Part XXXV: IQA Site Visit Operations Manual

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Formulating Institution: IAPUC Quality Accreditation Committee, International Association of Private Universities and Colleges

Applicable Scope: All peer review team members appointed to conduct IQA accreditation site visits; IQA Office personnel coordinating site visits; and Quality Representatives of accredited institutions.

Preface

The site visit is the pivotal link connecting the stages of the IAPUC-IQA accreditation process. During desk review, experts develop an initial understanding of the accredited institution through its self-evaluation report and supporting materials. However detailed, that understanding remains only a "written portrait" of institutional quality. The purpose of the site visit is to move beyond documents and enter the institution itself, adding texture, human context and verification to the portrait through direct observation, personal experience and in-depth dialogue.

The site visit is also the most visible test of the accreditation system's impartiality and professionalism. Every word and action of a review expert during the visit reflects not only the expert's professional competence, but also the image and authority of the IAPUC-IQA Accreditation System. A rigorous, professional, respectful and transparent visit is itself the strongest endorsement of accreditation credibility. Conversely, a cursory, biased or improper visit can damage the reputation of the system in the eyes of institutions and the public.

This Manual provides review experts and visit coordinators with comprehensive, systematic and operational guidance for site visits. Across three phases - preparation before the visit, conduct of visit activities and post-visit reporting - it provides standardized procedures and practical tools for all types of visit. It aligns with the site-visit provisions of the *IAPUC-IQA Accreditation Procedure Specifications*, the conduct requirements of the *IQA Peer Review Expert Selection and Code of Conduct*, and the sampling criteria in the *Multi-Campus and Transnational Provision Accreditation Review Criteria*. Together, these documents provide complete institutional safeguards for IQA site visits.

IAPUC expects every review expert who consults this Manual to gain clear guidance and full confidence, and to conduct each site visit as a rigorous search for the truth about quality, a deep dialogue concerning quality culture and a constructive impetus for quality improvement.

Chapter I General Provisions

Article 1 Purpose of the Manual

This Manual provides standardized operational guidance for IQA accreditation site visits, safeguards the regularity and consistency of preparation, implementation and reporting, and serves as a practical reference for expert training and on-site operations.

Article 2 Scope of Application

This Manual applies to:

(1) routine site visits arranged for initial accreditation and comprehensive re-accreditation;

(2) special site visits initiated because of a material change or abnormal accreditation status; and

(3) extended site visits to institutions with multiple campuses or transnational provision.

Remote visits and supplementary visits shall follow the general principles of this Manual as well as the relevant provisions of the *Supplementary Standards for Quality Accreditation of Distance and Hybrid Education* and the *Multi-Campus and Transnational Provision Accreditation Review Criteria*.

Article 3 Guidance on Use of the Manual

- This Manual is the overall operational guide for review teams conducting site visits and must be used together with the desk-review findings and issue list for the particular case.

- This Manual does not replace the professional judgement of review experts. Experts shall apply its methods and tools flexibly within the framework of the Manual according to the circumstances.

- Every review expert participating in a site visit must be familiar with the entire Manual before the visit.

Article 4 Basic Principles of Site Visits

Principle	**Core Meaning**
Evidence-Oriented	The central purpose of a visit is to collect, verify and clarify evidence. Review judgements must be based on evidence that is sufficient, reliable and capable of cross-verification.
Professional Respect	Review experts shall conduct the visit with a rigorous yet humble professional attitude, respecting institutional autonomy, cultural differences and normal operations.
Focus and Depth	Because time and energy are limited, the visit must focus on key issues identified during desk review and priority areas requiring verification, rather than distributing effort evenly.

Principle	Core Meaning
Transparent Communication	Interaction with the institution shall remain candid and clear, encouraging full presentation by the institution and timely clarification of misunderstandings.
Teamwork	Review team members shall cooperate closely, support one another and make decisions collectively.

Chapter II Pre-Visit Preparation

Article 5 Formation and Launch of the Review Team

After the review team is formed, the Team Chair must convene at least one launch meeting during the desk-review period. The principal agenda shall include:

- introductions among members and clarification of disciplinary backgrounds, expertise and division of responsibilities;

- review of priority areas and matters requiring verification identified during desk review;

- preliminary allocation of each member's principal duties and tasks during the visit;

- discussion and determination of the site-visit sampling plan, where applicable to a multi-campus institution;

- agreement on the basic framework and priorities of the visit schedule; and

- confirmation that all members have declared conflicts of interest and will observe confidentiality obligations.

Article 6 Preparation of the Visit Schedule

The Team Chair shall prepare the visit schedule based on the desk-review issue list, institutional size and disciplinary distribution, and shall agree it with the institution's Quality Representative. Scheduling must follow these principles:

- visit periods shall cover full working days and normally shall not exceed nine hours per day, ensuring adequate time for expert discussion and rest;

- sufficient transition and buffer time shall be reserved among interviews, focus groups, facility tours and evidence verification;

- an internal team debrief shall be scheduled each day to consolidate findings and follow-up matters; and

- the final day shall reserve time to prepare the exit briefing and sufficient flexibility for any supplementary verification that may arise.

Illustrative Three-Day Schedule for a Medium-Sized Institution

Time	Day 1	Day 2	Day 3
09:00-09:30	Opening meeting	Academic-unit visit: Schools B/C	Supplementary evidence verification / flexible time
09:30-10:30	Interview with President / senior leadership	Academic-unit visit continued	Student focus group
10:30-10:45	Break / transition	Break / transition	Break / transition
10:45-12:00	Academic-unit visit: School A	Facility tour: laboratories / studios	Internal team discussion and preparation for exit briefing
12:00-13:30	Working lunch / team discussion	Working lunch / team discussion	Lunch
13:30-15:00	Faculty focus group	Administrative-support unit visits	Exit briefing
15:00-15:15	Break / transition	Break / transition	End of visit
15:15-16:30	Sample-based evidence verification	Alumni / employer focus group, possibly remote	
16:30-17:30	Internal team debrief	Internal team debrief	

Article 7 Pre-Visit Confirmation of Information

At least two weeks before the visit, the Team Chair and the institution's Quality Representative shall confirm:

- the visit schedule and detailed arrangements for each activity;

- the names and roles of interview and focus-group participants; the institution must ensure that participants are representative, while the review team shall not pre-approve individual selections;

- the workspace, network access and logistical support required by the review team; and

- institutional escorts, normally one or two persons responsible for guidance and coordination who shall not participate in internal team discussions.

Article 8 Checklist of Visit Materials

Before the visit, the Team Chair shall ensure that the following materials are complete:

- the institutional self-evaluation report and index of all supporting materials;

- the desk-review issue list;

- the sampling plan and visit schedule;

- interview outlines and question guides;

- the plan for on-site evidence sampling;

- standards-conformity rating forms in electronic or paper form; and

- a team contact list and emergency contact person.

Article 9 Travel, Accommodation and Logistics

Travel and accommodation shall be coordinated by the IQA Office in accordance with the principles of safety, convenience and economy. Experts should not be accommodated in premises in which the institution under review has a financial interest or that might give rise to a conflict of interest. Review experts shall bear their own personal, non-official expenses during the visit.

Chapter III General Site Visit Procedures

Article 10 Opening Meeting

Before activities begin on the first day, the review team and the institution's principal leaders shall hold an opening meeting, normally lasting thirty minutes. The agenda shall include:

- introductions between institutional and review team members;

- a restatement by the Team Chair of the visit's purpose, scope and schedule;

- explanation of visit methods and cooperation required from the institution;

- confirmation of the timing of the exit briefing; and

- responses to the institution's initial questions.

The opening meeting shall be professional, friendly and transparent in tone. The Team Chair may briefly share the overall impression from desk review where appropriate, focusing primarily on positive matters and not discussing negative findings, but shall make no prediction or implication concerning the accreditation outcome.

Article 11 Interviews and Focus Groups

Interviews and focus groups are the principal methods for obtaining direct evidence during a site visit. Experts must apply this Manual together with the conduct requirements in the *IQA Peer Review Expert Selection and Code of Conduct*.

Types and Purposes of Interviews

Interview Type	Principal Purpose	Suggested Duration	Participants
Senior Leadership Interview	Understand institutional mission, strategic direction and governance commitment	60-90 minutes	President and 3-5 members of the core leadership team
Academic-Unit Visit	Verify actual operation of curriculum, teaching, faculty and learning-outcomes assessment	60-90 minutes per unit	Dean, department chair and faculty representatives
Faculty Focus Group	Hear faculty's authentic experience of teaching, academic freedom and faculty development	60-90 minutes	8-15 participants across disciplines and ranks

Interview Type	Principal Purpose	Suggested Duration	Participants
Student Focus Group	Understand student learning experience, support services and campus culture	60-75 minutes	8-15 participants across years and disciplines
Administrative-Support Unit Visit	Understand operation of admissions, academic records, quality assurance, student services and other administrative functions	30-45 minutes per unit	Unit heads and relevant personnel
Alumni / Employer Focus Group	Obtain external stakeholder feedback on graduate quality and institutional effectiveness	45-60 minutes	5-10 participants; may be remote
In-Depth Quality Representative Interview	Understand organization of accreditation self-evaluation and the institution's internal quality-assurance mechanisms	45-60 minutes	Quality Representative and relevant personnel

General Interview Procedure

- At the outset, experts shall introduce themselves, explain the purpose and anticipated duration, and restate confidentiality, informing participants that comments will not be attributed to individuals.

- Begin with open questions and move gradually into detail. Encourage free expression without interruption or judgement.

- Cover the planned key questions within the available time, allocating time appropriately while retaining flexibility to pursue meaningful lines of inquiry.

- Before concluding, allow participants to add information and ask questions, and thank them sincerely for their time and candour.

- Matters requiring further verification shall be recorded in the *Site Visit Issue Tracking List* and transferred to subsequent evidence verification or supplementary interviews.

Article 12 Facility Tours

Facility tours are an important means of verifying statements about resources and environments in the self-evaluation report. Sampling shall focus on the following types of facility:

- teaching facilities: classrooms, laboratories, studios and seminar rooms, normally sampling 2-4 different types of teaching venue;

- academic-support facilities: the library, including physical and electronic-resource access terminals, computing centre and shared learning spaces;

- student-service facilities: student centre, counselling rooms and career-development centre;

- specialist facilities: discipline-specific laboratory equipment, clinical-skills centres, art studios and engineering workshops; and

- information infrastructure: demonstrations of the learning-management system and student-information system, and network-access conditions.

During tours, experts should consider the physical condition and capacity of facilities, the maintenance and updating of technical resources, and spontaneous conversations with users and staff. Facilities unrelated to accreditation or education shall not be inspected without the institution's prior consent. Questions or concerns identified during a tour shall be recorded in the *Site Visit Issue Tracking List*.

Article 13 Sample-Based Evidence Verification

Sample-based evidence verification involves random or targeted checks of supporting evidence cited in the self-evaluation report, confirming that the evidence exists and is consistent with the related statement.

Sampling shall give priority to evidence questioned during desk review or relied upon by critical standards, while also randomly selecting a proportion of routine evidence as a consistency check. Samples shall cover different disciplines, units and periods. The result for each item shall be recorded promptly as "Consistent," "Partly Consistent," "Inconsistent" or "Unable to Verify."

Minimum reference sample sizes are:

- faculty qualification files: 5-10, covering different disciplines, ranks and appointment types;

- course syllabi and teaching plans: 5-10 courses across different disciplines and levels;

- student assessment materials: assessment instruments and grade distributions from 3-5 courses;

- curriculum-review meeting minutes: 2-4 review records from the preceding two years; and

- internal quality-review reports: the most recent 1-2 reports.

Article 14 Internal Team Debrief

At the end of each visit day, the review team shall schedule at least sixty minutes for internal discussion. This discussion shall take place behind closed doors in an independent workspace provided by the institution. Institutional personnel shall not attend or observe.

The principal agenda of the daily debrief shall include:

- reports from each member on principal findings and observations of the day;

- review of the issue list to identify matters resolved and matters requiring follow-up;

- discussion and prioritization of newly identified issues;

- identification of any necessary change in priorities for the following day; and

- cross-verification of evidence among members to avoid single-source bias.

Article 15 Exit Briefing

On the afternoon of the final day, the review team and the institution's principal leaders shall hold an exit briefing. Its framework shall be:

- the Team Chair first thanks the institution for its hospitality and cooperation, then briefly reviews the visit as a whole;

- the team presents its principal impressions constructively, including notable institutional strengths and good practices, areas of concern requiring improvement, and major matters consistent or inconsistent with desk-review findings;

- the Team Chair explains that the briefing presents preliminary impressions and does not constitute a formal accreditation decision, which will be made by the Accreditation Decision Committee on the basis of the complete case file; and

- the institution is given a brief opportunity to respond and clarify possible misunderstandings, without extended debate.

The exit briefing shall be candid and constructive. It shall avoid criticizing named individuals and shall make no promise or implication concerning the accreditation outcome.

Chapter IV Guidance for Specialized Visit Activities

Article 16 Classroom Observation

With the instructor's consent, experts may conduct a brief classroom observation lasting 15-20 minutes. Experts shall remain silent observers, shall not participate in the teaching activity, interrupt the class or interact with students. With the instructor's consent, observation of demonstrations or laboratory-based classes may be extended to thirty minutes. Afterward, an expert may ask the instructor for a brief informal conversation at a convenient time.

Article 17 Student Work Exhibitions

Institutions are encouraged to arrange presentations of student work during the visit, including capstone exhibitions, academic poster exhibitions and artistic performances. Such presentations provide students with a direct channel for demonstrating learning outcomes and should receive the experts' full attention.

Article 18 Remote Focus Groups

Where alumni, employers or particular partners cannot attend in person, a remote video focus group may be arranged during the visit. It shall be chaired by a review team member, with the institution assisting in provision of the technical platform. Before the session, the expert must confirm participants' identities and ensure a quiet, undisturbed environment. Privacy protections shall be identical to those for an in-person focus group.

Article 19 Distinctive Educational Activities

If a distinctive educational activity takes place during the visit, such as a student community-service day, industry-partnership project exhibition or academic competition, the institution may coordinate optional expert observation where this does not disrupt the visit schedule. The principal purpose is to experience the institution's academic culture, and the activity shall not be treated as the sole source of formal evidence.

Chapter V Handling Special Circumstances

Article 20 Potentially Serious Issues

If any of the following matters that could seriously affect the accreditation conclusion is identified during the visit, the review team must initiate an enhanced handling procedure immediately:

- a material discrepancy between statements in the self-evaluation report and actual circumstances;

- deliberate concealment or fabrication of evidence;

- a serious compliance failure potentially affecting student rights or public safety; or

- a systemic issue plainly inconsistent with accreditation standards.

Under the enhanced procedure, the team shall discuss and cross-verify the matter fully, confirm the reliability and seriousness of the finding, and seek clarification and response from the institution during the visit. In a serious case involving deliberate fabrication, the team may shorten or otherwise adjust the visit schedule according to the circumstances while safeguarding the institution's right to respond, and may raise the matter cautiously at the exit briefing. After the visit, the finding and handling process shall be recorded in detail in the review report and reported separately to the Accreditation Decision Committee.

Article 21 Complaints or Reports During the Visit

If an institutional member or external person raises a complaint or report with an expert during the visit, the expert shall receive the information courteously but make no promise or immediate judgement, and shall report the matter fully to the Team Chair that day. The Team Chair shall assess whether it concerns the accreditation standards and the current visit. If within scope, the information shall be recorded and forwarded to the IQA Office for handling under the *IQA Accreditation Appeals, Complaints and Dispute Resolution Measures*. If outside scope, the person shall be informed courteously and advised of an appropriate reporting channel.

Article 22 Response to Emergencies

In the event of a natural disaster, safety incident, public-health emergency or other force majeure during a visit, the Team Chair may suspend or adjust the schedule after consultation with the IQA Office and the institution, giving priority to personal safety. Once conditions stabilize, the parties shall assess whether to continue, postpone or complete the visit remotely.

Chapter VI Post-Visit Work

Article 23 Preparation of the Review Report

After the visit, the review team shall complete its report within the period specified in the *IAPUC-IQA Accreditation Procedure Specifications*. The conformity assessment for each standards domain must cite specific evidence collected during the visit, including interview summaries, observation records and evidence-verification results. If the team has differing views, the report must present both the majority and minority opinions accurately. A minority opinion must state its reasons for consideration by accreditation decision-makers.

Article 24 Archiving Visit Documents

After the visit, the Team Chair shall organize and submit the following documents to the IQA Office for archiving:

- the visit schedule and actual implementation timetable;

- interview and focus-group summaries, excluding original notes containing personal information and submitting the formal summary versions instead;

- consolidated sample-based evidence-verification records;

- the Site Visit Issue Tracking List;

- principal points from daily team discussions; and

- the exit briefing outline.

Archiving must be completed within thirty days after submission of the review report and the documents retained in accordance with the *IQA Accreditation Records and Data Retention Rules*.

Article 25 Post-Visit Feedback and Improvement

The IQA Office shall collect feedback from experts and institutions on organization of the site visit. Afterward, the institution may provide anonymous feedback on the experience through its Quality Representative, and experts may submit proposals for process improvement after filing the review report. Feedback shall be incorporated into IQA internal quality review and used as a basis for continual improvement of the site-visit process and this Manual.

Chapter VII Supplementary Provisions

Article 26 Relationship with Other Regulatory Documents

Document	Relationship with This Manual
Chapter IV of the *IAPUC-IQA Accreditation Procedure Specifications*	This Manual comprehensively expands and operationalizes the site-visit provisions of the Specifications.
IQA Peer Review Expert Selection and Code of Conduct	Interview and activity standards in this Manual remain subject to the overriding conduct boundaries in the Code.
Multi-Campus and Transnational Provision Accreditation Review Criteria	Multi-campus visit sampling plans shall be developed with reference to the Criteria.
Supplementary Standards for Quality Accreditation of Distance and Hybrid Education	Special requirements for remote visits shall follow the provisions concerning observation of distance teaching in these Standards.

Article 27 Interpretation and Amendment

(1) This Manual shall be interpreted by the IAPUC Quality Accreditation Committee.

(2) Any amendment must be approved by the IAPUC Board of Directors. Every two years, the IQA Office shall review the continuing suitability of the Manual in light of feedback from experts and institutions, and propose revisions where necessary.

Article 28 Entry into Force

This Manual shall enter into force on the date of approval by the IAPUC Board of Directors.

Appendix A: Interview and Focus-Group Outline Templates

Senior Leadership Interview Outline (Example)

1. Please briefly describe your institution's mission and the areas in which it has concentrated most strongly during the past three years to advance that mission.

2. What is the most distinctive institutional arrangement in your governance structure? How does the governing body support and oversee improvement of academic quality?

3. In the face of intensifying competition in private higher education and a changing policy environment, what are the institution's greatest strategic opportunities and challenges?

4. How does the institution ensure that financial resources are allocated with priority to improving educational quality?

5. In continual improvement, what achievement makes you personally most proud, and what improvement concerns you most?

Faculty Focus-Group Outline (Example)

1. Please briefly describe your teaching and research at the institution and your understanding of its mission.

2. What support have you received for curriculum design and teaching innovation, and what principal barriers have you encountered?

3. How does the institution evaluate your teaching, and how are the results used?

4. Have you participated in quality assurance or governance activities, and what was that experience like?

5. If one thing could be changed immediately, what would you most want to change?

Student Focus-Group Outline (Example)

1. Please briefly describe your programme and stage of study, and your principal reasons for choosing this institution.

2. When you enrolled and throughout your studies, were the course learning objectives and expectations clear to you?

3. Through what channels do you usually receive feedback on learning, and is that feedback helpful?

4. When you encounter difficulty in study or daily life, what support does the institution provide, and do you consider it adequate?

5. If introducing the institution to future students, what aspects would you emphasize and what would you say requires improvement?

Appendix B: Sample-Based Evidence Verification Record

Sample No.	Evidence Type	Related Standard	Sampling Method	Verification Result	Notes
EV-01	Faculty file	Standard 3	Random sampling	Consistent / Partly Consistent / Inconsistent / Unable to Verify	
...	...	...	...	...	...

Appendix C: Daily Issue Tracking List

Issue No.	Source	Issue Description	Related Standard	Status	Action / Finding	Included in Report?
Q-01	Desk review	...	Standard 2	Verified / Follow-Up Required / Unresolved		
...	...	...	...	...	...	...

Appendix D: Site Visit Preparation Confirmation Checklist

Before departure, the Team Chair shall confirm that:

- access has been received to the institutional self-evaluation report and all supporting materials;

- the desk-review issue list is complete;

- the visit schedule and sampling plan have been agreed with the institution;

- every member understands the division of responsibilities and principal tasks;

- interview outlines and the evidence-sampling plan are complete;

- travel and accommodation arrangements are confirmed;

- the institution's emergency contact details have been obtained; and

- office and logistical requirements have been communicated to the institution.

Document Approval

Role	Name/Position	Date
Drafted by	IAPUC Quality Accreditation Committee, Site Visit Standards Working Group	May 2026
Reviewed by	IAPUC Quality Accreditation Committee	Pending
Approved by	IAPUC Board of Directors	Pending

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