Review of the quality assurance system against European Standards and Guidelines for Quality Assurance in Montenegro

CONDUCTED FOR THE REGIONAL COOPERATION COUNCIL

CONTENTS

ABBREVIATIONS

ACQAHE	Agency for Control and Quality Assurance of Higher Education (Montenegro)
AQ	Agency for Quality Assurance and Accreditation Austria
ENQA	European Network of Quality Assurance Agencies
EQAR	European Quality Assurance Register
ESG	European Standards and Guidelines for Quality Assurance in Higher Education
ESU	European Students' Union
HE	Higher Education
HEI	Higher Education Institution
ICJ	International Court of Justice
KIC	Knowledge Innovation Centre
LoHE	Law on Higher Education
MoESY	Ministry of Education, sport & Youth
NQF	National Qualifications Framework
QA	Quality Assurance
QAA	Quality Assurance Agency
RCC	Regional Cooperation Council
SAR	Self-assessment report
VLUHR QA	Quality Assurance Unit of the Flemish Higher Education Council
UNSCR	United Nations Security Council Resolution
WB6	Western Balkan Six[1]

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[1] Albania, Bosnia and Herzegovina, Kosovo*, Montenegro, Republic of North Macedonia and Serbia
(*This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo declaration of independence).

INTRODUCTION

Review methodology & planning

The review of the Agency for Control and Quality Assurance of Higher Education (hereafter referred to as ACQAHE or the Agency) was carried out by a panel of three reviewers, consisting of a senior consultant from Knowledge Innovation Centre, **Nik Heerens**, who was also responsible for review coordination, one QA expert, **Maria E. Weber,** and one expert with specific student expertise, **Aleksandar Šušnjar**. All members of the panel shared responsibility for assessing the self-assessment material, attending the review and formulating the recommendations. All decisions by the panel were taken entirely autonomously and were taken by consensus. Short bios of the review panel are included in Annex II.

KIC ensured that the report of the review panel followed prescribed templates, and took a harmonised approach amongst the WB6 reviews undertaken within this project. But aside from that the content of this reports and its recommendations were left entirely up to the panels in line with suggested best practices.

The planning of the review started with the compilation of a self-assessment report by ACQAHE, based on a questionnaire provided by KIC, in which the agency was asked to reflect on how the QA System in Montenegro complies with each of the ESGs and additional European Quality Assurance Register (EQAR) criteria.

Once submitted, KIC experts validated the Self-Assessment Report, mainly checking if all ESGs, EQAR criteria and relevant legislation had been adequately addressed. Through further consultation between KIC and ACQAHE, further information and clarifications were provided where necessary.

A two-day virtual site visits was undertaken on 26 and 27 October 2020 via video conference and followed a meeting schedule in line with formal European Network of Quality Assurance Agencies (ENQA) reviews and based on an initial proposal of ACQAHE. The online site visit included interviews with ACQAHE's key internal and external stakeholders. Based on a principle of trust, KIC left it to ACQAHE to decide whom to select and invite to participate in the meetings. The site visit agenda in included in Annex I

On the basis of the information provided and the site visit, the review panel produced this recommendation report.

Information sources used for the review

In line with formal reviews for ENQA membership and EQAR inclusion, the main source of information was the above-mentioned self-assessment report (SAR) compiled by ACQAHE.

This information in the SAR was supported by a number of documents which ACQAHE supplied on the request of the KIC review panel:

1. overview of relevant legislation and by-laws which regulate external QA of higher education in Montenegro;

2. The operational manuals and rulebooks used by ACQAHE for its institutional and study programme reviews;

3. An overview of all steps taken in the external review processes undertaken by ACQAHE (from initiation to final review report);

4. Organigram of the governance and other structures of ACQAHE;

5. A sample of recent review reports produced by ACQAHE.

6. A link to the agency's website (https://akokvo.me/en/) together with further explanations to what information and documentation are available there.

Limitations

There are several differences between our consultancy and a real review conducted for entrance into EQAR. While in a real review significant effort would be spent triangulating data sources between different documentary evidences and interviewees, to ensure the accuracy of the data, in our case we have assumed that ACQAHE furnished data truthfully and in full. Any omissions in information given to us by ACQAHE would therefore affect our findings. Furthermore, our review panel is smaller than one which would operate in the real case.

Additionally, even mock-reviews are usually conducted physically on site but due to the exceptional circumstances caused by the COVID-19 pandemic, the site visit of ACQAHE has been conducted via video conference.

No part of this report implies an endorsement of these findings by ENQA or EQAR.

ANALYSIS OF THE QA SYSTEM AGAINST THE EUROPEAN STANDARDS AND GUIDELINES (ESG)

2.1 Consideration of Internal Quality Assurance

Standard	External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.
Guidelines	Quality assurance in higher education is based on the institutions' responsibility for the quality of their programmes and other provision; therefore it is important that external quality assurance recognises and supports institutional responsibility for quality assurance. To ensure the link between internal and external quality assurance, external quality assurance includes consideration of the standards of Part 1. These may be addressed differently, depending on the type of external quality assurance.
EQAR Interpretation	This standard relates to the crucial link between internal and external quality assurance of higher education institutions and programmes. To "address" means that the agency should systematically include all standards of Part 1 of the ESG in their criteria and procedures used to evaluate/accredit/audit institutions or programmes, while they may be addressed differently depending on the type of external quality assurance.
Analysis	ACQAHE conducts two types of external quality assurance; study programme accreditation and institutional reaccreditation. In addition, also accreditation of higher education programmes for lifelong learning falls under the competence of the Agency, but has not been included in our assessment due to a lack of information received about this type of accreditation. There are different sets of criteria for the accreditation of study programmes and for re-accreditation of institutions. Both sets of criteria are included in the respective manuals – *Standards and Guidelines for reaccreditation of higher education institutions* and *Standards and Guidelines for the accreditation of study programmes* and in their respective Rulebooks *(Rulebook for accreditation of study programs and Rules for procedures on re-Accreditation of HE institutions).* In addition, for study programme accreditation, there are additional standards for specific types of programmes, namely digital programmes, doctoral programmes, and programmes in English. The ACQAHE assessment frameworks includes the evaluation of internal quality assurance processes whereby all institutions and study programmes that are reviewed by the agency need to provide evidence of an internal quality assurance

	policy. However, during interviews ACQAHE staff indicated there is a need to provide more support to HEIs, not only in preparing for external review, but also in developing their internal QA in general (see also ESG 2.2).

The *Rules on Procedure of Re-accreditation of HE Institution* and the recently adopted *Rulebook on Accreditation of Study Programmes (September 2019)* do not make direct reference to the specific ESG standards but an analysis of these documents and the mapping of ACQAHE's Standards and Guidelines against the ESG, as provided in the SAR, shows that standards for both of ACQAHE's external QA procedures contain explicit links to all the standards under ESG Part 1. It must be noted that Standards 1.5- Teaching Staff and 1.6 – Learning Resources & Student Support are hereby fairly weakly represented in the criteria for study programme accreditation.

Furthermore, whereas the KIC panel could verify the requirements of ESG 2.1. with a sample of institutional re-accreditation reports, the study programme accreditation reports published before October 2020 are based on the older version of the rulebook and ACQAHE standards and guidelines, making it impossible to judge how the new study programme accreditation standards and guidelines are implemented in practice. |
| **Recommendations** | **KIC review panel conclusion: ACQAHE is Compliant with Standard 2.1**

R.2.1.1: The KIC panel encourages ACQAHE to undertake a process of consultation with all stakeholders to determine how external reviews can be more supportive in developing internal QA and development of a Quality Culture instead of primarily focusing on quality control.

R.2.1.2: For the study programme accreditation processes in Montenegrin higher education, ACQAHE should make sure that in implementing the new Rulebook on Accreditation of Study Programmes, all the elements covered by the ESG Part 1 are fully addressed and analysed in the review reports.

R.2.1.3: The KIC panel recommends ACQAHE to undertake an analysis of the prominence of the different standards and guidelines in the accreditation reports it has produced thus far, and to use this information for appropriate improvements in the Agency's rulebooks and templates. |

2.2 Designing Methodologies fit for purpose

Standard	External quality assurance should be defined and designed specifically to ensure its fitness to achieve the aims and objectives set for it, while taking into account relevant regulations. Stakeholders should be involved in its design and continuous improvement.

Guidelines	In order to ensure effectiveness and objectivity it is vital for external quality assurance to have clear aims agreed by stakeholders. The aims, objectives and implementation of the processes will

- bear in mind the level of workload and cost that they will place on institutions;

- take into account the need to support institutions to improve quality;

- allow institutions to demonstrate this improvement;

- result in clear information on the outcomes and the follow-up.

The system for external quality assurance might operate in a more flexible way if institutions are able to demonstrate the effectiveness of their own internal quality assurance. |
| **EQAR Interpretation** | - If the agency works in different jurisdictions it should take into account the relevant regulations of the jurisdiction in which the reviewed institution is based.

- In the case of joint programmes, the quality assurance agency should use the European Approach or Quality Assurance of Joint Programmes. |
| **Analysis** | All assessment procedures performed by ACQAHE are organised according to the following documents:

- Standards and Guidelines for the accreditation of study programmes (April 2019);
- Rulebook on the procedure for the accreditation of study programmes, including additional criteria for doctoral, English and distance learning studies (September 2020);
- Standards and Guidelines for reaccreditation of higher education institutions (April 2019);
- Rules on procedure for re-accreditation of higher education institution (April 2019);
- Rules on accreditation procedure of a lifelong learning programme (March 2019).

The combined documents serve as the guidelines for higher education institutions and for experts during the different review processes as well as describe the overall assessment procedures.

As the agency has only been in operation for a few years, the documents outlining its operations are also new - while the documents for re-accreditation of higher education institutions had been in use for approximately 1,5 years at the time of |

the site visit, the rulebook on the procedure for the accreditation of study programmes had only just been adopted[2].

For an external reader it is not immediately clear why there are different documents for Standards and Guidelines and for Rules of Procedures for the different types of external QA, but the agency staff is clear about the function of these documents and also representatives of the higher education institutions interviewed during the site visit found the documents clear enough. They also appreciated the support provided by ACQAHE staff in clarifying the different documents, criteria, procedures etc. in preparation for a review procedure.

When looking more closely at the different accreditation processes, there does seem to be some overlap and duplication and the KIC panel is worried that this leads to over-regulation in the system. For example, institutional re-accreditation is again focusing on programmes, although the published reports do not go in much detail of the programmes. There is also partial overlap between study programme accreditation conducted by the Agency, the NQF compliance assessment conducted by the Qualification Board, and the system of licensing under purview of the Ministry. It seems that these are all touching on similar issues - even though, or perhaps due to, these processes being regulated through different legal frameworks.

The stated aim of the QA system in Montenegro is not just to regulate, but also to develop the HE system as such and to serve the dual purpose of an improvement oriented external review and the basis for accreditation decisions. We would expect thereby that new systems for accreditation and re-accreditation should be an improvement upon the older ones, however the role of ACQAHE in supporting HEIs in building their own capacities for internal quality assurance is still underdeveloped. As was already mentioned under ESG 2.1, ACQAHE staff agreed with the KIC panel that there is a need to provide more support to HEIs in developing their internal QA and Quality Culture.

ACQAHE has developed its methodologies for QA within the legal framework set out in the Law on HE. The stipulations in the law are somewhat ambivalent about what aims are to be fulfilled through the QA system and especially the purpose of a specific focus on study programmes as well as on HE institutions is not explained. The KIC panel notes there is a markable difference between institutional re-accreditation and study programme accreditation in terms of the extent to which the agency is responsible for designing and adopting the procedures, standards and guidelines.

Whereas the Law on Higher Education stipulates that procedures for accreditation of study programmes are adopted by the Ministry, considering a

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[2] *Due to a lack of information provided, the third type of external reviews, accreditation of Lifelong Learning programmes, has not been included in our assessment.*

	proposal from ACQAHE, for institutional re-accreditation ACQAHE has the freedom to propose and adopt the procedures by itself. This is an unusual distinction and the reasoning behind it has not become clear to the KIC panel. We will address the consequences for ACQAHE's ownership of its work under ESG 3.3.
	Regardless, for both types of accreditation, involvement of stakeholders in Montenegrin HE in developing and continuous improvement of the methodologies (other than the Ministry and ACQAHE itself) is quite weak. It seems that the major strategic decisions are made without impactful consultation with either internal stakeholders (primarily students, but also HEI staff) or external stakeholders (e.g. labour market or civil society representatives).
Recommendations	**KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 2.2**
	R.2.2.1: The KIC panel recommends ACQAHE to embark upon a periodic review of its operations, with a focus on collecting all stakeholders' views on possible overlap and duplication between the different types of accreditation and related processes of licencing and qualifications framework referencing and whether all the procedures, standards and guidelines used are fit for purpose. This is obviously not under the sole responsibility or competence of ACQAHE, but at the very least the Agency should recommend systematic changes that would streamline these procedures and reduce the administrative burden on HEIs.
	R.2.2.2: ACQAHE should consider establishing more structural ways of involving stakeholders in all its operations, including in strategic decisions and the design and continuous improvement of the external methodologies as outlined in this Standard. This could for example be done through a new mandate and composition of its Steering Committee/Management Board or the establishment of a new Accreditation Board (see also ESG 3.1 and ESG 3.3).

2.3 Implementing processes

Standard	External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include
	- a self-assessment or equivalent;
	- an external assessment normally including a site visit;
	- a report resulting from the external assessment;
	- a consistent follow-up.
Guidelines	External quality assurance carried out professionally, consistently and transparently ensures its acceptance and impact.

	Depending on the design of the external quality assurance system, the institution provides the basis for the external quality assurance through a self-assessment or by collecting other material including supporting evidence. The written documentation is normally complemented by interviews with stakeholders during a site visit. The findings of the assessment are summarised in a report (cf. Standard 2.5) written by a group of external experts (cf. Standard 2.4). External quality assurance does not end with the report by the experts. The report provides clear guidance for institutional action. Agencies have a consistent follow-up process for considering the action taken by the institution. The nature of the follow-up will depend on the design of the external quality assurance.
EQAR Interpretation	- If site visits are not part of the processes used by the agency there need to be clear reasons for that. - The agency should provide follow-up procedures for all reviews that contain any sort of recommendations. - It is up to the agency to determine the nature and timing of the follow-up in light of its mission and as appropriate in its context, taking into consideration the national legislation. - The agency remains responsible for ensuring a consistent follow-up even if the formal decision is taken by another body or another body carries out the actual follow-up.
Analysis	ACQAHE follows most parts of this standard, in line with published manuals and templates of its two types of accreditation that outline the specific procedures for self-assessment, review, site visit and reporting. The review process is hereby clearly explained to the HEI and all the necessary information for participating in the review is available online. The KIC panel verified this during the online site visit, whereby HEIs confirmed that they understand what is expected of them and what they have to submit and perform during a review process. The agency is however lacking follow-up activities for part of its reviews. For *institutional re-accreditation*, a detailed follow-up procedure is developed whereby an HEI is expected to deliver an action plan within 90 days in response to recommendations in the review report, which is the basis for follow-up assessment by the agency. On the other hand, provisions on a follow-up process for *study programme accreditation* are completely lacking. According to ACQAHE, the agency had proposed a similar follow-up process as the one for institutional re-accreditation in the renewed Rulebook for accreditation of study programmes, but this was not

	included in the final version, adopted by the Ministry of Education in September 2020.
Recommendations	**KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 2.3** ***R.2.3.1:** The KIC panel recommends that a follow-up procedure becomes a mandatory element of every review process undertaken by ACQAHE. The Agency should also collaborate with the HEIs and other stakeholders to ensure the follow-up procedure provides a clear added value for them.*

2.4 Peer Review Experts

Standard	External quality assurance should be carried out by groups of external experts that include (a) student member(s).
Guidelines	At the core of external quality assurance is the wide range of expertise provided by peer experts, who contribute to the work of the agency through input from various perspectives, including those of institutions, academics, students and employers/professional practitioners. In order to ensure the value and consistency of the work of the experts, they - are carefully selected; - have appropriate skills and are competent to perform their task; - are supported by appropriate training and/or briefing. The agency ensures the independence of the experts by implementing a mechanism of no-conflict-of-interest. The involvement of international experts in external quality assurance, for example as members of peer panels, is desirable as it adds a further dimension to the development and implementation of processes.
EQAR Interpretation	- The agency should make use of a wide range of experts with different perspectives, including those of institutions, academics, students and employers/professional practitioners. - At least for reviews across border the agency should include experts from a variety of national origins. - The agency should ensure a consistent approach to the selection of experts as well as appropriate training or briefing of experts. - The agency needs to pay close attention to avoid conflicts of interest of experts, especially when the agency operates within small scientific or professional communities.

Analysis	For each of the external QA procedures ACQAHE forms an Expert Commission. Experts are recruited via an open call published on the Agency's website and through some partner QA agencies abroad, after which an Agency committee selects experts for the different review panels. The criteria for the inclusion of experts on list of experts and the selection process for different review panels are clearly defined in various protocols and followed through within the agency.

In this process, the Agency is not completely reliant on the open call and formal list of experts and has the possibility to directly invite experts for a review panel when they need someone with specific expertise. The KIC panel finds this positive.

The Agency has reliable and clearly defined mechanisms in place to ensure the independence and impartiality of potential experts and they have to sign a confidentiality and non-conflict of interest document.

The final decision about nomination of potential experts on the list and the appointment of experts on review panels is taken by the Director. Although in practise these decisions follow a process of checks and recommendations in which different members of staff members are involved, the KIC review panel believes the final decision about the composition of expert review panels should not be taken by one person and ought to be part of the mandate of a governing board or an experts' council rather than an executive director. Within the current governance structure of ACQAHE, this should be the responsibility of the Steering Committee/Managing Board. Alternatively, a good solution would be that this is part of the mandate of a new Accreditation Board which has been suggested by ACQAHE as a possible improvement of its governing structure and decision-making processes (see more on this under ESG 3.1 and ESG 3.3).

When it comes to the exact composition of expert review panels, there is the unusual situation that there are different eligibility criteria for institutional accreditation and for programme accreditation. Due to a different legal basis and interpretation of what constitutes an 'expert', students are *included* in review panels for institutional (re)accreditation but *excluded* from review panels for programme accreditation. A similar situation exists with labour market representatives who are only considered eligible for study programme reviews if they hold a doctoral degree. This is clearly not in line with the requirements of ESG 2.4, but, more importantly, an interpretation whereby being an 'expert' requires an academic title, disregards the specific knowledge and expertise students as well as non-academic external stakeholders can bring.

A positive aspect of the composition of review panels is that they mostly include a combination of domestic and international experts, the latter mostly from the region. Generally, the student member of institutional re-accreditation expert panels is also international. For a small HE system, it is indeed recommendable to involve international experts as this enhances the diversity, expertise and |

| | independence of review panels. Hereby recruitment from within the region, rather than further afield, does not only make sense from a cost perspective, but has the additional advantage that such experts can be expected to have a good understanding of a HE system which would not be too dissimilar from their own, and they more likely understand the language as well. On the other hand, including more experts from outside the region would add to diversity of the experts' list and bring truly international and diverse perspectives to the Montenegrin HE. A balance between those two approaches should therefore be achieved.

Experts panel members receive a one-day training from ACQAHE before the site visit. Besides this more general training, an ACQHE staff member functions as review coordinator whose task includes provision of further briefings and guidance to the expert panel during the review process.

Based on interviews with former members of expert panels, the KIC panel is confident ACQAHE takes training and preparations of experts very seriously. However, it would be beneficial for the quality and comprehensiveness of the reviews to have more extensive training opportunities for the experts, especially students and external stakeholders as well as a stronger support role of ACQAHE staff in the review process. |
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| **Recommendations** | **KIC review panel conclusion: ACQAHE is Partially Compliant with ESG 2.4**

R.2.4.1: ACQAHE should Involve students in all external reviews as a full member and ensure that all members of panels are engaged under equitable conditions

R.2.4.2: The KIC panel recommends ACQAHE to critically evaluate and where possible improve its structural training and briefing for all reviewers. This could include targeted trainings for different stakeholders and peer learning among experts (e.g. learning from more experienced reviewers).

R.2.4.3: The KIC panel recommends strengthening the support role of the review coordinator during the entire review visit. Although they are not a member of the expert panel, during the site visit the ACQAHE staff member can and should have a role in clarifying aspects related to the QA process, assuring consistency, pointing out when certain accreditation standards and criteria are not sufficiently addressed, making sure all the panel members (including the student expert) are fully involved and giving further guidance in the report writing process (see also ESG 2.5 and ESG 2.6).

R.2.4.4: The KIC panel recommends that the final decision on composition of review panels is taken by the governing board or (preferably) a newly established accreditation board, upon recommendation of the ACQAHE Director.

R.2.4.5: The KIC panel recommends ACQAHE to explore involving more international experts from beyond the region and to decide on the right balance |
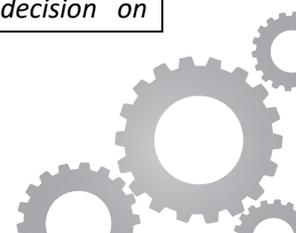
	in the expert register between domestic experts, experts from the region and experts from beyond the region.

2.5 Criteria for Outcomes

Standard	Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.
Guidelines	External quality assurance and in particular its outcomes have a significant impact on institutions and programmes that are evaluated and judged. In the interests of equity and reliability, outcomes of external quality assurance are based on pre-defined and published criteria, which are interpreted consistently and are evidence-based. Depending on the external quality assurance system, outcomes may take different forms, for example, recommendations, judgements or formal decisions.
EQAR Interpretation	*(No specific interpretation).*
Analysis	The outcome of the ACQAHE external QA procedures is the Expert Panel's report which includes the experts' judgement on assessment standards and a final judgement on the study programme or institution as a whole. ACQAHE's (re)accreditation documents provide an explicit overview of the assessment criteria the HEIs and their study programme need to meet, including different scores that can be given to indicate the level of fulfilment to the different accreditation standards. A predefined review template helps the expert panel in making sure all the standards and criteria are being addressed during the review and in the review report. The KIC panel finds these assessment standards and criteria clear and sufficiently detailed. The KIC panel has verified that institutional re-accreditation reports follow a structure intended to facilitate evidence-based reporting, while for the study programme accreditation it remains to be seen how evidence-based the new system will be (more on reports under ESG 2.6). There is a major weakness in the review process in relation to a consistent application of the external QA outcomes as there is no reliable mechanism to ensure consistency between different expert panels and their judgements. With each expert panel reaching their own judgement on the different standards and on overall accreditation, there is a realistic danger of inconsistency between different reviews. The role of the Agency's review coordinator would be key in guarding consistency, but in ACQAHE's review system, the main expert panel briefing only happens a day before the site visit and, in general in the review process the ACQAHE coordinator does not have a strong role when it comes to

	ensuring that the review reports include sufficient evidence and analysis to support the panel's judgements.

The KIC panel believes that the consistency of outcomes would greatly benefit from a stronger role of the ACQAHE staff member who acts as the coordinator of the review. They could give stronger support to the panel during the review process or even draft the review report based on the input from the expert panel.

Another weakness in relation to ESG 2.5 exists in relation to the overall final outcome of ACQAHE's external QA processes, namely if the HEI or study programme should receive or be rejected (re)-accreditation – or the third possible option: partial accreditation. For the KIC panel there are two concerns with the way in which (re) accreditation decisions are taken.

Firstly, there is no clear and transparent decision threshold, such as a minimum number of standards that need to be fulfilled. This means that the ultimate overall judgement in the expert report and the final accreditation decision are potentially arbitrary and lacking in transparency towards HEIs.

Secondly, the formal responsibility for taking decisions on accreditation is in the hands of one single person - the ACQAHE Director. The KIC panel understands that these decisions are based on the reports of the expert panels and normally just a confirmation of their judgements. Nevertheless, in theory, the director has some leeway to change the decisions of the expert panel.

Although the KIC panel agrees that the final decision on accreditation should be taken by the Agency, as there may be reason to correct misinterpretations of certain standards and criteria or to ensure judgements are applied consistently between different reviews, it does not support the current practise that this is the responsibility of one person (see also ESG 3.3)

Instead, the final accreditation decision should be taken by a dedicated accreditation body or, at the very least, become part of the mandate of the Steering Committee/Management board of ACQAHE. The responsibility of such a (accreditation) board should include assessing the expert reports, potentially asking for revisions or clarifications and taking decide on accreditation. All of this with the same provision that decisions should always be based on clear criteria and the judgement of the independent expert panel. |
| **Recommendations** | **KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 2.5**

R.2.5.1: the KIC panel recommends that ACQAHE develop clear, unambiguous and transparent criteria on how the views from expert panels in their external review reports are translated into an overall judgement on (re)accreditation.

R.2.5.2: Given the great importance and potential consequences for HEIs to receive (re) accreditation, the KIC panel recommends a change in the regulations on external QA resulting in a change whereby the formal decision on |

	(re)accreditation will no longer be taken by a single person (i.e. the Director) but by a new accreditation board, or at the very least by the ACQAHE governing board. (This recommendation needs to be considered in combination with the recommendations under ESG 3.3.). ***R.2.5.3:*** *ACQAHE should ensure a stronger coordinating role for the agency staff member to ensure consistency and quality of the expert panel's judgments and the overall outcome of the external review (see also ESG 2.4 and ESG 2.6).*

2.6 Reporting

Standard	Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.
Guidelines	The report by the experts is the basis for the institution's follow-up action of the external evaluation and it provides information to society regarding the activities of an institution. In order for the report to be used as the basis for action to be taken, it needs to be clear and concise in its structure and language and to cover. - context description (to help locate the higher education institution in its specific context); - description of the individual procedure, including experts involved; - evidence, analysis and findings; - conclusions; - features of good practice, demonstrated by the institution; - recommendations for follow-up action. The preparation of a summary report may be useful. The factual accuracy of a report is improved if the institution is given the opportunity to point out errors of fact before the report is finalised.
EQAR Interpretation	- All reports should be published in full, including those that resulted in a negative decision or conclusion. - The publication of summary reports (rather than full reports) does not fulfil the requirement of the standard. - Reports also have to be published for voluntary or commissioned evaluations of institutions or programmes, irrespective of whether they take place in the agency's base country or elsewhere, within the EHEA or beyond.

	- All experts should be appropriately involved in producing the report. - "Published" means that reports should be easily accessible on the agency's website, while "clear and accessible" refers to the reports' structure, content, style and language.
Analysis	At the time of the review, the number of reports that were available and were produced following the current rulebooks were too few for the KIC panel to draw a firm judgement about the overall quality and consistency of reports. With regard to the few reports that are available of external review undertaken by ACQAHE following the 'new' system, the KIC panel notes that the full reports as well as the resulting decision on accreditation are published on the Agency's website in a clear and accessible manner. In contrast, if we also consider the study programme accreditation reports from the previous system, it has to be noted that they follow an uneven structure, differ significantly among each other and in some cases the reports are not published in full. Overall, it is clear that positive steps have been taken to improve the quality, clarity and consistency of review reports, in particular in terms of ACQAHE's support and training for expert panels and their use of a predefined template for writing the report. Furthermore, assessed institutions are able to provide feedback on the draft reports and correct factual errors before the final versions are produced by the expert panels. The KIC panel learned that expert panels are also free to point out any commendations and examples of good practices, but these are not highlighted in the structure of the templates and especially in the available 'old' study programme accreditation reports, there appears to be little attention for such positive feedback as they are mainly focused on meeting minimum requirements. Equally, as has been addressed under ESG 2.3, there is a contrast between the institutional re-accreditation reports that include recommendations for follow-up actions and study programme accreditation reports that do not do so explicitly. Despite some clear positive developments in the way reports are being written and the KIC panel's optimism the quality and clarity of the newer reports compared to older ones, there remains much scope for improvement. Currently, ACQAHE staff do not participate in the wiring of reports and members of the review panels are fully responsible for their quality and consistency. In

	practise, they are however not always suitably experienced and skilled in this process, so besides more training and guidance from the ACQAHE staff, also a role in the drafting process itself of these experienced QA professionals would have a direct positive effect.
Recommendations	**KIC review panel conclusion: ACQAHE is Compliant with Standard 2.6** *R.2.6.1: It is necessary that ACQAHE upholds the practice of publishing all full reports, including those that resulted in a negative accreditation decision, and this should be included in the regulations for all types of accreditation undertaken by ACQAHE.* *R.2.6.2: ACQAHE should ensure that the reporting templates and guidance to expert panels have a clear indication of the minimum elements that are to be included in reports in line with ESG 2.6 and general good practice, namely:* • *Context description of the institution and/or study programme;* • *Description of the external review procedure, including experts involved;* • *Evidence, analysis and findings;* • *Conclusions;* • *Features of good practice, demonstrated by the institution and/or programme;* • *Recommendations for follow-up action.* *R.2.6.3: The KIC panel recommends an enhanced role for ACQAHE review coordinators in guiding and facilitating the report writing process. For consistency and quality of reports, it may be preferable to let the ACQAHE review coordinator act as coordinator of the writing process in collaboration with the chair of the expert panel. In line with practice in many QA agencies in Europe, it should also be considered to make the ACQAHE staff member responsible for the initial draft of the report, based on the findings and judgements of the expert panel, whereby the expert panel should at all times remain responsible for the final report. (See also ESG 2.4 and ESG 2.5)*

2.7 Complaints and appeals

Standard	Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.
Guidelines	In order to safeguard the rights of the institutions and ensure fair decision-making, external quality assurance is operated in an open and accountable way. Nevertheless, there may be misapprehensions or instances of dissatisfaction about the process or formal outcomes. Institutions need to have access to processes that allow them to raise issues of concern with the agency; the agencies, need to handle such issues in a

	professional way by means of a clearly defined process that is consistently applied.
	A complaints procedure allows an institution to state its dissatisfaction about the conduct of the process or those carrying it out.
	In an appeals procedure, the institution questions the formal outcomes of the process, where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the processes have not been consistently implemented.
EQAR Interpretation	It should be possible to appeal any formal decision.
Analysis	ACQAHE does not have its own *appeals procedure or complaints system* but instead the complaints and appeals procedure are defined through public administrative procedures in Montenegro which covers all administrative activities taken by the state bodies. This means that the only option for appeal for an HEI is to go to the administrative court to appeal against a negative accreditation decision from the agency.
	Although it is positive that reviewed HEIs have ample opportunities to point out factual errors in draft review reports to expert panels and that both the Agency and HEIs feel that the reviewed HEI can turn to ACQAHE with any complaint or appeal in an informal way, it is still a major weakness that the only formal mechanism for HEIs is to submit an appeal to the Administrative court through the official administrative procedure mandated by the Law.
	It is important to understand the exact role and scope that a well-functioning appeals and complaints system should have according to the ESG. An appeals and complaints procedure should focus on the procedural aspects of the evaluation and not its outcome. Hereby, a *complaints procedure* allows an institution to state its dissatisfaction about the conduct of the process or those carrying it out whereas in an *appeals procedure*, the institution questions the formal outcomes of the process, where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the processes have not been consistently implemented. An appeal can never result in a changed decision, but at most the decision to annul the original one and repeat the evaluation.
Recommendations	**KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 2.7**
	R.2.7.1: In addition to the national appeals system mandated by the Law, ACQAHE should establish a fair, independent and effective complaints and appeals process for the QA procedures they are responsible for. This internal complaint and appeals procedure is a crucial piece of the QA system and needs to be in place to nurture the trust of higher education institutions.

	• The <u>appeals process</u> should be more than the opportunity for appeals against negative accreditation decisions in the administrative court and include an internal independent body that decides on appeals in line with an established procedure of decision making. • *The <u>complaints process</u> should clearly indicate how responsibility for complaints will be assigned within the agency, how progress on them will be tracked, how this progress will be communicated to the complainants and how data from complaints will be analysed.*

3.1 Activities, policy and processes for quality assurance

Standard	Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.
Guidelines	To ensure the meaningfulness of external quality assurance, it is important that institutions and the public trust agencies. Therefore, the goals and objectives of the quality assurance activities are described and published along with the nature of interaction between the agencies and relevant stakeholders in higher education, especially the higher education institutions, and the scope of the agencies' work. The expertise in the agency may be increased by including international members in agency committees. A variety of external quality assurance activities are carried out by agencies to achieve different objectives. Among them are evaluation, review, audit, assessment, accreditation or other similar activities at programme or institutional level that may be carried out differently. When the agencies also carry out other activities, a clear distinction between external quality assurance and their other fields of work is needed.
EQAR Interpretation	- Agencies should themselves conduct external quality assurance activities on a regular basis, using established processes and criteria. Organisations that only occasionally organise reviews of institutions or programmes do not comply with the standard. - The involvement of stakeholders should be organised in a way that ensures the agency's independence (see ESG 3.3).
Analysis	Established by the Law on Higher Education (LoHE) in November 2017, ACQAHE became operational in September 2018 and should thus be considered a new

agency. The Agency has undertaken external reviews on a regular basis, with more than 50 study programme reviews and institutional reviews of most of the HEIs in Montenegro[3].

ACQAHE operates a comprehensive set of external QA procedures at the study programme level and institutional level and has much to offer the HE sector through the expertise of its staff, sector wide knowledge and accumulated institutional and programme data.

The work of ACQAHE is guided by the following mission statement, published on the Agency's website:

> *"ACQAHE contributes to the quality improvement of higher education in Montenegro by application of European Standards and Guidelines in evaluation of higher education institutions, their study programmes and lifelong study programmes in order to ensure the integration of Montenegrin system of quality assurance of higher education into the European one."*

This mission statement is straightforward and fully reflects ACQAHE's intention to operate in close alignment with the ESG. Indeed, the Law on Higher Education also states explicitly that activities related to quality assurance in higher education shall be carried out ACQAHE in compliance with the European Standards and Guidelines.

Both the Mission and Objectives of the Agency emphasise Quality Improvement of higher education programmes and institutions in Montenegro besides guaranteeing primary standards and criteria for public validity. In addition, ACQAHE's Objectives include objectivity and independence of QA decisions; providing society with information of the quality of HE; and promotion of internationalisation of the external QA process.

ACQAHE's Mission and Objectives are translated in the laws, by-laws and other acts that regulate the Agency's daily work, including the procedures for (re)accreditation.

Here the curious situation exists that ACQAHE has been almost entirely responsible for development and adoption of the system of institutional re-accreditation whereas it has only had an advisory role in the development of the system of study programme accreditation, which is adopted by the MoESY.

In QA systems across the EHEA it is not unusual that the Ministry is responsible for creating an overall framework for external QA, but it is unusual that is has a much stronger role in one type of accreditation than in the other. Moreover, the Ministry's involvement normally does not encompass the adoption of the

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[3] Based on figures from 2019

operational procedures and methods of external QA which is supposed to be the responsibility of the QA agency (see also ESG 3.3).

When it comes to the implementation of the Agency's Mission and Objectives in the standards and procedures for external QA, including alignment with the ESG which is such a key aspect of the Mission, he KIC panel can see a clear difference between the two types of accreditation. For the KIC panel the main weaknesses in the standards and procedures relate to the study programme accreditation, whereas the recently adopted standard and procedures for institutional re-accreditation are much more aligned to the ESG and, indeed, ACQAHE's own Mission and Objectives. The main differences, weaknesses and areas for improvement in both types of accreditation are explained in more detail under ESG Part 2.

During the online site visit the KIC panel received sufficient evidence that ACQAHE is trusted and well appreciated by HE stakeholders, who all expressed their willingness to cooperate in the future. Yet, stakeholder involvement in the governance and work of ACQAHE is insufficient and a major weakness in Montenegro's QA system – and also in terms of ESG 3.1.

In line with the LoHE, ACQAHE is governed by the Director and the Steering Committee/Management Board. Both the Director and the members of the Steering Committee/Management Board are appointed by the Government following a proposal by the MoEYS (in the case of the Director this is based on a public call), whereby the Steering Committee/Management Board only includes a representative from the Government, the MoEYS and the public University of Montenegro. The composition of the Steering Committee/Management Board clearly does not reflect the variety of stakeholders that participate in higher education governance. In particular students and representatives of the labour market, but also representatives of the other (non-public) universities are excluded from the governance and decision-making of ACQAHE. Currently, the Agency also does not have any international members in its governing or working bodies.

In the SAR, ACQAHE acknowledges this weakness and proposes to establish a separate independent Accreditation Body that would involve independent and expert members from universities, Government, foreign QA agencies, the labour market and students.

The KIC panel agrees that a possible way forward could be to establish a new expert committee/Accreditation Board which would include stakeholders and international expertise, and would be in charge of all the Agency's external QA processes and decisions on accreditation – currently part of the mandate of the Director. Such an Accreditation Body would undoubtedly be very useful for the Agency as it would not only help with the ratification and establishment of review panels, monitoring the implementation of peer reviews, consistency and quality

	of external review reports, but also in joint policy making and stronger involvement of stakeholders.
Recommendations	**KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 3.1** *R.3.1.1: The KIC panel recommends ACQAHE's Board and staff start a dialogue with the Ministry and key stakeholders to critically reflect on how the Agency's governing structure should be adjusted to better allow for independent, expert-driven and stakeholder-inclusive governance and decision making, which is in line with international good practise and compliant with the ESG.* *R.3.1.2: Together with policymakers and lawmakers ACQAHE should consider including a body similar to an Accreditation Board in the Agency's governing structure which would consist (at a minimum) of eminent experts and stakeholder representatives and would be responsible for all accreditation decisions and expert policy work on External QA.* *R.3.1.3: Even within the present legal constraints, ACQAHE should strive towards involving all stakeholders, and particularly students, as full members in its current and future governing bodies. The agency should use its international connections to also more actively encourage the participation of international experts in its governance and work. Outside of its governance, ACQAHE needs to find ways of collecting opinions and perspectives from diverse stakeholder groups to ensure that there is a fruitful exchange of ideas.*

3.2 Official status

Standard	Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.
Guidelines	In particular when external quality assurance is carried out for regulatory purposes, institutions need to have the security that the outcomes of this process are accepted within their higher education system, by the state, the stakeholders and the public.
EQAR Interpretation	For international organisations it might be a prerequisite to be registered on EQAR in order to be formally recognised by a (national) public authority. In such a case, the agency is not expected to be formally recognised as a quality assurance agency before it is registered on EQAR.
Analysis	ACQAHE has an established legal basis for its operations, defined in the Law on Higher Education and is registered in Montenegro's Central Register of Legal Entities. The site visit confirmed that the agency is formally recognised by the competent public authorities and all other stakeholders as the only body responsible for EQA procedures in the Economy.

	The Agency nevertheless indicates it prefers to be more clearly defined as a public institution and more firmly embedded in the Montenegrin public administration system, which the KIC panel can understand but does not consider a prerequisite for compliance with ESG 3.2. (For issues related to ACQAHE's independence, see ESG 3.3).
Recommendations	**KIC review panel conclusion: ACQAHE is Compliant with Standard 3.2** *R.3.2.1: In consultation with the Ministry and other relevant public authorities, ACQAHE should take the necessary steps to clarify its legal status within the system of public administration.*

3.3 Independence

Standard	Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.
Guidelines	Autonomous institutions need independent agencies as counterparts. In considering the independence of an agency the following are important: - Organisational independence, demonstrated by official documentation (e.g. instruments of government, legislative acts or statutes of the organisation) that stipulates the independence of the agency's work from third parties, such as higher education institutions, governments and other stakeholder organisations; - Operational independence: the definition and operation of the agency's procedures and methods as well as the nomination and appointment of external experts are undertaken independently from third parties such as higher education institutions, governments and other stakeholders; - Independence of formal outcomes: while experts from relevant stakeholder backgrounds, particularly students, take part in quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency. Anyone contributing to external quality assurance activities of an agency (e.g. as expert) is informed that while they may be nominated by a third party, they are acting in a personal capacity and not representing their constituent organisations when working for the agency. Independence is important to ensure that any procedures and decisions are solely based on expertise.
EQAR Interpretation	- Where an agency's independence is not obvious from its structures and status, the Register Committee expects that the external review panel considers in greater detail how operational independence is safeguarded in practice.

	- The integrity of expert groups' reports should be ensured by preventing undue influence of stakeholders on the findings, analysis, conclusions and recommendations, and that the body which takes (accreditation, audit, etc.) decisions after external QA activities, operates independently and without political or other undue influence. - If the agency has other activities than external quality assurance (e.g. seminars, consultancy), adequate policies and processes should be in place to safeguard independence of the respective organisational units in performing their QA functions.
Analysis	On a first view, the organisational structure of ACQAHE has been established in a way that ensures organisational independence. ACQAHE is legally an independent entity and a competent body responsible for external QA in Montenegro, has full control over its own budget, sets its own mission, vision and objectives and is governed by the ACQAHE Director and separate Steering Committee/Management Board. However, when zooming in further, the KIC panel has some concerns about ACQAHE's organisational independence. The KIC panel's main concern is that all members of the Steering Committee/Management Board are appointed by the Government on the proposal of the Ministry, as is the Director. In the case of the Steering Committee/Management Board, two of its current three members are even directly connected to the Government and Ministry, with the third member coming from the public University of Montenegro. This evidently creates a high level of dependency on the Government and Ministry and such a structure cannot fully assure that no government influence is taken on the work of ACQAHE. The composition of the Steering Committee/Management Board has the additional disadvantage that stakeholders are not fully involved in the governance of ACQAHE, and it raises concerns about the ownership and of the quality assurance system by the HE sector and a lack of checks and balances which a more diversely composed governing board would bring (see also ESG 3.1.). The KIC panel has a further concern regarding the mandate of the ACQAHE Director. The position and competences of the Director is regulated in the LoHE, giving them a clear individual mandate. This creates an unusual situation, in comparison with other QA agencies in Europe, that there is no clear hierarchical relationship between ACQAHE's Steering Committee/Management Board and the Director. The competence for the recruitment and appointment of the director lies with the Government and is thus undertaken outside the governing structures of the QA agencies themselves. Although the selection process for a

	new Director is officially based on a public competition it does not follow procedures for 'independent' appointees such as ombudsmen or members of the judiciary.

We would hereby like to emphasise that our review process does not include any assessment of the performance or independence of the current Director, however there is an obvious potential for appointments to be politically motivated. This method of appointment, combined with limited accountability towards the agency's board, means that the checks and balances for decision making within ACQAHE is weak and cause for concern.

As referred to under ESG 2.4 and 2.5, the mandate of the Director for the final decision on composition of review panels and on accreditation also raises the principal question if so much power ought to be in the hands of one person. Even when in practice this panel composition is based on the advice of ACQAHE staff members, which is itself based on solid criteria set for the experts' independence and the accreditation decisions are normally based on the expert panel recommendation, it is currently possible and permissible for the ACQAHE Director to deviate from these**.** As has been argued before, these important formal decisions ought to be taken by an autonomous and independent governing or accreditation board.

When it comes to ACQAHE's operational independence, the KIC panel is of the opinion that the Agency is not autonomous to a satisfactory degree in terms of setting its external QA policies and regulations. As has been mentioned under ESG 3.1, the LoHE allows that ACQAHE itself regulates the institutional reaccreditation process but does not allow full autonomy in regulating the study programme accreditation process for which the Agency only proposes but the Ministry adopts the regulations. Which are subsequently published as official documents by the Montenegrin Government, not as documents of the Agency.

The KIC panel was informed that several of ACQAHE's proposals for bringing the study programme accreditation more in line with the ESG, such as including a follow-up process and involve students in the review panels, were not taken over by the Ministry in the new regulations that were adopted in 2019. This further confirms that the limitations in ACQAHEs operational autonomy regarding study programme accreditation is not just formal but also a practical reality. |
| **Recommendations** | **KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 3.3**

R.3.3.1: The KIC panel recommends that the relevant legislation is amended to ensure ACQAHE has full organisational and operational independence. This should minimally include:

1. *A legal guarantee of full independence of operations and decisions, whereby ACQAHE has a similar authority over study programme accreditation as for institutional re-accreditation.* |

	2. *Change of the composition of the Steering Committee/Management board to include all relevant stakeholders, with no stakeholder having a controlling interest.*
	3. *Consider creation of a separate independent Accreditation Body, composed of all eminent experts, relevant stakeholders and if possible international experts, to be responsible for all decisions regarding external QA standards and procedures, including accreditation decisions. Alternatively, the Steering Committee/Management Board could take on these responsibilities, conditional on the proposed changes in its composition.*
	4. *Director to be appointed by the Steering Committee/Management Board instead of the Government.*

3.4 Thematic analysis

Standard	Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.
Guidelines	In the course of their work, agencies gain information on programmes and institutions that can be useful beyond the scope of a single process, providing material for structured analyses across the higher education system. These findings can contribute to the reflection on and the improvement of quality assurance policies and processes in institutional, national and international contexts. A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty.
EQAR Interpretation	*(No specific interpretation).*
Analysis	ACQAHE has only started operating recently and thus far it has not produced thematic analyses in line with the requirements of ESG 3.4. Nevertheless, the KIC panel recognises that ACQAHE does have the capacity to undertake thematic analyses as it already has a research component within its Sector for Quality Assurance and Research. Part of its remit is to collect data, realise surveys and publish analyses in field of quality of higher education and higher education system in general, but it has not yet embarked on this task, or set up a plan for its realisation. During the interviews, ACQAHE staff indicated that although it has not been a priority thus far, certain initiatives have been undertaken in data collection and analysis and they want to use this to produce thematic analysis in future, in which they would describe and analyse the general findings of their external QA activities.
Recommendations	**KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 3.4**

	R.3.4.1: In order to be in compliance with ESG 3.4, ACQAHE needs to start producing thematic analyses. ACQAHE is encouraged to actively engage in discussions with the higher education stakeholders to identify the areas for thematic analysis that would be of interest for them. *R.3.4.2: We recommend that ACQAHE considers its internal staff resources and research capacity for undertaking such thematic analyses on a structural basis. Preferably, the Sector for Quality Assurance and Research should be strengthened and adopt this as one of its core tasks. Alternatively, the work could be undertaken in partnership with other organisations such as specialised higher education research groups within universities or Non-Governmental Organisations (NGOs) or for example through the engagement of research students.* *R.3.4.3: ACQAHE should use the results of the thematic analysis to improve the quality assurance processes on institutional and national level.*

3.5 Resources

Standard	Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.
Guidelines	It is in the public interest that agencies are adequately and appropriately funded, given higher education's important impact on the development of societies and individuals. The resources of the agencies enable them to organise and run their external quality assurance activities in an effective and efficient manner. Furthermore, the resources enable the agencies to improve, to reflect on their practice and to inform the public about their activities.
EQAR Interpretation	*(No specific interpretation).*
Analysis	At the time of the review, ACQAHE had 13 staff members. During the interactions with ACQAHE and interviews with stakeholders, the KIC panel has been impressed with the dedication and professionalism of the agency's staff. After the first years of the agency's existence, where the emphasis was on development of core processes, the KIC panel believes ACQAHE's staff is qualified and the capacity is adequate to carry out the agency's basic functions. However, additional human resources might be needed if the ACQAHE is to strengthen its activities of other beneficial functions and ESG requirements, such as thematic analysis, institutional capacity building and more extensive QA experts training. ACQAHE's financial resources have thus far also been sufficient as full financing of salaries and expert commission fees and costs are provided through the state budget. This does mean though that for its financial resources, ACQAHE is fully

	dependent on the government as there is no finance stream for external reviews from HEIs directly to the agency.

The only source of additional funding from the agency comes from International projects, which the KIC panel sees as a good practice. These projects do not just provide the agency with more financial flexibility but are also the main source of training, exchange and capacity building opportunities for the agency and its staff. |
| Recommendations | **KIC review panel conclusion: ACQAHE is Compliant with Standard 3.5**

R.3.5.1: The KIC panel recommends that continuous professional development of the ACQAHE's staff becomes a much higher priority for the Agency. There should be a clear and structural internal budget allocated for significant and impactful staff training (other than participation in projects and peer exchange with staff of other QA agencies).

R.3.5.2: ACQAHE should create a long-term overview of expected financial resources needed for its core activities and the further capacity building requirements of the Agency, including those related to the recommendations in this report. This would allow ACQAHE to establish long-term financial plans which would enable it to timely acquire additional support from the state budget, if necessary. In addition, a diversification of income should be considered, in particular charging of fees from HEIs to cover some of the costs of external reviews, which would mean that ACQAHE would be more flexible and less dependent on state funding. |

3.6 Internal Quality Assurance and Professional Conduct

Standard	Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.
Guidelines	Agencies need to be accountable to their stakeholders. Therefore, high professional standards and integrity in the agency's work are indispensable. The review and improvement of their activities are on-going so as to ensure that their services to institutions and society are optimal.

Agencies apply an internal quality assurance policy which is available on its website. This policy

- ensures that all persons involved in its activities are competent and act professionally and ethically;

- includes internal and external feedback mechanisms that lead to a continuous improvement within the agency;

- guards against intolerance of any kind or discrimination; |

	- outlines the appropriate communication with the relevant authorities of those jurisdictions where they operate; - ensures that any activities carried out and material produced by subcontractors are in line with the ESG, if some or all of the elements in its quality assurance activities are subcontracted to other parties; - allows the agency to establish the status and recognition of the institutions with which it conducts external quality assurance.
EQAR Interpretation	- The processes for internal quality assurance need to be formal and regular, and not just informal. - Integrity of an agency's activities includes that it uses the EQAR and ESG "labels" only in connection with activities that are within the scope of the ESG and have been subject to an external review.
Analysis	ACQAHE does not currently have an internal quality assurance procedure. The SAR mentions there are a few documents in place aimed at supporting the agency's internal workings, including an Integrity Plan and regulations on conflict of interest for reviewers, but this is insufficient in terms of defining, assuring and enhancing ACQAHE's own quality and integrity of its activities. Although the agency is relatively new, ACQAHE ought to provide an example and there is no valid reason provided for not having the basic internal QA procedures in place, such as those related to the agency's own performance, integrity and non-discrimination provisions and assurances of the competent, ethical and professional behaviour of staff. These internal QA procedures should also be made publicly available via the agency's website. Another key element of an internal QA policy is a structured, formal system of collecting and analysing feedback from HEIs, reviewers and other stakeholders, as well as the agency's own staff. ACQAHE also does not currently have such feedback mechanisms in place, and the feedback the agency does receive happens in ad-hoc and informal way (e.g. during the site visits).
Recommendations	**KIC review panel conclusion: ACQAHE is Partially Compliant with Standard 3.6** *R.3.6.1: AQAHE should implement a comprehensive internal quality assurance policy and consistent internal procedures related to defining, assuring and enhancing the quality and integrity of its activities. The internal QA policy should at least integrate all the procedures related to the topics listed in the Guidelines to ESG 3.6 and should be published on the agency's website.* *R.3.6.2: ACQAHE's internal QA processes should also include a structured formal system of collection of regular feedback from HEIs, reviewers and other stakeholders involved in external reviews as well as from the agency' own staff.*

	This would provide ACQAHE with valuable information from all the stakeholders that should be used to continuously improve its work and the framework in which it operates. ***R.3.6.3:*** *A system of regular feedback collection as described under R.3.6.2 should serve as the basis for in-depth analyses of the agency's performance, which can also be connected with thematic analyses (see ESG 3.4.). Such analyses should then be used to implement thorough and continuous improvements to the agency's structures and operations, and stakeholders should be informed about these changes in order to close the feedback loop.*

3.7 Cyclical External Review of Agencies

Standard	Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.
Guidelines	A periodic external review will help the agency to reflect on its policies and activities. It provides a means for assuring the agency and its stakeholders that it continues to adhere to the principles enshrined in the ESG.
EQAR Interpretation	The cyclical review of an agency is a prerequisite for (continued) EQAR registration and inherently fulfilled by the agency undergoing a review.
Analysis	***This Standard is not applicable for agencies that are not yet EQAR registered.***
Recommendations	-

SUMMARY OF THE FINDINGS

ESG 2.1: Compliant

R.2.1.1: The KIC panel encourages ACQAHE to undertake a process of consultation with all stakeholders to determine how external reviews can be more supportive in developing internal QA and development of a Quality Culture instead of primarily focusing on quality control.

R.2.1.2: For the study programme accreditation processes in Montenegrin higher education, ACQAHE should make sure that in implementing the new Rulebook on Accreditation of Study Programmes, all the elements covered by the ESG Part 1 are fully addressed and analysed in the review reports.

R.2.1.3: The KIC panel recommends ACQAHE to undertake an analysis of the prominence of the different standards and guidelines in the accreditation reports it has produced thus far, and to use this information for appropriate improvements in the Agency's rulebooks and templates.

ESG 2.2: Partially Compliant

R.2.2.1: The KIC panel recommends ACQAHE to embark upon a periodic review of its operations, with a focus on collecting all stakeholders' views on possible overlap and duplication between the different types of accreditation and related processes of licencing and qualifications framework referencing and whether all the procedures, standards and guidelines used are fit for purpose. This is obviously not under the sole responsibility or competence of ACQAHE, but at the very least the Agency should recommend systematic changes that would streamline these procedures and reduce the administrative burden on HEIs.

R.2.2.2: ACQAHE should consider establishing more structural ways of involving stakeholders in all its operations, including in strategic decisions and the design and continuous improvement of the external methodologies as outlined in this Standard. This could for example be done through a new mandate and composition of its Steering Committee/Management Board or the establishment of a new Accreditation Board (see also ESG 3.1 & ESG 3.3).

ESG 2.3: Partially Compliant

R.2.3.1: The KIC panel recommends that a follow-up procedure becomes a mandatory element of every review process undertaken by ACQAHE. The Agency should also collaborate with the HEIs and other stakeholders to ensure the follow-up procedure provides a clear added value for them.

ESG 2.4: Partially Compliant

R.2.4.1: ACQAHE should Involve students in all external reviews as a full member and ensure that all members of panels are engaged under equitable conditions.

R.2.4.2: *The KIC panel recommends ACQAHE to critically evaluate and where possible improve its structural training and briefing for all reviewers. This could include targeted trainings for different stakeholders and peer learning among experts (e.g. learning from more experienced reviewers).*

R.2.4.3: *The KIC panel recommends strengthening the support role of the review coordinator during the entire review visit. Although they are not a member of the expert panel, during the site visit the ACQAHE staff member can and should have a role in clarifying aspects related to the QA process, assuring consistency, pointing out when certain accreditation standards and criteria are not sufficiently addressed, making sure all the panel members (including the student expert) are fully involved and giving further guidance in the report writing process (see also ESG 2.5 & ESG 2.6).*

R.2.4.4: *The KIC panel recommends that the final decision on composition of review panels is taken by the governing board or (preferably) a newly established accreditation board, upon recommendation of the ACQAHE Director.*

R.2.4.5: *The KIC panel recommends ACQAHE to explore involving more international experts from beyond the region and to decide on the right balance in the expert register between domestic experts, experts from the region and experts from beyond the region.*

ESG 2.5: Partially Compliant

R.2.5.1: *the KIC panel recommends that ACQAHE develop clear, unambiguous and transparent criteria on how the views from expert panels in their external review reports are translated into an overall judgement on (re)accreditation.*

R.2.5.2: *Given the great importance and potential consequences for HEIs to receive (re) accreditation, the KIC panel recommends a change in the regulations on external QA resulting in a change whereby the formal decision on (re)accreditation will no longer be taken by a single person (i.e. the Director) but by a new accreditation board, or at the very least by the ACQAHE governing board. (This recommendation needs to be considered in combination with the recommendations under ESG 3.3.).*

R.2.5.3: *ACQAHE should ensure a stronger coordinating role for the agency staff member to ensure consistency and quality of the expert panel's judgments and the overall outcome of the external review (see also ESG 2.4 & ESG 2.6).*

ESG 2.6: Compliant

R.2.6.1: *It is necessary that ACQAHE upholds the practice of publishing all full reports, including those that resulted in a negative accreditation decision, and this should be included in the regulations for all types of accreditation undertaken by ACQAHE.*

R.2.6.2: *ACQAHE should ensure that the reporting templates and guidance to expert panels have a clear indication of the minimum elements that are to be included in reports in line with ESG 2.6 and general good practice, namely:*

- *Context description of the institution and/or study programme;*

- *Description of the external review procedure, including experts involved;*
- *Evidence, analysis and findings;*
- *Conclusions;*
- *Features of good practice, demonstrated by the institution and/or programme;*
- *Recommendations for follow-up action.*

R.2.6.3: *The KIC panel recommends an enhanced role for ACQAHE review coordinators in guiding and facilitating the report writing process. For consistency and quality of reports, it may be preferable to let the ACQAHE review coordinator act as coordinator of the writing process in collaboration with the chair of the expert panel. In line with practice in many QA agencies in Europe, it should also be considered to make the ACQAHE staff member responsible for the initial draft of the report, based on the findings and judgements of the expert panel, whereby the expert panel should at all times remain responsible for the final report. (See also ESG 2.4 & ESG 2.5)*

ESG 2.7: Partially Compliant

R.2.7.1: *In addition to the national appeals system mandated by the Law, ACQAHE should establish a fair, independent and effective complaints and appeals process for the QA procedures they are responsible for. This internal complaint and appeals procedure is a crucial piece of the QA system and needs to be in place to nurture the trust of higher education institutions.*

- The <u>appeals process</u> should be more than the opportunity for appeals against negative accreditation decisions in the administrative court and include an internal independent body that decides on appeals in line with an established procedure of decision making.
- *The <u>complaints process</u> should clearly indicate how responsibility for complaints will be assigned within the agency, how progress on them will be tracked, how this progress will be communicated to the complainants and how data from complaints will be analysed.*

ESG 3.1: Partially Compliant

R.3.1.1: *The KIC panel recommends ACQAHE's Board and staff start a dialogue with the Ministry and key stakeholders to critically reflect on how the Agency's governing structure should be adjusted to better allow for independent, expert-driven and stakeholder-inclusive governance and decision making, which is in line with international good practise and compliant with the ESG.*

R.3.1.2: *Together with policymakers and lawmakers ACQAHE should consider including a body similar to an Accreditation Board in the Agency's governing structure which would consist (at a minimum) of eminent experts and stakeholder representatives and would be responsible for all accreditation decisions and expert policy work on External QA.*

R.3.1.3: *Even within the present legal constraints, ACQAHE should strive towards involving all stakeholders, and particularly students, as full members in its current and future governing bodies. The agency should use its international connections to also more actively encourage the participation of international experts in its governance and work. Outside of its governance, ACQAHE needs to find ways of collecting opinions and perspectives from diverse stakeholder groups to ensure that there is a fruitful exchange of ideas.*

ESG 3.2: Compliant

R.3.2.1: In consultation with the Ministry and other relevant public authorities, ACQAHE should take the necessary steps to clarify its legal status within the system of public administration.

ESG 3.3: Partially Compliant

R.3.3.1: The KIC panel recommends that the relevant legislation is amended to ensure ACQAHE has full organisational and operational independence. This should minimally include:

1. *A legal guarantee of full independence of operations and decisions, whereby ACQAHE has a similar authority over study programme accreditation as for institutional re-accreditation.*
2. *Change of the composition of the Steering Committee/Management board to include all relevant stakeholders, with no stakeholder having a controlling interest.*
3. *Consider creation of a separate independent Accreditation Body, composed of all eminent experts, relevant stakeholders and if possible international experts, to be responsible for all decisions regarding external QA standards and procedures, including accreditation decisions. Alternatively, the Steering Committee/Management Board could take on these responsibilities, conditional on the proposed changes in its composition.*
4. *Director to be appointed by the Steering Committee/Management Board instead of the Government.*

ESG 3.4: Partially Compliant

R.3.4.1: In order to be in compliance with ESG 3.4, ACQAHE needs to start producing thematic analyses. ACQAHE is encouraged to actively engage in discussions with the higher education stakeholders to identify the areas for thematic analysis that would be of interest for them.

R.3.4.2: We recommend that ACQAHE considers its internal staff resources and research capacity for undertaking such thematic analyses on a structural basis. Preferably, the Sector for Quality Assurance and Research should be strengthened and adopt this as one of its core tasks. Alternatively, the work could be undertaken in partnership with other organisations such as specialised higher education research groups within universities or Non-Governmental Organisations (NGOs) or for example through the engagement of research students.

R.3.4.3: ACQAHE should use the results of the thematic analysis to improve the quality assurance processes on institutional and national level.

ESG 3.5: Compliant

R.3.5.1: The KIC panel recommends that continuous professional development of the ACQAHE's staff becomes a much higher priority for the Agency. There should be a clear and structural internal budget allocated for

significant and impactful staff training (other than participation in projects and peer exchange with staff of other QA agencies).

R.3.5.2: ACQAHE should create a long-term overview of expected financial resources needed for its core activities and the further capacity building requirements of the Agency, including those related to the recommendations in this report. This would allow ACQAHE to establish long-term financial plans which would enable it to timely acquire additional support from the state budget, if necessary. In addition, a diversification of income should be considered, in particular charging of fees from HEIs to cover some of the costs of external reviews, which would mean that ACQAHE would be more flexible and less dependent on state funding.

ESG 3.6: Partially Compliant

R.3.6.1: AQAHE should implement a comprehensive internal quality assurance policy and consistent internal procedures related to defining, assuring and enhancing the quality and integrity of its activities. The internal QA policy should at least integrate all the procedures related to the topics listed in the Guidelines to ESG 3.6 and should be published on the agency's website.

R.3.6.2: ACQAHE's internal QA processes should also include a structured formal system of collection of regular feedback from HEIs, reviewers and other stakeholders involved in external reviews as well as from the agency' own staff. This would provide ACQAHE with valuable information from all the stakeholders that should be used to continuously improve its work and the framework in which it operates.

R.3.6.3: A system of regular feedback collection as described under R.3.6.2 should serve as the basis for in-depth analyses of the agency's performance, which can also be connected with thematic analyses (see ESG 3.4.). Such analyses should then be used to implement thorough and continuous improvements to the agency's structures and operations, and stakeholders should be informed about these changes in order to close the feedback loop.

ESG 3.7: Not applicable for agencies that are not yet EQAR registered

CONCLUSIONS

ACQAHE is currently not in a position to be admitted to the EQAR, due to substantial insufficient compliances with the European Standards and Guidelines for Quality Assurance.

Three main avenues need to be pursued to ensure eligibility of ACQAHE to the register:

- changes to government policy and/or legislation to address areas of concern, in particular around ACQAHE's organisational and operational independence, involvement of stakeholders, accreditation standards and procedures for complaints and appeals;
- introduction of significant new policies and activities within ACQAHE – in particular with regards to internal quality assurance procedures, ensuring consistency in decision making and following up review recommendations;
- secure additional material support to ACQAHE in terms of funding to cover these additional activities, external expertise to aid in implementation and access to local expertise from across the region.

We recommend ACQAHE to allow itself enough time to address the structural shortcomings as identified in this report and to make sure improvements are properly implemented and evidenced before submitting again to an ENQA review for EQAR registration.

ANNEXES

Annex I: Agenda of the site visit

Monday 26 October 2020		Issues to discuss
8:30 – 9:00	Check in review panel	
9:00 – 10:00	**Meeting with the author(s) of the self-assessment report (including the ACQAHE Director)**	Preparation for the external review; initial clarifications related to the overall system and context.
10:00 – 10:30	Internal meeting review panel	
10:30 – 11:30	**Meeting with members of the Steering Committee/Management Board**	Strategic goals and planning (ESG 3.1); Independence (ESG 3.3); Research capacity and thematic analyses (ESG 3.4); Funding and human resources (ESG 3.5); Internal QA and professional conduct (ESG 3.6)
11:30 – 12:00	Internal meeting review panel	
12:00 – 12:45	**Meeting with Leadership of Higher Education Institutions (Rectors/Vice Rectors)**	HEI's perspective on ACQAHE governance and independence (ESG 3.1 and 3.3); Involvement in designing ACQAHE methodologies (ESG 2.2); ACQAHE accountability (ESG 3.6); ACQAHE thematic analyses (ESG 3.4)
12:45– 14:00	Internal meeting & lunch review panel	
14:00 – 14:45	**Meeting with Experts involved in External QA processes**	External quality assurance processes and methodologies; selection and training of experts (esp. ESG 2.3 & 2.4); Independence (ESG 3.3); professional conduct and feedback collection (ESG 3.6)
14:45 – 15:15	Internal meeting review panel	
15:15 – 16:00	**Meeting with ACQAHE staff involved in daily activities of the Agency (without the Director)**	Working conditions; development opportunities; independence; staff involvement in internal quality assurance and thematic analyses (ESG 3.3, 3.4, 3.5 and 3.6)
16:00 – 17:00	Wrap up meeting review panel	

Tuesday 27 October 2020		Issues to discuss
9:00 – 9:30	Check in review panel	
9:30– 10:15	**Meeting with Ministry of Education, Sport & Youth**	Overall strategic issues behind the law and its implementation so far; appointment of the Accreditation board and Director; independence (ESG 3.3) and funding (ESG 3.5); thematic analyses (ESG 3.4); appeals process (ESG 2.7)
10:15-10:45	Internal meeting review panel	
10:45–11:30	**Meeting with representatives of various University Student Councils & student reviewers**	ACQAHE governance, and students' role in external quality assurance (ESG 3.1); Involvement in designing ACQAHE methodologies (ESG 2.2); Selection and training of students for ASCAL processes (ESG 2.4); student perspective in ACQAHE processes (ESG 2); Independence of ACQAHE and students involved in its processes (ESG 3.3) and professional conduct (ESG 3.6).
11:30– 12:00	Internal meeting review panel	
12:00 – 12:45	**Meeting with representatives of higher education institutions (in charge of or involved in internal quality assurance)**	External quality assurance processes and methodologies; experts; criteria for decisions; reporting; and appeals (ESG 2); independence and accountability, incl. external feedback collection (ESG 3.3 and 3.6) Internal quality assurance policy, feedback collection and follow-up mechanisms (ESG 3.6)
12:45 – 13:45	Internal meeting & lunch review panel	
13:45 – 14:30	**Meeting with members of the Council of Qualifications**	Complaints and appeals (ESG 2.7) Designing external quality assurance methodologies processes (ESG 2.2 and 2.3); Criteria for decisions, and appeals (ESG 2.5 and 2.7); thematic analyses (ESG 3.4)
14:30– 15:00	Internal meeting review panel	
15:00 – 15:45	**Meeting with external stakeholders (employer organisations, trade unions, other relevant organisations for HE in Montenegro)**	Activities, policy & processes for QA (ESG 3.1); Independence (ESG 3.3); Funding and human resources (ESG 3.5).
15:45 – 16:15	Internal meeting review panel	
16:15 – 17:00	**Meeting with the Self-Evaluation Working Group to clarify any pending issues**	Outstanding issues
17:00 – 18:00	Wrap up meeting review panel	

Annex II: Short bios of the review panel

Maria E. Weber

Maria E. Weber is Head of Department Accreditation & International Affairs at AQ Austria. She has extensive expertise and experience in the region, holding a master's degree in interdisciplinary Balkan studies, focusing on the role of higher education and the Bologna Process in Serbia, and having spent two years in Bosnia & Herzegovina, working on all strengthening institutional capacity in Quality Assurance. Maria E. has participated in several ENQA reviews across Europe during the past years.

Aleksandar Šušnjar

Aleksandar Šušnjar works as Expert Associate at the University of Rijeka's Centre of Quality Assurance and Enhancement which he combines with the finalisation of a PhD in Philosophy. Aleksandar has extensive experience of student representation that started as President of the University of Rijeka Students' Council, followed by a position of President of the Croatian Students Council and he recently finalised a 3-year period in the Executive Committee of the European Students' Union (ESU) where he was primarily involved in the areas of Quality Assurance and Teaching & Learning and where he remains member of the Steering Committee of ESUs QA Students' Pool of Experts. Besides several presentations and delivery of trainings in these areas, Aleksandar contributed to scientific publications on the topic of Student-Centred Learning. Aleksandar's QA review experience includes institutional reviews in Croatia and Ireland and an ENQA ESG review in Spain.

Nik Heerens

Nik Heerens has been working in the field of higher education and development for the last 20 years, mostly related to the Bologna Process, Quality Assurance, students' engagement and regional development. He worked for Dutch QA agency QANU and held senior management positions in development charity ATA/SPARK (based in North Macedonia and Kosovo*), the Scottish higher education support agency sparqs and the European Students' Union. Since 2008, he has been a member of the Flemish Quality Assurance Board (VLUHR). Nik has also been one of the authors of the first version of the ESGs (2005) and was involved in the ESG implementation evaluation that formed the basis for the revision of the ESGs in 2015. Nik has undertaken PhD research at the University of Exeter in the UK, in which he studied the European, national and regional policies and practices around universities as an instrument for regional development, with a focus on peripheral regions in Europe.