the accreditation process are also considered.

Application dates for renewal of accreditation should be followed by the institution. THEQC may not be held responsible for any loss of rights that might arise from failure to submit applications on time.

ANNEXES AND REFERENCE DOCUMENTS

The legislative documents that will be used with this version of the Guide are:

Regulation on Higher Education Quality Assurance and the Turkish Higher Education Quality Council (Last Amendment: Official Gazette-13/7/2023-32247)

THEQC International Institutional Accreditation Program Directive (16.04.2024)

THEQC Appeals and Complaints Directive

Directive on the Turkish Higher Education Quality Council Student Member and Students Commission

The reference documents and their versions that will be used with this version of the Guide are:

IIAP ISER Writing Guide v.1.0a

THEQC IIAP Evaluation Criteria v.1.0a

The annexes and their versions that will be used with this version of the Guide are:

ANNEX 1) THEQC Code of Ethics v.3.0

ANNEX 2) International Institutional Accreditation Program Agreement v.1.0a

ANNEX 3) IIAP Site Visit Schedule Samples for Evaluation Teams v.1.0a

- A- Evaluation Team Pre-Visit Schedule Sample
- B- Evaluation Team Site Visit Schedule Sample
- C- Follow-up Team Visit Schedule Sample

ANNEX 4) Request for Acknowledgement v.1.0a

ANNEX 5) Comparison Chart v.1.0a