



香港學術及職業資歷評審局  
Hong Kong Council for Accreditation of  
Academic & Vocational Qualifications

# Guidance Notes on Programme Area Accreditation

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# 1. Introduction

- 1.1 These Guidance Notes contain the accreditation criteria and standards for Programme Area Accreditation (PAA) of the Four-stage Quality Assurance (QA) Process. They give an overview of the PAA timeframe and procedures and suggest possible types of evidence that can be presented in support of a PAA application. These Guidance Notes also serve as a reference for the Accreditation Panels (the Panels).
- 1.2 PAA is Stage 3 of the Four-stage Quality Assurance Process. With PAA status, Operators may develop and operate learning programme(s) within an approved programme area at the approved Qualifications Framework (QF) level or lower levels without going through Learning Programme Accreditation (LPA) and Learning Programme Re-Accreditation (re-LPA) by Hong Kong Council for Accreditation of Academic & Vocational Qualifications (HKCAAVQ). Qualifications developed within the approved programme area(s) can be entered, during the validity period, into the Qualifications Register (QR).
- 1.3 A new classification system rationalising the Areas of Study and Training from 21 to 14 has been developed based on a review of classification of qualifications and learning programmes on the QR by the Liaison Committee on Quality Assurance (LCQA) under the Education Bureau. To provide guidance for the definition of the scope of programme area, HKCAAVQ has developed Sub-areas for each Area of Study and Training. Operators can refer to the *New Classification of Areas of Study and Training in the Qualifications Register (QR), List of Sub-areas and Illustrative Scope Statements* available on HKCAAVQ website at [http://www.hkcaavq.edu.hk/files/services/accreditation/four-stage-qa-process/New\\_Classification\\_System\\_e.pdf](http://www.hkcaavq.edu.hk/files/services/accreditation/four-stage-qa-process/New_Classification_System_e.pdf). A programme area can be a whole Area of Study and Training, a Sub-area in full or a Sub-area in part (see also section 3).
- 1.4 PAA status will only be granted to mature Operators demonstrating a track record of managing and assuring the quality of their learning programmes within the approved scope. To apply for PAA, Operators should also conduct a comprehensive and critical self-evaluation against the accreditation criteria and standards (see Section 5). It helps Operators assess their readiness for seeking PAA and prepare the Accreditation Document. The *Guide to Preparing an Accreditation Document for PAA through a Self-evaluation Process* is available at **Annex 1**.

## 2. Eligibility

2.1 The purpose of PAA is to determine whether Operators have well-balanced and robust internal quality assurance systems to self-monitor and accredit their own learning programmes. This assessment will be based on Operators' track record of developing and delivering their accredited learning programmes, and self-monitoring and assuring the standards of those learning programmes within the defined scope of the programme area. Operators may apply for PAA in the Area of Study and Training of their accredited learning programmes subject to the following eligibility criteria:

- (i) Seven years of operation after (a) successful LPA / re-LPA by HKCAAVQ, or (b) successful accreditation by a QA body recognised by HKCAAVQ; or
- (ii) Five years of operation after successful LPA / re-LPA by HKCAAVQ, with no pre-conditions nor requirements concerning the quality aspects of the outcome-based learning programme(s), including:
  - Achieving the programme objectives and delivering the intended learning outcomes that meet the QF standards, with reference to the Generic Level Descriptors (GLD).
  - Aligning the curriculum as well as teaching / training and learning strategies and procedures with programme objectives for the purpose of delivering the intended learning outcomes for the target students / learners.
  - Adopting valid and reliable assessment strategies and procedures in measuring the students' / learners' standard of learning.
  - Ensuring the outcome standard of the programme via an effective internal quality assurance system.

### 3. Scope of Programme Area

- 3.1 Operators should specify the proposed programme area(s) and define the scope of the proposed programme area(s) when applying for PAA. During the accreditation process, they must demonstrate how, among other things, their accredited learning programmes (i.e. those programmes satisfying the eligibility criteria in Section 2.1(i) or 2.1(ii)), staff expertise and resources are commensurate with the scope of the proposed programme area(s).
- 3.2 The following guiding principles should be used by Operators, Panels and HKCAAVQ to define the scope of a programme area:
- (a) A programme area can be a whole Area of Study and Training, a Sub-area in full or a Sub-area in part (one subject matter or a combination of subject matters under the same Sub-area) but it cannot be a combination of Areas of Study and Training or Sub-areas;
  - (b) The Illustrative Scope Statement of each Sub-area should be used as a reference for defining the proposed scope of a programme area;
  - (c) Should the proposed programme area only partially cover a Sub-area, the examples of subject matter(s) covered in the Sub-area should be referred to;
  - (d) There should be flexibility within an approved programme area to allow innovative development of learning programmes;
  - (e) Creation of new sub-areas not included in the published list, if deemed necessary, should be fully justified by Operators;
  - (f) As a standing practice, Panels should consider the scope of a programme area based on individual merits. In cases where the full scope of a Sub-area is considered to be too broad for an Operator, the Panel can recommend a limited scope of the Sub-area to be granted as the programme area; and
  - (g) When an Operator operating inter-disciplinary learning programmes applies for PAA status, whether it should apply for PAA status only in the major programme area, or in all programme areas covered by its learning programmes should be considered on a case-by-case basis.
- 3.3 HKCAAVQ has established the Standing Panel on PAA Scope to advise on the scope of a programme area should there be disagreement between HKCAAVQ and an Operator under the following circumstances:
- (a) when drawing up a Service Agreement on the basis of the track record of the programme area(s) for which an application is made; and
  - (b) when monitoring the entry of a new learning programme under the approved PAA status on the QR.

## 4. Institutional Review and Discipline Review

- 4.1 PAA comprises two levels of review: Institutional Review (IR) and Discipline Review (DR). IR assesses Operators' institutional competencies; and DR examines the development and operation of learning programmes under the proposed programme area in their associated academic discipline / faculty or operating unit. Operators are required to demonstrate that learning programmes are operated and managed in accordance with institutional policies and processes.
- 4.2 Operators applying for PAA for the first time are required to undergo both IR and DR at the same time. In subsequent PAA applications, the operator may be exempt from IR when a PAA IR has been conducted within the last five years. This will be considered as part of the preparation of the Service Agreement.

## 5. Accreditation Criteria and Standards

- 5.1 To complete PAA successfully, Operators have to demonstrate with supporting evidence that they meet the standards under the criteria specified below. The evidence should be presented in the Accreditation Document and through meetings and/or a site visit organised by HKCAAVQ with the Panel.
- 5.2 The Four-stage QA Process is learner-centred. In a PAA application, Operators should demonstrate that they have taken into account the quality of students' / learners' learning experience in different aspects, including organisational structures, policies, QA systems, support services, learning and teaching / training.
- 5.3 The criteria and standards for Institutional Review are specified below. **Annex 2** shows a list of possible sources of evidence in relation to each criterion.

### (i) Governance and Institutional Structure

The Operator's governing body must be responsible for the formulation of its educational / training purpose, the quality, integrity and financial stability and sustainability in an appropriate, effective and efficient manner. The governing body must monitor the performance of the Operator against its planned strategies and operational targets consistent with its legal and social responsibilities and obligations. There should be an appropriate institutional structure to execute the directions laid down by the governing body.

### (ii) Overall Institutional Management

The Operator's management, financial control and quality assurance arrangements must be sufficient and adequate to manage its existing operations and to respond to development and change.

### (iii) Strategic Plan

The Operator must have short-term and long-term strategic plans which are both responsive to the aims and objectives of the whole institution and teaching / training goal of the discipline / industry, as well as feasible in terms of finance, resources, teaching and learning policies, quality assurance and staffing.

### (iv) Financial Viability and System

The Operator must be financially viable in order to sustain its institutional operation and provision of learning programmes. Its financial statement and other records must show the source(s) of funding, income, as well as expenditure. The Operator must demonstrate that rigorous planning and allocation of resources are applied to its operations, and that there are plans for contingencies.

**(v) Quality Assurance (including Programme Approval, Monitoring and Review)**

The Operator must have a system with clear policies and procedures in place to monitor the quality and standards of the learning programmes and demonstrate that these procedures are effective in meeting the Operator's purpose (mission) and intended learning outcomes and objectives of its learning programme(s), and in determining the QF level(s) of the outcome-based learning programmes. The system must include robust processes of programme approval, monitoring and review.

**(vi) Staffing Policies**

The Operator must have a team of teaching and support staff who are qualified and competent for the effective delivery of their outcome-based learning programmes and education / training operation.

**(vii) Resources and Support Services**

The Operator must have adequate physical resources for the delivery of its learning programmes and these resources must be effectively deployed.

5.4 The criteria and standards for Discipline Review are specified below. **Annex 2** shows a list of possible sources of evidence in relation to each criterion.

**(i) Discipline-/Industry-level Management**

The Operator's management, financial control and quality assurance arrangements at the discipline / industry level must be sufficient to manage existing operations within the proposed programme area and to respond to development and changes.

**(ii) Academic / Industry-level Development Plan**

The Operator must have a developmental blueprint commensurate with its overall strategic plan developed through an iterative process involving academic / industry-level development and resource decisions under institutional leadership.

**(iii) Programme Development and Management**

The Operator must have its educational objectives and learning outcomes set at appropriate levels, in a clear and consistent manner. It must have effective mechanisms to ensure that its learning programmes meet those objectives. It must also have an ongoing process in place for monitoring the learning programmes. If cross-disciplinary learning programmes are included in the strategic plan, the Operator should demonstrate the operation of a robust QA mechanism and the arrangements for sharing of resources for cross-disciplinary academic planning, management, delivery, monitoring and review.

**(iv) Admission, Progression and Assessment**

The Operator must have valid and effective systems and procedures for admitting students / learners, monitoring of their progress, and assessing their achievement.

**(v) Teaching and Learning Policies**

The Operator must have a system in place for the formulation and implementation of effective teaching and learning policies to ensure the quality of the intended learning outcomes.

**(vi) Scope of Programme Area**

The Operator must have a sound track record in planning and delivering learning programmes in the programme area under consideration. Its learning programmes must have a clearly defined scope which is relevant to its mission and within its capability and financial means for further development.

**(vii) Justification of QF Level**

The Operator must ensure that the structure, content and learning outcomes of the intended programme area match the classifications under the General Level Descriptors of QF.

**(viii) Discipline-/Industry-level Staffing and Staff Development**

The Operator must have adequate teaching and support staff with the qualities, competence, qualifications and experience necessary for the effective delivery of its learning programmes. The qualifications should be consistent with prevailing government regulation.

**(ix) Discipline-/Industry-level Resources and Support Services**

The Operator must have adequate physical resources for the delivery of its learning programmes and these resources must be effectively deployed.

## 6. Timeline and Process

6.1 It normally takes 20 to 24 weeks to complete a PAA after Operators have submitted their Accreditation Document. The accreditation schedule will be specified in the Service Agreement signed by HKCAAVQ and the Operator.

6.2 The following table shows an indicative timeline of the main steps of a PAA including both IR and DR.

Time	Main Steps
--	<p><b>Initial consultation</b></p> <ul style="list-style-type: none"> <li>• An Operator consults HKCAAVQ at least six months before submitting a formal application.</li> <li>• The Operator indicates its intention to seek accreditation by returning a signed Statement of Intent.</li> <li>• HKCAAVQ reviews the scope of the proposed programme area(s).</li> <li>• If there is disagreement between HKCAAVQ and the Operator about the scope of the proposed programme area(s), HKCAAVQ may seek advice on the scope of the proposed programme area(s) from the Standing Panel on PAA Scope.</li> </ul>
--	<p><b>Service Agreement, Accreditation Document and panel formation</b></p> <ul style="list-style-type: none"> <li>• HKCAAVQ will issue a Service Agreement. After signing the Service Agreement and making payment for the initial / full accreditation fee, the Operator is required to submit the Accreditation Document on or before the date specified in the Service Agreement.</li> <li>• HKCAAVQ forms a Panel.</li> <li>• The Operator checks conflict of interests of potential panel members and confirms with HKCAAVQ in writing.</li> </ul>
Weeks 1-4	<p><b>Review of Accreditation Document</b></p> <ul style="list-style-type: none"> <li>• HKCAAVQ examines the Accreditation Document and the state of readiness of the Operator.</li> <li>• The Panel reviews the Accreditation Document.</li> </ul>
Weeks 5-10	<p><b>Panel's initial comments and Operator's response</b></p> <ul style="list-style-type: none"> <li>• The Panel provides initial comments on the Accreditation Document and requests additional information or clarifications as needed.</li> <li>• The Operator provides a written response to the Panel's initial comments and further information as requested.</li> </ul>
Week 12	<p><b>Site visit or meeting</b></p> <ul style="list-style-type: none"> <li>• Site visit by the Panel or meeting at the HKCAAVQ office between the Operator and the Panel.</li> <li>• Post-visit or post-meeting follow-up, if applicable.</li> </ul>

Weeks 13-23	<p><b>Interim and accreditation reports</b></p> <ul style="list-style-type: none"> <li>• HKCAAVQ issues an interim report based on the Panel's recommendations.</li> <li>• The Panel prepares the accreditation report.</li> <li>• HKCAAVQ finalises the accreditation report after considering the Panel's recommendations. HKCAAVQ makes the final determination.</li> <li>• The Operator checks factual accuracy of the accreditation report.</li> </ul>
Week 24	<p><b>Notification of outcome</b></p> <ul style="list-style-type: none"> <li>• HKCAAVQ issues the accreditation report.</li> </ul>
--	<p><b>Follow-up actions</b></p> <ul style="list-style-type: none"> <li>• If pre-conditions and/or requirements are stipulated by HKCAAVQ in respect of the granting of PAA status, the Operator must provide evidence of having fulfilled them by the specified dates.</li> </ul>

## 7. Possible Outcomes

7.1 In its capacity of the Accreditation Authority provided for under the Accreditation of Academic and Vocational Qualifications Ordinance (AAVQO) (Cap 592) and the HKCAAVQ Ordinance (Cap 1150), HKCAAVQ makes an accreditation determination after considering the Accreditation Panel's recommendation(s) (taking into account the Terms of Reference of the accreditation exercise as specified in the signed Service Agreement) and the available evidence. The possible determinations of an accreditation exercise are:

- Approval
- Approval with conditions (pre-conditions and/or requirements)
- Non-approval

Where approval is granted, a validity period of five years will be specified in the accreditation report.

7.2 Any pre-condition(s) that forms part of the determination must be fulfilled prior to the commencement of the validity period imposed on a PAA status. Requirement(s) must be fulfilled by the stipulated deadline(s) within the validity period. Fulfilment of the pre-condition(s) and/or requirement(s) is **mandatory for obtaining and maintaining a valid PAA status**.

7.3 A recommendation can also form part of the accreditation determination. It has a continuous improvement purpose and is directly related to the accreditation criteria. It is non-binding in nature, but Operators should explain if / how recommendations have been addressed at the time of Periodic Review.

7.4 Advice is an opinion of the Panel for the improvement of Operators. It provides for the sharing of good practice in education and training among peers. It is non-binding and Operators are not required to report follow-up actions taken, if any, to HKCAAVQ.

7.5 A Statement of Accreditation Approval confirming the granting of the accreditation status to Operators is issued together with the accreditation report when no pre-condition is stipulated, or upon satisfactory fulfilment of all of the pre-condition(s). In the latter case, the validity period will only start after satisfactory fulfilment of the pre-condition(s).

## 8. Possible Follow-up Action

- 8.1 If PAA is not successful, Operators' accredited learning programmes within the proposed programme area will continue to be subject to cycles of re-LPA by HKCAAVQ, before expiry of the validity period for maintaining the accreditation status.
- 8.2 If PAA is successful, the learning programmes under the approved programme area can enter / stay on the QR for the approved validity period in accordance with the terms and procedures stipulated by the QR Authority.
- 8.3 Operators with PAA status are required to provide an annual return to report the new learning programmes to be offered and the learning programmes to be phased out under the approved programme area(s). Annual returns are vetted by HKCAAVQ.
- 8.4 Operators with PAA status are allowed to offer inter-disciplinary programme(s) if the leading component of the programme(s) is within the approved PAA scope. The "leading" subject matter should take up the majority of the learning credits or students' / learners' intended learning time. For the non-leading subject matter, Operators should have either PAA status or accredited learning programmes in the relevant subject matters.
- 8.5 To maintain the PAA status, Operators must have successfully completed a Periodic Review before the expiry of the validity period and be granted renewed PAA status. Operators must also seek prior approval from HKCAAVQ before introducing any substantial change(s). The *Guidance Notes on Periodic Review* and *Guidance Notes on Substantial Change to Accreditation Status* are available on HKCAAVQ website at <http://www.hkcaavq.edu.hk>.
- 8.6 Operators may lose their PAA status if the validity period expires before they can successfully complete a Periodic Review with a positive outcome, or if they introduce substantial change(s) without the prior approval of HKCAAVQ. HKCAAVQ also reserves the right to withdraw the PAA status before expiry of the validity period if Operators fail to maintain the standard as required under the approved PAA status.

## 9. Points to Note

- 9.1 These Guidance Notes are by no means exhaustive. They should be read in conjunction with the *Guidelines on the Four-stage Quality Assurance Process under the Qualifications Framework* available on HKCAAVQ website at <http://www.hkcaavq.edu.hk>.
- 9.2 These Guidance Notes supersede any previous guidance notes, other guidelines or handbook that HKCAAVQ or the former Hong Kong Council for Academic Accreditation (HKCAA) has published or issued previously regarding PAA.
- 9.3 As the QF evolves, these Guidance Notes will from time to time be revised. Whilst HKCAAVQ endeavours to ensure the accuracy and currency of the information contained in these Guidance Notes, HKCAAVQ reserves the right to delete, suspend or edit any information at any time in its absolute discretion without prior notice. To obtain the most up-to-date information, users refer to the electronic version of these Guidance Notes on HKCAAVQ website at <http://www.hkcaavq.edu.hk>.
- 9.4 Operators are expected to put in place arrangements to respond to new government initiatives, including for example, assignment of QF credit, Award Title Scheme, and credit accumulation and transfer. Operators are also required to demonstrate the implementation of the new government initiatives and their effectiveness.
- 9.5 For enquiries, please contact HKCAAVQ at [info@hkcaavq.edu.hk](mailto:info@hkcaavq.edu.hk), or by phone at (852) 3658 0000.

## **Guide to Preparing Accreditation Document for Programme Area Accreditation through a Self-evaluation Process**

1. When applying for PAA, Operators are expected to provide two sets of self-contained and evaluative documents: one for Institutional Review and one for Discipline Review – address each of the accreditation criteria.

### **Self-evaluation for PAA**

2. Operators are requested to complete a critical and comprehensive self-evaluation before undertaking PAA. The purpose of the self-evaluation is for the Operator to assess its own readiness to meet the PAA criteria, and to explore potential avenues where further improvement / enhancement can be made. Based on the findings of the self-evaluation, the Operator should implement the necessary improvement and changes to its structure, policies and process. It is important to note that PAA is conducted by HKCAAVQ on the basis that the Operator concerned undertakes self-evaluation, as part of its regular internal quality assurance process, on an ongoing basis. The self-evaluation process provides the basis of an Accreditation Document for HKCAAVQ's external quality assurance exercise.

### **Suggestions for Conducting Self-evaluation**

3. Self-evaluation lies at the heart of quality assurance processes, whether at the institutional level, programme area management or individual programme level. In the self-evaluation process, an Operator should evaluate its policies and processes, its performance and the effectiveness of its internal quality assurance at institutional and programme area levels. The process should be constructive with a view to identifying strengths and weaknesses, formulating improvement plans, and instituting enhancement.
4. It is advised that the process involves personnel at senior management and programme area levels, senior staff responsible for quality assurance, and other staff who are involved in or may be affected by any changes brought about by the PAA. It is always good practice to involve external stakeholders, as well as advisers, students / learners and employers in the self-evaluation. The duration of the self-evaluation stage depends on the circumstances of the individual Operators.
5. The self-evaluation provides an opportunity for an Operator to reflect on key questions such as:
  - What are the purposes / objectives and outcomes of its education / training provision? (What does it want to achieve?)
  - What are the processes and activities to support the achievement of its purposes and outcomes? (How does it achieve them?)
  - What are the indicators of success? (What outcomes have been achieved? How does it know it is doing well and let others know too?)

- How does it seek feedback and adjust itself for its future performance so as to ensure continuous enhancement at both the institutional and programme area levels? (How does it apply what it knows?)

### **Accreditation Document**

6. The Accreditation Document should provide background information about each criterion, present the findings of the self-evaluation, and incorporate documentary evidence to support the findings. **Annex 2** gives an overview of the use of documentary evidence and suggests some possible examples of evidence. Operators are advised to structure the Accreditation Document so as to address each accreditation criterion in the order in which they appear in the relevant HKCAAVQ Guidance Notes. In particular, the document should reflect on the threshold standards specified in the Guidance Notes.
7. The Accreditation Document should be presented in 2 parts: a **Main Submission** and **Supporting Materials**. As a rule of thumb, the document should be self-contained, include key facts and make cross references to data in supporting documents, with clear indication of the relevant parts in the supporting documents from which reference is drawn. It should also be analytical using the supporting materials to support the finding and claims as to how the standards are met and the enhancement initiatives planned. The document should be no more than 60-70 pages (excluding attachments / annexes) for the Institutional Review and the Discipline Review respectively.

### Sources of Evidence

1. The purpose of PAA is to determine whether Operators have well-balanced and robust internal systems to assure and self-monitor the quality of their own learning programmes. This assessment will be based on Operators' track record of developing and delivering their accredited learning programmes, and self-monitoring and assuring the standards of those programmes within the defined scope of the programme area. When preparing the Accreditation Document, the Operator is expected to enclose what it has been using for management purposes on a daily operational basis as evidence to support the analysis in the Accreditation Document. Documentary evidence with regard to each accreditation criterion should also include review procedures and mechanisms employed for continuous improvement.
2. The onus of providing sufficient and appropriate documentary evidence lies with the Operator. In preparing evidence, the emphasis should be put on the quality and relevance of the evidence and not on the amount. The following suggestions are for reference only, and are not meant to be exhaustive. As Operators are diverse in nature and adopt different operational modes, it is likely that their documentation also differs. Possible sources of evidence may apply to both academic and vocational Operators or to either academic or vocational Operators only. It is important that Operators provide evidence to demonstrate the implementation of the policies and processes and their effectiveness.

### Institutional Review

Accreditation Criteria	Possible Sources of Evidence
<b>(i) Governance and Institutional Structure</b>	<ul style="list-style-type: none"> <li>• Regulations, statutes or other instruments relevant to institutional governance</li> <li>• Institutional governance structure               <ul style="list-style-type: none"> <li>▪ Interrelationship between governing body and its committees</li> <li>▪ Terms of reference</li> <li>▪ Composition</li> <li>▪ Membership</li> <li>▪ Delegations schedules</li> <li>▪ Examples of decision-making, i.e. minutes and notes</li> </ul> </li> <li>• Annual reports or similar official publications</li> <li>• Governance reviews</li> </ul>
<b>(ii) Overall Institutional Management</b>	<ul style="list-style-type: none"> <li>• Organisational and management structures</li> <li>• Policies relating to management, financial control and quality assurance</li> <li>• Roles and responsibilities of key management personnel</li> <li>• Student / learner representation in management</li> </ul>

<b>(iii) Strategic Plan</b>	<ul style="list-style-type: none"> <li>• Long-term and short-term strategic plans</li> <li>• Resource plans in support of the strategic plans</li> <li>• Industry needs analysis in support of the strategic plans</li> <li>• Mechanism for monitoring and reviewing implementation of the strategic plans</li> <li>• Quantitative and/or qualitative performance indicators</li> </ul>
<b>(iv) Financial Viability and System</b>	<ul style="list-style-type: none"> <li>• Finance and budget policy</li> <li>• Policy on deployment of resources</li> <li>• Audited financial statements throughout a specified period<sup>1</sup></li> <li>• Latest management accounts</li> <li>• Approved budgets</li> <li>• Financial projection for the next five years</li> </ul>
<b>(v) Quality Assurance including Programme Approval, Monitoring and Review</b>	<ul style="list-style-type: none"> <li>• Quality assurance policy</li> <li>• Committees responsible for quality assurance, including programme development, management and review <ul style="list-style-type: none"> <li>▪ Interrelationship between committees</li> <li>▪ Terms of reference</li> <li>▪ Composition</li> <li>▪ Membership</li> </ul> </li> <li>• Process and procedures for programme approval, management and review</li> <li>• Academic / programme development policies</li> <li>• Industry needs analysis policies</li> </ul>
<b>(vi) Staffing Policies</b>	<ul style="list-style-type: none"> <li>• Policy and procedures for staff recruitment, deployment, appraisal, promotion and dismissal</li> <li>• Policy on workload and staff-to-student ratio</li> <li>• Policy on staff engagement in research and scholarly activities</li> <li>• Appointment criteria for staff with different capacities and at different ranks</li> <li>• Overall staff profile and justification for this profile (including academic, teaching / training, administrative and support staff)</li> <li>• Number of staff across different ranks (including academic, teaching / training, administrative and support staff)</li> <li>• Staffing plan for the next five years</li> <li>• Policy on staff development and support</li> <li>• Staff development activities undertaken throughout a specified period<sup>1</sup>, and the plan for the next five years</li> <li>• Annual budget for staff development for the next five years</li> <li>• Staff handbook</li> </ul>

<sup>1</sup> The period since an existing programme(s) was / were last accredited / re-accredited or in the past three years, whichever is longer. Existing programmes refer to those programmes satisfying criteria 2.1(i) and 2.1(ii).

**(vii) Resources and Support Services**

- Policy on deployment of resources for ensuring their effective allocation
- Overall student capacity of campus(es)
- Overview of facilities and equipment
- Mechanism for monitoring utilisation of key facilities and equipment
- Procurement plan for key facilities and equipment
- Policy on student / learner support services
  - Academic and pastoral counselling
  - Career planning / coaching
  - Financial aid and scholarship
  - Online learning system
  - Student amenities
  - Workplace learning and placement
  - Other support scheme(s)
- Overview of student / learner support services at institutional level (e.g. counselling, career guidance, academic support and mentoring, online learning system, student amenities, financial aid and scholarship)
- Student handbook

## Discipline Review

The evidence for Discipline Review should be provided at the level of an academic discipline / faculty or operating unit.

Accreditation Criteria	Possible Sources of Evidence
<b>(i) Discipline-/Industry-level Management</b>	<ul style="list-style-type: none"><li>• Management structure</li><li>• Committee structure<ul style="list-style-type: none"><li>▪ Interrelationship between committees</li><li>▪ Terms of reference</li><li>▪ Composition</li><li>▪ Membership</li></ul></li><li>• Student representation in management</li><li>• Latest financial statements</li><li>• Approved budgets</li><li>• Financial projection for five years</li><li>• Financial control mechanism</li><li>• Mechanism for deployment of resources</li></ul>
<b>(ii) Academic-/Industry-level Development Plan</b>	<ul style="list-style-type: none"><li>• Policy and procedures for addressing new educational developments (e.g. employability of graduates, credit accumulation and transfer, and QF credits)</li><li>• Quantitative and/or qualitative performance indicators and outcomes</li><li>• Mechanism for monitoring and reviewing implementation of the academic / industry plan</li><li>• Academic-/Industry-level plan for the coming five years</li><li>• Resource plan in support of the academic-/industry-level plan</li></ul>

<p><b>(iii) Programme Development and Management</b></p>	<ul style="list-style-type: none"> <li>• Committee structure <ul style="list-style-type: none"> <li>▪ Interrelationship between committees</li> <li>▪ Terms of reference</li> <li>▪ Composition</li> <li>▪ Membership</li> </ul> </li> <li>• Major improvements made to the quality of student learning throughout the specified period<sup>1</sup></li> <li>• Information relating to the existing programmes<sup>2</sup> and/or new programmes to be introduced under the programme area seeking accreditation <ul style="list-style-type: none"> <li>▪ Documents on programme development (for new programmes) and approval</li> <li>▪ Documents showing on-going monitoring of the existing programmes<sup>2</sup></li> <li>▪ Agreements with workplace learning / placement organisations</li> <li>▪ Summary of improvements made since the last accreditation / re-accreditation</li> <li>▪ Statistics of the programmes in the programme area, including number of applications, enrolment numbers, retention and drop out rates, graduation rate, etc.</li> <li>▪ Graduate survey results, including education / career pathways, attainment of professional qualifications, and employment for graduates of the programmes in the programme area throughout the specified period<sup>1</sup></li> </ul> </li> <li>• Overall articulation pathways of graduates and employment rate throughout a specified period<sup>1</sup> <ul style="list-style-type: none"> <li>▪ Statistics of professional qualifications obtained by graduates and employment rate throughout a specified period<sup>1</sup></li> </ul> </li> </ul>
<p><b>(iv) Admission, Progression and Assessment</b></p>	<ul style="list-style-type: none"> <li>• Student admission policy</li> <li>• Student selection policy and procedures</li> <li>• Assessment and progression policy including workplace learning / placement</li> <li>• Information relating to the existing programmes under the programme area seeking accreditation <ul style="list-style-type: none"> <li>▪ Profiles of students admitted to the programmes throughout the specified period<sup>1</sup></li> <li>▪ Award classification and GPA distribution</li> <li>▪ External examiner reports</li> </ul> </li> </ul>
<p><b>(v) Teaching and Learning Policies</b></p>	<ul style="list-style-type: none"> <li>• Policy on teaching / training and learning, including support for workplace attachment</li> <li>• Ratio of teaching / training staff to students</li> <li>• Curriculum of programmes in the programme area</li> </ul>

<sup>2</sup> That is, those programmes satisfying the eligibility criteria in Section 2.1(i) and 2.1(ii).

<p><b>(vi) Scope of Programme Area</b></p>	<ul style="list-style-type: none"> <li>• Scope of and rationale for the programme area</li> <li>• Track record of successfully developing and delivering accredited learning programmes in the programme area</li> <li>• Five-year plan for developing the programme area, including offering new programmes</li> </ul>
<p><b>(vii) Justification of QF Level</b></p>	<ul style="list-style-type: none"> <li>• Mechanism / tools for designing outcome-based programmes and determining QF levels</li> <li>• Sample programmes demonstrating the attainment of corresponding QF levels</li> </ul>
<p><b>(viii) Discipline-/Industry-level Staffing and Staff Development</b></p>	<ul style="list-style-type: none"> <li>• Staffing plan for the coming five years</li> <li>• Current staff profile (including academic, teaching / training and key administrative staff)</li> <li>• Roles and responsibilities of staff with different capacities and at different ranks</li> <li>• Workload of staff with different capacities and at different ranks</li> <li>• Scholarly and/or staff development activities undertaken throughout the specified period<sup>1</sup>, and staff development plan</li> <li>• Actual spending on staff development throughout the specified period<sup>1</sup>, the budget for staff development for the next five years, and the comparison between the two</li> </ul>
<p><b>(ix) Discipline-/Industry-level Resources and Support Services</b></p>	<ul style="list-style-type: none"> <li>• Resource allocation mechanism</li> <li>• Overview of facilities and equipment</li> <li>• Information relating to the existing programmes under the programme area seeking accreditation <ul style="list-style-type: none"> <li>▪ Utilisation rate of key facilities and equipment</li> <li>▪ Procurement plan for key facilities and equipment in support of the new programme development</li> </ul> </li> <li>• Mechanisms for reviewing the adequacy / effectiveness of facilities</li> <li>• Overview of student / learner support services at discipline-/industry-level (e.g. academic support, mentoring scheme and workplace learning)</li> <li>• Mechanisms for reviewing the adequacy / effectiveness of student / learner support services</li> <li>• Student handbook</li> </ul>

## Glossary

Term	Definition
Accreditation Document	Prepared by the Operator to substantiate its claim of meeting the required standards when undertaking any stage(s) of the Four-stage Quality Assurance Process.
Accreditation Panel	A panel consisting of specialists with expertise in the relevant discipline / industry / quality assurance issues. It is formed to assess the Operator / learning programmes in each stage of the Four-stage Quality Assurance Process under the guiding principle of 'peer review', with a HKCAAVQ staff member serving as the Panel Secretary.
Accreditation Report	A report issued by HKCAAVQ pursuant to section 5 of the AAVQO on completion of any stage of the Four-stage Quality Assurance Process after conducting the relevant accreditation tests.
Advice	Advice is an opinion of the Panel for the improvement of Operators and/or learning programmes. It provides for the sharing of good practice in education and training among peers. It is non-binding and Operators are not required to report follow-up actions taken, if any, to HKCAAVQ.
Condition	A condition forms part of the accreditation determination(s), to be fulfilled by the Operator prior to the start of the validity period of the accreditation status (pre-condition) or by a specified deadline(s) during the validity period (requirement).
Criteria	The elements for consideration in an accreditation exercise, as specified in the relevant set of guidance notes on individual stages of the Four-stage Quality Assurance Process. Each stage in the process has a specific purpose and therefore requires relevant evidence corresponding to the respective accreditation criteria and standards.
Discipline Review (DR)	The DR follows a successful Institutional Review in a PAA exercise. It scrutinises the Operator's QA competency in practice, on the basis of a focused study of the programme area concerned. The quality and standards of learning programmes, and the effectiveness of programme monitoring and review mechanisms within the programme area under consideration will provide reference on the Operator's competency in ensuring and determining whether the learning programmes in the programme area(s) concerned meet the standards required under the QF.
Institutional Review (IR)	The IR is the pre-requisite to Discipline Review of a PAA exercise. IR examines an Operator's overall governance, institutional structure, management, resources, academic environment and quality assurance. Through IR, the Operator demonstrates that it is competent to run an educational and training operation that meets its purpose as well as the quality requirements underpinning the QF via its systems, capacity and capability.
Learning Outcome	The knowledge, skills and application ability attained by a student / learner as a result of completing the learning programme.
Learning Programme	A programme of study or training defined by a curriculum (which may consist of one or more modules, units, subjects or courses or any combination of those elements) that includes, where the context permits, any proposed programme of such studies or training.

Operator	A person, school, institution, or organisation or other body, the whole or part of the business of which includes the operation of any learning programme or any part of a learning programme.
Periodic Review (PR)	The fourth stage of the Four-stage Quality Assurance Process. It periodically monitors and reviews Operators with valid PAA status, and is conducted at an interval of five years.
Pre-condition	A pre-condition forms part of the accreditation determination, to be fulfilled by the Operator prior to the start of the validity period of the accreditation status.
Programme Area	A programme area is an Area of Study and Training, a Sub-area in full or a Sub-area in part, one subject matter or a combination of subject matters under the same Sub-area; but not a combination of Areas of Study and Training or Sub-areas.
Programme Area Accreditation (PAA)	The third stage of the Four-stage Quality Assurance Process. It determines whether the Operator has well-balanced and robust internal quality assurance systems in place to self-monitor, as well as to ensure that operations meet their claimed objectives, and that learning programmes meet the Qualifications Framework standards in the specified programme area(s).
Qualification	A formal award given in recognition of the skills, knowledge and experience acquired by an individual upon the satisfactory completion of a learning programme which meets specified QF standards. It is granted on the basis of formal assessment. The award title should follow the policy laid down by the EDB ( <a href="http://www.hkqf.edu.hk">http://www.hkqf.edu.hk</a> ) and should not include a Statement of Attendance.
Qualifications Framework Level	Under QF, each qualification is assigned a level to indicate its position in the hierarchy relative to others. The level of a qualification is determined in accordance with a set of Generic Level Descriptors (GLD) which specifies the outcome standards expected of the qualification at each level.
Qualifications Framework Standards	The skills, knowledge or experience acquired upon the completion of the learning programme that are commensurate with the requirements under the specified level of the QF.
Recommendation	A recommendation forms part of the accreditation determination. It has a continuous improvement purpose and is directly related to the accreditation criteria. It is non-binding in nature but Operators should explain if / how recommendations have been addressed at the time of re-accreditation or Periodic Review.
Requirement	A requirement forms part of the accreditation determination, to be fulfilled by Operators by the specified deadline(s) during the validity period of the approved accreditation status.
Site Visit	A visit to the Operator's learning centre / campus used for the purpose of delivering the learning programme(s) under study. This is an integral part of an accreditation exercise, conducted primarily to collect evidence for evaluating whether the accreditation criteria are met.
Statement of Accreditation Approval	An official document issued by HKCAAVQ confirming the granting of accreditation status to an Operator. It is issued together with the accreditation report for approved cases, or upon satisfactory fulfilment of all pre-condition(s) in cases for which pre-condition(s) are set.

Substantial Change	Any changes that may impact an Operator's competency to continue meeting the relevant accreditation standards. For details, please refer to <i>Guidance Notes on Substantial Change to Accreditation Status</i> , available on the HKCAAVQ website.
Threshold Standard	The minimum standards required of an Operator and learning programme in accreditation, as provided for in the Accreditation of Academic and Vocational Qualifications Ordinance (AAVQO).
Validity Period	The period of time in which an approved accreditation status is effective as stipulated in the accreditation report. The validity period for Stage 1 IE is standardised as two years subject to conditions; the validity period for Stage 2 LPA and re-LPA is linked to programme quality and duration; and the validity period for Stage 3 PAA and Stage 4 PR is five years.