

# ESG Self-Evaluation Guidance for QA agencies- Montenegro

IN PREPARATION OF AN EXTERNAL EVALUATION OF QUALITY  
ASSURANCE SYSTEMS AGAINST EUROPEAN STANDARDS AND  
GUIDELINES FOR QUALITY ASSURANCE IN THE WESTERN BALKANS



The Self-Evaluation Report (SER) should demonstrate the Level of Implementation of Part 2 and Part 3 of the European Standards and Guidelines (ESG) by answering the questions corresponding to each of the Standards and Guidelines, as outlined below.

In addition to the SER, the following additional documentation is requested from the QA agency which will allow the review panel to verify some of the ESG requirements directly:

1. Overview of relevant legislation/by-laws which regulate external QA of higher education within the Economy;
2. Operational manual/protocol used by the QAA when it undertakes an external review of a university or study programme;
3. Diagram of all steps taken in the external review processes undertaken by the QAA (from initiation to final review report);
4. Organigram of the governance and other structures of the QAA;
5. The formal Internal Quality Assurance policy of the QAA;
6. A sample of recent review reports produced by the QAA.

For items 1- 5 an English translation is essential

If an English translation of the operational manual (item 2) and/or the internal QA policy (item 5) are not yet available, we can discuss with the agency if a partial translation of key sections would be sufficient.

For recent review reports (item 6), a version in the official language is sufficient. Also, if review reports are available on the agency's website, a link to this suffices.

# SELF-EVALUATION REPORT QUESTIONNAIRE

## 2.1 Consideration of Internal Quality Assurance

<b>Standard</b>	External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.
<b>Guidelines</b>	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.
<b>EQAR Interpretation</b>	<p>This standard relates to the crucial link between internal and external quality assurance of higher education institutions and programmes.</p> <p>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.</p>
<b>The Self-Evaluation Report should answer the following questions</b>	<p><b>• How does the agency address the effectiveness of internal QA processes in its evaluations, audits and accreditations?</b></p> <p>With the aim of conducting external quality assurance procedures in higher education, Agency takes into account internal quality assurance established by the higher education institutions, which bears primary responsibility for the quality of their policies. In that sense, Agency's quality assurance procedures as a supplement to internal quality assurance, as well as contribution to continuous quality enhancement of higher education institutions and their study programmes.</p> <p>As stipulated in the article 13a of the Montenegrin Law on Higher Education, Agency carries out procedures on external quality assurance in line with the Standards and Guidelines for Quality Assurance in Higher Education (ESG). There are two types of compulsory external quality assurance procedures, which form the largest part of the Agency's activities, as follows:</p> <ul style="list-style-type: none"> <li>- Accreditation of study programme which purpose is to evaluate the quality of study programme and its harmonization with the professional needs and adopted standards. The effectiveness of internal quality assurance is particularly addressed in the document Standards and Guidelines for the accreditation of study programmes referring the Part</li> </ul>



1 of ESGs. It calls among the rest for effective internal processes for design, delivery and approval of study programme, as well as for its periodic revision. Every standard is developed in details through criteria in Standards for accreditation of study programs with criteria, which institution submits as mandatory part of accreditation documentation.

- Reaccreditation of higher education institutions as a process under which the public distinctiveness of quality of licensed higher education institutions and accredited study programmes is being verified. Hence, the internal quality assurance and its effectiveness as such are subject matter of this procedure. The Standards and guidelines for reaccreditation of HE institutions referring the Part 1 are developed through Self-evaluation report with Criteria as mandatory part of reaccreditation documentation.

There are clear standards and criteria regarding internal QA evaluated during both external evaluations. If HE institution does not fulfill standard regarding formulation and implementation of its own quality assurance policy, or institution does not assure quality of study programs based on Part 1 of ESGs, then HE institution cannot be re-accredited or its study program cannot be accredited. The effectiveness of internal QA processes could be seen in eliminatory nature of these criteria for both evaluation procedures. (Standards and Guidelines for the Accreditation of Study programs, Rules on the procedure for reaccreditation of HE institutions/Standards and criteria for self-evaluation)

**• How are standards 1.1 – 1.10 (see Annex 1) addressed in the agency's criteria and processes for institutions/programmes?**

Based on the Law on Higher Education, Agency is responsible for adopting standards for external evaluation (Article 13a, Paragraph 2, number 2a) in accordance with the standards in the European Higher Education Area (EHEA). In this respect, standards 1.1 – 1.10 as described in Part 1 of the ESG have been included as an integral part of the Agency's internal acts: Standards and Guidelines for Reaccreditation of Higher Education Institutions and Standards and Guidelines for the Accreditation of Study Programmes. (additional documentation). Each standard of these two types of external evaluations in Montenegro is clearly referred to each ESG from 1.1-1.10. and represents the base from which criteria for evaluations are developed.

**• Please indicate how and where the standards 1.1 – 1.10 are referred to in the agency's Operational Manual/Protocol for external reviews.**

These standards are fully transposed into the Standards and Guidelines for Reaccreditation of Higher Education Institutions, as a set of criteria on which basis is being prepared institution's reaccreditation report by the Expert Commission (Rules on the Procedure for Reaccreditation of HE Institution). Also, standards in question are referred to in the Standards and Guidelines for the Accreditation of Study Programmes, namely standards 1-6 (Rulebook on the procedure for Accreditation of Study Programs, content and form of the



accreditation certificate). All mentioned documents are available at the Agency's official website: [www.akokvo.me](http://www.akokvo.me).

The references of standards 1.1-1.10 are transposed in Agency's Rulebook on the procedure for Accreditation of Study Programs, content and form of the accreditation certificate and Rules on the procedure for Reaccreditation of HE Institutions are as follows:

ESG Part 1: Standards for internal quality assurance	ACQAHE's Standards and Guidelines
1.1. Policy for quality assurance	<p>Standard 1: Higher education institution</p> <p>Criteria: Internal organizational structure (units and other forms of organizational wholes and institution activities with a brief description of its composition and functions), participation of external members (students, employers and others) in management structures and their role and contribution.</p> <p>Standard 4: Quality management</p> <p>Criteria: Quality assurance system has clearly defined responsibilities, includes students and stakeholders.</p>
Standard 1.2 Design and approval of programmes	<p>Standard 2: Structure of study programme and concept for implementation</p> <p>Criteria: Learning outcomes are available to stakeholders, primarily teachers and students; they are comparable to Dublin descriptors; there is a possibility of their verification within the internal quality assurance system; they are available, realistic and reflect improvement in a given field; they enable development of cooperation with relevant parties.</p> <p>Criteria:</p> <p>Programme objectives will be systematically implemented in practice. There are information on how every subject or module contribute to attainment of objectives;</p> <p>All subjects or modules described in the "Manual for subjects/modules" contain the information sheet available to stakeholders (primarily to teachers and students);</p>



		<p>There is a clear description of knowledge, skills and competences expected to be gained by students after attending individual subjects;</p> <p>Learning outcomes are clear and comprehensible to teachers and students.</p> <p>Criteria: Academic classification (academic or applied studies) and particulars of affiliation to the higher education level within the Montenegrin Qualification Framework (hereinafter referred to as: MQF) and compliance with the European Qualification Framework.</p>
	<p>Standard 1.3 Student-centred learning, teaching and assessment</p>	<p>Standard 2: Structure of study programme and concept for implementation</p> <p>Criteria: Implementation of teaching and learning with „a student in the centre of educational process“, recognizes and fosters the need:</p> <ul style="list-style-type: none"> <li>• that there are realistic differences of students and their needs in their studies,</li> <li>• that there are flexible learning paths,</li> <li>• different modes of delivery are used,</li> <li>• a variety of pedagogical methods is used,</li> <li>• that modes of delivery and used pedagogical methods are regularly evaluated and adjusted,</li> <li>• to develop a sense of autonomy in the students,</li> <li>• to ensure adequate guidance and support to the teacher,</li> <li>• to promote mutual respect within the student-teacher relationship,</li> <li>• to have appropriate procedures for dealing with students' complaints.</li> </ul>
	<p>Standard 1.4 Student admission, progression, recognition and certification</p>	<p>Standard 2: Structure of study programme and concept for implementation</p> <p>Criteria: Study programme admission procedures are regulated, strictly applicable, transparent and provide simpler attainment of intended learning outcomes.</p> <p>Standard 5: Documents</p> <p>Criteria: Institution disposes of all relevant regulations for the study programme including essential rules related to admission, course of studies and completion of programme.</p>



	Standard 1.5 Teaching staff	Standard 3: Resources Criteria: Teacher composition and competences should provide the accomplishment of expected learning outcomes in the time intended for completion of studies.
	Standard 1.6 Learning resources and student support	Standard 3: Resources Criteria: Financial sustainability of programme is secured.  Criteria: Institution is able to respond to problems, resolve finances, provide staff and a required number of students.
	Standard 1.7 Information management	Standard 4: Quality management Criteria: Methods and instruments are used in order to maintain and develop the quality of study programme. They are documented and subject to regular control. Criteria: Data obtained are assessed as a part of the quality assurance system. They provide necessary information and permit drawing of conclusions.
	Standard 1.8 Public information	Standard 1: Higher education institution Criteria: Overview of institution activities. Criteria: Overview of integrated functions and activities in the institution.
	Standard 1.9 On-going monitoring and periodic review of programmes	Standard 4: Quality management Criteria: Quality assurance system is designed so as to provide a continuous improvement of a study programme.
	Standard 1.10 Cyclical external quality assurance	Standard 4: Quality management Criteria: Quality assurance system allows for the discovery of omissions in attaining the educational goals, checking if the goals set are attainable, to prepare and carry out appropriate measures for remedying omissions and improvement.

## 2.2 Designing Methodologies fit for purpose

<b>Standard</b>	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
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	continuous improvement.
<b>Guidelines</b>	<p>In order to ensure effectiveness and objectivity it is vital for external quality assurance to have clear aims agreed by stakeholders.</p> <p>The aims, objectives and implementation of the processes will</p> <ul style="list-style-type: none"> <li>- bear in mind the level of workload and cost that they will place on institutions;</li> <li>- take into account the need to support institutions to improve quality;</li> <li>- allow institutions to demonstrate this improvement;</li> <li>- result in clear information on the outcomes and the follow-up.</li> </ul> <p>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.</p>
<b>EQAR Interpretation</b>	<ul style="list-style-type: none"> <li>- 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.</li> <li>- In the case of joint programmes, the quality assurance agency should use the European Approach or Quality Assurance of Joint Programmes.</li> </ul>
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>How does the agency develop, review and update the processes and criteria used in its different activities?</b></li> </ul> <p>In criteria and processes development, the Agency uses The Law on higher education, European Standards and Guidelines (Article 13a, Paragraph 2, Number 2a) as well as own experiences and examples of good practice of EHEA countries with similar higher education system. Both main external quality assurance procedures for study programs and institutions which are regularly carried out by the Agency as its main competences, follow by-law acts that are published on the Agency's official website: <a href="http://www.akokvo.me">www.akokvo.me</a>.</p> <p>Valid by-law acts that consider processes and criteria for external evaluations are:</p> <p>Rulebook on the procedure for accreditation of study programmes, content and form of the accreditation certificate with Application form for accreditation of study program (with standards and criteria for evaluation) and Report template for accreditation of study program (September 2020). These forms include additional criteria for doctoral, English and distance learning studies;</p> <ul style="list-style-type: none"> <li>- Instructions for work of expert commission for accreditation of study program.</li> <li>- Rules on the Procedure for Reaccreditation of Higher Education</li> </ul>



	<p>Institution (April 2019);</p> <ul style="list-style-type: none"> <li>- Rules on the accreditation procedure of a lifelong learning programme (March 2019);</li> <li>- Standards and Guidelines for the Accreditation of Study Programmes (April 2019);</li> <li>- Standards and Guidelines for Reaccreditation of Higher Education Institutions (April 2019);</li> <li>- Standards and Guidelines for quality assurance agency (April 2019).</li> </ul> <p>Previous by-laws on accreditation of study program (which Agency applied from its establishment until September 2020) were:</p> <ul style="list-style-type: none"> <li>- Rulebook on the initial accreditation of study programmes at higher education institutions in the Republic of Montenegro;</li> <li>- Criteria and standards for initial accreditation of study programmes at higher education institutions in the Republic of Montenegro;</li> <li>- Rulebook on standards and norms for accreditation of study programmes of master's studies;</li> <li>- Rulebook on standards and norms for accreditation of study programmes of doctoral studies;</li> <li>- Instruction on the procedure for submitting and reviewing the application for accreditation and re-accreditation.</li> </ul> <p>The procedures of development, from initiative until adoption, of by-law acts regarding external evaluation procedures and criteria depend on Law on Higher Education, if they are defined, who the stakeholders are in the process and what type of evaluation they regulate. The short presentation of development for both evaluation procedures and criteria follow:</p> <ol style="list-style-type: none"> <li>a) According to the Law on Higher Education (Article 13a, Paragraph 2, number 2a), the Agency adopts standards for evaluation in accordance with the standards in the European Higher Education Area (Standards and Guidelines for Accreditation of Study Programs, Standards and Guidelines for Re-accreditation Institutions). Those standards are base for evaluation criteria, developed by Agency through by-law acts.</li> <li>b) According to the Law on Higher Education (Article 28, Paragraph 10), Agency proposes and Ministry adopts procedures for accreditation of study programs (Rulebook on the procedure for Accreditation of Study Programs, content and form of the accreditation certificate).</li> <li>c) The Law on Higher Education does not define how procedures on re-accreditation of HE institutions are administratively developed. This fact gives freedom to Agency to takeover this responsibility. Therefore, Agency proposes and adopts processes for re-accreditation of HE institution according to ESGs, best practice and in frame of national legislation (Rules of procedures for reaccreditation HE institutions).</li> <li>d) According to Law on Higher Education (Article 42, Paragraph 8) the Agency defines method and criteria for self-evaluation by institutions</li> </ol>
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According to the Law on Higher Education (Article 97), Agency proposes and adopts criteria and processes for external evaluation of long-life learning programs.

Regarding dynamic, the Law on Higher Education stipulates that bylaws have to be adopted within one year from the day of the enactment of the law (Article 118). Since Agency became functional one year after Government established it, it was obliged to prepare/adopt bylaw acts related to the procedures and criteria in short period of time. Agency adopted standards for accreditation of study programmes and reaccreditation of institutions as well as procedures for re-accreditation of institutions and long-life learning programs at beginning of 2019.

Every further improvement of current or implementation of new criteria and procedures for these types of evaluations is technically easier and faster when Agency is responsible for their adoption. Therefore, procedures were improved at end of 2019 after gained experience through evaluations, knowledge through working groups, staff visits and seminars and support of Croatian colleagues from AZVO who were engaged through project financed by EU funds. We believe there is room for improvement in concept and understanding all elements of procedures and criteria for reaccreditation of HE institutions.

The procedure for adopting bylaw acts by Agency, is much simpler and independent than when the Agency is the proposer and the ministry is a lawmaker. When it comes to bylaws related to the accreditation of study programs, according to Article 28 of the Law on Higher Education, "the procedure of accreditation of study programs, content and form of accreditation certificates are adopted by the Ministry, at the proposal of the Agency." In the process of adopting bylaw acts regulating the procedure of accreditation of study programs, the Agency is the proposer of bylaws, which it sends to the Ministry of Education, which requests formal opinion from Secretariat for Legislation, for verification and harmonization of bylaws with valid regulations. After a positive opinion of the Secretariat for Legislation, bylaws are published in the Official Gazette of Montenegro and on the website, and only then can they be applied. Often the implementation of such procedures, which require the opinion of several institutions, is much more complicated and requires more time for adoption, enactment and implementation. Although the Agency initiated, prepared and sent a proposal of by-law act on procedures for accreditation of study programs (Rules for accreditation of study programs), it was adopted in September 2020. Before that, Agency applied rules that were valid before its establishment, respecting the application of European standards and guidelines as much as it was possible. The reviewing and improving by-law on procedure of accreditation study programs have to go through the same administrative process of adoption.

On the other hand, when it comes to bylaws prepared and adopted by the Agency, after harmonization with applicable regulations, consultation with partners and stakeholders, the decision is made by the director of the agency



and bylaws are applied from the moment of their publication on website of the Agency.

Although legislation framework does not allow it, existence of Accreditation body consisted of different and independent members would provide expert and objective approach to development and improvement of all acts regarding criteria and processes, assuring independent decision-making process in their proposal and adoption.

The Law on Higher Education provides possibility for Agency to propose measures for improvement of higher system quality based on evaluation reports to Ministry and Government. The Agency used this possibility and sent to the Ministry at the end of 2018 amendments of the Law on Higher Education in field of quality assurance, proposing independent Accreditation body, inclusion of students and real sector representatives in all evaluation processes, design and adoption of criteria and procedures by Agency, etc.

• **How does the agency ensure that its methodologies are fit for purpose? Please also refer to your diagram with different steps of the agency's external review process when further explaining the agency's methodologies.**

The external evaluation procedure is defined by the Rules on the procedure for Reaccreditation of a Higher Education Institution adopted by the Agency and Rulebook on the procedure for Accreditation of Study Programs, content and form of the accreditation certificate adopted by Ministry, taking into account the legal regulations of Montenegro in the field of administrative procedures. The rules define all procedures from the moment of submission of the request for external evaluation by the institution with clearly defined forms of self-evaluation reports or accreditation requests that the institution should use and in which the stated standards and criteria are in accordance with ESG that the institution should meet, through procedures of selection and appointment of external evaluators (namely commission for re-accreditation and commission for accreditation), explained roles of all members of the commission in the external evaluation procedure, procedures related to the evaluation of criteria and standards, giving recommendations, submitting reports and proposing accreditation or re-accreditation stance, etc. The descriptions of both procedures are given below:

The sequence of steps for accreditation of study programs:

1. The institution submits a request for accreditation of study program with accompanying documentation.
2. The Agency appoints a coordinator (employee from the Agency) to verify the formal fulfillment of the request (within 5 days from the day of submission).
3. Institution submits completed request for accreditation, positive opinion from Qualification Council and proof about payment of the administration tax. If the institution has not submitted a complete request, the coordinator asks for a supplement or elimination of deficiencies (within 8 days).



4. Once the application is complete, an expert commission is formed to evaluate the Reaccreditation Request.
5. The act on the appointment of the Commission regulates the more detailed composition, tasks and other issues that are of significance for the work of the Commission. The more detailed manner of work and decision-making of the Commission is regulated by the Rules of Procedure of the Commission.
6. Before the beginning of the work of the Commission, the coordinator informs the President and members of the Commission about procedures, deadlines and preparation of reports on the accreditation of the study program.
7. The Commission, on the basis of the request for accreditation and other submitted documentation, prepares a report on accreditation with a stance that the study programme shall be accredited / not accredited and sends it to the Agency (within 30/60 days since the formation of the commission, depending on the number of study programmes which are the subject of accreditation).
8. The Coordinator checks to see if all members of the Commission assessed all accreditation standards in the accreditation report (within 5 days). The Agency may return the accreditation report to the Commission for improvement or make a decision on accreditation.
9. The Commission is obliged to improve and submit to the Agency the final accreditation report with the accreditation proposition (within 7 days).
10. The Agency sends the final report to the institution (within 7 days).
11. The institution is obliged to declare about the data stated in the report (within 15 days).
12. The Agency sends to the commission the institutions declaration (within 3 days). The commission is obliged to respond to any objections of the institution (within 7 days).
13. Based on the report on the accreditation of the study program, the Agency (Director) issues a certificate of accreditation of the study program, i.e. brings decision to reject the request for accreditation (within 8 days). Along with the certificate of accreditation, i.e. the decision to reject the request for accreditation, the Agency sends to the institution a report on the accreditation of the study program.

The sequence of steps for re-accreditation of institutions:

1. The institution submits a request for re-accreditation with accompanying documentation.
2. The Agency appoints a coordinator (employee from the Agency) to verify the formal fulfillment of the request (within 10 days from the day of submission). If the institution has not submitted a complete request



with proof of payment of administrative tax, the coordinator requests a supplement or elimination of deficiencies (within 8 days).

3. Once the application is complete, an expert commission is formed to evaluate the Reaccreditation Request (on coordinator's proposal, within 5 days). The commission is formed by the director of the Agency (min 5 experts for the re-accreditation of the university and min 3 experts for the re-accreditation of other institutions).
4. The Agency submits to the institution a decision on the appointment of members of the commission, for the purpose of giving opinions. The institution is obliged to submit an opinion on the decision on the formation of the commission (within 3 days). If the institution submits a negative opinion and the Agency deems it justified, the Agency will appoint a new re-accreditation commission.
5. The Commission, on the basis of the rules, assesses the request for re-accreditation, prepares a preliminary report and (together with the coordinator) visits the institution.
6. After reviewing all the documents and a direct inspection of the work of the institution during the visit, the commission prepares a draft report on re-accreditation of the institution and sends it to the institution. The institution can submit comments and suggestions on the draft (within eight days).
7. The Commission prepares and submits a final report (signed by all members) with a recommendation that the institution shall be re-accredited / not re-accredited to the Agency (within 30 days from the visit).
8. The Agency sends the final report on re-accreditation with re-accreditation stance to the institution to give their comments and suggestions (within 8 days).
9. The Agency may return the re-accreditation report to the Commission for improvement or make a decision on re-accreditation.
10. The Commission is obliged to improve and submit to the Agency the final re-accreditation report with the re-accreditation position (within 8 days).
11. The Agency (Director) makes a decision regarding the request for re-accreditation on the basis of the final report on re-accreditation (within 8 days). The Agency informs the institution about the decision on re-accreditation.
12. The Agency issues a re-accreditation certificate to the institution based on the re-accreditation decision.

• **How are stakeholders involved in the design and continuous improvement of the agency's processes? Please also refer to the diagram of the external review process to indicate at which steps which stakeholders are involved.**

Before explanation of stakeholder's role, we will explain the role of the Agency



in design and improvement of the Agency's processes:

- a) to prepare and adopt standards and criteria for external evaluation based on ESGs, Montenegrin legislation, communication with experts and institution representatives;
- b) to propose the draft of study program accreditation procedures to Ministry based on ESGs, other Montenegrin legislation, communication with experts and institution representatives;
- c) to prepare and adopt Instruction for work of expert commission for accreditation of study programs based on Montenegrin legislation and the good practice;
- d) to prepare and adopt procedure act for re-accreditation of the institutions based on ESGs, other Montenegrin legislation, good practice, experience through evaluations and consultation with other agencies experts;
- e) to prepare and adopt criteria and procedures for accreditation of life-long learning programs based on good practice, other Montenegrin legislation and ESGs.
- f) to propose measures for improvement of quality assurance based on evaluation reports to Ministry and Government (Article 13a, Paragraph 2, Number 7).

The role of stakeholders involved in design and continuous improvement of Agency's processes is:

1. Ministry:

- a. to provide suggestions and changes on Agency's proposal of study program accreditation procedures;
- b. to request opinion from Secretariat for Legislation about by-law act on study program accreditation procedures' harmonization with Montenegrin legislative framework;
- c. to adopt the by-law act on study program accreditation procedures.
- d. to consider improvements proposed by Agency and eventually submit to Government for adoption.

2. Secretariat for Legislation provides opinion on harmonization of by-law act on procedures for accreditation of study programs with Montenegrin legislation framework to Ministry.

Institution representatives were involved through different project meetings or events. The drafts of by-laws on procedures were sent to them for comments and suggestions. The fact is that more could be done from Agency's and institutions' side on their involvement in design and improvement of procedures and criteria.

The representatives and experts of other country's agencies and ENQA/EQAR are informal stakeholders whose contribution is valuable and significant through communication with Agency's management and coordinators of the



	<p>external evaluation procedures as in preparation of the draft of procedures, as in their further improvement. The experts from other agencies and organizations were included through different projects, as well as direct communication contributing to quality of processes and criteria for evaluations in Montenegro.</p> <p>Every external evaluation is the source of valuable information that coordinator, in communication with experts and institution representatives, collects and uses in development of official Agency documents regarding procedures and criteria. Through re-accreditation institution procedures, the Agency engages domestic experts, experts from the region, students of Montenegrin universities and representatives of the real sector from Montenegro (Article 7 of the Rules for re-accreditation). Study programs accreditation procedures, due to opinion of Montenegrin legislation authority, cannot include students and real sector representatives in expert commissions which is not in line with first Agency's proposal of the same procedure.</p>
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## 2.3 Implementing processes

<b>Standard</b>	<p>External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include</p> <ul style="list-style-type: none"> <li>- a self-assessment or equivalent;</li> <li>- an external assessment normally including a site visit;</li> <li>- a report resulting from the external assessment;</li> <li>- a consistent follow-up.</li> </ul>
<b>Guidelines</b>	<p>External quality assurance carried out professionally, consistently and transparently ensures its acceptance and impact.</p> <p>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).</p> <p>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</p>



	assurance.
<b>EQAR Interpretation</b>	<ul style="list-style-type: none"> <li>- If site visits are not part of the processes used by the agency there need to be clear reasons for that.</li> <li>- The agency should provide follow-up procedures for all reviews that contain any sort of recommendations.</li> <li>- 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.</li> <li>- 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.</li> </ul>
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>How does the agency ensure that its processes are reliable, useful and consistent?</b></li> </ul> <p>Agency has not any formal tool or body to check reliability and ensure consistency of the processes. By making relevant acts and documents transparent, Agency tends to ensure wider public trust and support in regard of its external quality assurance activities. Regulation (explained in previous sections) makes processes consistent but in certain extent:</p> <ul style="list-style-type: none"> <li>• The criteria for study programs and those for self-evaluation reports, as well as, reports on external evaluation have unique templates that institutions and peer reviewers (expert commissions) fulfil respectively.</li> <li>• The instructions for work of expert commission put the same rules for all commissions from its establishment until final decision on accreditation/re-accreditation.</li> <li>• The coordinator of the certain procedure takes care to achieve consistency, but his/her role is also limited according to current regulation.</li> </ul> <p>The external evaluations done in period from January 2019 until September 2020 and direct communication of Agency's employees with expert commissions and institution representatives were the main source of information about usefulness and reliability of the processes. Based on that, some of by-law acts were improved. Agency plans to create questionnaires for experts, institutions and coordinators that will be base for surveys after every evaluation is completed, in order to estimate reliability and usefulness of the processes. In that way, Agency will have systematized information and analyses according to which can improve quality assurance process in Montenegro.</p> <p>Agency believes that creation of accreditation body, consisted of different and independent stakeholders, can contribute to consistency of evaluation reports, besides all other benefits of such body. Establishment of accreditation body was one of the official suggestions Agency recommended to Ministry at the very</p>



beginning of its functioning (November 2018).

**• How are the key features in the standard implemented by the quality assurance agency in each of its activities?**

Key features of the Standard 2.3 of the ESG are implemented within the internal acts regulating reaccreditation of higher education institutions. The self-assessment by the higher education institution with defined standards and criteria and necessary documentation, external assessment by peers, site visit, published report in consistent form and follow up are the core elements of that respective procedure. As prescribed in the Rules on the procedure for re-accreditation of higher education institutions, final report prepared by the Expert Commission must contain recommendations for further enhancement and development, with possible deadline for their implementation by the institution. Final decision on re-accreditation is made by Agency (Director). In accordance with the Commission recommendation, institution shall prepare and submit to the Agency follow up assessment in order to verify the implementation results of report conclusions. Consequently, Agency remains fully responsible for ensuring consistent follow up procedure.

On the other side, the accreditation process is organized as a peer review procedure which consists of the following elements: fulfilment of standards and criteria for accreditation of study programs with necessary documentation ; selection and preparation of the expert commission by Agency; site visit at the location of the applicant institution; report written by experts; accreditation decision by the Agency and publication of the expert report of the programme accreditation along with the formal decision taken by Agency (Director). However, follow up is not provided through accreditation procedure according to changes made by Ministry and Secretariat for Legislation in Agency's proposal of Rulebook for accreditation of study programs.

According to Law on Higher education (Article 13a, Paragraph 2, Number 3), Agency is responsible for periodical evaluations during the period of accreditation, but only after HE institution or Ministry's initiative.

**• If no site visits are used, how is evidence provided by institutions validated through other mechanisms?**

Site visit is obligatory for both external quality assurance procedures according to the Agency's regulations. It helps an Expert Commission to check data from application of the higher education institution for external assessment and to gather actual facts on the state of the institution being evaluated or quality of study programme which is the subject of accreditation, all complemented with valuable information provided by relevant stakeholders during interviews.



	<p>Pandemic made site visits impossible for certain period of time. In order not to quit from this important element of external evaluation, Agency adopted temporary measure providing possibility to foreign experts in commissions to have online meetings and virtual tours of the institutions with Agency's full support.</p> <p><b>•Please indicate where information is provided in the agency's Operational Manual/Protocol for external reviews about the implementing processes, including the aspects mentioned in this standard.</b></p> <p>Information about the implementing processes regarding aspects deriving from Standard 2.3 is provided in the Rules on the procedure for reaccreditation of higher education institutions, as follows:</p> <ul style="list-style-type: none"> <li>• Self-assesment by HEI - article 6 paragraphs 1,2,3 and 4</li> <li>• External assesment by peers - article 11 paragraph 4 and 5</li> <li>• Site visit - article 10 paragraphs 1,2,3,4,5,6,7,8 and 9</li> <li>• Published report - article 15 paragraph 1</li> <li>• Follow-up - article 14 paragraph 1.</li> </ul> <p>Additionally, such aspects are also foreseen in the Rulebook on the accreditation procedure of study programmes, content and form of the certificate of accreditation, namely:</p> <ul style="list-style-type: none"> <li>• Self-assesment by HEI - article 2 paragraph 1 and 3</li> <li>• External assesment by peers – article 7 paragraphs 1, 3 and 4</li> <li>• Site visit - /</li> <li>• Published report - article 10 paragraph 1</li> <li>• Follow-up - /</li> </ul> <p>Site visit and follow up as specific elements of the accreditation procedure are regulated in more detail by the Rules of Procedure of the Commission, adopted by the Agency.</p>
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## 2.4 Peer Review Experts

<b>Standard</b>	External quality assurance should be carried out by groups of external experts that include (a) student member(s).
<b>Guidelines</b>	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.



	<p>In order to ensure the value and consistency of the work of the experts, they</p> <ul style="list-style-type: none"> <li>- are carefully selected;</li> <li>- have appropriate skills and are competent to perform their task;</li> <li>- are supported by appropriate training and/or briefing.</li> </ul> <p>The agency ensures the independence of the experts by implementing a mechanism of no-conflict-of-interest.</p> <p>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.</p>
<p><b>EQAR Interpretation</b></p>	<ul style="list-style-type: none"> <li>- The agency should make use of a wide range of experts with different perspectives, including those of institutions, academics, students and employers/professional practitioners.</li> <li>- At least for reviews across border the agency should include experts from a variety of national origins.</li> <li>- The agency should ensure a consistent approach to the selection of experts as well as appropriate training or briefing of experts.</li> <li>- 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.</li> </ul>
<p><b>The Self-Evaluation Report should answer the following questions</b></p>	<ul style="list-style-type: none"> <li>• <b>How are the agency's groups of experts composed?</b></li> </ul> <p>According to the Law on higher education, Agency forms an Expert Commission for each external quality assurance procedure (articles 28 and 42). This Commission is composed of independent experts from the country and abroad chosen from the list of experts. The list of experts is being established on the basis of a public call conducted by the Agency, which is announced and published on its official website, while open throughout the year. Other ways of engaging external experts are:</p> <ul style="list-style-type: none"> <li>- from the database of experts maintained by the Agency;</li> <li>- on the basis of recommendations from other agencies competent for the higher education quality assurance and</li> <li>- by directly inviting potential experts.</li> </ul> <p>Members of the Expert Commission are eminent experts in the specific fields, including university teachers with academic title, students and representatives of the real sector elected on the proposal of employers' association.</p> <p>With regard to study programme accreditation, Agency (Director) forms an Expert Commission consisting of maximum three members (president and two</p>



members), with an exception if Commission accredits two or more related study programs, than it will have president and four members, while reaccreditation commission consists of minimum five members for university reaccreditation and three members for the reaccreditation of other institutions, such as faculties.

• **How does the agency ensure in the selection process that experts have appropriate skills and competences, and no conflict of interest?**

In order to establish List of experts for study programmes accreditations and higher education institutions reaccreditation, Agency announces public invitation for application of experts from Montenegro and other countries. All interested applicants need to meet criteria provided by public invitation, such as:

- possession of scientific or academic title;
- proven expertise and specialization in relevant and referent fields;
- working experience in relevant and referent fields;
- proven experience in quality assurance of higher education,
- relevant experience in management positions of higher education institutions;
- experience in projects in field of his/her own expertise;
- the most important awards/acknowledgement/accomplishment in field of his/her own expertise;
- the most important memberships in relevant experts bodies or associations of his/her own expertise;
- knowledge of English and other languages.

Internal commission appointed by the Agency, which consists of three members from the ranks of employees, reviews submitted applications and checks whether the criteria are met. Taking into account specific requirements, Commission proposes experts to the director of Agency, who decides on the final composition of the list of experts. Before forming an Expert Commission for study programme accreditation or higher education institution reaccreditation, Agency ensures the independence and impartiality of selected experts for the List by checking for potential conflicts of interest in regard of institution which is being evaluated or whose study programme is being accredited. Following their official appointment, Agency sends decision on nomination of the Commission members to the institution to present its opinion and examine possible conflict of interest. Additionally, members of the Commission before the commencement of the review process sign the Confidentiality and non-conflict of interest statement on a specific form, which is integral part of the regulations on the quality assurance procedures.

Members of the Commission are in the conflict of interest if:

- a) Member of the Commission is/was under an employment contract or



any cooperation agreement or has for the last two years been under an employment contract or any other cooperation agreement with the institution or participates in a project the respective institution takes part in;

- b) Member of the Commission takes part or has in the last two years taken part in management, expert, professional or advisory bodies of the institution;
- c) Member of the Commission is associated with the members of management bodies of institution, i.e. is a relative of a Commission member in a straight line and laterally to the second degree of kinship, is in-law up to the first degree of kinship, marital and extra marital spouse, adopter and adoptee;
- d) Member of the Commission studies in the institution;
- e) Member of the Commission establishes an employment relationship with the institution within one year after the completion of a review procedure.

When it comes to the student election, Agency announces separate Call for applications of students from all areas of higher education in the final years of undergraduate, master's and doctoral studies to participate in external quality assurance procedures.

All interested students can submit their CV and Motivation Letter (500 words), in which they will state the key reasons for application, recommendations for improving the quality of higher education in Montenegro, as well as expectations from their participation in the Expert panel.

#### **How does the agency organize training or briefing of experts?**

As already explained, Agency puts engaging external experts at the core of the external quality assurance processes and makes great efforts in composing expert commissions, briefing the experts and providing support during the procedure itself. At the beginning of the process, experts are provided electronically with the application for accreditation/reaccreditation submitted by the respective institution with all accompanying documentation. Agency also ensures that experts are provided with guiding material and all relevant regulation on quality assurance. The training of experts is stipulated in Rules for procedures of re-accreditation of HE institutions, but it is not included in Rulebook on the procedure for Accreditation of Study Programs, content and form of the accreditation certificate due to rejecting this Paragraph by the Secretariat for Legislation.

One day before site visit at latest, all members of the Commission undergo a training conducted by the Agency in its premises regarding the procedures, duties, tasks and method of preparing external assessment report, content of the adopted standards and ESG, as well as all other issues relevant for the



	<p>procedure being undertaken by the Agency.</p> <p>For each external quality assurance procedure, Agency is designating a coordinator among the employees of the Agency who carries out the activities of written and oral communication with the Commission members. Apart from organizational aspects of the process, the coordinator plays a crucial role in briefing the experts, in particular as regards assuring correct and consistent understanding of the adopted regulations. Additionally, the coordinator supports the president of the Commission in ensuring that the site visit is organized with the predefined protocol and that all relevant topics are discussed. After the final report is submitted to the Agency, the coordinator verifies its factual and structural correctness and takes care that all relevant aspects of the process have been addressed in a proper manner.</p>
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## 2.5 Criteria for Outcomes

<b>Standard</b>	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.
<b>Guidelines</b>	<p>External quality assurance and in particular its outcomes have a significant impact on institutions and programmes that are evaluated and judged.</p> <p>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.</p>
<b>EQAR Interpretation</b>	<i>(No specific interpretation).</i>
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>How does the agency publish the criteria used in each of its activities?</b></li> </ul> <p>The criteria used in evaluations are based on Standards and Guidelines for Accreditation of Study Programs and Standards and Guidelines for Reaccreditation of Institutions. Standards for both evaluation activities are referred to ESGs (previously explained). The criteria for re-accreditation of institutions are integral part of Rules on procedures, and criteria for accreditation of study programs are part of the Application Form. In the process of criteria evaluation, expert commissions based on documentation, amendments to documentation and visits, evaluate criteria, provide comments on the degree of fulfillment of standards (through three levels: fulfilled / partially fulfilled and not fulfilled) as well as recommendations for improving standards. All reports and decisions related to external evaluation procedures are publicly available on the Agency's website and directly sent to institutions.</p> <ul style="list-style-type: none"> <li>• <b>How does the agency ensure consistency in its application of criteria for all</b></li> </ul>



	<p><b>types of reviews?</b></p> <p>In assessing the fulfillment of standards and criteria for external evaluation of the institution, the Commission uses unique template for reporting which consists two types of evaluation criteria: Elimination criterion - in case that non-compliance with the standard or its elements causes a negative reaccreditation attitude - rejection of reaccreditation request and , Required criterion – in case when standard or its criteria are not fulfilled, but the process of re-accreditation and realization of study programs can be continued if the criterion can be fulfilled in the period determined by the recommendation of the commission. The obligation of the commission is to explain each of the stated criteria during the external evaluation and provide recommendation.</p> <p>•<b>Please indicate where the agency’s Criteria for Outcomes are outlined in the Operational Manual/Protocol for External Reviews.</b></p> <p>For the process of institution re-accreditation, outcome criteria are stated in article 8 (Instructions for work of expert commission) and article 12 of the Institution reaccreditation report (Rules on the Procedure for Reaccreditation of Higher Education Institution).</p> <p>For the process of accreditation of study programs, outcome criteria are stated in article 7 (Accreditation report) of the Rules on the Accreditation Procedure of study programs, content and form certificate of accreditation.</p>
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## 2.6 Reporting

<b>Standard</b>	<p>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.</p>
<b>Guidelines</b>	<p>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</p> <ul style="list-style-type: none"> <li>- context description (to help locate the higher education institution in its specific context);</li> <li>- description of the individual procedure, including experts involved;</li> <li>- evidence, analysis and findings;</li> <li>- conclusions;</li> </ul>



	<ul style="list-style-type: none"> <li>- features of good practice, demonstrated by the institution;</li> <li>- recommendations for follow-up action.</li> </ul> <p>The preparation of a summary report may be useful.</p> <p>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.</p>
<b>EQAR Interpretation</b>	<ul style="list-style-type: none"> <li>- All reports should be published in full, including those that resulted in a negative decision or conclusion.</li> <li>- The publication of summary reports (rather than full reports) does not fulfil the requirement of the standard.</li> <li>- 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.</li> <li>- All experts should be appropriately involved in producing the report.</li> <li>- “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.</li> </ul>
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>How are reports made accessible to the public for all types of reviews?</b></li> </ul> <p>The Agency provides the public with information about the quality of work of higher education institutions and study programmes. It is one of the most important aspects of the external quality assurance processes. Reports for all types of external reviews (accreditation and reaccreditation) undertaken by the Agency are being regularly published in full content on the Agency’s official website, regardless of their final outcome, positive or negative. In addition to the expert’s report, a formal decision taken by the Agency (Director) on the basis of that report is also published, as an obligation prescribed by the regulation on specific external quality assurance procedure.</p> <ul style="list-style-type: none"> <li>• <b>How does the agency ensure that its reports are clear and understandable in their structure, content and style?</b></li> </ul> <p>Agency prescribed uniform template (form) for report preparation, making its content, structure and style very clear and understandable to all stakeholders in the quality assurance system. Report contains evaluation of the criteria adopted by Agency in respect of external quality assurance procedure, evaluation criteria (elimination and required), key findings, recommendations and final accreditation stance of the Expert Commission.</p>



## 2.7 Complaints and appeals

<b>Standard</b>	Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.
<b>Guidelines</b>	<p>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.</p> <p>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.</p> <p>A complaints procedure allows an institution to state its dissatisfaction about the conduct of the process or those carrying it out.</p> <p>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.</p>
<b>EQAR Interpretation</b>	It should be possible to appeal any formal decision.
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>Which appeals processes are in place for each of the agency's activities?</b></li> </ul> <p>The Law on higher education, as well as other by-laws referring to the external quality assurance, don't prescribe appeal procedure as such. Nevertheless, higher education institutions have a legal remedy at their disposal on the basis of the Montenegrin Law on administrative dispute which envisages that is possible to initiate an administrative procedure before the Administrative court of Montenegro against any formal decision enacted by the Agency, within 20 days from the day of decisions' receipt.</p> <ul style="list-style-type: none"> <li>• <b>How does the agency handle complaints?</b></li> </ul> <p>As previously explained, there were no complaint procedure to Agency. Party in the administrative procedure (in this case: higher education institution) may file a lawsuit against any formal decision taken by the Agency on accreditation or reaccreditation directly to the Administrative court of Montenegro, which might result in returning the decision to Agency for a new solution if any provision of the Law on administrative procedure has been violated.</p>



	<p>So far, no lawsuit was filed against any of the Agency's decision.</p> <p>•<b>Please indicate where the agency's Complaints and Appeals procedures are outlined in the Operational Manual/Protocol for External Reviews.</b></p> <p>Complaints and appeal procedures are not outlined as such in the Operational Manual nor Protocol for external reviews of the Agency, considering the fact that the Government of Montenegro adopted single Law on Administrative Procedure, which covers all administrative activities taken by the state bodies. Consequently, it means the following - if by special law (in this case: The Law on Higher Education) is not prescribed appeal procedure, the provisions of the Law on administrative procedure shall apply.</p>
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### 3.1 Activities, policy and processes for quality assurance

<b>Standard</b>	<p>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.</p>
<b>Guidelines</b>	<p>To ensure the meaningfulness of external quality assurance, it is important that institutions and the public trust agencies.</p> <p>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 commissions.</p> <p>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.</p>
<b>EQAR Interpretation</b>	<ul style="list-style-type: none"> <li>- 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.</li> <li>- The involvement of stakeholders should be organised in a way that ensures the agency's independence (see ESG 3.3).</li> </ul>
<b>The Self-Evaluation</b>	<p>•<b>How does the agency comply with standards 2.1 – 2.7? (in a distinct chapter, each</b></p>



<p><b>Report should answer the following questions</b></p>	<p><b>standard should be addressed separately for each different type of review).</b></p>	
	<p>ESG</p>	<p>ACQAHE's Standards and Guidelines</p>
	<p>2.1 Consideration of internal quality assurance</p> <p>Standard: External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.</p>	<p>Quality assurance policy formally adopted and publicly available (date of adoption, website with publicly available document).</p> <p>ACQAHE encourages HE institutions on regular basis to comply their activities by always considering ESGs. ACQAHE emphasizes that for HE institution this means not just following the rules but improving the quality of studies.</p> <p>Detailed described in section 2.1. of this Report.</p>
	<p>2.2 Designing methodologies fit for purpose</p> <p>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.</p>	<p>The policy supports the organization of a quality assurance system.</p> <p>External quality assurance is defined and designed by Law on HE, taking in account regulations regarding accreditation of study program and those regarding re-accreditation of HE institutions.</p> <p>While preparing set of accreditation/ re-accreditation rules ACQAHE included all relevant (formal and informal) stakeholders, by taking into consideration their opinions. The regulations regarding accreditation of study programmes include Ministry and Secretariat of Legislation as formal and institutions and experts as informal stakeholders. The regulations regarding re-accreditation of study programs are prepared with support of different stakeholders and adopted by Agency. Experts are representatives of the other countries' agencies or ENQA/EQAR. Also, through external evaluation procedure, the Agency engages domestic experts, experts from the region, students of Montenegrin universities and representatives of the economy from Montenegro, who after the external evaluation procedures make recommendations for improving the rules and procedures.</p>
<p>2.3 Implementing processes</p> <p>Standard: External quality assurance processes should be reliable, useful, pre-</p>	<p>Key features of the Standard 2.3 of the ESG are implemented within the internal acts regulating reaccreditation of higher education institutions. The self-assessment by the higher education</p>	



	<p>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.</p>	<p>institution with defined standards and criteria and necessary documentation, external assessment by peers, site visit, published report in consistent form and follow up are the core elements of that respective procedure. As prescribed in the Rules on the procedure for re-accreditation of higher education institutions, final report prepared by the Expert Commission must contain recommendations for further enhancement and development, with possible deadline for their implementation by the institution. Final decision on re-accreditation is made by Agency (Director). In accordance with the Commission recommendation, institution shall prepare and submit to the Agency follow up assessment in order to verify the implementation results of report conclusions. Consequently, Agency remains fully responsible for ensuring consistent follow up procedure.</p> <p>On the other side, the accreditation process is organized as a peer review procedure which consists of the following elements: fulfilment of standards and criteria for accreditation of study programs with necessary documentation ; selection and preparation of the expert commission by Agency; site visit at the location of the applicant institution; report written by experts; accreditation decision by the Agency and publication of the expert report of the programme accreditation along with the formal decision taken by Agency (Director). However, follow up is not provided through accreditation procedure according to changes made by Ministry and Secretariat for Legislation in Agency's proposal of Rulebook on the procedure for Accreditation of Study Programs, content and form of the accreditation certificate.</p>
	<p>2.4 Peer-review experts</p> <p>Standard: External quality assurance should be carried out by groups of external experts that include (a) student member(s).</p>	<p>Standard 1: Quality assurance policy</p> <p>The policy supports the involvement of external actors in quality assurance.</p> <p>According to the Law on Higher Education, Agency forms an Expert Commission for each external quality assurance procedure (articles 28 and 42). This Commission is composed of independent experts from the country and abroad chosen from the list of</p>



		<p>experts. The list of experts is being established on the basis of a public call conducted by the Agency, which is announced and published on its official website, while open throughout the year.</p>
	<p>2.5 Criteria for outcomes</p> <p>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.</p>	<p>In the process of accreditation of study programs, outcome criteria are stated in article 7 (Accreditation report) of the Rules on the accreditation procedure of study programs, content and form certificate of accreditation.</p> <p>In the process of institution re-accreditation, outcome criteria are stated in article 8 (Manner of work, rights and obligations of commission members) and article 12 (Institution reaccreditation report) of the Rules on the procedure of reaccreditation of a higher education institution.</p> <p>There are two types of criteria: elimination criterion and required criterion. All criteria in these processes are evaluated through three levels: fulfilled / partially fulfilled and not fulfilled. Also, it is stated that for the elimination criterion in case when non-compliance with the standard or its elements conditions a negative reaccreditation attitude - the request for reaccreditation has to be rejected.</p>
	<p>2.6 Reporting</p> <p>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.</p>	<p>The Agency makes a decision on accreditation of study programs / re-accreditation of institution based on the report of the commission. All reports of the commission as well as Agency decisions are publicly available on the Agency's web site.</p>
	<p>2.7 Complaints and appeals</p> <p>Standard: Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.</p>	<p>Each decision on accreditation of study programs/ re-accreditation of institution contains a legal instruction that an administrative dispute may be initiated against the decision with the Administrative Court of Montenegro within 20 days from the day of the decisions' receipt.</p>
<p><b>•How does the agency's mission translate into its daily activities?</b></p>		



ACQAHE mission: Ensuring full application of the Standards and Guidelines defined in the European Higher Education Area through defining clear procedures for accreditation of study programmes and reaccreditation of higher education institutions and rendering independent and objective decisions, which is a precondition for membership in the European quality assurance structures.

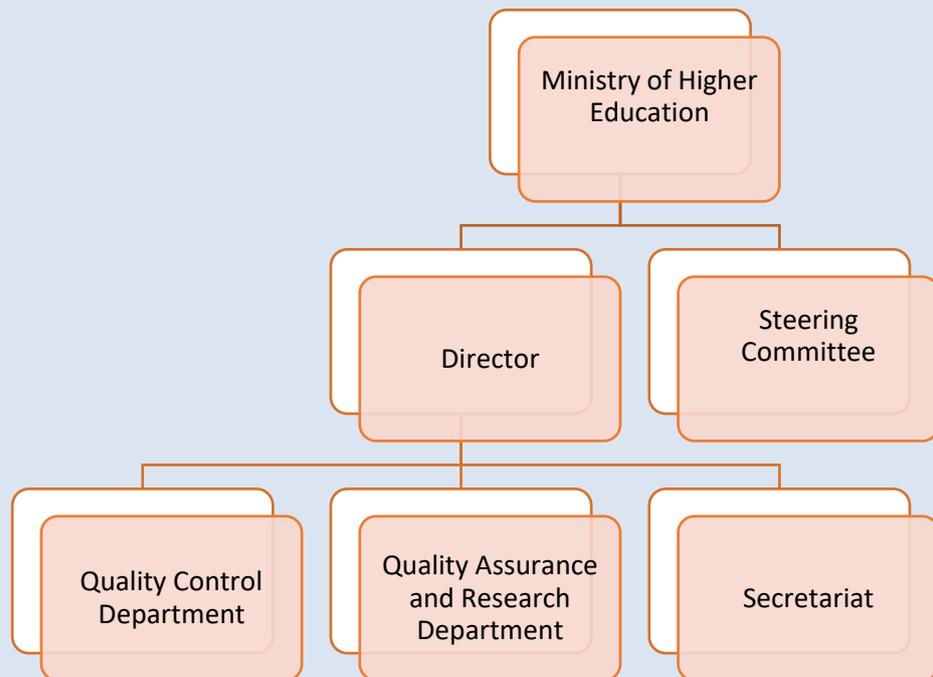
ACQAHE is ensuring application of the Standards and Guidelines defined in the European Higher Education Area through translation of those standards into national legislative (law, by-laws and other acts) and in extent allowed by national legislative framework.

Therefore, clear procedures with criteria are precise within by-law acts for reaccreditation and accreditation, both published on ACQAHE website. In line with these rules, on website there can be found step by step explained procedures on processes of reaccreditation and accreditation.

The decisions are made by ACQAHE director, but following the previous experts' recommendation on reaccreditation/ accreditation procedure.

There is still room for improvement in application of many ESGs, ACQAHE is aware of it and assumes legislation framework improvement and capacity building as driving force into mission realization.

**•How are stakeholders involved in the agency? Please refer to the agency's Governance Organigram to indicate in which bodies/commissions stakeholders are involved, with a specification of the types of stakeholders.**



The Agency is established by the Government (Law on Higher Education, Article 13a), therefore according to the same Law, the Ministry shall supervise the work of the Agency (Article 13g). The Agency shall provide the Government and the Ministry with activity report as well as annual financial statement including the opinion of an independent auditor (Article



13f).

ACQAHE's bodies are Steering Committee and director. Steering Committee is composed of president and two members (two representatives of the Government and one representative of the Public University) appointed by the Government, for a period of four years, on the proposal of the Ministry (Law on Higher Education, Article 13b).

Steering Committee has a managing role, but director represents the ACQAHE and leads its activities. Director attends the meetings of Steering Committee and informs about all relevant operations.

ACQAHE has a plan of establishing Accreditation body, as a separate independent body, consisted of experts from several fields and stakeholders. By establishing Accreditation body, additional level of expertise and fulfillment of independence criteria would be added. This Accreditation body would perform in between the decisions of Experts Commission and the decisions of the director. It would involve independent and expert members from universities, Government, foreign agency, real sector, student and Agency.

Stakeholders such as experts in the field of labor market and students are included through reaccreditation process (Rules on the Procedure for Reaccreditation of Higher Education Institutions, Article 7, paragraph 6), and could impact procedures and criteria improvement through feedback information.

ACQAHE has three departments: Quality Control Department, Quality Assurance and Research Department and Secretariat (detailed activities of each department are described in the answer below).

**•How does the agency ensure a clear distinction between external quality assurance and its other fields of work, if applicable? Annex 2 should be taken into account in that regard.**

As seen from the Governance Organigram above, ACQAHE has three departments, Quality Control Department, Quality Assurance and Research Department as well as Secretariat.

The Quality Control Department conducts the procedures of accreditation of study programs; prepares documentation for the implementation of the public call for the list of experts, determines the list of experts for accreditation and re-accreditation; conducts the procedure of re-accreditation of higher education institutions on the basis of re-accreditation reports. They are involved in drafting by-law acts and collecting information on evaluation procedures, proposing measures for improvement.

The Sector for Quality Assurance and Research is in charge of international relations, projects and researches in field of policies for higher education system. This department takes care of processes and criteria development through by-laws, improvement and their compatibility with ESGs, apply and conduct projects, following the realization of obligations arising from ACQAHE memberships in international associations for quality assurance. It collects and processes data on the higher education system; conducts research in the field of higher education and related areas; prepares analysis and indicators necessary for quality assurance. Based on results of its work and cooperation with Quality Control sector, this department has mandate to propose measures for improvement of quality assurance system.

The Secretariat performs the following tasks: drafting the work plans and reports on the work of the Agency; HR issues; organizational, legal, material - financial affairs, and especially preparation and execution of budget estimates; development of a financial plan; timely and



	<p>purposeful use of funds for the purposes provided by the budget and financial plan; payments with state money; public purchase; office and support work and other work in accordance with regulations.</p> <p>It is important to notice that coordinators of evaluation processes are employed in all sectors. The reason for that decision was in one hand the need to realize many external evaluation procedures in short period of time right after the Agency had been functional, and in other, to include all employees with references in “real life” of the Agency in order to understand issues regarding evaluations through practice. All of them were included in the first drafting of by-law acts which helped to all to distinct and understand terminology and create the unique one, complied with ESG and Montenegrin legal framework.</p>
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### 3.2 Official status

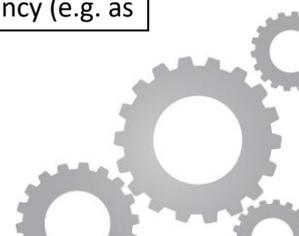
<b>Standard</b>	Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.
<b>Guidelines</b>	In particular when external quality assurance is carried out for regulatory purposes, institutions need to have the security that the outcomes of this process are accepted within their higher education system, by the state, the stakeholders and the public.
<b>EQAR Interpretation</b>	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.
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>What is the legal status of the agency?</b></li> </ul> <p>According to Law on Higher Education ACQAHE is established by Government as legal entity that performs activities of public interest (Article 13a, Paragraphs 3 and 4). It is registered as a legal entity in the Central Register of Legal Entities. Agency reports the Government about its activities on annual basis, having Ministry of Education as supervisor. (Articles 13d and 13dž). However, ACQAHE’s position is not fully clear. The Agency is not recognized in the system of public administration, either as state agency or administration authority although it regulates quality of higher education based on defined legal basis and performs public interest. Making Agency “visible” in the public administration system would rise quality assurance complied to ESGs as one of the priorities of the education system in Montenegro.</p> <ul style="list-style-type: none"> <li>• <b>In which higher education system(s) is the agency formally recognised as a quality assurance agency? Please indicate the exact section(s) of the relevant</b></li> </ul>



	<p><b>legislation and/or by-laws where this is regulated.</b></p> <p>According to Law on Higher Education ACQAHE is formally recognized in Montenegrin higher education system: “Activities related to quality assurance in higher education shall be carried out by Agency for Quality Control and Quality Assurance in Higher Education in compliance with the European Standards and Guidelines” (Article 13a, Paragraph 1).</p> <p>Pursuant to Article 13a paragraph 3, the Government of Montenegro, at its session held on 2 November 2017 adopted the Memorandum of association of the Agency for Control and Quality Assurance of Higher Education. According to this Memorandum, Agency is established for the purposes of ensuring quality in higher education (Article 1).</p> <p>In wider context, Montenegro as independent country has been a full member of the Bologna Process / European Higher Education Area since 2007.</p>
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### 3.3 Independence

<b>Standard</b>	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.
<b>Guidelines</b>	<p>Autonomous institutions need independent agencies as counterparts.</p> <p>In considering the independence of an agency the following are important:</p> <ul style="list-style-type: none"> <li>- 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;</li> <li>- 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;</li> <li>- 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.</li> </ul> <p>Anyone contributing to external quality assurance activities of an agency (e.g. as</p>



	<p>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.</p>
<p><b>EQAR Interpretation</b></p>	<ul style="list-style-type: none"> <li>- Where an agency's independence is not obvious from its structures and status, the Register Commission expects that the external review panel considers in greater detail how operational independence is safeguarded in practice.</li> <li>- 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.</li> <li>- 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 (see Annex 2)</li> </ul>
<p><b>The Self-Evaluation Report should answer the following questions</b></p>	<ul style="list-style-type: none"> <li>• <b>How is the agency's organisational independence demonstrated by official documentation?</b></li> </ul> <p>Agency's organizational independence is formally demonstrated through election of director and deputy directors who are selected based on public competition. Ministry selects the best candidate, proposes to Government and Government nominates him/her to this leading position (Article 13c, Law on Higher Education).</p> <p>On the other side, president and two members of Steering Committee are proposed by Ministry and nominated by Government. Currently, president of Steering Committee is representative of UCG (public university), and members are representative of Ministry and Cabinet of Prime Minister.</p> <p>Employees are selected according to public tender and criteria defined in Law for Public Servants and Referents.</p> <p>Ministry is supervisory body of the Agency (Article 13dž)</p> <ul style="list-style-type: none"> <li>• <b>How does the agency operate independently de facto, especially in terms of defining procedures and methods as well as nomination and appointment of experts?</b></li> </ul> <p>According to Law on Higher Education:</p> <ul style="list-style-type: none"> <li>- The procedure and method on accreditation of study programs are prepared by Agency, and adopted by Ministry.</li> <li>- The criteria and method of institutional self-evaluation is defined by the</li> </ul>



Law on Higher Education (Article 42, Paragraph 8). Who adopts the procedure is not defined, therefore Agency is responsible for preparation and adoption.

- Standards and Criteria for external evaluations are prepared and adopted by the Agency.
- Agency implements full procedure of accreditation of study programs: from the moment HE institution delivers request until final decision. The director of the Agency is legal representative thus he/she is responsible for full accreditation procedure (Article 13c, Paragraph 2, points 1,2,3,4; Article 28, Paragraph 5). It means that Director, nominated by Government makes decision on president and members of expert commission, as well as decision on accreditation of study program based on evaluation report. But the Law does not forbids changing the expert commission's recommendation (accreditation attitude). Being conscious of this inconsistency with ESG, none of decisions on accreditation of study programs have not been different de facto from expert commission recommendation since 2018 when Agency took over external evaluation of study programs.
- Agency also implements full procedure of re-accreditation of institutions, from the moment HE institution delivers request until final decision. The only, and important difference compared to accreditation of study programs is that institution is re-accredited only if expert commission delivers positive recommendation (Article 42, Paragraph 7). Agency, namely director is responsible for selection of expert commission members and nomination of president (Article 13c, Paragraph 2, point 4; Article 42, Paragraph 5).

• **How does the agency ensure that the outcomes of its quality assurance processes are its independent responsibility?**

According to Law on Higher Education, the Agency is responsible for implementation of evaluation procedure (Article 13a, Paragraph 2, Number1), for development of standards and criteria for all types of evaluations (Article 13a, Paragraph 2, Number 2a) and for proposing measure for improvement of HE quality based on evaluation reports (Article 13a, Paragraph 2, Number 7) to Government and Ministry.

The procedures for re-accreditation of HE institutions include mandatory recommendation for every evaluated criterion and follow up with action plan for implementation. The follow up is implemented through establishment of the expert commission.

The procedures for accreditation of study programmes do not include follow up what was the suggestion by Secretariat of Legislation.

• **Please indicate the exact section(s) of the relevant legislation and/or by-laws**



	<p><b>where the agency's independence is regulated.</b></p> <p>There is no such section in any law in Montenegro.</p> <p>ACQAHE needs to be legally recognized as independent state agency and factually through compliance to ESG standards.</p>
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### 3.4 Thematic analysis

<b>Standard</b>	Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.
<b>Guidelines</b>	<p>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.</p> <p>A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty.</p>
<b>EQAR Interpretation</b>	<i>(No specific interpretation).</i>
<b>The Self-Evaluation Report should answer the following questions</b>	<ul style="list-style-type: none"> <li>• <b>How does the agency conduct and publish analyses of the general findings from its activities?</b></li> </ul> <p>ACQAHE apprise fact that one of the scopes of its activities is analytical work and possibility to propose measures for improvement of quality of higher education.</p> <p>There is the component of the Sector for Quality Assurance and Research supposed to collect data, realize surveys and publish analyses in field of quality of higher education and higher education system in general. The head of that sector is in charge of conducting researches and analyses. One of the obstacles for development of this component is that it has no employed researchers and IT expert although they are planned in systematization.</p> <p>The second burden to development of the research component is lack of information system. There is no overall and systemic data base on higher education institutions, either electronic platform for evaluations. It means that all data are collected via email communication. The Agency tried to initiate projects for development of information system for higher education and electronic platform for external evaluations, but unsuccessfully. This will not hinder Agency to continue searching for expert and financial support to reach this aim.</p> <p>The Agency realized external evaluations of three universities in last 14 months.</p>



	<p>Two of them are completed recently, one in July and other in October 2020. The largest (public) university will be evaluated in 2022. After these cycles of reaccreditation processes, research department could have valid base for thematic analyses within the system.</p> <p>There are few analyses regarding higher education system and efficiency of external evaluation procedures that agency realized, but not published in last year. They were used for internal processes and decisions.</p> <p><b>• How does it use the outcomes of these analyses?</b></p> <p>The analyses Agency realized were for its internal works, rising efficiency of the evaluation processes among coordinators and management and creating holistic picture of trends in HE system.</p> <p>At first place, the findings from thematic analyses will be used for students to have better comparative approach when deciding what study program/institution to enroll. It will be useful for Government to improve the system of quality assurance. And finally, Agency will use analyses to improve its work, procedures and criteria for evaluations.</p>
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### 3.5 Resources

<b>Standard</b>	Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.
<b>Guidelines</b>	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.
<b>EQAR Interpretation</b>	<i>(No specific interpretation)</i>
<b>The Self-Evaluation Report should answer the following questions</b>	<p><b>• How do the agency's financial arrangements ensure the sustainability of its activities within the scope and in line with the ESG?</b></p> <p>ACQAHE finances activities as written in Law on Higher Education, Article 13a "Funds required for the work of the Agency shall be provided from the Budget of Montenegro and own revenues." It means that ACQAHE has separate budget position in state budget, but approved by Ministry of Education before plan is submitted to Ministry of Finance. The sustainability is provided through full financing of salaries and expert commission fees and costs by state budget. The budget covers, as well as small part of travel costs, consultancy services (mainly</p>



translation) and equipment.

- **Please provide an overview of the main resources that enable the agency to carry out its work.**

The State Budget and own revenues

The Budget of the Agency is planned on annual basis, according to planned (institutions) and expected (study programs) external evaluations. The amount for expert commissions' fees and costs depend on own revenues that Agency generates through administrative taxes paid by institutions for external evaluations. Although they are called "own", according to Administrative taxes law, institutions pay the tax not directly to Agency but to central budget and represent baseline for negotiation with Budget Directorate during planning the budget for the next year.

Projects

The Agency used money from project to equip the working space at beginning of the work. Now, projects are the main source for capacity building. Bearing in mind that strong and adequate human capacities mean higher level of HE system quality, ACQAHE worked a lot to be partner in some projects. The projects ACQAHE is/was involved are:

Erasmus + project **Fostering Internationalization at Montenegrin HEIs through Efficient Strategic Planning (IESP)** is aimed to improve international competitiveness and visibility of Montenegrin HEIs through providing an optimum model for strengthening capacities for various aspects of internationalization.

**Staff exchange in the field of quality assurance BFUG**, the staff mobility project in the field of quality assurance in higher education will cover the practice of agency employees in France and Poland.

**Quality education for all (QUALITY ED – MONTENEGRO)** project aims to develop evaluation criteria that will assess the academic integrity of the institution.

**Integration of key competences into the education system of Montenegro project** aims to conduct research on higher education institutions in order to include key competencies in the curriculum of higher education institutions in Montenegro.

**SEQA ESG** - Supporting European QA agencies in meeting the ESG project aims to support newly established institutions for quality assurance in higher education in the implementation of the ESG.

**BAQUAL** - Better Academic Qualifications through Quality Assurance project



	<p>aims to identify a common standard in evaluation procedures and encourage the application of qualifications frameworks in internal and external quality assurance procedures in Croatia, Montenegro and Northern Macedonia.</p> <p>Completed projects: <b>INVO – HERIC Higher Education and Research for Innovation and Competitiveness</b> goal of the project was strengthening of the quality and relevance of higher education and research in Montenegro through the reform of higher education financing and system of quality assurance and through the strengthening of research and development capacities.</p> <p>Currently, there are 13 people work in ACQAHE. The act on systematization and organization of the Agency provides the possibility for employment of missing human resources like researches, lawyer, IT expert and PR expert. As Agency develops its scope of work, need for these positions becomes stronger. Their engagement mainly depends on fiscal policy of the Government.</p>
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### 3.6 Internal Quality Assurance and Professional Conduct

<b>Standard</b>	Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.
<b>Guidelines</b>	<p>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.</p> <p>Agencies apply an internal quality assurance policy which is available on its website. This policy</p> <ul style="list-style-type: none"> <li>- ensures that all persons involved in its activities are competent and act professionally and ethically;</li> <li>- includes internal and external feedback mechanisms that lead to a continuous improvement within the agency;</li> <li>- guards against intolerance of any kind or discrimination;</li> <li>- outlines the appropriate communication with the relevant authorities of those jurisdictions where they operate;</li> <li>- 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;</li> </ul>



	<p>- allows the agency to establish the status and recognition of the institutions with which it conducts external quality assurance.</p>
<p><b>EQAR Interpretation</b></p>	<p>- The processes for internal quality assurance need to be formal and regular, and not just informal.</p> <p>- 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; Annex 2 should be taken into account in that regard.</p> <p>- When a registered agency involves a partner or subcontractor (for activities within the scope of the ESG) that is not itself an EQAR-registered agency, the registered agency should demonstrate how it ensures ESG compliance of the parts of the work performed by the partner/subcontractor.</p> <p>- Where an agency uses the results of another agency or makes a decision based on a report from another agency, the same principles as for subcontractors apply.</p>
<p><b>The Self-Evaluation Report should answer the following questions</b></p>	<p>• <b>How does the agency's internal QA system guarantee the quality and integrity of its activities? Please also refer to the Internal QA Policy document to indicate where this is specifically indicated.</b></p> <p>Agency does not have Internal QA Policy Document but plans to develop the one in near future based on experience, national legislative and ESGs.</p> <p>Agency uses few documents and their provisions to assure and provide quality and integrity in its activities:</p> <ul style="list-style-type: none"> <li>• Rules on procedures for re-accreditation of HE institutions (Articles 7, 9 and 9)</li> <li>• Instructions for work of expert commission for accreditation of study program (Articles 3, 5, 6, 7, 8, 9, 10, 13)</li> <li>• Statement on nonexistence of conflict of interest with the rules of procedure that is obligatory to be signed individually by expert commission members</li> <li>• Every second year ACQAHE adopts Integrity Plan according to Anticorruption Law assigning head of secretariat as integrity manager whose task is to follow and conduct the realization of the plan.</li> </ul> <p>• How does the internal QA system foster continuous improvement within the agency? Please also refer to the Internal QA Policy document to indicate where this is specifically indicated.</p> <p>Making capacities stronger from day to day with more knowledge and experience in QA are assumed as the main force of the continuous improvement within the Agency. Two years of functioning are not enough to</p>



	make QA system in order especially in current legal framework, but are enough to know where to focus capacities and energy and do quality assurance in reliable, consistent and ESG compliant way. This awareness is good base for systematization of internal QA of the Agency in the future period.
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### 3.7 Cyclical External Review of Agencies

<b>Standard</b>	Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.
<b>Guidelines</b>	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.
<b>EQAR Interpretation</b>	The cyclical review of an agency is a prerequisite for (continued) EQAR registration and inherently fulfilled by the agency undergoing a review.
<b>The Self-Evaluation Report should answer the following questions</b>	<p><b><i>This Standard is not applicable for agencies that are not yet EQAR registered and therefore doesn't need to be addressed in the Self-Evaluation Report.</i></b></p> <p>ACQAHE is not EQAR registered.</p>



# ANNEX 1

## ESG Part 1: Standards for internal quality assurance

### Standard 1.1 Policy for quality assurance

Institutions should have a policy for quality assurance that is made public and forms part of their strategic management. Internal stakeholders should develop and implement this policy through appropriate structures and processes, while involving external stakeholders.

### Standard 1.2 Design and approval of programmes

Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated, and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.

### Standard 1.3 Student-centred learning, teaching and assessment

Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.

### Standard 1.4 Student admission, progression, recognition and certification

Institutions should consistently apply pre-defined and published regulations covering all phases of the student “life cycle”, e.g. student admission, progression, recognition and certification.

### Standard 1.5 Teaching staff

Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of the staff.

### Standard 1.6 Learning resources and student support



Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and student support are provided.

## Standard 1.7 Information management

Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.

## Standard 1.8 Public information

Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible.

## Standard 1.9 On-going monitoring and periodic review of programmes

Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.

## Standard 1.10 Cyclical external quality assurance

Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.



## ANNEX 2

### Guiding principles for the separation between agencies' activities

This annex addresses the clear and transparent separation between different activities by registered agencies, within and outside the scope of the ESG. While agencies may choose the most suitable ways of ensuring such a separation, as expected by the ESG, it is recommended that agencies use the following guiding principles as a benchmark.

#### Clear communication

1. Agencies make clear distinctions (e.g. on their website, in publications and external quality assurance reports) between their different fields of activity and, in particular, between those activities within the scope of the ESG and other activities.

2. While the agency decides on and is responsible for its own terminology, it is able to demonstrate that the terms it uses are clearly defined, and that there is no risk of confusion whatsoever between external quality assurance within the scope of the ESG and other activities.

3. Agencies apply special care to avoid confusion if and when they use the typical terms “evaluation”, “review”, “audit”, “assessment” or “accreditation” (see ESG 3.1) for activities outside the scope of the ESG.

4. Agencies only use the EQAR label and refer to the ESG in connection with activities within the scope of the ESG. Agencies do not make any statements that might create the impression that other activities were within the scope of the ESG or covered by their registration on EQAR.

#### Preventing conflicts of interest

5. Agencies take appropriate precautions to prevent any conflicts of interest arising from different activities they carry out, and publish the respective measures or principles on their website.

6. Among the various activities outside the scope of the ESG, consultancy deserves special attention. “Consultancy” means that an agency offers a service to an individual higher education institution, usually for a fee. Unlike external quality assurance activities, which are based on predefined processes and standards, these activities are usually driven by the institution's demands and requirements, to serve a specific purpose.



7. Where consultancy services relate to issues covered by the ESG (i.e. teaching and learning in higher education, including the learning environment and relevant links to research and innovation) and in which the agency also makes assessments, there is a particular potential for conflicts of interest.

8. Agencies thus ensure that they do not carry out any external quality assurance (within the scope of the ESG) of the same unit (e.g. institution, faculty, department or study programme) to which they have provided consultancy during the past six years.

9. Agencies do not select experts to review an entity who have provided consultancy to the entity before.

## Subsidiaries

10. If agencies have subsidiaries or are linked to other organisations that are not effectively distinguishable from themselves (i.e. share the name, staff or organisational structure), there is a high probability that the public may attribute activities and actions of those entities to the registered agency, i.e. considers them as if they were conducted by the registered agency.

11. Therefore, unless a subsidiary or linked organisation is effectively distinguishable, all rights and obligations resulting from EQAR registration apply equally to subsidiaries or linked organisations.

