

INTERNATIONAL EDUCATION BOARD



Accreditation Validity, Monitoring, and Review Policy

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1. Preamble

- 1.1. The International Education Board (IEB) is an independent, private, non-governmental, and non-statutory international education authority.
- 1.2. IEB operates as a voluntary quality assurance and accreditation body for educational institutions worldwide.
- 1.3. IEB is committed to maintaining high standards of quality and integrity in the institutions it accredits.
- 1.4. This policy establishes the framework for managing accreditation validity, ongoing monitoring, and periodic review of accredited institutions.
- 1.5. IEB recognizes that accreditation is not a one-time event but an ongoing commitment to quality assurance.
- 1.6. Continuous monitoring ensures that accredited institutions maintain compliance with IEB standards throughout the accreditation cycle.
- 1.7. This policy reflects IEB's commitment to protecting learners and maintaining public confidence in accredited institutions.
- 1.8. IEB acknowledges that circumstances may change, requiring responsive and adaptive monitoring mechanisms.
- 1.9. IEB is not a government agency, statutory body, or regulatory authority in any jurisdiction.
- 1.10. IEB accreditation does not constitute government approval, statutory recognition, or professional licensure.

2. Purpose

- 2.1. The purpose of this policy is to define the validity periods for IEB accreditation.
- 2.2. This policy establishes procedures for ongoing monitoring of accredited institutions.
- 2.3. This policy outlines requirements for annual reporting and compliance verification.
- 2.4. This policy defines the process for periodic review and renewal of accreditation.
- 2.5. This policy specifies procedures for addressing non-compliance and implementing corrective actions.
- 2.6. This policy establishes the framework for suspension and withdrawal of accreditation.
- 2.7. This policy ensures transparency in the public disclosure of accreditation status.
- 2.8. This policy supports continuous quality improvement among accredited institutions.
- 2.9. This policy protects the interests of learners enrolled at IEB-accredited institutions.

3. Scope

- 3.1. This policy applies to all institutions holding IEB accreditation.
- 3.2. This policy covers all levels of IEB accreditation, including Candidate, Accredited, and Accredited with Distinction status.
- 3.3. This policy applies to institutional accreditation and programme-specific accreditation where applicable.
- 3.4. This policy governs the monitoring and review of institutions throughout their accreditation cycle.
- 3.5. This policy applies to all IEB staff, committees, and assessors involved in monitoring and review activities.
- 3.6. This policy covers the renewal process for institutions seeking continued accreditation.
- 3.7. This policy applies to circumstances requiring suspension or withdrawal of accreditation.
- 3.8. This policy does not supersede requirements imposed by national regulatory authorities.
- 3.9. Institutions remain responsible for compliance with all applicable laws and regulations in their jurisdiction.

4. Definitions

- 4.1. **Accreditation Cycle** refers to the period from the granting of accreditation to its expiry or renewal.
- 4.2. **Accreditation Validity Period** refers to the duration for which accreditation remains active.
- 4.3. **Annual Monitoring Report (AMR)** refers to the report submitted annually by accredited institutions to IEB.
- 4.4. **Compliance** refers to adherence to IEB standards, policies, and conditions of accreditation.
- 4.5. **Condition** refers to a specific requirement that an institution must fulfill to maintain accreditation.
- 4.6. **Corrective Action** refers to measures taken by an institution to address identified deficiencies.
- 4.7. **Interim Review** refers to an unscheduled review conducted between regular monitoring cycles.

4.8. **Monitoring** refers to ongoing oversight activities to verify continued compliance.

4.9. **Non-Compliance** refers to failure to meet IEB standards or conditions of accreditation.

4.10. **Renewal** refers to the process of extending accreditation beyond the initial validity period.

4.11. **Review** refers to systematic evaluation of an institution's compliance and quality.

4.12. **Sanction** refers to a penalty or restriction imposed for non-compliance.

4.13. **Site Visit** refers to an on-site evaluation conducted by IEB assessors.

4.14. **Stipulation** refers to a specific recommendation that an institution should address.

4.15. **Suspension** refers to temporary removal of accreditation status.

4.16. **Withdrawal** refers to permanent removal of accreditation status.

4.17. **Working Days** refers to Monday through Friday, excluding public holidays observed by the IEB Secretariat.

5. Guiding Principles

5.1. Continuous Quality Assurance

- 5.1.1. Accreditation represents an ongoing commitment to quality, not a one-time achievement.
- 5.1.2. Institutions are expected to maintain and improve quality throughout the accreditation cycle.
- 5.1.3. Monitoring activities are designed to support continuous quality improvement.
- 5.1.4. IEB will work collaboratively with institutions to address quality concerns.

5.2. Proportionality

- 5.2.1. Monitoring intensity will be proportionate to the level of risk and institutional track record.
- 5.2.2. Institutions with strong compliance records may receive reduced monitoring.
- 5.2.3. Institutions with compliance concerns will receive enhanced monitoring.
- 5.2.4. Sanctions will be proportionate to the severity of non-compliance.

5.3. Transparency

- 5.3.1. Accreditation status and validity periods will be publicly disclosed.
- 5.3.2. Institutions will be informed of monitoring requirements and outcomes.
- 5.3.3. Stakeholders will have access to information about accredited institutions.
- 5.3.4. Changes in accreditation status will be communicated promptly.

5.4. Fairness and Due Process

- 5.4.1. All institutions will be treated fairly and consistently.
- 5.4.2. Institutions will have opportunities to respond to concerns before sanctions are imposed.
- 5.4.3. Decisions will be based on evidence and objective assessment.
- 5.4.4. Institutions may appeal decisions through established procedures.

5.5. Learner Protection

- 5.5.1. The welfare of learners is a primary consideration in all monitoring activities.
- 5.5.2. Actions will be taken to protect learners from institutions failing to meet standards.

5.5.3. Learners will be informed of significant changes in institutional accreditation status.

5.5.4. IEB will consider the impact on learners when making decisions about accreditation status.

5.6. Responsiveness

5.6.1. IEB will respond promptly to information indicating potential non-compliance.

5.6.2. Monitoring processes will be adaptable to changing circumstances.

5.6.3. Urgent matters affecting learner welfare will receive immediate attention.

5.6.4. IEB will adjust monitoring approaches based on emerging risks.

5.7. Evidence-Based Decision Making

5.7.1. Monitoring and review decisions will be based on verifiable evidence.

5.7.2. Multiple sources of evidence will be considered.

5.7.3. Institutions will have opportunities to provide evidence and explanations.

5.7.4. Decisions will be documented with clear rationale.

6. Accreditation Validity Overview

6.1. General Framework

- 6.1.1. IEB accreditation is granted for a defined validity period.
- 6.1.2. The validity period varies based on the level of accreditation and institutional track record.
- 6.1.3. Accreditation remains valid subject to continued compliance with IEB standards and conditions.
- 6.1.4. Institutions must complete monitoring and reporting requirements throughout the validity period.

6.2. Commencement of Validity

- 6.2.1. Accreditation validity commences from the date of the formal accreditation decision.
- 6.2.2. The effective date is communicated in the accreditation decision letter.
- 6.2.3. The institution may represent itself as IEB-accredited from the effective date.
- 6.2.4. Any conditions must be addressed within specified timeframes regardless of the effective date.

6.3. Expiry of Accreditation

- 6.3.1. Accreditation expires at the end of the validity period unless renewed.
- 6.3.2. Institutions must apply for renewal before the expiry date to maintain continuous accreditation.
- 6.3.3. Expired accreditation cannot be used for promotional or official purposes.
- 6.3.4. Institutions with expired accreditation must inform stakeholders of their status.

6.4. Maintaining Accreditation

- 6.4.1. Accreditation is maintained through ongoing compliance with IEB standards.
- 6.4.2. Institutions must submit required reports and documentation.
- 6.4.3. Institutions must pay applicable fees within specified timeframes.
- 6.4.4. Institutions must cooperate with monitoring and review activities.

7. Accreditation Validity Periods

7.1. Candidate Status

- 7.1.1. Candidate status is granted for a period of two (2) years.
- 7.1.2. During this period, institutions work toward meeting full accreditation standards.
- 7.1.3. Candidate status may be extended for one (1) additional year in exceptional circumstances.
- 7.1.4. Institutions that do not achieve full accreditation within the maximum period will have Candidate status terminated.
- 7.1.5. Candidate status does not constitute full accreditation.

7.2. Initial Accreditation

- 7.2.1. Initial accreditation is granted for a period of three (3) years.
- 7.2.2. The initial period allows IEB to monitor the institution's sustained compliance.
- 7.2.3. Institutions receiving initial accreditation are subject to enhanced monitoring.
- 7.2.4. Successful completion of the initial period enables application for full accreditation renewal.

7.3. Full Accreditation

- 7.3.1. Full accreditation following successful initial accreditation is granted for five (5) years.
- 7.3.2. Institutions with a strong compliance record may receive the full five-year validity.
- 7.3.3. Institutions with compliance concerns may receive a reduced validity period.
- 7.3.4. The validity period is determined by the Accreditation Committee based on review outcomes.

7.4. Accredited with Distinction

- 7.4.1. Accredited with Distinction status is granted for five (5) years.
- 7.4.2. Institutions must demonstrate exceptional quality and exemplary practices.
- 7.4.3. Enhanced monitoring requirements apply to ensure standards are maintained.
- 7.4.4. Loss of Distinction status may occur if quality declines during the validity period.

7.5. Programme-Specific Accreditation

- 7.5.1. Programme accreditation validity aligns with institutional accreditation where applicable.
- 7.5.2. Standalone programme accreditation is granted for periods of three (3) to five (5) years.
- 7.5.3. Programme accreditation validity depends on programme complexity and outcomes.
- 7.5.4. Programme accreditation may be renewed independently of institutional accreditation.

7.6. Conditional Accreditation

- 7.6.1. Conditional accreditation may be granted with a reduced validity period.
- 7.6.2. Conditional accreditation typically ranges from one (1) to two (2) years.
- 7.6.3. Conditions must be addressed before full validity can be granted.
- 7.6.4. Failure to address conditions may result in further sanctions.

8. Conditions and Stipulations

8.1. Nature of Conditions

- 8.1.1. Conditions are mandatory requirements that institutions must fulfill.
- 8.1.2. Conditions address significant deficiencies or compliance gaps.
- 8.1.3. Failure to meet conditions within specified timeframes may result in sanctions.
- 8.1.4. Conditions are clearly stated in the accreditation decision with timeframes for compliance.

8.2. Nature of Stipulations

- 8.2.1. Stipulations are recommendations for improvement that institutions should address.
- 8.2.2. Stipulations relate to areas where quality could be enhanced.
- 8.2.3. Progress on stipulations is monitored through annual reporting.
- 8.2.4. Persistent failure to address stipulations may result in their elevation to conditions.

8.3. Timeframes for Conditions

- 8.3.1. Conditions are assigned timeframes based on their nature and urgency.
- 8.3.2. Urgent conditions affecting learner welfare must be addressed within thirty (30) days.
- 8.3.3. Standard conditions must be addressed within six (6) months.
- 8.3.4. Complex conditions may be granted up to twelve (12) months.
- 8.3.5. Extensions may be granted in exceptional circumstances with documented justification.

8.4. Verification of Condition Fulfillment

- 8.4.1. Institutions must submit evidence of condition fulfillment to the IEB Secretariat.
- 8.4.2. Evidence will be reviewed by the Monitoring and Review Panel.
- 8.4.3. Additional evidence may be requested if the initial submission is insufficient.
- 8.4.4. A site visit may be conducted to verify condition fulfillment.
- 8.4.5. Formal confirmation of condition fulfillment will be communicated to the institution.

8.5. Consequences of Non-Fulfillment

- 8.5.1. Failure to meet conditions within specified timeframes will result in escalation.

- 8.5.2. Escalation may include imposition of additional conditions.
- 8.5.3. Escalation may include reduction of validity period.
- 8.5.4. Serious or persistent non-fulfillment may result in suspension or withdrawal.

9. Annual Monitoring and Reporting

9.1. Purpose of Annual Monitoring

- 9.1.1. Annual monitoring ensures ongoing compliance with IEB standards.
- 9.1.2. Annual monitoring identifies emerging issues before they become significant problems.
- 9.1.3. Annual monitoring tracks institutional progress and improvement.
- 9.1.4. Annual monitoring maintains communication between IEB and accredited institutions.

9.2. Annual Monitoring Report (AMR)

- 9.2.1. All accredited institutions must submit an Annual Monitoring Report.
- 9.2.2. The AMR is due within ninety (90) days of the institution's academic year end.
- 9.2.3. The AMR template is provided by IEB and must be completed in full.
- 9.2.4. Incomplete AMRs will be returned for completion before review.

9.3. AMR Content Requirements

- 9.3.1. The AMR must include confirmation of continued compliance with IEB standards.
- 9.3.2. The AMR must report on progress against any conditions or stipulations.
- 9.3.3. The AMR must disclose any significant changes in institutional circumstances.
- 9.3.4. The AMR must include key performance indicators and outcome data.
- 9.3.5. The AMR must report on learner enrollment, retention, and completion rates.
- 9.3.6. The AMR must include financial sustainability indicators.
- 9.3.7. The AMR must report on complaints received and their resolution.
- 9.3.8. The AMR must include quality improvement activities undertaken.

9.4. AMR Review Process

- 9.4.1. AMRs are reviewed by the Monitoring and Review Panel.
- 9.4.2. The review assesses continued compliance with IEB standards.
- 9.4.3. The review identifies any areas of concern requiring follow-up.
- 9.4.4. The review considers progress on conditions and stipulations.

9.4.5. A summary report is prepared with findings and recommendations.

9.5. AMR Outcomes

9.5.1. Satisfactory AMR: Confirmation of continued accreditation with no action required.

9.5.2. Satisfactory AMR with recommendations: Suggestions for improvement to be addressed.

9.5.3. Concerns identified: Request for additional information or clarification.

9.5.4. Significant concerns: Triggering of interim review or enhanced monitoring.

9.5.5. Serious concerns: Potential initiation of suspension proceedings.

9.6. Feedback to Institutions

9.6.1. Institutions will receive written feedback on their AMR within sixty (60) days of submission.

9.6.2. Feedback will confirm the outcome of the review.

9.6.3. Feedback will identify any follow-up actions required.

9.6.4. Feedback will provide recommendations for continuous improvement.

10. Ongoing Compliance Monitoring

10.1. Purpose of Ongoing Monitoring

- 10.1.1. Ongoing monitoring supplements annual reporting with continuous oversight.
- 10.1.2. Ongoing monitoring enables responsive action to emerging issues.
- 10.1.3. Ongoing monitoring protects learners and stakeholders.
- 10.1.4. Ongoing monitoring maintains the integrity of IEB accreditation.

10.2. Sources of Monitoring Information

- 10.2.1. Annual Monitoring Reports submitted by institutions.
- 10.2.2. Complaints received from learners, staff, or other stakeholders.
- 10.2.3. Media reports or public information about accredited institutions.
- 10.2.4. Information from regulatory authorities or other quality assurance bodies.
- 10.2.5. Information from site visits or other direct engagement.
- 10.2.6. Financial reports and sustainability indicators.
- 10.2.7. Graduate outcome data and employer feedback.

10.3. Risk-Based Monitoring

- 10.3.1. IEB employs a risk-based approach to monitoring.
- 10.3.2. Institutions are assigned a risk rating based on compliance history and other factors.
- 10.3.3. Low-risk institutions receive standard monitoring.
- 10.3.4. Medium-risk institutions receive enhanced monitoring.
- 10.3.5. High-risk institutions receive intensive monitoring.
- 10.3.6. Risk ratings are reviewed annually and adjusted as appropriate.

10.4. Enhanced Monitoring

- 10.4.1. Enhanced monitoring applies to institutions with identified compliance concerns.
- 10.4.2. Enhanced monitoring may include more frequent reporting requirements.
- 10.4.3. Enhanced monitoring may include additional site visits.
- 10.4.4. Enhanced monitoring may include specific data submissions.

10.4.5. Enhanced monitoring continues until concerns are resolved.

10.5. Triggers for Escalation

10.5.1. Failure to submit required reports or documentation.

10.5.2. Evidence of non-compliance with IEB standards.

10.5.3. Verified complaints indicating systemic issues.

10.5.4. Significant financial instability or sustainability concerns.

10.5.5. Regulatory action by government authorities.

10.5.6. Material changes in institutional circumstances without notification.

10.5.7. Public information indicating potential quality or integrity issues.

11. Interim Review and Site Visits

11.1. Purpose of Interim Reviews

- 11.1.1. Interim reviews are conducted between regular review cycles when warranted.
- 11.1.2. Interim reviews address specific concerns or verify compliance.
- 11.1.3. Interim reviews may be triggered by monitoring findings or complaints.
- 11.1.4. Interim reviews protect learners and maintain accreditation integrity.

11.2. Triggers for Interim Review

- 11.2.1. Significant concerns identified through annual monitoring.
- 11.2.2. Verified complaints indicating potential non-compliance.
- 11.2.3. Information suggesting material changes in institutional circumstances.
- 11.2.4. Request from regulatory authorities or other quality assurance bodies.
- 11.2.5. Failure to address conditions within specified timeframes.
- 11.2.6. Public information indicating potential quality concerns.
- 11.2.7. Institution request for early review.

11.3. Interim Review Process

- 11.3.1. The IEB Secretariat will notify the institution of the interim review.
- 11.3.2. The notification will specify the scope and focus of the review.
- 11.3.3. The institution will be given reasonable time to prepare documentation.
- 11.3.4. A review panel will be appointed by IEB.
- 11.3.5. The review may include document review and/or site visit.
- 11.3.6. The institution will have an opportunity to respond to findings.

11.4. Site Visits

- 11.4.1. Site visits may be conducted as part of interim review or routine monitoring.
- 11.4.2. Site visits provide direct verification of institutional compliance.
- 11.4.3. Site visits allow engagement with institutional leadership, staff, and learners.
- 11.4.4. Site visit teams will include appropriately qualified assessors.

11.4.5. Institutions will be notified of site visits with reasonable notice except in urgent circumstances.

11.5. Announced and Unannounced Visits

11.5.1. Announced visits are scheduled with advance notice to the institution.

11.5.2. Announced visits are used for routine monitoring and verification.

11.5.3. Unannounced visits may be conducted in exceptional circumstances.

11.5.4. Unannounced visits may be triggered by serious concerns about compliance or learner welfare.

11.5.5. Unannounced visits require approval from the Director of Quality Assurance.

11.6. Interim Review Outcomes

11.6.1. Confirmation of continued compliance with no further action required.

11.6.2. Identification of issues requiring corrective action.

11.6.3. Imposition of additional conditions or stipulations.

11.6.4. Change in monitoring status (enhanced or intensive).

11.6.5. Recommendation for suspension or withdrawal proceedings.

11.6.6. Reinstatement of full accreditation status if concerns resolved.

12. Renewal of Accreditation

12.1. Purpose of Renewal

- 12.1.1. Renewal extends accreditation beyond the initial validity period.
- 12.1.2. Renewal involves comprehensive review of continued compliance with IEB standards.
- 12.1.3. Renewal ensures that accredited institutions continue to meet quality expectations.
- 12.1.4. Renewal provides an opportunity to assess institutional improvement.

12.2. Eligibility for Renewal

- 12.2.1. Institutions must hold current IEB accreditation to apply for renewal.
- 12.2.2. Institutions must be in good standing with all monitoring requirements.
- 12.2.3. Institutions must have addressed all outstanding conditions.
- 12.2.4. Institutions must be current with all applicable fees.

12.3. Renewal Application Timeline

- 12.3.1. Institutions must submit a renewal application at least twelve (12) months before expiry.
- 12.3.2. Early application is encouraged to allow sufficient time for the review process.
- 12.3.3. Late applications may result in gaps in accreditation coverage.
- 12.3.4. Institutions failing to apply for renewal will have accreditation expire.

12.4. Renewal Application Requirements

- 12.4.1. Completed renewal application form.
- 12.4.2. Comprehensive self-evaluation report addressing all IEB standards.
- 12.4.3. Evidence of continued compliance with IEB standards.
- 12.4.4. Evidence of progress and improvement since initial accreditation.
- 12.4.5. Current strategic plan and quality improvement plan.
- 12.4.6. Updated institutional documentation and policies.
- 12.4.7. Financial statements demonstrating sustainability.
- 12.4.8. Applicable renewal fees.

12.5. Renewal Review Process

- 12.5.1. The renewal application will be reviewed by the Accreditation Committee.
- 12.5.2. A site visit will normally be conducted as part of renewal review.
- 12.5.3. The review assesses continued compliance with all IEB standards.
- 12.5.4. The review considers institutional progress and improvement.
- 12.5.5. The review considers feedback from stakeholders including learners.
- 12.5.6. The review considers outcomes data and quality indicators.

12.6. Renewal Outcomes

- 12.6.1. Renewal granted for the full validity period (five years).
- 12.6.2. Renewal granted for a reduced validity period with conditions.
- 12.6.3. Renewal granted with conditions and/or stipulations.
- 12.6.4. Deferral of renewal decision pending additional information or actions.
- 12.6.5. Denial of renewal with accreditation expiring at end of current validity.

12.7. Communication of Renewal Decision

- 12.7.1. The renewal decision will be communicated in writing.
- 12.7.2. The communication will include the rationale for the decision.
- 12.7.3. The communication will specify the new validity period if renewed.
- 12.7.4. The communication will specify any conditions or stipulations.
- 12.7.5. The communication will include information on appeal rights.

13. Changes in Institutional Circumstances

13.1. Duty to Notify

- 13.1.1. Accredited institutions have a duty to notify IEB of material changes.
- 13.1.2. Notification must be made within thirty (30) days of the change or decision to change.
- 13.1.3. Failure to notify may result in sanctions.
- 13.1.4. Notification should be submitted in writing to the IEB Secretariat.

13.2. Material Changes Requiring Notification

- 13.2.1. Changes in institutional ownership, governance, or legal status.
- 13.2.2. Changes in institutional name or branding.
- 13.2.3. Changes in physical location or addition of new campuses.
- 13.2.4. Introduction of new programmes or significant changes to existing programmes.
- 13.2.5. Discontinuation of programmes with enrolled learners.
- 13.2.6. Significant changes in institutional leadership.
- 13.2.7. Financial difficulties or significant changes in financial circumstances.
- 13.2.8. Merger, acquisition, or partnership arrangements.
- 13.2.9. Regulatory actions, sanctions, or loss of recognition by other bodies.
- 13.2.10. Significant negative publicity or reputational issues.

- 13.2.11. Significant changes in learner numbers (enrollment growth or decline exceeding 25%).

13.3. IEB Response to Notifications

- 13.3.1. IEB will acknowledge receipt of the notification within five (5) working days.
- 13.3.2. IEB will assess the implications of the change for accreditation.
- 13.3.3. IEB may request additional information about the change.
- 13.3.4. IEB may determine that no further action is required.
- 13.3.5. IEB may require an updated self-evaluation or site visit.
- 13.3.6. IEB may impose additional conditions or enhanced monitoring.

13.3.7. IEB may initiate interim review proceedings.

13.4. Approval of Substantive Changes

13.4.1. Some changes may require prior approval from IEB before implementation.

13.4.2. Changes requiring approval include new campuses, new delivery modes, and major programme additions.

13.4.3. Institutions should consult with IEB before implementing significant changes.

13.4.4. Implementation of unapproved changes may affect accreditation status.

13.5. Changes in Accreditation Scope

13.5.1. Institutions may request expansion of accreditation scope.

13.5.2. Expansion requests are subject to review and may require site visits.

13.5.3. Institutions may request reduction of accreditation scope.

13.5.4. Scope changes will be reflected in updated accreditation documentation.

14. Sanctions and Corrective Actions

14.1. Purpose of Sanctions

- 14.1.1. Sanctions are measures taken in response to non-compliance.
- 14.1.2. Sanctions aim to protect learners and maintain accreditation integrity.
- 14.1.3. Sanctions encourage institutions to address deficiencies promptly.
- 14.1.4. Sanctions are proportionate to the nature and severity of non-compliance.

14.2. Types of Sanctions

- 14.2.1. Formal warning: Documented concern requiring attention.
- 14.2.2. Imposition of conditions: Specific requirements to be fulfilled.
- 14.2.3. Enhanced monitoring: Increased reporting and oversight requirements.
- 14.2.4. Reduction of validity period: Shortened accreditation cycle.
- 14.2.5. Probationary status: Accreditation maintained under close supervision.
- 14.2.6. Restriction on new enrollments: Limitation on accepting new learners.
- 14.2.7. Suspension: Temporary removal of accreditation status.
- 14.2.8. Withdrawal: Permanent removal of accreditation status.

14.3. Corrective Action Requirements

- 14.3.1. Institutions subject to sanctions must develop and implement corrective action plans.
- 14.3.2. Corrective action plans must address the root causes of non-compliance.
- 14.3.3. Corrective action plans must include specific actions, responsibilities, and timelines.
- 14.3.4. Corrective action plans must be submitted to IEB for approval.
- 14.3.5. Progress on corrective actions must be reported as required by IEB.

14.4. Escalation of Sanctions

- 14.4.1. Failure to address non-compliance will result in escalation of sanctions.
- 14.4.2. Escalation follows a progressive approach where appropriate.
- 14.4.3. Severe or persistent non-compliance may result in immediate escalation.
- 14.4.4. Escalation decisions are made by the Accreditation Committee.

14.5. Lifting of Sanctions

- 14.5.1. Sanctions are lifted when non-compliance is remediated.
- 14.5.2. Institutions must provide evidence of corrective actions taken.
- 14.5.3. Verification may include document review or site visit.
- 14.5.4. Lifting of sanctions is communicated in writing.

15. Suspension of Accreditation

15.1. Nature of Suspension

- 15.1.1. Suspension is the temporary removal of accreditation status.
- 15.1.2. Suspension is a serious sanction applied in cases of significant non-compliance.
- 15.1.3. Suspension allows time for remediation while protecting learners.
- 15.1.4. Suspended institutions may not represent themselves as IEB-accredited.

15.2. Grounds for Suspension

- 15.2.1. Failure to meet conditions within specified timeframes.
- 15.2.2. Serious breach of IEB standards affecting learner welfare.
- 15.2.3. Failure to submit required reports or documentation.
- 15.2.4. Failure to pay required fees.
- 15.2.5. Misrepresentation of accreditation status.
- 15.2.6. Evidence of fraud or dishonesty.
- 15.2.7. Regulatory actions by government authorities affecting institutional operations.
- 15.2.8. Financial instability threatening institutional viability.

15.3. Suspension Process

- 15.3.1. The IEB Secretariat will issue a notice of intent to suspend.
- 15.3.2. The notice will specify the grounds for proposed suspension.
- 15.3.3. The institution will have twenty (20) working days to respond.
- 15.3.4. The response will be considered by the Accreditation Committee.
- 15.3.5. The Committee will decide whether to proceed with suspension.
- 15.3.6. The decision will be communicated in writing with reasons.

15.4. Duration of Suspension

- 15.4.1. Suspension is imposed for a defined period.
- 15.4.2. The suspension period allows time for remediation.
- 15.4.3. Typical suspension periods range from three (3) to twelve (12) months.

15.4.4. The suspension period may be extended if remediation is not achieved.

15.5. Obligations During Suspension

15.5.1. Suspended institutions must continue to provide for enrolled learners.

15.5.2. Suspended institutions must cooperate with IEB monitoring.

15.5.3. Suspended institutions must implement corrective actions.

15.5.4. Suspended institutions must not accept new enrollments unless permitted.

15.5.5. Suspended institutions must not use IEB accreditation marks or claims.

15.6. Lifting of Suspension

15.6.1. Suspension is lifted when the institution demonstrates compliance.

15.6.2. The institution must submit evidence of corrective actions.

15.6.3. A site visit may be required to verify compliance.

15.6.4. Lifting of suspension is decided by the Accreditation Committee.

15.6.5. Accreditation is reinstated upon lifting of suspension.

15.7. Failure to Remediate

15.7.1. Failure to remediate within the suspension period may result in withdrawal.

15.7.2. The institution will be given notice of potential withdrawal.

15.7.3. The institution may request an extension with justification.

15.7.4. Extensions are granted at the discretion of the Accreditation Committee.

16. Withdrawal of Accreditation

16.1. Nature of Withdrawal

- 16.1.1. Withdrawal is the permanent removal of accreditation status.
- 16.1.2. Withdrawal is the most serious sanction available to IEB.
- 16.1.3. Withdrawal is applied when remediation is not possible or has failed.
- 16.1.4. Withdrawn institutions may not represent themselves as IEB-accredited.

16.2. Grounds for Withdrawal

- 16.2.1. Failure to remediate issues during suspension period.
- 16.2.2. Severe or irreparable breach of IEB standards.
- 16.2.3. Fraud, misrepresentation, or serious dishonesty.
- 16.2.4. Institutional closure or cessation of operations.
- 16.2.5. Voluntary surrender of accreditation by the institution.
- 16.2.6. Loss of legal authority to operate.
- 16.2.7. Actions that bring IEB accreditation into disrepute.

16.3. Withdrawal Process

- 16.3.1. The IEB Secretariat will issue a notice of intent to withdraw.
- 16.3.2. The notice will specify the grounds for proposed withdrawal.
- 16.3.3. The institution will have thirty (30) working days to respond.
- 16.3.4. The response will be considered by the Accreditation Committee.
- 16.3.5. The Committee will make a recommendation to the Governing Council.
- 16.3.6. The Governing Council will make the final decision.
- 16.3.7. The decision will be communicated in writing with reasons.

16.4. Effective Date of Withdrawal

- 16.4.1. Withdrawal takes effect from the date specified in the decision letter.
- 16.4.2. Immediate withdrawal may be imposed in cases of serious concern.
- 16.4.3. Delayed effective dates may be granted to protect current learners.

16.4.4. The institution must inform learners and stakeholders of withdrawal.

16.5. Obligations Following Withdrawal

16.5.1. The institution must cease all use of IEB accreditation marks and claims.

16.5.2. The institution must remove IEB accreditation from all materials and communications.

16.5.3. The institution must inform current learners of the withdrawal.

16.5.4. The institution must make arrangements for teach-out or transfer of learners.

16.5.5. The institution must return any IEB certificates or materials.

16.6. Public Notification

16.6.1. Withdrawal of accreditation will be published on the IEB website.

16.6.2. Stakeholders who inquire will be informed of the withdrawal.

16.6.3. Relevant regulatory authorities may be notified.

16.6.4. Public notification protects learners and maintains accreditation integrity.

16.7. Reapplication After Withdrawal

16.7.1. Institutions may apply for accreditation after a period of at least three (3) years.

16.7.2. Reapplication requires demonstration that the issues leading to withdrawal have been addressed.

16.7.3. Reapplication is treated as a new application subject to full review.

16.7.4. There is no guarantee that reapplication will be successful.

17. Reinstatement of Accreditation

17.1. Eligibility for Reinstatement

17.1.1. Reinstatement applies to institutions whose accreditation has been suspended.

17.1.2. Reinstatement is not available for institutions whose accreditation has been withdrawn.

17.1.3. Institutions must have remediated the issues that led to suspension.

17.1.4. Institutions must demonstrate sustained compliance with IEB standards.

17.2. Reinstatement Process

17.2.1. The institution must submit a reinstatement application to IEB.

17.2.2. The application must include evidence of corrective actions taken.

17.2.3. The application must include a self-evaluation demonstrating current compliance.

17.2.4. A site visit will normally be conducted to verify compliance.

17.2.5. The Accreditation Committee will review the application and site visit findings.

17.3. Reinstatement Outcomes

17.3.1. Full reinstatement: Accreditation restored with remaining validity period.

17.3.2. Conditional reinstatement: Accreditation restored with conditions and enhanced monitoring.

17.3.3. Reinstatement with reduced validity: Accreditation restored with shortened validity period.

17.3.4. Denial of reinstatement: Suspension continues or withdrawal proceedings initiated.

17.4. Conditions Following Reinstatement

17.4.1. Reinstated institutions are subject to enhanced monitoring.

17.4.2. Enhanced monitoring continues for a minimum of twelve (12) months.

17.4.3. Reporting requirements may be increased.

17.4.4. Follow-up site visits may be required.

18. Public Disclosure and Transparency

18.1. Publication of Accreditation Status

- 18.1.1. IEB maintains a public register of accredited institutions.
- 18.1.2. The register includes the institution name, accreditation level, and validity period.
- 18.1.3. The register is available on the IEB website.
- 18.1.4. The register is updated promptly when accreditation status changes.

18.2. Information Available to the Public

- 18.2.1. Current accreditation status of all accredited institutions.
- 18.2.2. Accreditation validity dates.
- 18.2.3. Scope of accreditation (programmes or areas covered).
- 18.2.4. Any conditions or sanctions that are public.
- 18.2.5. Suspension or withdrawal of accreditation.

18.3. Confidential Information

- 18.3.1. Detailed assessment reports are confidential to the institution.
- 18.3.2. Specific conditions and stipulations are normally confidential unless significant.
- 18.3.3. Corrective action plans are confidential.
- 18.3.4. Internal deliberations and committee discussions are confidential.

18.4. Institutional Use of Accreditation Status

- 18.4.1. Accredited institutions may publicize their IEB accreditation status.
- 18.4.2. Institutions must accurately represent their accreditation status and scope.
- 18.4.3. Institutions may use IEB accreditation marks in accordance with IEB policy.
- 18.4.4. Misrepresentation of accreditation status is a serious breach.

18.5. Notification to Stakeholders

- 18.5.1. Institutions are responsible for informing stakeholders of their accreditation status.
- 18.5.2. Changes in status must be communicated to current learners.
- 18.5.3. Prospective learners must be given accurate information about accreditation.

18.5.4. IEB may independently notify stakeholders in cases of suspension or withdrawal.

19. Roles and Responsibilities

19.1. IEB Governing Council

- 19.1.1. Provides strategic oversight of accreditation validity and monitoring.
- 19.1.2. Approves policy amendments.
- 19.1.3. Makes final decisions on withdrawal of accreditation.
- 19.1.4. Receives reports on monitoring outcomes and trends.

19.2. Accreditation Committee

- 19.2.1. Makes decisions on accreditation validity periods.
- 19.2.2. Reviews and decides on renewal applications.
- 19.2.3. Decides on sanctions including suspension.
- 19.2.4. Makes recommendations to the Governing Council on withdrawal.

19.3. Monitoring and Review Panel

- 19.3.1. Reviews Annual Monitoring Reports.
- 19.3.2. Conducts interim reviews and site visits.
- 19.3.3. Assesses compliance with conditions and stipulations.
- 19.3.4. Makes recommendations to the Accreditation Committee.

19.4. IEB Secretariat

- 19.4.1. Manages the annual monitoring process.
- 19.4.2. Coordinates site visits and interim reviews.
- 19.4.3. Maintains records and documentation.
- 19.4.4. Communicates with institutions throughout the monitoring cycle.
- 19.4.5. Maintains the public register of accredited institutions.

19.5. Director of Quality Assurance

- 19.5.1. Oversees implementation of this policy.
- 19.5.2. Approves enhanced monitoring arrangements.
- 19.5.3. Authorizes unannounced site visits.

19.5.4. Reports to the Governing Council on monitoring activities.

19.6. Accredited Institutions

19.6.1. Maintain compliance with IEB standards throughout the accreditation cycle.

19.6.2. Submit required reports and documentation within specified timeframes.

19.6.3. Notify IEB of material changes in circumstances.

19.6.4. Cooperate with monitoring activities including site visits.

19.6.5. Address conditions and stipulations within specified timeframes.

19.6.6. Pay applicable fees within specified timeframes.

19.6.7. Accurately represent accreditation status to stakeholders.

20. Policy Review

- 20.1. This policy will be reviewed every three (3) years.
- 20.2. Reviews will assess the effectiveness of monitoring and review procedures.
- 20.3. Reviews will consider feedback from institutions and other stakeholders.
- 20.4. Reviews will incorporate lessons learned from monitoring activities.
- 20.5. Reviews will consider developments in quality assurance best practice.
- 20.6. Amendments will be approved by the IEB Governing Council.
- 20.7. Stakeholders will be notified of significant amendments.
- 20.8. The current version of this policy will be published on the IEB website.

21. Disclaimer and Legal Position

- 21.1. IEB is an independent, private, non-governmental, and non-statutory international education authority.
- 21.2. This policy does not create any legal rights or obligations enforceable in any jurisdiction.
- 21.3. IEB accreditation does not constitute government approval, statutory recognition, or professional licensure.
- 21.4. This policy operates within the voluntary accreditation framework established by IEB.
- 21.5. IEB reserves the right to amend this policy at any time without prior notice.
- 21.6. Decisions made under this policy are internal to the IEB accreditation framework.
- 21.7. Institutions seeking legal remedies should consult appropriate legal counsel.
- 21.8. This policy does not limit any rights institutions may have under applicable law.
- 21.9. IEB accreditation validity does not guarantee institutional quality or outcomes.
- 21.10. Stakeholders should conduct their own due diligence regarding institutions.

22. Conclusion

- 22.1. This policy establishes IEB's framework for managing accreditation validity and ongoing monitoring.
- 22.2. IEB is committed to ensuring that accredited institutions maintain quality throughout the accreditation cycle.
- 22.3. Ongoing monitoring protects learners and maintains public confidence in IEB accreditation.
- 22.4. IEB supports institutions in continuous quality improvement.
- 22.5. This policy reflects IEB's commitment to transparency, fairness, and accountability.
- 22.6. IEB will work collaboratively with institutions while maintaining rigorous standards.

23. Annexures

23.1. Annexure A: Annual Monitoring Report Template

23.1.1. Annexure A provides the template for Annual Monitoring Reports.

23.1.2. The template specifies required content and format.

23.1.3. The annexure is available as a separate document from IEB Secretariat.

23.2. Annexure B: Renewal Application Form

23.2.1. Annexure B provides the application form for accreditation renewal.

23.2.2. The form includes required information and supporting documents checklist.

23.2.3. The annexure is available as a separate document from IEB Secretariat.

23.3. Annexure C: Change Notification Form

23.3.1. Annexure C provides the form for notifying IEB of institutional changes.

23.3.2. The form specifies the information required for change notifications.

23.3.3. The annexure is available as a separate document from IEB Secretariat.

23.4. Annexure D: Corrective Action Plan Template

23.4.1. Annexure D provides the template for corrective action plans.

23.4.2. The template includes sections for issues, actions, responsibilities, and timelines.

23.4.3. The annexure is available as a separate document from IEB Secretariat.

23.5. Annexure E: Validity Period Summary

23.5.1. Annexure E provides a summary of validity periods for different accreditation levels.

23.5.2. The summary assists institutions in understanding accreditation cycles.

23.5.3. The annexure is available as a separate document from IEB Secretariat.

23.6. Annexure F: Monitoring Timeline Summary

23.6.1. Annexure F provides indicative timelines for monitoring activities.

23.6.2. The summary includes reporting deadlines and review schedules.

23.6.3. The annexure is available as a separate document from IEB Secretariat.

24. Document Control

24.1. Document Information

24.1.1. Document Title: Accreditation Validity, Monitoring, and Review Policy

24.1.2. Document Code: IEB-POL-005

24.1.3. Version: 1.0

24.1.4. Effective Date: January 2026

24.1.5. Next Review Date: January 2029

24.1.6. Prepared by: International Education Board Quality Assurance Division

24.1.7. Approved By: IEB Governing Council

24.1.8. Classification: Public

24.2. Version History

24.2.1. Version 1.0 represents the initial release of this policy.

24.2.2. Future versions will be documented with version number, date, and summary of changes.

24.2.3. All previous versions are archived and available upon request.

24.3. Related Documents

24.3.1. IEB Accreditation Framework and Standards Policy (IEB-POL-001)

24.3.2. IEB Accreditation Process Policy (IEB-POL-002)

24.3.3. IEB Eligibility Criteria Policy (IEB-POL-003)

24.3.4. IEB Accreditation Levels and Status Policy (IEB-POL-004)

24.3.5. IEB Complaints, Appeals, and Grievance Policy (IEB-POL-006)

24.3.6. IEB Data Protection and Privacy Policy (IEB-POL-007)

24.3.7. IEB Recognition and Representation Policy (IEB-POL-008)

24.3.8. IEB Logo Use and Intellectual Property Policy (IEB-POL-009)

24.3.9. IEB Accreditation Decision-Making and Oversight Policy (IEB-POL-010)

25. Approval

- 25.1. This policy has been reviewed and approved by the IEB Governing Council.
- 25.2. This policy is effective from the date specified in Document Control.
- 25.3. All stakeholders are expected to comply with this policy.
- 25.4. Queries regarding this policy should be directed to the IEB Secretariat.

End of Document

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