4.2.2 Align education, with labour market needs through close cooperation with the business community and through revising the legal framework on VET and adult education and increasing work-based learning in VET schools.

Summary of checks performed by relevant authorities on the steps for which funding is requested, including weaknesses identified and any corrective actions taken

In accordance with the requirements set forth in the national legal framework on public internal control, financial management and internal audit, RGF Regulation and the applicable Commission Implementing Decision, a comprehensive verification process was conducted by the competent authorities concerning this reform step. This process entailed a systematic collection and thorough review of all pertinent evidence, as part of the internal control framework in the main implementing body, the Kosovo Accreditation Agency and Ministry of Education, Science, Technology and Innovation as a support institution, to assess the conformity of the reform step with the criteria defined in the Reform Agenda and related legal instruments. Checks and verifications were performed by the units responsible for implementing the reform step, the units responsible for coordination of Reform Agenda within the respective institution, and the institution's internal controls by senior management. Additionally, the Reform Agenda coordination structures within the Office of the Prime Minister have carried out their oversight and verification responsibilities.

All relevant documentation and supporting materials have been gathered, examined, and documented in a dedicated verification checklist, ensuring a clear and transparent audit trail in compliance with established procedural standards. The verification checklist and supporting evidence have been securely archived to maintain the integrity and accessibility of the records.

Upon completion of these procedures, no weaknesses, discrepancies, or non-compliances were identified in relation to the reform step under review. Consequently, it is concluded that the reform step has been satisfactorily fulfilled in accordance with all applicable regulatory requirements.

The step under review	Full membership of ENQA
Baseline	KAA is already an affiliated member of ENQA (fulfilled all obligations and full membership depends on ENQA)
Deadline of the step	June 2025
Actual results	Kosovo is not a member state of the European Higher Education Area (EHEA). According to ENQA's own Statutes and Admission Criteria, membership is reserved for quality assurance agencies from EHEA countries. This means Kosovo Accreditation Agency (KAA) cannot obtain full ENQA membership and ENQA's General Assembly in Stockholm in October 2022 confirmed KAA as an ENQA Affiliate. The formal role of The European Quality Assurance Register for Higher Education (EQAR) is the official register of such agencies, listing the quality assurance agencies that work in line with an agreed common framework to ensure the quality of higher education institutions and study programmes. Under such circumstances, the goal of this reform is the re-listing/registration at the European Quality Assurance Register for Higher Education (EQAR) which has just as an impart role as ENQA in terms of its core functions of recognition of **cross-border quality assurance** and implementation of EHEA commitments regarding quality assurance. Acceptance in either body is based on the same **external review** by an independent panel that shows **substantial compliance** with the ESG.

	Progress in this reform is related on the strategic objective of achieving reregistration within EQAR, and is based on the full implementation recommendations from ENQA External Review, in two broad categories: 1. Development and adoption of implementing legislative framework following the adoption of the Law No. 08/L-110 on Kosovo Accreditation Agency in 2023; 2. Improvement in the available human, material and financial resources. (1) In 2024, important progress was ensured with the adoption of legislative and regulatory framework contributing to the strengthening of Kosovo's higher education quality assurance system. The adopted acts are: • Administrative Instruction (MASHTI)-01B-03/2024-UA for the evaluation of compatibility of the study program holders as well as programs from non-majority communities in the accreditation and reaccreditation process of higher education institutions; • Guidelines for Student Engagement in Internal and External Quality Assurance of Kosovo Higher Education; • Regulation (AKA) No. 04/2024 on the Manual for Accreditation/Reaccreditation and Validation of Higher Education Institutions and Study Programs at the Bachelor's and Master's levels; • Regulation (AKA) No. 02/2024 on the Internal Organization and Systematization of Jobs within the KAA; and • The Internal Quality Assurance Policy of the KAA. The Kosovo Accreditation Agency (KAA) has ensured that all its documents, manuals, and procedures are fully aligned with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015). (2) With respect to improvements in human, material, and financial resources, the agency has increased its staff significantly from 9 to 25 employees. KAA has also upgraded its equipment by providing smart boards, laptops and desktop computers for each employee. The development and adoption of these documents and resources directly addressed ENQA's requirements to align Kosovo's accreditation processes with European standards in education and support KAA's membership in EQAR. KAA underwent an external review by ENQA between March and September 2024, which serves as the basis for the EQAR Register Committee's decision on KAA's eligibility for registration. The ENQA Agency Review Report published in December 2024, evaluated KAA's fulfilment of these conditions. At the EQAR Register Committee meeting of 26-27 June, the Kosovo quality assurance agency was found to be working in substantial compliance with the ESG and were thus admitted to the Register.
Evidence provided	The following evidence is provided to support the achievement of the reform step: 1. ENQA Agency review Kosovo Accreditation Agency (KAA), European Association for Quality Review; Can be accessed here: External-review-report-KAA.pdf

	2. Law No. 08/l-110 on Kosovo Accreditation Agency Can be accessed here: LIGJI NR. 08/L-110 PËR AGJENCINË E KOSOVËS PËR AKREDITIM 3. Administrative Instruction (MASHTI)-01B-03/2024-UA for the evaluation of compatibility of the study program holders as well as programs from non-majority communities in the accreditation and reaccreditation process of higher education institutions (attached) 4. Internal Quality Assurance Policy of the Kosovo Accreditation Agency (KAA); Can be accessed here: https://akreditimi.rks-gov.net/about-kaa/legal-provisions-and-responsibilities/ 5. Regulation (Aka) No.02/2024 on the Internal Organization and Systematization of Jobs in the Kosovo Accreditation Agency. Can be accessed here: https://akreditimi.rks-gov.net/about-kaa/legal-provisions-and-responsibilities/ 6. Regulation (AKA) No. 04/2024 on the Manual for Accreditation/Reaccreditation and Validation of Higher Education Institutions and Study Programs at Bachelor's and Master's Levels; Can be accessed here under the name "KAA Accreditation Manual 2024: https://akreditimi.rks-gov.net/about-kaa/legal-provisions-and-responsibilities/ 7. Self-Assessment Report of the Kosovo Accreditation Agency (KAA), 2024 Can be accessed here (Report is found by going to the on the left side, click on the KAA dropdown: https://akreditimi.rks-gov.net/ 8. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). (2015). Brussels, Belgium. Can be accessed here: https://www.enqa.eu/wp content/uploads/2015/11/ESG_2015.pdf 9. Guidelines for Student Engagement in Internal and External Quality Assurance of Kosovo Higher Education (2023); Can be accessed here: Guidelines-for-student-engagement-in-internal-and-external-quality-assurance-of-Kosovo-Higher-Education-eng.pdf 10. Statutes of the European Association for Quality Assurance in Higher Education, ENQA, 2021 (adopted at the General Assembly meeting on 10 March 2021), Can be accessed here: https://www.enqa.eu/wp-content/uploads/ENQA-Statutes-2021.pdf 11. ENQA Rules of Procedure Revised version adopted by the General Assembly on 10 March 2021; Can be accessed here: https://www.enqa.eu/wp-content/uploads/ENQA-Rules-of-Procedure-2021-1.pdf 12. EQAR Approval decision of Kosovo Accreditation Agency to the Register in the Committee meeting of June 26-27, 2025.

Checks performed in the verification of the step and related findings	During the verification of this reform step, all relevant evidence was reviewed and summarised in the control checklist by MES, AKA and staff of Office of Prime Minister supporting the RGF National Coordinator, while all supporting documents were properly stored to ensure a complete audit trail. The conducted checks and verifications confirmed that: • all required documents, as specified in Annex 1 of the Reform Agenda, were provided and attached to this report; • the submitted evidence is consistent with the description and requirements of the reform step set out in the Commission Implementing Decision; • the submitted documentation confirms the fulfilment of the reform step; • the submitted documentation confirms the period in which the reform step was fulfilled. Based on the checks and verifications conducted, the evidence provided confirms the achievement of the and the relevant implementation period. No related findings were identified.
Compliance with general principles and DNSH principle	The implementation of this step does not contravene the general principles outlined in Article 4 and 11(4) of Regulation (EU) 2024/1449 and Article 3 of the Facility Agreement. The implementation of this step does not contravene the 'Do No Significant Harm' principle (DNSH).
Double funding	Contributions from third parties supporting the achievement of this reform step are presented below. All such contributions are consistent with the guidance on avoiding double funding under the Reform and Growth Facility (RGF). The successful completion of this reform step—concerning the re-registration process and institutional reform of the Kosovo Accreditation Agency (KAA)—is a direct result of strong political commitment, the dedication and professionalism of KAA staff, and the proactive leadership of its new management. Through focused efforts and a shared strategic vision, KAA has undertaken significant reforms to strengthen internal governance and align its practices with international standards. In support of this process, a number of technical assistance interventions were provided by development partners, contributing to the broader institutional development of KAA. Specifically: • The Higher Education Intervention (HEI 25) provided technical assistance to the drafting of Internal Quality Assurance Policy, the Regulation on the Appeals Commission, the Regulation on the Selection, Engagement, and Compensation Procedures of External Experts, and the Regulation on Internal Organization and Systematization of Jobs. These documents were finalized by KAA's staff through working groups and formally endorsed by the management. • The HERAS+ program offered technical assistance to KAA in the development of Standards for the Evaluation of PhD Programs and in preparing the KAA Accreditation Manual. • The U.S. Embassy in Kosovo supported the preparation of the Manual for Internal Staff Evaluation, the Thematic Analysis, Guidelines for Student

	Engagement in Internal and External Quality Assurance, and a Digitalization Feasibility Study. • The QAINT Project financed by Austrian Development Agency (ADA) offered technical expertise to KAA staff in advancing the Monitoring and Post-Accreditation Methodology, developing its Strategic Plan, and supporting the digitalization efforts for the e-accreditation platform.
Clear conclusion on the achievement of the step	For the reasons outlined in this fiche under the section on *Results*, full membership in ENQA is legally not feasible due to changes in the ENQA statute. This matter is beyond the control of the authorities of the Republic of Kosovo. Instead, admission of Kosovo to the EQAR register is legally feasible. Admission in the EQAR Register contributes equally or to a greater extent to the achievement of the intended objective of this step. Consequently, at its meeting held on 26–27 June, the EQAR Register Committee approved the admission of the Kosovo Accreditation Agency to the European Quality Assurance Register for Higher Education (EQAR). Based on evidence presented in this fiche, it can be concluded that the reform step has been fully achieved.

ENQA AGENCY REVIEW

KOSOVO ACCREDITATION AGENCY (KAA)

PADRAIG WALSH, GIULIANA SABBATINI, TOMAŽ DEŽELAN, NATALIA GRENIEWSKA

17 DECEMBER 2024

ENQA AGENCY REVIEW **2024**

enqa.

European Association for Quality Assurance in Higher Education

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EXECUTIVE SUMMARY

This report analyses the compliance of the Kosovo Accreditation Agency (KAA) with the European Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), as required by the Terms of Reference (TOR) stipulated between the agency and ENQA/EQAR. It is based on an external review conducted from March 2024 to September 2024, including a site visit from 2nd to 4th July 2024 in Pristina.

This is KAA's third review, but since the agency was removed from EQAR in 2018 and lost its ENQA membership in 2019, KAA is effectively being reviewed as a new agency. Results and recommendations from the 2019 ERR are nevertheless considered throughout the report. As ENQA amended its statutes in 2020 so that only members from a member state of the EHEA are now eligible for ENQA membership, ENQA's General Assembly in Stockholm in October 2022 confirmed KAA as an ENQA affiliate. In 2023, KAA requested an ENQA co-ordinated review so that it could be considered for re-listing on EQAR.

KAA was established by the competent Ministry in 2004 and became fully operational in 2009, starting with accreditation activities at institutional and programme level, with the support of international projects, donors and experts. In 2014, KAA became an ENQA member and was accepted into EQAR in 2015. In 2017, the Ministry suddenly dismissed the Director and the whole Board of KAA (SCQ), citing irregularities. This act of political interference on the independence of the agency led to its exclusion from EQAR in 2018 and from ENQA in 2019, following the ENQA external review in the same year. In 2023 finally a new Law on KAA was adopted, establishing the independent legal status of the agency and its Board.

Based on this law, external QA activities of KAA include accreditation and re-accreditation, monitoring and validation for HEIs and their study programmes in Kosovo. The mission of KAA is to support the development of quality in HEIs and ensure the overall quality of the sector in Kosovo. Specific goals are the promotion of HE quality, an increase in transparency and accountability in the HE sector, the improvement of quality of HE offers, encouraging innovative content, ensuring comparability between Kosovo HE and international qualifications, and also to contribute to the integration of Kosovo into the EHEA. Activities of KAA are based on the values of independence of KAA, of transparency, credibility and professionalism.

In light of the available documentary and oral evidence considered by it, the review panel made the following judgements and recommendations on the compliance of KAA with the ESGs:

- Compliance with ESG 3.2, 3.3, 3.4, 3.7, 2,1, 2.2, 2.4, 2.5, 2.6, 2.7
- Partial compliance with ESG 3.1, 3.5, 3.6, 2.3

Based on the analysis provided, the review panel considers that, in the performance of its functions, KAA does not substantially comply with the ESG. The agency is recommended to take appropriate action to achieve compliance in all standards at the earliest opportunity.

INTRODUCTION

This report analyses the compliance of the Kosovo Accreditation Agency (Agjencia e Kosovës pr Akreditim / Agencija Kosova za Akreditaciju, KAA) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG). It is based on an external review conducted from March 2024 to September 2024.

BACKGROUND OF THE REVIEW AND OUTLINE OF THE REVIEW PROCESS

BACKGROUND OF THE REVIEW

ENQA's regulations require all member agencies to undergo an external cyclical review, at least once every five years, in order to verify that they act in compliance with the ESG as adopted at the Yerevan ministerial conference of the Bologna Process in 2015. However, as Kosovo is not a member state of the EHEA and therefore KAA cannot become an ENQA member, the review was requested on a voluntary basis pursuing EQAR registration.

This is KAA's third review, but since the agency was removed from EQAR in 2018 and lost its ENQA membership in 2019, the panel is expected to review KAA as a new agency but also to consider the results and recommendations from the 2019 ERR.

As explained in more detail in the Chapter about KAA, the agency became a member of ENQA in 2014 following a review and became listed in EQAR that same year. Then it was excluded from EQAR in 2018. It undertook a five-year review for ENQA membership in 2019 and its membership was not renewed. In 2020, ENQA amended its statutes so that only members from a member state of the EHEA are now eligible for ENQA membership. The minutes of ENQA's General Assembly in Stockholm in October 2022 confirmed KAA as an ENQA affiliate.

In 2023, KAA requested an ENQA co-ordinated review so that it could be considered for listing on EQAR.

SCOPE OF THE REVIEW

The tripartite Terms of Reference (TOR) between KAA, ENQA and EQAR were finalised in March 2024. As KAA applied for inclusion in EQAR, a full review was required, considering the compliance of KAA with each of the standards of Part 2 and 3 of the ESG.

Considering the chronology explained in the Introduction of this ERR, the panel was required in the TOR "to give specific attention to the issues where the Register Committee concluded in its last decision, that the agency was not compliant with the ESG, namely ESG 3.3."

The following activities carried out by KAA are considered in this review according to the TOR:

- Institutional accreditation: QA procedure at institutional level for public and private HEIs to obtain a first accreditation or re-accreditation, necessary to gain and maintain the ministerial licence to operate in Kosovo (every 3 to 5 years)
- Programme accreditation: QA procedure at programme level (Bachelor and Master) for already accredited HEIs, necessary to operate a specific study programme (every 3 to 5 years)
- Monitoring procedures: QA procedure to be performed every 6 months at programme or institutional level in order to confirm that the conditions of the last accreditation are being maintained
- Evaluation of doctoral programmes: QA procedure at programme level (Doctorate) for already accredited HEIs, necessary to operate a specific Doctoral programme (every 3 to 5 years)

According to the Law on KAA, the agency also performs validation of international accreditations at institutional and programme level, as a pre-condition for institutions to operate and offer specific study programmes in Kosovo after they have been accredited by international QA agencies. To the knowledge of the panel, there are no other external QA activities performed by KAA falling within the scope of the ESG and not listed in the TOR.

MAIN FINDINGS OF THE 2019 REVIEW

Prior to the current review, KAA underwent an external review in 2019, with the site visit in March 2019. Using the 2015 ESG and the ENQA Guidelines for Agency Reviews in place at the time (with four possible levels of compliance: fully, substantially, partially, not), the review panel reached the following judgements:

ESG	**Compliance level**
3.1 Activities, policy, and process for quality assurance	Partially compliant
3.2 Official status	Fully compliant
3.3 Independence	Substantially compliant
3.4 Thematic Analysis	Partially compliant
3.5 Resources	Partially compliant
3.6 Internal quality assurance and professional conduct	Partially compliant
3.7 Cyclical external review of agencies	Fully compliant
2.1 Consideration of internal quality assurance	Substantially compliant
2.2 Designing methodologies fit for purpose	Substantially compliant
2.3 Implementing processes	Partially compliant
2.4 Peer-review experts	Partially compliant
2.5 Criteria for outcomes	Substantially compliant
2.6 Reporting	Partially compliant
2.7 Complaints and appeals	Fully compliant

Based on the ERR, the ENQA Board decided on 19th September 2019 not to renew the KAA membership, sharing the panel's concern about the areas of partial compliance with the ESG, and the ENQA President communicated the decision to KAA on 1st October 2019. KAA was advised by ENQA to follow-up and implement the provided recommendations before reapplying (after at least two years from the ENQA decision).

In May 2022 KAA delivered a follow-up report to ENQA, providing an overview of the main recent developments at KAA and a self-assessment of the level of fulfilment of the recommendations from the 2019 ERR. In 2022 KAA also became an affiliate of ENQA.

In the present ERR the follow-up of the recommendations from the 2019 ERR will be discussed under the corresponding ESG.

Summary

In the executive summary of the 2019 ERR (p. 4) the panel expressed the following overall judgement: "The review panel considers that, in the performance of its functions, KAA does not substantially comply with the ESG. The agency is recommended to take appropriate action to achieve at least substantial compliance in all standards at the earliest opportunity."

REVIEW PROCESS

The 2024 external review of KAA was conducted in line with the process described in the *Guidelines for ENQA Agency Reviews* and in accordance with the timeline set out in the Terms of Reference. The panel for the external review of KAA was appointed by ENQA in May 2024 and composed of the following members:

- Padraig Walsh, Chief Executive, Quality and Qualifications Ireland (QQI), Ireland – Chair, quality assurance professional (ENQA nominee)
- Giuliana Sabbatini, Head of Service and Competence Center for Higher Education Development and Quality Management, Austria – Secretary, quality assurance professional (ENQA nominee)
- Tomaž Deželan, Full Professor, Jean Monnet Professor, CoE&EU European Youth Researcher (PEYR), Faculty of Social Sciences, University of Ljubljana, Slovenia – Panel member, academic (EUA nominee)
- Natalia Greniewska, PhD student in Literature, Faculty of Oriental Studies, University of Warsaw and Master's student in Economics, Warsaw School of Economics, Member of the European Students' Union Quality Assurance Student Experts' Pool, Poland – Panel member, student (ESU nominee)

Alexis Fábregas Almirall, Project and Reviews Officer at ENQA acted as the coordinator for the review. The coordinator is not a member of the panel.

The review panel received the SAR together with its Annexes on 23rd May 2024. In the weeks between the provision of the SAR and the site visit, the following online meetings took place:

- 4th June 2024: briefing of the panel members attended by ENQA and EQAR representatives
- 17th June 2024: kick-off meeting (1st part) with panel members and ENQA coordinator
- 26th June 2024: kick-off meeting (2nd part) with panel members and ENQA coordinator
- 26th June 2024: meeting with the agency (two KAA representatives, panel members and ENQA coordinator)

On 1st July 2024, the day before the site visit, the panel members met once again in person in Pristina to finalise the preparation activities.

Concerning the schedule of the site visit, a proposed structure for the sessions and their composition was provided by the review panel on 12th June 2024, draft versions were circulated and adapted on 20th and 25th, then finalised on 26th June 2024.

Based on the internal discussions among the panel members concerning the mapping between ESG and evidence (SAR and its annexes, KAA website etc.), extensive additional documentation was first required by the panel on 11th June 2024 and then again during the site visit itself. Before as well as during the site visit, KAA provided the required documents promptly (where available, otherwise a short information or explanation was returned).

Self-assessment report (SAR)

According to the SAR itself (p. 7), this document was first drafted by a small team made up of the President of KAA's Board (State Council of Quality, SCQ), KAA's Director and the Head of the Department for Monitoring and Post-Accreditation Procedures (previously called the Department for Follow-up Procedures); then thoroughly discussed in two workshops in December 2023 and January 2024 with Board members, KAA staff members, and (in the second workshop) also with representatives of the (international) donors and of two higher education institutions (HEIs). A consultation phase followed, in which the document was circulated through KAA's website as well as

via email with representatives of all stakeholders of the agency. Feedback was integrated by the original team and the document finalised and submitted.

The SAR consists of eighty-eight pages and three annexes, whereas several other documents available on KAA's website and more generally on the web are given as links in the text. The document contains information about the agency's development, the national context regarding QA and HE, and the history, profile and activities of KAA. It provides evidence about compliance with ESG Part 2 and 3 and includes opinions of KAA's stakeholders, a reflection on the recommendations from the previous review and their implementation, and a SWOT analysis including KAA's findings on the main challenges and future developments.

A collection of additional documents was provided in the week prior to the site visit, as well as during the site visit itself based on the requests of the review panel, as the panel members were not always in the position, based on the SAR itself, to recognise if specific activities or steps described in the SAR were already implemented or still in the planning / introduction phase. The panel believes that it would have been more helpful if more evidence had been provided directly in the SAR or in the Annexes.

The SAR also includes an overview (pages 78-83) of the recommendations from the 2019 ERR and the corresponding progress of the agency.

Site visit

The site visit took place from 2nd July to 4th July 2024 in Pristina at the premises of the agency, according to the time schedule in Annex 1. In sixteen sessions, representatives from the following groups and stakeholders were interviewed by the panel:

- KAA's Board (SCQ) members
- KAA's Director and staff from the Departments of Evaluation and Accreditation as well as Monitoring and Post-Accreditation procedures
- International donors and consultants involved in (capacity-building) projects and activities with KAA
- Representatives of employers / industry / labour market and of the civil society
- Representatives of the responsible Ministry of Education, Science, Technology and Innovation (MESTI) and of the national ENIC/NARIC
- Representatives from the HEIs in Kosovo – public as well as private ones: senior management (e.g. Rector or Dean) and quality management units
- Experts involved in reviews conducted by KAA: student reviewers and non-student reviewers (both these meetings took place online)
- Student representatives from Kosovo HEIs

All meetings were held in English and only a few participants needed support with translation, which was kindly provided by other participants in the same sessions.

Before the beginning and at the end of each site-visit day, as well as between the sessions and in a longer slot during the last day of the site visit, the panel members prepared and discussed the mapping between the various ESG standards and the evidence provided, as well as reflected on the results of each session. Additional documents provided during the site visit were also analysed during these time slots.

The panel members thank the agency for the organisation of the site visit and the fruitful discussions during the meetings.

External review report

Already during the site visit, in the last private sessions, the panel members had the chance to thoroughly review their main findings and possible recommendations. The results of this session were summarised by the panel chair and served as a starting point for the ERR. The report itself was first drafted by the secretary of the panel and then circulated with and edited by all panel members, so that a final version of the draft could be provided to the ENQA coordinator on 30th July 2024. Based on the coordinator's feedback the panel reviewed the ERR and sent it to the agency on 12th August 2024, in order for the agency to check for factual inaccuracies. The agency provided feedback on 31st August 2024 and the final report was sent by the panel to the ENQA coordinator on 6th September 2024.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

The following characterisation is based on information contained in the SAR, on KAA's report "The state of higher education in Kosovo" (2020[1]), and on the explanations and further information provided during the site visit, especially by KAA's Board President, KAA's Director and the representatives of the ministry (MESTI). The HE sector is regulated by the Higher Education Law (2011, link in the SAR on p. 11) and includes:

- Bachelor's degrees: 3 or 4 years with 180-240 ECTS
- Master's degrees: 1 or 2 years with 60-120 ECTS
- Doctoral degrees: at least three years
- As well as post-secondary education

The sector is made up of different types of HEIs, which – depending on their type/status and their nature (public or private) – are entitled to provide programmes at one or more of the levels listed above. These types include Universities, University Colleges, Colleges, Institutes, Schools of Higher Education and Academies. According to the law, public HEIs are established by decision of MESTI, ratified by the parliament, while private HEIs are privately founded. Both have to undergo institutional accreditation.

Following the end of the war in 1999 and then in 2008 the declaration of independence, in Kosovo an intensive expansion of higher education began, leading to the proliferation of HEIs of both a public and private nature. This posed and still poses specific challenges to KAA, because this new rapidly growing sector had to be developed, regulated and consolidated during the past years, and a quality culture established and nurtured step by step together with all stakeholders. At the time that SAR was released, the Kosovo HE sector consisted of 26 institutions (9 public and 17 private ones, p. 9), offering a total of 382 study programmes (58% at public HEIs and 42% at private ones) to 71,835 students (57% in the public sector and 43% in the private sector). More recently, the total number of HEIs, especially of private HEIs, has dropped significantly. However, this is still a highly diversified and large sector for a total population of about 1,59 Mio in the country in 2024 (according to information from the Kosovo Agency of Statistics[2]).

QUALITY ASSURANCE

The general framework of QA in the Kosovar HE sector evolved rapidly (starting with 2002 with the first Law on Higher Education where the role of KAA was first defined) and is set out in the current version of the Law on Higher Education (updated in 2011), in the responsibility of the Ministry of

[1] https://akreditimi.rks-gov.net/wp-content/uploads/2021/11/Report-on-the-state-of-higher-education-in-Kosovo_ENG.pdf (access 12th July 2024)
[2] https://ask.rks-gov.net/ (access 3rd August 2024)

Education, Science, Technology and Innovation (MESTI). Article 7 of this law introduces KAA and its duties and responsibilities, and also sets the boundaries between the activities of the agency and of the ministry: KAA is responsible for QA and accreditation decisions; based on these decisions and with the advice by KAA, MESTI grants, modifies and revokes the licences of HEIs to offer study programmes in Kosovo (see Article 7, §2.2). Accreditation and a licence are both necessary to offer HE study programmes. Of course, decisions about licences also affect financial conditions for the HEIs (same Article, §2.5 and Article 41, §3). Article 15 defines the national framework for accreditation, at institutional and at programme level. The legal framework is then further developed and specified in the Law on KAA (2023), which defines in more detail the State Council of Quality (SCQ, the Board of KAA) and corresponding regulations. A whole chapter of this Law (Chapter III) is dedicated to Accreditation, establishing in detail the national framework for accreditation activities at institutional and programme level.

Both, MESTI and KAA, have recently played an important role in the consolidation of the HE sector in Kosovo, strongly contributing, together with all the stakeholders, to the development and establishment of a quality culture. Beside MESTI and KAA and the directly involved stakeholders (HEIs, students, employers/industry), a specific role is played by the civil society and especially by NGOs engaged for transparency, accountability and integrity in HE in Kosovo. The Coalition for Integrity and Transparency in the University (KITU) was already involved in 2018 in the communication with EQAR to raise attention to the problem of political interference in the QA in HE in Kosovo The Kosovo Education Center and especially the Organization for Increasing Quality of Education (ORCA) are strongly involved in the activities of KAA (for example, ORCA monitors regularly the activities of the SCQ and prepares yearly monitoring reports on it).

As the country with its 1,7 Mio inhabitants only has limited resources for QA activities and the whole HE sector is young, international experts have played and continue to play a huge role:

- The first round of institutional accreditations was commissioned to and carried out by the British Accreditation Council (BAC) in 2008, before KAA became fully operative.
- A number of international projects largely funded by donors like the US Embassy and the Austrian Development Agency played a huge role in capacity building and standards development with KAA.
- Institutional and programme accreditations still involve exclusively international reviewers in the panels, both student and academic experts; as national capacity has not yet been built up, for various reasons.

KAA

According to the SAR (§3.1), KAA was established by MESTI[3] in 2004 by means of the Administrative Instruction for the Establishment of the Kosovo Accreditation Agency, based on the Law on Higher Education of 2002. Quality assessment and accreditation of public and private institutions were defined as KAA's responsibilities. The same law also already required the establishment of the SCQ. It was not until 2009 that KAA became fully operational and started with accreditation activities at institutional and programme level, with the support of international projects, donors and experts. These helped with the design of the procedures and with staff development.

Starting with 2011, when the new Law on Higher Education was established, the decisions by the SCQ concerning the accreditation of institutions and programmes became effective on their own, without

[3] The former name of this ministry was MEST – Ministry of Education, Science and Technology, only in recent years it was changed to include Innovation. In this report, the current name and abbreviation are used.

need for approval by the Government of the Republic of Kosovo (this was the case based on the Law of 2002).

In 2014, KAA became an ENQA member and was accepted into EQAR in 2015. In 2017, MESTI on behalf of the Prime Minister of Kosovo suddenly dismissed the Director and the whole Board of KAA (SCQ), citing irregularities. Despite attempts from several sides, no further clarification or evidence was provided. This act of political interference on the independence of the agency led to its exclusion from EQAR in 2018 (effective as of 2017) and from ENQA in 2019, following the ENQA external review in the same year.

In 2018, a new Administrative Instruction on the Criteria and Procedures on the Appointment of the Members of the State Council of Quality of KAA was adopted. According to the SAR (§6.3.1), all current members of the SCQ have been elected based on this regulation.

Following these drastic changes, the role and work of KAA and of its Board were progressively developed and their activities standardised, thanks to a network of international donors (e.g. the US Embassy in Kosovo and the Austrian Development Agency), numerous international projects and experts, significantly supporting capacity building, staff development and alignment with international practices.

In 2023 finally a new Law on KAA was adopted, establishing the independent legal status of the agency and its Board as well as the framework for its activities based on the already existing Law on Higher Education. The provisions of this new Law are not yet fully implemented and to the knowledge of the panel there is no official time plan for their full implementation.

KAA'S ORGANISATION/STRUCTURE

According to KAA's website and to the SAR (§3.2 and §6.3.1), the State Council of Quality (SCQ) is the Board of the agency and acts as its policy- and decision-making body, as defined in the Law on KAA (which sets out the composition and selection of the Board members, based on open calls for nomination), and in the SCQ's own Regulation on the Work of the State Council of Quality (SCQ). The SCQ includes nine members (with a President and a Vice-President), three of whom are international, and including KAA's Director. The current composition is published on KAA's website. According to the Law on KAA, a student member with the right to vote is to be included in these nine members, this is not yet the case – the open call for nominations was only published by MESTI during the site visit. Moreover, two industry representatives as non-voting members are to be included as well, the procedure for their nomination has not been started by MESTI yet.

The SCQ is responsible for the approval of KAA's statutes and regulations, its strategic documents, workplans, guidelines and procedures for the different activities; it takes decisions concerning all steps of the procedures for institutional accreditation, programme accreditation, monitoring and evaluation of doctoral programmes, from the approval of the timelines and the lists of international experts to the approval of the corresponding reports.

KAA's staff is led by the Director and consists currently of eighteen employees according to the SAR[4]. This number has been and is continuously growing, from ten employees in 2018 to the planned thirty-two positions according to the SAR and confirmed by the representatives of MESTI during the site visit. The organogram from the website shows the organisational structure of KAA, where the external

[4] KAA's website shows 15 employees (access 14.7.2024) including 2 colleagues who started shortly before the site visit and who were met by the panel. During the site visit, the Director and the Heads of the two Departments explained that 2 further employees have been already selected to start at the beginning of August 2024.

QA activities are carried out by the staff of two Departments (Department of Evaluation and Accreditation and Department of Monitoring and Post-Accreditation Procedures). Each Department consists of two Divisions, and four further Divisions for several support functions directly report to the Director (in brackets the number of employees per unit):

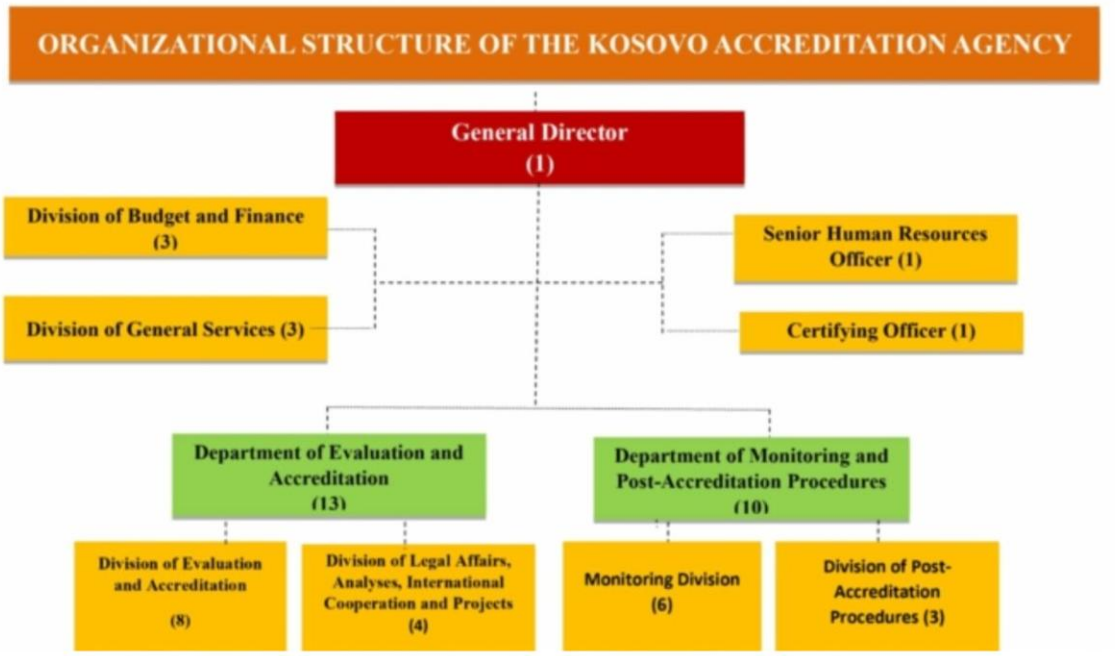


Figure 1 - Organogram of KAA (from KAA's website)

KAA'S FUNCTIONS, ACTIVITIES, PROCEDURES

According to the website and to the SAR (§3.2), KAA is "responsible for internal and external quality assurance, including accreditation, re-accreditation, monitoring, validation and all other quality assurance processes in higher education institutions and their study programs in the Republic of Kosovo".

According to the Law on KAA and as reported in the SAR (§4), the activities carried out by KAA consist of:

- Accreditation and re-accreditation of HEIs: QA procedure at institutional level for public and private HEIs to obtain a first accreditation or re-accreditation, necessary to gain and maintain the ministerial licence to operate in Kosovo (every 3 to 5 years), based on the Accreditation Manual
- Accreditation and re-accreditation of programmes offered by already accredited HEIs, at the level of Bachelor, Master and Doctoral Programmes, necessary to operate a specific study programme (every 3 to 5 years), based on the Accreditation Manual (for Bachelor and Master) and on the Standards for Evaluation of Doctoral Programmes
- Validation of internationally accredited institutions and programmes, as a pre-condition for institutions to operate and offer specific study programmes in Kosovo after undergoing accreditation by an international QA agency.
- Follow-up and monitoring procedures concerning HEIs and their programmes, as defined in KAA Methodology on Monitoring and Post-accreditation Procedures: monitoring consists of

QA activities to be performed every 6 months at programme or institutional level to confirm that the conditions of the last accreditation are maintained; while follow-up procedures serve to ensure the delivery and implementation of measures based on an accreditation procedure (at institutional or programme level)

While the post-accreditation activities correspond to conventional forms of follow-up, the monitoring activities are peculiar to the Kosovo context and consist of detailed control activities on the side of KAA with the aim of verifying if the HEIs comply with what has been accredited at institutional and programme level. The panel would like to draw attention to the fact that monitoring as defined by the Law on KAA (Chapter IV) presents issues about the question of matching this activity with the standards of Part 2 of the ESG due to its nature / traits and to the national legislation. Among other things, monitoring is directly performed by KAA's staff (Article 42), not by external experts.

An overview of KAA's activities at the level of institutional and programme accreditation as well as evaluation of doctoral programmes is provided in the SAR (§4)[5]:

	2021	2022	2023
Institutional accreditation	6	14	10
Programme accreditation	234	97	64
Evaluation of Doctoral Programmes	5	5	2

Table 2 - Overview of accreditation activities 2021-2023

For the monitoring activities (only introduced in this form in 2023), the list provided by the agency during the site visit as requested by the panel shows nineteen activities for 2023 and 5 activities for the first half of 2024.

The international activities of KAA are summarised in the SAR (§3.1) and reported in detail on KAA's website for the interested public. They consist mainly of:

- Participation in activities organised by international bodies such as ENQA and the International Network for Quality Assurance Agencies in Higher Education (INQAAHE)
- Visits to other European QA agencies with the aim of exchanging good practices and of staff development (e.g. AQ Austria and ACQAHE in 2022, AQAS and ASIIN in 2023)
- International projects funded by the Austrian Development Agency:
    - Heras Plus[6] (twinning project with AQ Austria, 2021)
    - QAINT - Quality, Accountability, Integrity, and Transparency in Higher Education (2019-2022), with the participation of the Kosovo Education Center (KEC, Kosovo), the Organization for Increasing Quality of Education (ORCA, Kosovo) and the Centre for Social Innovation (ZSI, Austria)
    - HEI25 (2022-2025), involving KAA, KEC and MESTI, and staff and students' representatives from seven public universities in Kosovo

Several documents directly resulted from the cooperation with international experts in the context of these international projects and from further activities funded by the US Embassy in Kosovo. Examples of such documents (also available on KAA's website) include:

[5] The current IT-system was introduced in 2020 and does not contain reliably comparable data for the years 2019 and 2020.
[6] Also called HERAS+ depending on the source.

- Guidelines for Student Engagement in Internal and External Quality Assurance of Kosovo Higher Education (see SAR §6.1.4)
- Thematic Analysis of Processes Involved in Accreditation/Reaccreditation of Study Programmes
- Report on the State of Higher Education in Kosovo
- Guidelines on conducting thematic analyses by Kosovo Accreditation Agency
- Thematic Analysis Preparation of the Kosovar Graduates for the Labour market – Employer and Alumni Perspective
- Recommendations on revision of standards for Institutional and Programme Accreditation by Kosovo Accreditation Agency
- Review of good practices on the carrying out of thematic analysis by the accreditation agencies in selected European countries

KAA'S FUNDING

The two main sources of funding of the agency are the budget from the Government of Kosovo and the fees paid by the HEIs for the procedures conducted by KAA. The budget from the Government is planned according to the SAR (§6.5.1) over a three-year period and mainly covers the salaries of the employees of KAA (who are civil servants), but also additional costs for infrastructure. The fees paid by the HEIs roughly correspond to the external costs of the procedures with the international experts (apart from the monitoring procedures, which are undertaken only by KAA staff, and from the follow-up procedures, covered by KAA according to the SAR). Additionally, as a third source, donors and international grants support some infrastructure and above all the external personnel costs for international experts and consultants involved in capacity building.

The financial information was provided in the form of Annexes to the SAR and is also available on KAA's website – and was further explained by KAA's Director during the site visit.

Budget	2021	2022	2023	2024
Government	216.813 EUR	255.092 EUR	356.310 EUR	280.604 EUR
Revenues	530.100 EUR	530.100 EUR	530.100 EUR	530.100 EUR
Total	746.913 EUR	785.192 EUR	886.410 EUR	810.704 EUR

Table 3 - KAA's budget 2021-2024

The budget already includes salaries for thirty-two employees for the entire period 2021-2024, while the actual number of employees only increased from 9 in 2021 to11 in 2023. Therefore, the actual expenditures for the period 2021-2023 show that only 32-36% of the Government grant was drawn down:

Expenditures	2021	2022	2023
From Government	78.832,01 EUR	88.251,00 EUR	112.046,04 EUR
From revenues	521.932,41 EUR	457.077,94 EUR	362.094,33 EUR
Total	600.764,42 EUR	545.328,94 EUR	474.140,37 EUR

Table 4 - KAA's expenditures 2021-2023

FINDINGS: COMPLIANCE OF KAA WITH THE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE IN THE EUROPEAN HIGHER EDUCATION AREA (ESG)

ESG PART 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 ACTIVITIES, POLICY, AND PROCESSES FOR QUALITY ASSURANCE

Standard:

Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

2019 review recommendations

- Find as soon as possible HE-wide consensus and consequently decide on a KAA Strategic Plan, including solid activity plans with performance indicators and well defined responsibilities, so as to prepare a sound basis for regular future activities.
- Involve students in the daily activities and the decision making structure of KAA.

Evidence

The mission, strategic goals and values of KAA have been defined based on the Law on Higher Education and communicated through the website and in the Strategic Plan 2021-2025. The mission is defined in terms of supporting "the development of quality in HEIs" and ensuring for "the society of Kosovo that the quality of teaching and learning is at the level of international standards." Based on this mission, the following strategic goals are identified and published on KAA's website:

- promote, improve and enhance the quality of HE
- increase transparency and accountability in the HE system
- improve the quality of studies in HEIs
- encourage innovative content in HE
- ensure the comparability of qualifications from Kosovo HEIs with those provided by international programmes
- implement the objectives for the integration of Kosovo in the EHEA and contribute to its development

The activities of KAA are defined in the Law on KAA and include, according to Chap. II, §6.1:

- Accreditation and re-accreditation of HEIs
- Accreditation and re-accreditation of programmes of HEIs, including programmes offered in foreign languages, joint and double degree programmes
- Validation of internationally accredited institutions and programmes
- Continuous quality control and enhancement in accredited institutions and their programmes
- Monitoring of HEIs and their programmes concerning the implementation of the accreditation criteria

- Withdrawal or revocation of accreditation of a HEI or programme
- Cooperation with MESTI regarding granting, changing, limiting or cancelling of licences (for HEIs)
- Drafting and approval of rules and procedures, criteria, accreditation forms, reaccreditation, validation, external evaluation, quality control, monitoring and selection of international experts
- Involvement and close cooperation with the academic community as well as dialogue with all stakeholders in the process of drafting rules, procedures and standards for accreditation, re-accreditation, validation, external assessment, quality control and monitoring
- Cooperation with MESTI regarding the implementation of policies for QA in HE and the harmonisation of the legal terms of accreditation and licensing
- Undertaking activities in accordance with European and international standards for accreditation, re-accreditation, monitoring, validation in function of QA in HE in Kosovo.

KAA has defined procedures for:

- Accreditation and re-accreditation of HEIs (in the Accreditation Manual)
- Accreditation and re-accreditation of programmes at Bachelor and Master level (in the Accreditation Manual) and at doctoral level (in the Standards for Evaluation of Doctoral Programmes)
- Follow-up of accreditation and re-accreditation of HEIs and their programmes (in the document KAA Methodology on Monitoring and Post-accreditation Procedures)
- Monitoring activities (in the document KAA Methodology on Monitoring and Post-accreditation Procedures)

Reports of accreditations (institutional, programme, doctoral evaluations) as well as reports of monitoring activities are published on the website, providing evidence that KAA carries out the procedures on a regular basis.

The published Strategic Plan 2021-2025, as explained in the SAR (§6.1.1) was first drafted by the agency and then further developed with external experts and HEI representatives; the document was then disseminated for consultation to HEIs, donors, international experts and representatives of the civil society. It introduces six strategic objectives for the work of KAA during this period:

1. To regain the KAA membership in European Network for Quality Assurance - ENQA and registration in EQAR
2. To consolidate the legal framework that guarantees KAA institutional and financial independence in performing external quality assurance processes
3. To advance the KAA management and administration by increasing physical and professional capacities
4. To improve quality in higher education sector with efficient and effective accreditation and follow-up procedures
5. To advance KAA procedure digitalization for an effective external evaluation procedure information and data management
6. To strengthen KAA cooperation with external quality assurance international agencies

For each strategic objective sub-goals are listed in the same document. According to the document itself, KAA prepares on this basis its working plan, including activities, indicators and deadlines, subject to regular evaluation and reporting.

During the site visit, the panel was informed that KAA was in the phase of preparing the annual work plan for 2025 which includes a list of activities (accreditations, re-accreditations, monitoring and follow-up procedures) to be performed. This annual work plan does not link to the Strategic Plan, and

an overall work plan with deadlines and performance indicators for the implementation of the Strategic Plan is not available and not planned yet, based on the meetings during the site visit. The SAR (§6.1.2) mentions that the annual work plan is evaluated at the end of each calendar year, but no evidence of this was presented to the panel. The evaluation reports mentioned and linked there are those concerning the external QA activities of KAA, not the evaluation of KAA's own annual work.

According to the SAR (§3.2) and as required by the Law on KAA, civil society and stakeholders are directly involved in the governance of KAA through the composition of its Board (the State Council of Quality) and through the composition of the commission for the selection of the Board members.

- Composition of the commission for the selection of the members of the State Council of Quality (SCQ): The commission includes one representative from MESTI, one academic representative from the Academy of Science and Arts of Kosovo, one representative from the Rectors' conference, one representative of an international development partner and one from civil society, both active in the education field in Kosovo. The commission has the aim of preparing a short list of candidates based on the applications, whereas the short list should contain at least twice the number of members to be nominated, respecting all criteria.
- Composition of the SCQ: The SCQ consists by law of 9 voting members, including 5 academic members from Kosovo HEIs (whereas a single HEI cannot have more than 3 members and academic members cannot move to another HEI during their mandate), 1 student member (attending Master or Doctoral studies in Kosovo) and 3 international members (experts in the field of QA with academic experience). Non-voting members are KAA's Director and two industry representatives. Overall gender representation has to be ensured. Academic members include at least one person for each of the following groups of study fields: human sciences; social sciences, justice and economy: natural sciences, agriculture and environment; medical sciences; architecture, engineering and technology.

Although the Law has been in force since June 2023, at the time of the site visit the procedure for the nomination and selection of the employer/industry representatives had not yet been started by MESTI. The open call for the nomination and selection of the student member was only started during the site visit itself.

Beside the representation in the SCQ required by the law, stakeholders of KAA are involved in ad-hoc consultations and workshops, for example in the revision of procedures and guidelines of KAA, with a strong emphasis on HEIs and international experts. There is no evidence of a regular, structured involvement of other stakeholder groups (for example in consultative bodies) outside these ad-hoc activities.

Analysis

The standard requires the agency to conduct external QA processes at programme and/or institutional level on a regular basis. Agencies must also ensure the involvement of stakeholders in their governance and work.

Moreover, the recommendations from the 2019 review required the agency (a) to find HE-wide consensus and provide a Strategic Plan including an activity plan with indicators and responsibilities, and (b) to involve students in the daily activities and decision-making structures of KAA.

The panel considers that the first part of the standard is well implemented: KAA conducts on a regular basis external QA activities at institutional and programme level as defined by the ESG Part 2. For these activities, goals and objectives are defined and published and are consistent with KAA's mission.

The standard also requires that the agency's goals be translated into actions. While the agency has produced a five-yearly strategic plan, it is not clear that this is translated into a series of actions to be

performed annually, as the working plans only focus on the list of procedures to be conducted in the upcoming year. The production of an implementation plan, including indicators and responsibilities as recommended in the 2019 review, would assist in the planning of the agency's work and in particular, would drive a workforce plan to ensure that appropriate human and financial resources are found to deliver on the priorities of the Strategic Plan. The panel believes that the publication and dissemination of the implementation plan would be a particularly useful way of indicating the agency's progress in delivering on its goals to its wide stakeholder base.

The last part of the standard requires agencies to ensure the involvement of stakeholders in their governance and work. The panel understands that the legal provisions of the SCQ as defined in the Law on KAA in 2023 ensure students' and employer/industry representation in the governance of the agency, but it was disappointing to note that the process for the nomination of a student representative only commenced during the panel's visit and that the process for the nomination of employer/industry representatives in the SCQ had yet to commence at the time of the panel visit.

The panel believes it would be beneficial for the agency to widen the base of stakeholders that are regularly and structurally engaged in the totality of their work, not only on an ad-hoc basis for specific consultations and workshops. Regular engagement with a wide student base and the expansion of engagement with the wider world of work would greatly enhance the work of the agency. The agency could for example establish consultative structures that it could meet on a frequent and structured basis to inform its work and disseminate its outcomes. Overall, the panel believes that the agency needs to develop more expertise in how it engages and communicates with the wider Kosovar community.

Panel recommendations

The agency is strongly recommended to implement as soon as possible the representation of a student (voting) member and of two industry (non-voting) members in the SCQ, as defined by the Law on KAA (2023). These three members should be nominated and directly involved in the meetings and the activities of the SCQ at soon as possible.

The panel strongly recommends translating KAA's Strategic Plan in a (multi-year) implementation plan, setting out measures / activities and the corresponding time plan, which are necessary to ensure that the goals are reached in all areas.

Panel suggestions for further improvement

The stakeholder basis for the further development of QA in Kosovo should be enlarged. A stronger and wider, regular and structured, involvement of students and student representatives, of employer / industry representatives, of civil society in the work of KAA would be beneficial – beside ad hoc working groups or consultations. This could be realised through consultative bodies, either through an adaptation of the Law, or on a voluntary basis on the part of KAA and SCQ. Industry / professional representatives could also be included in accreditation panels.

Panel conclusion: Partially compliant

ESG 3.2 OFFICIAL STATUS

Standard:
Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

Evidence

According to the SAR (§3.1), KAA was established by MESTI[7] in 2004 by means of the Administrative Instruction for the Establishment of the Kosovo Accreditation Agency, based on the Law on Higher Education of 2002. The same law was updated in 2011 (this version is the current one at the time of the present review) and defines KAA in its §7: "Kosovo Accreditation Agency KAA is an independent agency responsible for assessing and promoting quality of higher education in Kosovo." The same article establishes the responsibilities of KAA:

- advising with the Ministry on applications from institutions for licences to offer courses or programs forming part of or otherwise leading to higher education qualifications
- inspecting providers of higher education and advising with the Ministry related to granting, modification or revocation of licences
- performing periodic audits over the quality of licensed providers of higher education and taking decision on accreditation or their re-accreditation including the right to award titles and diplomas
- undertaking periodic quality assessment of programs offered by accredited providers of higher education
- advising the Ministry, on the results of quality assessment and its implications for financing public providers of higher education, regarding the allocation of funds for private providers of higher education and with the support of free discretion to students who attend study programs to private providers of higher education
- carrying out, on behalf of the Ministry, such functions as may be delegated to it relating to the recognition of academic and professional qualifications and, in particular, acting as the competent authority for the regulation of higher education qualifications in accordance with of the Law on state qualifications
- undertaking other activities that conform to European standards and coherent for higher education that are aimed at ensuring and improving the quality and standards in higher education in Kosovo

During the interviews, the panel heard that a thorough political discussion followed the exclusion of KAA from EQAR in 2018 and the termination of the ENQA membership in 2019 due to the political interference in 2017. The discussion helped create a broad consensus about the role and the importance of KAA and of its independence for the HE sector and for the economy and society of Kosovo. This resulted in June 2023 in the new Law on KAA, which further specifies the role and work of KAA in the broader framework of the Law on Higher Education. A first definition is provided in Article 3 of KAA as "a regulatory agency for quality assurance in higher education in the Republic of Kosovo, which is responsible for the evaluation, accreditation, re-accreditation, validation, quality control and monitoring of higher education institutions and their study programmes". Article 5 defines

[7] It seems to be the case that the former name of this ministry was MEST – Ministry of Education, Science and Technology, and only in recent years it was changed to include Innovation. Throughout this report, the current name and abbreviation are used.

the status of the agency: "Kosovo Accreditation Agency (KAA) is a regulatory agency for ensuring the quality of higher education which operates in the entire territory of the Republic of Kosovo."

This same law further declares the principles on which the work of KAA is based (Article 4), its duties and responsibilities (Article 6), the SCQ and its conditions as a decision-making body of KAA (Article 9) with corresponding duties and responsibilities (Article 11) as well as the rules for the SCQ members (Articles 12 to 16). Moreover, Article 17 defines the procedure for dismissal of SCQ members.

Analysis

The standard requires that the agency has an established legal basis and is recognised by the competent public authorities.

Based on the evidence presented, it is clear to the panel that the agency has been established in law and that the agency is recognised for its work by the government, the competent ministry and institutions. Indeed, the panel found that all stakeholders were extremely supportive of the work and outputs of the agency and believe strongly that it contributes significantly to the improvement of the quality and standing of higher education in Kosovo. Many stakeholders commented during the site visit on the marked improvement over the past number of years.

Panel conclusion: Compliant

ESG 3.3 INDEPENDENCE

Standard:
Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

2019 review recommendation

In conducting evaluations according to the new procedures as described in the Accreditation Manual 2018 make sure that operational independence and independence of formal outcomes is guaranteed.

Evidence

<u>Organisational independence</u>

The SAR and the meetings during the site visit confirm that after the sudden dismissal of KAA's Director and members of the SCQ by MESTI in 2017, a lot of effort has been put in creating a national consensus around the role, the duties and the work of the agency, as well as in ensuring full independence of its work and of the decisions of its Board. This was explicitly mentioned by several stakeholder groups (ministry, public and private HEIs, employer / industry representatives, NGOs and civil society, international experts, donors). The Law on KAA itself is a very tangible result: Articles 12 to 16 define criteria and modalities for the selection of SCQ members; Article 17 defines under which conditions dismissal of members of SCQ can take place. The composition of the SCQ and the composition of the commission for the selection of the nomination of the SCQ members have already been explained in the evidence about ESG 3.1.

The nomination procedure itself is defined in the Law on KAA in the Articles 14 and 16:

- A public call for the local members is published by the Ministry.
- For the international members, the Ministry asks international development partners and QA agencies that are full members of ENQA/EQAR and the US Department of Education to nominate experts from their respective countries.
- For all voting members, the criteria for selection are provided by Article 12 of the Law, while Article 13 lists incompatibility criteria. The commission prepares a short list based on the applications (Article 15). From this short list, the Minister selects the required members.
- The non-voting industry representatives are directly nominated by the Minister.
- The Minister forwards the list to the Government for approval and the Assembly of the Republic of Kosovo appoints the members of the SCQ.

All members are nominated for 4 years with the exception of the student member, nominated for 2 years, and members can be re-elected for a second mandate. The SCQ members directly choose the President and Vice-President by a majority vote among the representatives from the national academic community.

Article 17 of the Law on KAA defines under which conditions dismissal of one or more SCQ members is possible. Seven criteria are listed as possible reasons for dismissal, whereas the dismissal procedure can be started either by MESTI or by the General Assembly. In this case, the Minister appoints a temporary commission based on the same composition rules as for the commission selecting the nominations of the Board members. The commission prepares and submits to the Minister a report containing recommendations of appropriate measures related to the dismissal initiative, and the Minister makes a decision based on the proposal of the Commission. A dismissal decision is subject to the approval first of the Government and second of the Assembly.

Operational independence

The operational independence of KAA is established by the Law on KAA mainly through Article 20, which lists the activities under the responsibility of the Director of KAA as its chief administrative officer. These cover:

- The whole organisation of the work of KAA and its work coordination with MESTI, as well as the cooperation with MESTI about the licensing and inspection processes of HEIs
- The coordination of the activities with the SCQ and the Appeals Commission and the implementation of their decisions
- The drafting of the Strategic Plan and the work plan, to be approved by the SCQ, and the management of the budget of KAA and its expenditures as well as the recruitment and evaluation of the work of KAA's staff
- The organisation of all activities of external QA for HEIs and their programmes, and the compilation of the list of external evaluators, submitted to the SCQ for annual approval
- The submission of external evaluation reports to the SCQ for approval and the compilation of reports of monitoring procedures, subjected to the review of the SCQ
- The drafting of the annual performance report to MESTI and to the Government, as well as the coordination of thematic analyses and information to MESTI and other authorities on the state of QA in HE in Kosovo
- The representation of the agency in Kosovo and abroad, concerning relevant international organisations and agencies and local and international institutions, as well as KAA's participation in international cooperations

The same law in Article 28 about accreditation procedures, criteria and standards states clearly that KAA drafts and reviews "accreditation standards, procedures and regulations" and that those "are

determined by internal acts issued and approved by the SCQ". Moreover, the law already establishes a broad framework for the standards and procedures, guaranteeing KAA clear conditions for its independent work.

Independence of formal outcomes

The panel considers strong evidence of independence of formal outcomes to be provided by the relatively high number of negative decisions by the SCQ, which became necessary during the last years, in a phase of strong consolidation of the HE sector in Kosovo after the initial proliferation especially of private HEIs. This clearly shows the independent work of the agency. According to the SAR (Chap. 4):

	2021		2022		2023	
	public	private	public	private	public	private
Institutional accreditations						
Positive decision	0	3	1	11	4	3
Negative decision	0	3	0	2	1	2
Withdrawn	0	0	0	3	0	2
Programme accreditation						
Positive decision	124	74	57	56	32	24
Negative decision	12	15	4	2	2	6
Withdrawn	0	9	0	7	0	4
Evaluation of Doctoral Programmes						
Positive decision	1	0	2	0	2	0
Negative decision	4	0	3	0	0	0
Withdrawn	0	0	0	0	0	0

Table 5 - Overview of SCQ decisions 2021-2023

These negative decisions, according to the meetings during the site visit, were thoroughly respected by all stakeholders; even in cases where appeals and complaints were filed, the HEIs accepted the final decisions and even reported being satisfied with the overall procedure and its transparency and fairness. Moreover, stakeholders actively commented on the positive role played by KAA more recently in enhancing the overall quality of HE in Kosovo.

Analysis

The standard requires that agencies be independent and autonomous and have full responsibility for the operation of and the outcomes of their processes.

The 2019 external review recommendation also stressed the importance of ensuring operational independence and independence of the outcome of evaluations according to the Accreditation Manual.

The agency together with some of its main stakeholders (MESTI, HEIs, civil society and international donors) have made significant progress during the last years in terms of establishing and ensuring independence. The new Law on KAA of 2023 is the main result, granting formal independence to the agency and its Board, the SCQ. While the form of evaluations it must organise and the composition of the external evaluation panel it deploys are set in law, the panel found that the agency is supported by MESTI and the HEIs to act independently in its work. Indeed, all actors that the panel met concurred with the notion of the agency's independence. A long process of developing and establishing consensus in the HE sector and, in the society, makes sure that there is a broad basis supporting the Law and its implementation, so that the panel considers that formal independence is fully provided.

The same Law and KAA's internal rules especially as defined in the Accreditation Manual, as well as the development of the work of the agency and of its Board, strongly support the operational independence of KAA, of its staff and of its Director. The exchange with the stakeholders in the meetings during the site visit confirmed that the work of the agency is particularly appreciated as supporting the development of a quality culture in the whole HE sector in Kosovo. From the point of view of the panel, operational independence is thus ensured by the framework conditions, by the procedures and regulations, and in the day-by-day cooperation with the stakeholders of the agency.

Despite the number of negative decisions made during the last years by the SCQ based on the results of external evaluation processes as defined and conducted by the agency, the HEIs that the panel met indicated satisfaction with the outcomes of the evaluations and frequently referred to the concept of transparency and fairness, as part of the work of the agency. No stakeholder expressed concern with interference in the current work of the agency, either by political or institutional actors. Therefore, the panel feels confident that the independence of outcomes as required by the standard and stressed by the 2019 recommendation is fulfilled.

Panel conclusion: Compliant

ESG 3.4 THEMATIC ANALYSIS

Standard:
Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

2019 review recommendation

Use data collected during accreditation processes and other activities to carry out thematic and system-wide analysis in order to support further development of the HE system in Kosovo.

Evidence

Based on the 2019 ERR recommendation, in 2021 a project funded by the US Embassy in Kosovo led to the support of a group of international experts to the preparation of two documents:

- Review of good practices on the carrying out of thematic analysis by the accreditation agencies in selected European countries, and
- Guidelines on conducting thematic analyses by Kosovo Accreditation Agency (linked to the SAR)

The second document sets the framework for future thematic analyses by KAA, in terms of definition, concept, methodology, tools, outcomes and dissemination of the results.

Following this approach, in the years 2021-2024 according to KAA's website, the following thematic analyses were developed and published:

- Thematic Analysis Preparation of the Kosovar Graduates for the Labor market – Employer and Alumni Perspective (supported by the US Embassy in Kosovo, by the same group of international experts): this document reflects on the perception of the employability of graduates from the point of view of employers and on the preparation of graduates with digital skills for the 21st century from the point of view of alumni, based on surveying these

stakeholders. The purpose is to provide evidence for policy makers and for stakeholders involved in the framework of cooperations between HEIs and industry

- Thematic Analysis for Institutional Accreditation of Kosovar Higher Education Institutions (2021, supported by the US Embassy in Kosovo, by the same group of international experts): this document is based on external review reports of institutional accreditation procedures from 2019/20 and 2020/21, and reflects on the standards related to public mission and institutional objectives; quality management; research; staff, employment processes and professional development; institutional cooperation. The analysis is intended to support HE-policy decision making.
- Thematic Analysis of Processes Involved in Accreditation/Reaccreditation of Study Programs (2024, supported by the US Embassy in Kosovo, carried out by an international expert): this document provides a review of self-assessment and external review reports of 6 HEIs (public and private) for programme (re-)accreditation, over a period of three years at Bachelor and Master level. It identifies overarching and diverging issues, areas of improvement and challenges, and trends, with the aim of contributing to the improvement of quality in the HE sector.
- Research Report about Increasing Student Participation in Internal and External Quality Assurance Processes in Kosovo (supported by the US Embassy in Kosovo, by a group of international experts): the document provides a theoretical and practical background for corresponding guidelines, based on an international benchmarking analysis of best practices from other European countries, on the analysis of external review reports from KAA's accreditation procedures, and on a national survey on students from HEIs in Kosovo (public and private).

To the knowledge of the panel, there is no information at the moment about specific plans (topic and release date) for future thematic analysis.

According to the information provided in the SAR (§6.4), KAA disseminates the results of these activities in meetings with the participation of national stakeholders and international experts. The documents are published on the website and there are examples of news in the corresponding section of the website, but the panel has no evidence of the stakeholders being aware of these activities.

Analysis

The standard requires that agencies regularly publish reports that analyse the general findings of their external quality assurance activities.

KAA published guidelines for its thematic-analysis activities as well as some examples of such documents during the last years, thus following the recommendation from the 2019 external review. Nevertheless, based on the SWOT-analysis in the SAR, KAA itself considers the current situation to deserve improvement (see SAR Chap. 10), as the policy is not consistently implemented yet and KAA still needs to increase its staff capacities (with corresponding skills) and its data collection tools to carry out thematic analysis on a more regular basis and with a desirable frequency in the future.

Based on the evidence presented, the panel feels that the agency is currently overly dependent on contributions from donors to support such activities and on the expertise and capacity of international experts to carry out the analyses. The panel considers that the agency needs to develop more expertise in analysis of the outcomes of its processes and in systematic data collection. While the commitment from the donors was very evident in the meetings that the panel had with some of them, the panel members still feel that it is important that the agency builds its own capacity to develop its analytic expertise. It is therefore important that the skills required for both qualitative and data analytic capacity be developed by the agency itself. This further emphasises the need for a workforce plan that

clearly identifies the activities that need to be undertaken over the next number of years and the skill set that will be required of its employees, both current and new. It was clear from discussions with the agency leadership that they share this view, but the panel realistically would have expected this to have come through more clearly in the self-evaluation process.

Panel recommendations

The panel recommends that thematic analyses are developed more regularly, that they build upon the standardisation of the agency's activities and procedures and the data collected from its external QA procedures through the agency's developing IT-platforms and that such analyses be created with the participation of KAA's staff to ensure knowledge transfer and capacity building, and that the topics address the needs of the Kosovo HE sector as identified by KAA itself.

Panel conclusion: Compliant

ESG 3.5 RESOURCES

Standard:
Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

2019 review recommendation

Take all necessary actions in order to assure adequate human and financial resources needed for conducting the activities expected from KAA.

Evidence

Financial resources

According to the SAR (§6.5.1), KAA's own resources, especially in terms of human resources / salaries and infrastructure are partly covered by budget from the Government. This is planned over a three-year period (based on Kosovo Medium-Term Expenditure Framework, the governmental three-year policy and budget planning document) and published on KAA's website, as summarised in Table 3 - KAA's budget 2021-2024 (see section on KAA's funding). The currently available version of the budget contains data for the years 2021 to 2024, which show a growth of the total budget (made up of Government grant and own revenues from fees and procedure costs covered by the HEIs).

During the site visit, MESTI representatives emphasised that the ministry is willing to fulfil KAA's financial needs, as the funding provided over recent years testifies to, and KAA's Director confirmed that the requests from the agency in terms of budget have been approved by MESTI.

Most of KAA's budget is covered by own-source revenues, consisting of fees from the HEIs undergoing accreditation and of funding from donors. The costs from the HEIs cover accreditation procedures, international experts and the related costs. Costs for monitoring and follow-up procedures, where until now international experts are not actually involved, are covered by KAA.

Own-source revenues have been sinking significantly through the last three years based on the overview data provided, as the HE sector underwent consolidation and the number of HEIs was reduced, but still make up more than 65% of KAA's budget. The panel could not find any information

on the specific amount of the own-source revenues derived by international grants and activities with the donors. Allocated and approved for appropriation but unspent budget resources from own-source revenues are carried over to the budget of the following year. Own-source revenues exceeding the amount agreed upon for appropriation get deposited in the national budget fund.

The total revenues (from Government and from own-source revenues) were and are more than sufficient to cover KAA's expenditures so far.

Human resources

KAA's staff consists currently of eighteen employees according to the SAR, including two new employees who started shortly before the site visit and whom the panel met with. During the site visit, the Director and the Heads of the two Departments explained that two further employees have already been selected and will commence work at the beginning of August 2024. The number of KAA's employees has been continuously growing, from 10 employees in 2018 according to the SAR (§3.2) respectively 9 employees in 2021 according to the table of expenditures 2021-2023 published on the website, to 10 employees in 2022 and 11 in 2023 (according to the same table), then to the current 18 employees at the time of the site visit. Of these eighteen employees, beside KAA's Director, nine are involved in evaluations and follow-ups (these are the areas where the largest increase in resources took place over the last years), three work in the finance area, two in legal issues and two in internal administration, and one person is responsible for the IT infrastructure.

The planned complement of thirty-two positions according to the SAR was confirmed during the site visit by the representatives of MESTI and has already been included in the budget allocation (mostly covered through the Government grant) starting with the year 2021. As the agency has not yet been fully staffed, the actual expenditures so far do not require the full drawdown of the budget, as shown in Table 4 - KAA's expenditures 2021-2023 (see section on KAA's funding). All KAA employees are classed as civil servants. The SAR mentions that the objective of thirty-two employees is to be reached by September 2024 but the evidence provided does not confirm this time plan to be realistic.

In 2024, in the context of the QAINT international project supported by the Austrian Development Agency, the Regulation on Internal Organization and Systematization of Jobs in the Kosovo Accreditation Agency has been approved and published, which contains a definition of the main tasks of each of the units of KAA and fixes the final number of staff for each unit (when KAA will reach its stated complement of 32 employees).

Concerning staff development, the following activities are reported in the SAR:

- Attendance at ENQA leadership development programme by two of KAA employees
- Attendance at a training event about alignment with the ESG Part 3, provided in the framework of the Technical Assistance and Information Exchange instrument of the European Commission
- Participation in a twinning project with AQ Austria providing training by senior staff and Board members about the improvement of evaluation procedures
- Staff exchange with ASIIN, consisting of one employee of KAA spending one month at ASIIN to get familiar with the processes of other agencies
- Participation of KAA's staff as peer reviewers in USA study programme evaluation procedures through ATMAE

For the onboarding process of new staff, the panel got an opportunity to meet with employees who had only recently joined the agency and they expressed themselves satisfied with the documentation that they have access to and the opportunity already to have participated as observers in evaluation processes.

A Manual on Staff Internal Evaluation has been developed in 2021 but not implemented yet.

Infrastructure

A growth in terms of the area reserved for KAA's offices at its premises in a building near the campus of the University of Prishtina in a central part of the city was reported in the SAR (§6.5.3) and was confirmed by the panel during the site visit. The panel members had the possibility to visit newly refurbished offices (in another floor of the same building where KAA is located), which offer modern workplaces appropriate to the planned growth in human resources at the agency. As a next step, the first floor, where the "old" offices are located, will be renovated as well. The IT-infrastructure for all the planned staff (32 people) is already available according to the SAR.

Improvement in the available IT-Infrastructure has taken place progressively with the support of international donors (especially the US Embassy and the Austrian Development Fund), whereas a possible roadmap has been sketched out in the Digitalization Feasibility Study (2021). KAA makes use of a central IT platform for the administration of all its activities, users being not only KAA's staff and staff of QA units in HEIs, but also all other players involved in the accreditation and in the monitoring procedures, including academic staff of HEIs and international experts working as reviewers. The availability and use of this platform was confirmed by members of the HEIs during the site visit.

Analysis

The standard requires that agencies have adequate and appropriate human and financial resources to carry out their work and the recommendation from the 2019 external review asked KAA to take appropriate action to this aim. The SAR indicates that the agency wishes to significantly expand its human resources and MESTI indicated that they are supportive of the request that the agency has placed with it for more resources, so that they already approved the requested budget growth starting with 2021. From this point of view, KAA acted on reaching appropriate human and financial resources.

For the last three years KAA has had by far more budget allocated than it could reasonably spend, resulting in budget carry-over to the following year from the own-source revenues (as approved by MESTI in the agreed budget appropriations) and in deposit of excess funds in the national budget fund of Kosovo. Part of this surplus has already been dropping during the last three years due to consolidation in the HE sector in Kosovo (resulting in less accreditation procedures and thus less fees by the HEIs) and part is expected to be used in the near future for the planned significant increase in staffing and infrastructure. Also, the engagement of international donors can be expected to slowly decline over the next years as the whole HE sector in Kosovo gets more mature and independent, so that the long-term sustainability of the system cannot be assessed yet.

The expected staff increase is significant in a short period of time and could not be realised yet.

One week prior to the review visit, the staff complement was sixteen, exactly half of the number of staff that the agency and MESTI has agreed are necessary to undertake the functions of the agency. While the addition of two more staff more recently is welcome, there was still a significant, recognised deficit in staffing at the time of the review visit. Moreover, it is important that the staffing structures are appropriate to deliver on the future needs of the agency. It is disappointing that the SAR does not clearly outline the agency's intentions on the skills profile of staff required for the future and an implementation plan for the Strategic Plan does not exist, explaining how the growth in human resources is going to be realised. The agency clearly understands that it needs to enhance its own expertise and to reduce the dependence on donor funds and on the skills of external experts for its development. While the panel met with staff who have just joined the agency in recent weeks, the ambition of the expansion in human resources must be matched by a clear plan on how such staff are to be deployed in the work of the agency. As the QA system in Kosovo HE moves from QA (and

control in some cases) to quality enhancement, it will be important that the agency matches the changed nature of its future work with the skillsets of its workforce. It is hoped that the monitoring / inspection of such activities as the deployment of academic resources by the HEIs and their adherence to programme timetables can be replaced by a more trust-based system of follow-up to the recommendations of evaluation outcomes and ultimately to the enhancement of the academic programmes on offer.

Until recently, the agency had a relatively small complement of staff. This can have the effect of relying on the governance body, the SCQ, to perform a significant amount of work. The SCQ following the Law on KAA approves the experts list and membership of the evaluation panels, is involved in the screening of accreditation applications to see whether the evaluation can proceed, approves the outcomes of all evaluation processes, noting that there are a significant number of negative decisions. The Council also has to reconsider any appeals that are referred back to it. The Council also includes three international members whose time is necessarily limited. Moreover, as the agency has indicated that it wishes to expand its staff complement and presumably to expand the number of its evaluations (especially for a thorough implementation of the defined monitoring and follow-up procedures), the panel believes that this will place even more work on the Council over time.

The Council is the sole governance entity of KAA and therefore has to oversee the agency's performance in all areas including its strategic performance and operation. In many other agencies, governance is further devolved to other bodies established, for instance, to monitor the evaluation processes that the agency conducts, and this can free up the governing board to perform its essential role of strategic oversight of the agency and the executive.

While the panel understands that the SCQ is the only governance entity established in law, the panel members would like to establish whether it is possible for the agency to create sub-council structures that could assist in its deliberations. It may be useful to evaluate the effectiveness of the current governance system and to determine whether it could be expanded to alleviate the current burden on the council. External expertise could usefully assist in this audit process.

Panel recommendations

The panel recommends matching the planned expansion in human resources by a clear and specific plan on how such staff are to be deployed in the future, where more enhancement-oriented work of the agency could take place and consequently which skills are needed for such activities.

The panel strongly recommends establishing whether it is possible for the agency to create sub-council structures to assist the SCQ in its deliberations. The effectiveness of the current governance system is to be evaluated, and it is to be determined whether the SCQ can be expanded. External expertise should assist in this audit process.

Panel conclusion: Partially compliant

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

Standard:
Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

2019 review recommendation

In order to collect feedback KAA should increase and describe in documents the implementation of formal rather than informal mechanisms to create solid routines of internal quality assurance based on principles like closed-loop practices and the four-eyes system.

Evidence

In 2024, KAA updated its own internal QA, defined in the Internal Quality Assurance Policy document and published on the website (section on Legal Provisions and Responsibilities). The policy describes the planned implementation of a PDCA approach to internal QA. However, before and during the site visit, no evidence of a specific cycle/example was available to indicate that a beginning / pilot implementation phase of this policy had commenced.

The described yearly work plan (§3 of the Policy) is not implemented in the required form yet and there is no evidence as to when and how it will be developed by the agency. The defined annual work Plan (§4) is a list of the accreditation and monitoring procedures to be carried out by KAA during the following year, not a comprehensive list of internal and external activities (including indicators and responsibilities), to be implemented in order to gradually reach the objectives of the Strategic Plan. The external QA activities list for 2025 was being drafted during the site visit.

The SCQ meets monthly to keep up with the high amount of work, but there is no calendar of the planned meetings over a longer period, which could be used for the yearly schedule and for a better distribution of workload. The defined yearly evaluation report about the performance of KAA with respect to the established work plan (not existing yet) is not yet implemented.

Concerning the procedures (accreditation, follow-up, monitoring, evaluation) carried out by KAA, all stakeholders confirmed during the site visit in the respective sessions that they have been involved by KAA in workshops or consultations (e.g. with an email invitation to express their opinion) for feedback and further development of the procedures, and that they witnessed changes and improvement of the procedures based on their feedback. Beside open consultations and stakeholder workshops, formal and extensively used questionnaires for the target group of the institutions and stakeholders directly involved in every process instance (international reviewers, academic staff, students, student experts, employers/industry) are only available in a rudimentary form. While the agency indicates that it has surveys in place for evaluators and for HEIs, and that it plans to deploy them automatically based on a new IT platform which is being implemented, the discussions and the available evidence show a more differentiated picture:

- Questionnaires for the target group of the HEIs are in place and an example of a completed questionnaire was provided. Nevertheless, the sample and the interviews with HEIs during the site visit demonstrated that not all HEIs get promptly asked for specific and timely feedback after the end of each procedure and that there is not a systematic process in place to seek their feedback on the processes.

- Some questionnaires are in use, but feedback is only collected yearly (the panel got evidence for 2022), not after every procedure. For international reviewers and student reviewers, a completed example has been provided, however the questionnaires were not related to a specific instance of a procedure. Review panel members involved in accreditation procedures with KAA indicated that they are only surveyed on an annual basis but that feedback is not sought from them after each accreditation process has concluded.
- Some questionnaires exist in draft form but have not been deployed yet (e.g. for students and employers/industry), as they have not yet been approved by the SCQ.

The standardisation of the implementation of the defined procedures has only improved recently, with reviews of procedures and documentation based on the feedback from the international experts and from the HEIs, as confirmed by the participants during the site visit, and with the provision of templates for the reports (for the HEIs and for the experts). The following documents describe the activities, whereas the year refers to the last adaptation of the document:

- Manual for External Evaluation of Higher Education Institutions (2021)
- Accreditation Manual (2024, for institutional and programme accreditation of Bachelor and Master programmes, whereas the main steps are also valid for Doctoral Programmes)
- Standards for Evaluation of Doctoral Programmes (2020)
- KAA Methodology on Monitoring and Post-accreditation Procedures (2022)

Templates for the HEIs have been developed and are available for:

1. Application for Accreditation (2021)
2. List of Publications (2024, to be provided for accreditation procedures)
3. Self-Evaluation Report for Institutional Accreditation (2021)
4. Self-Evaluation Report for Programme Accreditation (2021)

As part of a cooperation agreement with the Coalition for Integrity and Transparency in the University (KITU), according to the SAR (§6.5.6) and as confirmed by the ORCA representative during the site visit, ORCA monitors the work of the SCQ and produces annual reports, the last one is available for 2022 and linked to the SAR.

Analysis

The standard requires that agencies have in place processes for internal QA related to defining, assuring and enhancing the quality and integrity of their activities.

From the conducted interviews, the panel concludes that the agency acts in a professional manner in all its activities and that there has been effort towards standardisation and improvement of the definition, application and documentation of the procedures for external QA activities of KAA over the last years, based on input and feedback provided by the stakeholders participating in those procedures as well as by international experts.

Nevertheless, there is always a danger, that in a relatively small agency, there is a comfort to the level of informality that can permeate the interactions between staff. With the significant planned expansion of staff resources, it will be important to develop more systematic approaches to the internal quality assurance of the agency. The evidence shows that feedback is not sought in a regular and systematic manner from all involved stakeholders (HEIs, panel members, students) through well-structured and comprehensive surveys right after every procedure and procedure specific. For some of the stakeholders, surveys have not been approved and implemented yet. For others, surveys are performed only on a yearly basis, with no connection to a specific procedure (in the case where the institution or individual stakeholder were involved in more than one single procedure during the last year). There is also no evidence of the results of these surveys being collected and analysed in a

structured way, leading to pertinent, adequate and documented adaptations in the procedures or in their implementation, and disseminated to the sector to close the quality loop. This is state of the art and is necessary to ensure thorough standardised implementation of all required steps and a consistent improvement of the quality of the procedures.

The panel feels that further work needs to be done to systematise and improve the feedback mechanisms on the outcomes of its evaluations. Despite the 2019 external review recommendation having been addressed and a policy on internal quality assurance having been defined and published, no evidence could be provided of first implementation steps happening or of an implementation plan being drafted or discussed. There is no example of the described PDCA approach, no draft and no time plan for a comprehensive annual work plan with internal and external activities, indicators and responsibilities, which could be yearly evaluated and reported, so that in this sense, some of the essential components of the defined internal QA policy seem not to be in place or at least planned for implementation yet.

The involvement of monitors from education transparency bodies (ORCA and KEC) in the work of the agency to demonstrate the independence of their activities is to be commended. The panel met with several such actors during the site visit, and they clearly expressed their confidence in the trajectory of the agency over the past number of years.

Panel commendations

The involvement of education transparency bodies from the civil society of Kosovo as active stakeholders in the work of the agency is to be commended, as it shows the strong commitment to independence and transparency.

Panel recommendations

The panel strongly recommends developing more systematic approaches to the internal QA of the agency and to implement them in a structured and systematic way.

The panel recommends regular, standardised, timely surveys to be directed to all involved stakeholders after the conclusion of every procedure conducted by KAA, and the results to be analysed and used for the further development of KAA's activities.

Panel conclusion: Partially compliant

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Standard:
Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

Evidence

According to the Law on KAA (Article 4), "KAA ensures that its standards and procedures for the quality of higher education in Kosovo in all its processes, are in line with European standards and guidelines for quality assurance in higher education" (a very similar sentence is also contained in Article 7 of the Law on Higher Education).

KAA has already undergone two ENQA reviews, one in 2014 (which resulted in subsequent listing on EQAR) and one in 2019. At the time of the second review, KAA had already been excluded from

EQAR because of the instance of political interference. Based on the 2019 ERR, KAA was excluded from ENQA membership.

In 2022, KAA submitted its follow-up report to ENQA and became an affiliate. The current review (2024) is therefore the agency's third and follows the required interval of five years.

Chapter 8 from the SAR lists specific progress on each recommendation from the 2019 ERR.

Analysis

The standard requires that an agency undergoes an external review at least once every five years to demonstrate their compliance with the ESG.

The agency was last reviewed in 2019, delivered a follow-up report in 2022, and the current 2024 review fulfils the requirement in the standard.

The recommendations from the 2019 ERR have been without doubt a central element of KAA's developments during the last cycle, as the many documents produced, approved and published in recent years and the number of activities carried out with the support and expertise of international colleagues show. There is evidence of sustained effort and of a strategic orientation, at national level and involving not only the agency itself but the whole HE sector with its stakeholders, towards the ESG and the EHEA.

Nevertheless, as also Chapters 9 (SWOT analysis) and 10 (Key challenges and areas for future development) of the SAR points out, further progress still has to be made, especially in terms of a more thorough and overall consistent implementation of all existing approaches and activities and of a long-term planning of substantial improvement steps.

Panel conclusion: Compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

Standard:
External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.

2019 review recommendation

Take care that in institutional and programme self-evaluations, in site visits and in review reports the ESG 2015 Standards Part I are addressed clearly.

Evidence

KAA implements the following procedures for HEIs in Kosovo, as established by the Law on KAA:

- Institutional accreditation, based on the standards defined in the Accreditation Manual (2024); follow-up procedures are an integral part of the accreditation cycle and are based on the same standards (the process itself is described in KAA Methodology on Monitoring and Post-accreditation Procedures, Part 2). For institutional accreditation, forty-three standards in eleven

areas must be fulfilled, each defined with a list of indicators to be considered. The connection between KAA standards and the ESG is provided in this document at area level (e.g. the area Student Administration and Support Services is defined to cover ESG 1.4, ESG 1.6). The areas of standards for accreditation procedures are defined in the Law on KAA (Article 29).

- Programme accreditation at Bachelor and Master level, based on the same Accreditation Manual (2024) as institutional accreditation; follow-up procedures are also in this case an integral part of the accreditation cycle and are based on the same standards, the process being described in KAA Methodology on Monitoring and Post-Accreditation Procedures. For programme accreditation at Bachelor and Master level 33 standards in seven areas are considered. As for institutional accreditation, the connection between KAA standards and the ESG is provided at area level, while the areas themselves are defined in the Law on KAA (Article 29).
- Evaluation of doctoral programmes, based on the document Standards for Evaluation of Doctoral Programmes: "The Standards cover seven major components. Each component is divided into two types of standards: Core and Supplementary. While core standards must be met in the process of evaluation, supplementary standards offer other desirable features that reflect good practice followed in many European universities." A total of thirty-six core and nineteen supplementary standards are defined.
- Monitoring procedures after criteria defined in KAA Methodology on Monitoring and Post-accreditation Procedures. Monitoring includes three kinds of procedures, following the same structure: (i) General Monitoring, with a focus on study programme holders (9 criteria) and on websites and advertising materials of HEIs (8 criteria); (ii) Monitoring according to the standards of the Accreditation Manual, with a focus on academic staff (13 criteria), lecture and exercise schedule (14 criteria), infrastructure and resources (12 criteria); (iii) Extraordinary Monitoring, either initiated after complaints from external parties (10 criteria), or because of the submission of false evidence to KAA (5 criteria), or in cooperation with the Education Inspectorate (10 criteria).

The correspondence between ESG and KAA standards is analysed by the agency in the SAR (§5.1), indicated explicitly in the Accreditation Manual as far as institutional and programme accreditation are concerned, integrated by the panel based on the description of the standards, and summarised in the following table. For monitoring, the SAR does not specifically establish direct connection with the individual ESG, because monitoring directly builds on the standards for institutional or programme accreditation. Therefore, the corresponding column in the table shows which part of the monitoring procedures directly connects to which ESG, based on the evidence of the description:

ESG	**Institutional accreditation**	**Programme accreditation**	**Evaluation of doctoral programmes[8]**	**Monitoring procedures**
1.1 Policy for QA	Area 1: 1.1, 1.2 Area 2: 2.1 to 2.3 Area 4: 4.1 Area 5: 5.1 Area 7: 7.1	Area 1: 1.1, 1.2 Area 2: 2.1 Area 6: 6.1	1.1, 1.6 (suppl.)	-
1.2 Design and approval of programmes	Area 5: 5.3, 5.4 Area 6: 6.1 to 6.6	Area 2: 2.2 Area 4: 4.1 to 4.5, 4.8	3.1-3.3 7.3	1.7 Monitoring lecture and

[8] The addition "suppl." in this column stays for "supplementary," as KAA's standards for the evaluation of doctoral programmes, as explained above, include core as well as supplementary standards, meant to be desirable features.

				exercise schedules
1.3 Student-centred learning, teaching and assessment	Area 6: 6.2 to 6.4, 6.7 to 6.9	Area 4: 4.6, 4.7	3.6, 3.9 (suppl.), 3.10 (suppl.) 5.1	-
1.4 Student admission, progression, recognition and certification	Area 9: 9.1 to 9.3	Area 5: 5.1 to 5.3	2.1 to 2.4, 2.5 (suppl.) 6.1, 6.3 to 6.6 7.1, 7.2, 7.4 (suppl.), 7.5 (suppl.)	-
1.5 Teaching staff	Area 8: 8.1 to 8.5 Area 7: 7.1 to 7.3	Area 3: 3.1 to 3.5 Area 6: 6.2 to 6.4	1.2, 1.3 5.2 to 5.5, 5.7 (suppl.), 5.8 (suppl.)	1.3 Monitoring of study programme holders 1.6 Monitoring of academic staff
1.6 Learning resources and student support	Area 2: 2.1, 2.2, 2.4 Area 3: 3.1, 3.2 Area 9: 9.2 to 9.4 Area 10: 10.1, 10.2	Area 1: 1.4 Area 5: 5.4 Area 7: 7.1 to 7.3	1.2 4.1, 4.4	1.8 Monitoring of infrastructure and resources
1.7 Information management	Area 5: 5.1, 5.2	Area 1: 1.3 Area 5: 5.2	3.5, 3.11 (suppl.)	-
1.8 Public information	Area 4: 4.2	Area 1: 1.1, 1.2 Area 2: 2.4 Area 4: 4.1 Area 5: 5.1	1.5 (suppl.)	1.4 Monitoring of website and advertising materials
1.9 On-going monitoring and periodic review of programmes	Area 5: 5.1 to 5.4 Area 6: 6.1	Area 2: 2.3 Area 5: 5.2	1.4 (suppl.)	-
1.10 Cyclical external QA	By law, HEIs must undergo an institutional accreditation every 3 to 5 years (based on the decision of the SCQ)	By law, programmes must undergo an institutional accreditation every 3 to 5 years (based on the decision of the SCQ)	By law, programmes must undergo an institutional accreditation every 3 to 5 years (based on the decision of the SCQ)	According to the SAR, regular monitoring is to be conducted every 6 months for every institution

Table 6 - Mapping of ESG Part 1 in KAA's activities

Analysis

The standard requires that the agency's external QA processes should address the effectiveness of the internal QA processes described in Part 1 of the ESG, those being the responsibility of the HEIs. To ensure the link between internal and external QA, external QA must include explicit consideration of the standards of Part 1.

It is clear from the SAR and from the sessions during the site visit, especially those with the HEIs, that the ESG are well known and that the procedures for institutional accreditation, programme accreditation and evaluation of doctoral programmes use the ESG part 1 as a basis for the evaluation.

The 2019 ERR recommended KAA to take care that the ESG 2015 Part 1 are addressed clearly in the activities of the agency. The panel believes that the mapping in Table 6 shows that the recommendation has been addressed.

In particular:

- ESG 1.1 – Policy for QA – is comprehensively covered by KAA's standards for institutional accreditation in the Areas 1 and 2, with specific additions from the Areas 4, 5 and 7. At programme level, the required aspects are covered in the Areas 1 and 2, with the addition of part 6. Of the more specific standards for the evaluation of doctoral programmes, Area 1 covers ESG 1.1, although one relevant aspect (institutional strategy for doctoral education) is part of the so-called supplementary standards (16 overall, of which at least eleven have to be fulfilled). ESG 1.1 is not part of the monitoring procedures, as their focus lies on the actual implementation (courses, student information, lecturers) still fulfilling the accreditation.
- ESG 1.2 – Design and approval of programmes – is covered at the institutional level by Areas 5 and 6. At programme level, Area 2 establishes the core of ESG 1.2, and Area 4 provides specific aspects. For doctoral programmes, Area 3 covers the required aspects. In the context of the monitoring activities, part 1.7 of the overall procedure covers lectures and exercise schedules, meant to verify if the actual situation matches the conditions of the accreditation in terms of programme implementation.
- ESG 1.3 – Student-centred learning, teaching and assessment – is covered by several of KAA's standards in the Area 6 for institutional accreditations; in the Area 4 for programme accreditation at Bachelor and Master level; in the Area 3, both in core and in supplementary standards, with an addition from Area 5. Based on the understanding of the panel, there is no explicit coverage of ESG 1.3 in the monitoring procedures, as part 1.7 has a strong focus on formal aspects of implementation of the curricula, less so on didactics or student evaluation.
- ESG 1.4 – Student admission, progression, recognition and certification – is covered by Area 9 of KAA's standards for institutional accreditation and Area 5 for programme accreditation at Bachelor and Master level. Concerning doctoral programmes, Areas 2 (both in core and supplementary standards) and six, together with specific aspects relevant to the outcome of research activities from Area 7, cover ESG 1.4. Aspects of this standard are not part of the monitoring procedures.
- ESG 1.5 – Teaching staff – is covered by Area 8 of KAA's standards for institutional accreditation, with specific additions from Area 7 concerning research activities. For programme accreditation at Bachelor and Master level, the coverage is provided by the Areas 3 and 6. At the level of doctoral programmes, Areas 1 and 5 (with both core and supplementary standard) address ESG 1.5. In the monitoring activities, verification of staff is especially important for KAA because of the developments in the HE sector during the last years, so that two parts of the monitoring procedures address this ESG, 1.3 for programme holders and 1.6 for academic staff in general.
- ESG 1.6 – Learning resources and student support – is covered at institutional and programme level by several areas, as the topic of resources is a central one. At institutional level, the relevant standards are in Areas 2, 3, 9 and 10. At programme level (Bachelor and Master) the Areas 1, 5 and 7 cover this ESG. For doctoral programmes, the required aspects are included in standards from the Areas 1 and 4. The monitoring activities cover one specific aspect of ESG 1.6, namely infrastructure and resources in the procedure part 1.8.

- ESG 1.7 – Information management – is addressed by the Area 5 for institutional accreditations and Areas 1 and 5 of the standards for programme accreditation. For doctoral programmes, the standards in Area 3 (both core and supplementary ones) cover ESG 1.7. Aspects of this standard are not addressed by the monitoring activities.
- ESG 1.8 – Public information – is covered by the standards of all activities of KAA: for institutional accreditation in Area 4; for programme accreditation by standards in different Areas (1, 2, 4 and 5); for doctoral programmes by standard 1.5 (although this is a supplementary standard); and for monitoring there is a specific part of the procedures (1.4) devoted to website and advertising materials.
- ESG 1.9 – On-going monitoring and periodic review of programmes – are fully covered by Areas 5 and 6 for institutional accreditation; by Areas 2 and 5 for programme accreditation; by standard 1.4 at doctoral level (although again this is a supplementary standard). For monitoring procedures, there is no part covering this ESG.
- ESG 1.10 – Cyclical external QA – is required by law every 3 to 5 years and implemented in KAA's procedures at institutional as well as at programme level.

The panel considers that institutional accreditation, programme accreditation at Bachelor and Master level, as well as evaluation of doctoral programmes substantially cover the ESG. Concerning monitoring, the panel refers to the considerations included in the Introduction to this document and believes that this cannot be considered a procedure of its own, therefore the question of coverage of the individual ESG cannot be assessed in the same way as for the other procedures.

The QA officers of the HEIs met by the panel indicated that the staff of their institutions have become more accepting of the role of QA in their work thanks also to the activities carried out by KAA. Members of the international evaluation panels commented positively on the quality processes and procedures that were in place in the HEIs.

It is not clear, however, how adequately involved were the students by their HEIs in all QA processes, including during external evaluation events. The panel heard that for the accreditation of new study programmes, it has not been the practice for the evaluation panel to meet with students, as there are no students enrolled in the study programme. The panel feels, however, that it is important that students of the institution are met during the panel's evaluation visit, on all accreditations, except for the accreditation of a new higher education institution. Even though there are no students in a new programme, there are many general aspects of the student experience that can be assessed by meeting with students of the institution as part of any evaluation process.

Panel recommendations

KAA is strongly recommended to ensure that student representatives are met by the panels as part of all activities of institutional accreditation, programme accreditation and evaluation of doctoral programmes, except for the accreditation of new higher education institutions. Students from other programmes of the same institution can assess general aspects of the student experience.

Panel conclusion: Compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

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

2019 review recommendation

Make sure that during accreditation activities the workability of the methodologies is guaranteed.

Evidence

The specific activities and procedures carried out by KAA are defined in the Law on KAA (2023) and communicated transparently on KAA's website together with the corresponding standards and methodologies. These apply to institutional and programme accreditation (at Bachelor and Master level), evaluation of doctoral programmes, follow-up and monitoring procedures.

According to KAA's own documents, listed in ESG 2.1 and also referenced below for each procedure (available on the website for HEIs and the general public), the objectives of the procedures are set out as follows:

- Institutional accreditation is defined in §3 of the Law on KAA as "a formal process of quality assessment, which determines the official status of recognition granted by the KAA for the institution of higher education which enables the development of academic activity and the right to award qualifications for a certain period of time". The procedure is addressed in the Accreditation Manual (revised in 2024) and aims at (only slightly adapted from Chap. 1 of this document):
    - certify the compliance of the higher education institutions with the standards
    - consolidate the internal QA systems at institutional level
    - support the HEIs in the quality enhancement and continuous development
    - increase the transparency and accountability of HEIs
    - strengthen the involvement of members of the academic community and encourage continuous cooperation with external stakeholders
    - increase the quality of student learning outcomes across the Kosovar HE sector
    - enhance the student learning experience at the HEIs
- Programme accreditation is defined in §3 of the Law on KAA as a "formal process of quality assessment, which determines the official status of recognition granted by the KAA, which enables the higher education institution to award qualifications for the relevant field within a certain period of time". The Accreditation Manual is valid for institutional and for programme accreditation, so that the aims listed above also apply to programme accreditation.
- Evaluation of doctoral programmes: the corresponding document (2020) sets different quality standards than for Bachelor / Master programmes in the Accreditation Manual but otherwise leaves the framework and the procedure unchanged. The definition or programme accreditation in the Law also does not establish any difference based on the programme level.
- Monitoring is defined in the same article in the Law on KAA as "a formal process carried out by the KAA through which it is assessed that the higher education institution meets and implements the accreditation conditions given in the KAA decision and in the evaluation report." Article 42 defines again its aim as ensuring "that the minimum criteria are met by HEIs throughout the

entire accreditation period.". It is addressed in KAA Methodology for Monitoring and Post-Accreditation Procedures, at institutional and programme level, and aims to "verify and confirm whether the given conditions of accreditation as well as the standards of the Accreditation Manual continue to be applied by the accredited higher education institutions."

The basic principles for the work of KAA and applying to all its activities are given in Article 4 of the Law on KAA: (i) equality, (ii) ethics and integrity, (iii) inclusiveness, (iv) foreseeability, (v) application of European standards with direct reference to the ESG.

Accreditation procedures (applying to the first three kinds of activities carried out by KAA, as stated in Article 26) as well as criteria and areas for standards are then defined in more detail in Chapter III of the Law on KAA. The first accreditation is valid for three years, following re-accreditations can be granted for three or for five years based on the SCQ decision (Article 35). The law describes very specifically the following aspects: application and deadlines; internal evaluation; steps of the external evaluation; external evaluators to be involved; the scope of the decision on accreditation. As a specific step of the accreditation process, Article 44 defines the conditions for follow-up procedures.

Concerning monitoring, the framework is set in Articles 42 and 43 and does not involve external experts (Article 42, §3: "Monitoring is performed by KAA staff"). As mentioned above, monitoring is defined as the formal process that the agency undertakes to ensure that the HEI meets and implements the (programmatic, institutional or doctoral programme) accreditation conditions. It is there a procedure that is consequential on the accreditation procedure, rather than a procedure in its own right.

Stakeholders confirmed during the site visit that they are involved in working groups and open consultations for the development and improvement of procedures and standards by KAA on a regular and repeated basis. HEI' representatives (heads and senior management of the HEIs and their QA officers) and MESTI representatives confirmed being intimately involved as required by KAA and are considered to be the main stakeholders. For students and student representatives from the national HEIs, employer / industry and civil society, examples of involvement have been provided by the agency and confirmed by the stakeholders, but not in a structured and systematic way. International reviewers and student reviewers are involved on a yearly basis through surveys, or in the form of international experts engaged for consulting on standardisation issues. A broader involvement of the national academic community is not part of the activities of KAA yet.

Analysis

The standard requires that all external QA processes be designed to ensure their fitness to achieve the aims and objectives set for them and that stakeholders are involved in the design and continuous improvement of the processes.

There is a wide body of stakeholders with an interest in the quality of higher education. This includes the government, HEIs, students, professions and the world of work. Considering the evidence provided, it is clear to the panel that the local HEIs at the level of senior management and of QA officers as well as international academics and experts are deeply involved in the development and improvement of the QA procedures and methodologies of KAA. This seems to happen mostly in consultations and workshops when KAA is in the process of revising its procedures or preparing new documentation.

Other stakeholder groups are less involved in the design and improvement. The panel believes that the widening of the stakeholder base that KAA formally engages with, is essential to ensure that the voices of all stakeholders in higher education, including local academics, students and student representatives, employers and industry representatives and the professional bodies for regulated professions are sufficiently involved in the ongoing improvement of the agency's processes. The

engagement of local academics and students is even more important when evaluation panels for external quality processes do not contain any local academic or student members.

Following evaluations, the programmes and institutions are accredited on a three- or five-yearly basis. The panel believes that a three-year period is short and with the requirement for follow-up there could be a sense that HEIs feel that they are being subject to continuous evaluation. As more confidence grows in the evaluation process, the panel believes that extending the evaluation period where possible, would give the HEIs a greater chance to enhance their processes in the period between evaluations. At the same time, this would give the agency better conditions for carrying out more meaningful follow-up procedures. Although the agency has made progress during the most recent years in terms of improving and standardising its procedures, also based on the feedback from the stakeholders and also addressing workability as required by the 2019 ERR recommendation (as for example reported by the international experts about the methods to establish compliance), extending the accreditation period would also again help to improve workability.

If legislative amendments are required to achieve this recommendation, the panel believes that engagement from the agency and HEIs and MESTI should take place.

Panel recommendations

KAA is strongly recommended to widen the systematic and structured involvement of all groups of stakeholders, including local students, student representatives and members of the national academic community, in the design and improvement of QA methodologies.

The panel strongly recommends that the agency engages with HEIs and MESTI for a future amendment to the Law on KAA, opening the possibility for further extending the accreditation period at institutional and programme level.

Panel conclusion: Compliant

ESG 2.3 Implementing processes

Standard:

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include:

- a self-assessment or equivalent
- an external assessment normally including a site visit
- a report resulting from the external assessment
- a consistent follow-up

2019 review recommendation

- Monitor and evaluate the implementation of accreditation activities from 2019 onwards thoroughly.
- Concentrate on quality improvement, when monitoring the follow-up of recommendations to HEIs provided by expert panels.

Evidence

For institutional and programme accreditation including for doctoral programmes, the structure of the process is regulated by the Law on KAA (Chapter III) and implemented according to the Accreditation Manual, publicly available on KAA's website:

- Article 31 establishes a self-assessment report (Internal evaluation), for which a template is made available by KAA
- External assessment including a site visit is required by Article 32 (External evaluation)
- The report from external assessment is required by Article 32 as well
- All accreditations include a follow-up, as defined in Article 44 (Post-accreditation procedure)

There is no difference in the procedures and their implementation between institutional accreditation, programme accreditation at Bachelor and Master level, and evaluation of doctoral programmes (programme accreditation at PhD level).

In some more detail, the accreditation process consists of:

- Application for accreditation (Article 25 of the Law on KAA), where the possible types of accreditation are listed in Article 26: institutional accreditation and re-accreditation; accreditation and re-accreditation of study programmes; institutional accreditation and re-accreditation of the branch and of the study programmes that are offered in that branch; accreditation of distance programmes and online study programmes; validation of international accreditations, recognized by member agencies of EQAR, CHEA and USDE. Applications must be submitted by 31st July of the previous year (Article 30)
- Internal evaluation (Article 31), resulting in a self-evaluation report by the HEI, to be compiled based on the template made available by KAA and submitted within fifteen working days after the confirmation of the application by KAA
- External evaluation in form of a site visit by a panel of international experts (Article 32), whose composition and criteria are established by law and include 2 to 7 experts, always including one student member
- Preparation of an external evaluation report by the experts
- Decision for accreditation (Article 34) by the SCQ based on the experts' report, including decision about the duration of the accreditation (3 or 5 years, by law)
- Notification of the decision to MESTI, for the ministry to issue licences or changes to existing ones
- In case of a negative decision, a new process follows one year later. During this time, the HEI is not allowed to enrol new students, but can carry on its activities with already enrolled students
- A second negative decision results in a final notification to MESTI, whereas the institution or programme which loses its licence is nevertheless obliged to ensure the completion of the studies for already enrolled students or the successful transfer of those students to another compatible HEI
- After a positive decision, all institutions which underwent an accreditation must submit a plan for the implementation of the recommendations by 30th September of the same year (Article 44), that is no later than 90 days after the site visit (§2.2 of KAA Methodology on Monitoring and Post-Accreditation Procedures)
- Evaluation by one external reviewer should be performed based on this plan (denominated "improvement report" in KAA's Methodology document) to monitor its implementation and result in a report, which has to be submitted to the SCQ for approval. A follow-up procedure must take place at least once in every accreditation cycle for each institution, as defined in KAA Methodology on Monitoring and Post-Accreditation Procedures (§2.1). Either a remote or a site visit should take place for this purpose. Before and during the site visit, no evidence could be

gathered showing that the requirements of the law and of KAA's procedures in terms of follow-up are fulfilled. The meetings showed two main reasons for this: (i) most of the accreditations are only granted for a period of 3 years and there are only about two years between the end of one accreditation process (in September, with the submission of the implementation plan 90 days after accreditation) and the application for the next re-accreditation (two years later in July at the latest); (ii) lack of staff on KAA's side, as well as an overload of the SCQ also play a role here.
- If an HEIs does not put in place the measures defined, the SCQ can withdraw the accreditation.
- In all cases, the experts' reports and the decisions by the SCQ are published on KAA's website.

Details of the process, ensuring consistency over different process instances, are defined in the Accreditation Manual. Each process instance is accompanied by a coordinator from KAA's staff, who ensures consistency and supports the panel. Evidence in the form of an agenda of site visits and of published expert reports shows that formal consistency is implemented, as also confirmed by representatives of the HEI during the site visit.

Based on KAA Methodology on Monitoring and Post-Accreditation Procedures, the monitoring process consists of these steps:

- KAA organises the monitoring procedure at least once within six (6) months at the institutional level and/or study programme for each accredited HEI (§1.1)
- Monitoring is performed by law by KAA's staff
- Monitoring can be carried out remotely (desk-based research and exchange of documentation with the HEI) and / or through site visits. Site visits can take place with or without prior notification to the HEI
- Upon completion of the monitoring visit, KAA's staff draft a report confirming if the HEIs still fulfils the conditions of the accreditation for the monitored aspects
- The report is reviewed and approved by the SCQ, and the institution notified about the results, warnings can be issued by the SCQ

Analysis

The standard requires that external QA processes be reliable, pre-defined, implemented consistently and their outputs published. They should follow the usual 4-stage process of self-assessment, site visit, published report and follow-up.

Moreover, the recommendations from the 2019 ERR have to be considered:

- Monitor and evaluate the implementation of accreditation activities from 2019 onwards thoroughly.
- Concentrate on quality improvement, when monitoring the follow-up of recommendations to HEIs provided by expert panels.

The panel recognises that the processes for institutional accreditation, programme accreditation and evaluation of doctoral programmes are by now well established and largely follow the above 4-stage model.

Nevertheless, in accordance with the 2019 ERR recommendation, the panel is not fully convinced that the follow-up process is working as well as it could and that it provides sufficient opportunity for the institutions to demonstrate how they are enhancing their processes following evaluation. What is described as follow-up appears to involve the writing of an action plan which must be submitted 90 days after the evaluation report is published. The panel believes this is quite a short period to engage

with the governance systems, particularly of larger HEIs, to meaningfully produce a plan to follow-up on the findings and recommendations arising from the evaluations.

The existing process also does not implement the legal requirements of the Law on KAA and KAA's own procedure definition, as there is no follow-up activity after the submission of an implementation plan from the side of the HEI following implementation: there is no further review between an accreditation and the following re-accreditation, no international expert engagement for review purpose, and no follow-up report submitted to the SCQ and published on the website.

The monitoring process can involve both planned visits and also unannounced visits (termed extraordinary monitoring events) to HEIs to check that the staff are in place for programmes that have been accredited and that the programme timetables are publicly displayed and are being adhered to. While it is understandable that such processes might be required in some cases, it is hoped that, over time, follow-up processes will move towards seeing how HEIs are engaging with the recommendation of quality reviews and how they are using the outputs of such processes to enhance the student experience.

The panel understands that the development of HE In Kosovo has followed similar patterns to other countries in development, either from war or other political upheavals and that the outcome of such changes has often resulted in unchecked growth of new HEIs, particularly in the private sector. It is clear, however, that the accreditation work of KAA over the past number of years has resulted in the number of private higher education institutions going down from 28 to 9 and that over time, it will no longer be necessary to have the inspectoral type of monitoring that has been described above. In their discussions with the leadership and quality officers of the private HEIs, the panel was impressed with their commitment to providing a high-quality learning experience to their students.

The accreditation activities from 2019 onwards have been thoroughly revised in two thematic analyses by KAA, one about institutional accreditation (for the period 2019/20 and 2020/21) and one about programme accreditation (for the period 2021-2023), the results could be used by KAA in a more structured way for the further improvement of the procedures.

Panel recommendations

The panel strongly recommends revising the follow-up process, focusing more on providing sufficient opportunity for the HEIs to demonstrate how they are enhancing their processes following evaluation, and on implementing the processes as required by the laws and by KAA's manuals.

Panel suggestions for further improvement

For the monitoring procedures, the panel suggests moving from a quality control to more focus on enhancement, e.g. integrating monitoring in the follow-up procedures.

Panel conclusion: Partially compliant

ESG 2.4 PEER-REVIEW EXPERTS

Standard:
External quality assurance should be carried out by groups of external experts that include (a) student member(s).

2019 review recommendation

- Make sure that the level of degree-work can and will be judged properly by the expert panels.
- Make sure that full students' participation in institutional reviews and program evaluations is guaranteed.
- Build a network of national experts, including students, in order to participate in activities such as monitoring of the follow-up of recommendations provided in review reports.

Evidence

The composition of panels for institutional accreditation and programme accreditation (including doctoral programmes) is regulated by the Law on KAA (Article 32). This requires external evaluations to be carried out by international experts, consisting of:

- from 2 to 7 external evaluators, depending on the number of study programmes being evaluated
- at least one student member
- "evaluators […] shall have the relevant academic and professional degree in the programme field which is undergoing the assessment process": reviewers who are not students are required to hold a PhD.

No involvement of industry / employer representatives is foreseen by the Law.

For monitoring procedures, no external expert is involved, as the Law on KAA (Article 42) foresees that KAA's staff directly carries out this activity. The panel reflected on that in the Introduction to this document.

Further details about the criteria for the selection of reviewers are defined in the Regulation on the Selection, Engagement, and Compensation Procedures of External Experts (2024) in Article 3:

- Relevant academic and professional degree in the field of the programme(s) undergoing the assessment process
- The panel chair should have a good knowledge of QA in HE and be experienced in conducting external QA procedures
- Teaching and /or research experience
- The student expert member should be recognized for his/her continuity of studies and have the fundamental knowledge in QA in HE
- All international experts are expected to have a good knowledge of the English language, good oral and written communication skills, be able to work in a team environment
- The external experts must not have a history of misconduct or malpractice, especially regarding their previous cooperation with KAA or other QA agencies listed in EQAR

Article 7 of the Regulation also defines aspects of avoidance of conflicts of interest. Criteria are listed and the reviewers are required to sign a declaration of non-incompatibility ("Incompatibility and Ethical Statement").

In practice, panels composed by three experts are installed, including one student expert, all of them being international experts. Their tasks are defined in Article 33 of the Law. During the site visit, the necessity to involve only international experts was explained with the relatively small size of the HE sector in Kosovo and with it being relatively young, so that on the one hand the availability of experience in external QA procedures is still limited, and on the other hand potential conflicts of interest could arise. The added value from the point of view of the agency is also that this way knowledge transfer from the international experience of the experts to the HE sector in Kosovo takes place.

In February 2024, KAA adopted a new Regulation on the Selection, Engagement, and Compensation Procedures of External Experts. Experts including students are recruited through open calls, the Regulation defines the modalities and the criteria to be fulfilled. The current list of experts, who can be part of KAA panels, has been approved in February 2024 by the SCQ and published on KAA's website and consists of 191 international experts including student experts. According to Article 32 of the Law on KAA, evaluators for programme accreditation must have a relevant academic and professional degree in the field of the study programme undergoing accreditation; Article 20 foresees that KAA's Director proposes the updated list of international experts, and the SCQ according to Article 11 reviews and decides on it yearly for approval. In 2023, 56 experts were involved in a total of 150 accreditations, eighteen of them being students. A total of eight of these fifty-six experts were involved in five accreditations or more in the same year. The composition of each panel must be approved by the SCQ (Article 5 of the Regulation). According to the SAR (§5.4) experts come from Croatia (42), Germany (14), Russia (13), Austria (10), Georgia (9) and other countries.

An overview of the total number of experts involved in accreditation activities during the years 2021-2023 is provided in Chapter 4 of the SAR, whereas based on the meetings during the site visit most of the student experts seem to be Master or PhD students:

	2021	2022	2023
Experts involved in institutional accreditation	21	28	20
Experts involved in programme accreditation	236	139	150
Student experts involved	105	94	108

Table 7 - Overview of experts' involvement 2021-2023

KAA offers twice per year, before the accreditation procedures start, online training sessions for the experts including students, for them to become familiar with the system before they are deployed. All experts confirmed that the training and support provided by KAA was helpful for them.

After the accreditation procedure is completed, expert panel members submit their feedback to KAA as required by Article 17 of the above-mentioned Regulation. The experts including students that the panel met during the site visit confirmed having been requested in the past to provide feedback via form/survey on a yearly basis (not directly after each procedure).

For follow-up procedures, at least one international expert must be engaged. For monitoring procedures, no external expert is foreseen according to the Law, only KAA's staff.

Analysis

The standard requires that external quality assurance be carried out by groups of external experts that include student members. Furthermore, these experts should be carefully selected, have the appropriate skills, be well trained and supported by the agency's staff.

Moreover, the recommendations from the 2019 ERR require the agency to:

- Make sure that the level of degree-work can and will be judged properly by the expert panels.
- Make sure that full students' participation in institutional reviews and program evaluations is guaranteed.
- Build a network of national experts, including students, in order to participate in activities such as monitoring of the follow-up of recommendations provided in review reports.

On the basis of the reflection included in the Introduction to this document, concerning the question if monitoring activities can be considered procedures on their own, the panel does not take into account monitoring in this analysis.

The panel found that the agency has made strong efforts to ensure that high-quality academic evaluators are used in the external evaluation committees. It is testimony to the ambition of Kosovo and the agency that they have selected and procured academic evaluators from well-established foreign HEIs to benchmark the quality of HE in Kosovo.

All accreditation committees have student members as required in the standard. However, the pool from which the students are drawn is quite narrow compared to the number of procedures to be carried out yearly, especially at programme level. Students are usually Masters or Doctoral students, and, in some cases, these students are mature and have undergone their undergraduate studies sometime in the past. While recognising that these evaluators have much to contribute, the panel believes that it is important to ensure that the students involved in evaluation panels have recent experience of attending HEIs at Bachelor or Master level so that they are in a position to comment on the current student experience for the programme accreditations mostly conducted by KAA.

The HEIs have a role to play here in ensuring that students have an opportunity to participate fully and widely in the QA structures within HEIs. The national students' union usually has a role in ensuring that students are informed about the purposes of QA and the vital role that students can play in the quality of their education. The fact that the national students' union in Kosovo no longer seems to be functioning for the whole HE sector is a liability in terms of ensuring that students are fully engaged in contributing to the quality of their education. The panel recommends that the agency finds a way to expand their engagement with the wider student body through seminars and other dissemination processes, for instance.

Concerning the 2019 ERR recommendations, the panel considers based on the discussion with external evaluators during the site visit and on their feedback about the information and onboarding provided by KAA, that progress has been made about ensuring students' participation in institutional and programme accreditation. There is no evidence on activities addressing the first recommendation (about international experts being able to assess the quality of degree-work because of language and cultural differences and difficulties). A network of international experts including students has been built to be engaged as external evaluators.

The current legal composition of external evaluation panels requires the use only of international academic and student experts. There is no opportunity to involve the world of work such as industry

or employer representatives or evaluators from the regulated professions for programmes producing practitioners in regulated professions. The panel believes that a widening of the stakeholder base to include members from the world of work and particularly from the regulated professions in evaluation panels could contribute to evaluating not only the quality but also the relevance of study programmes. This could form part of any discussions on changes in the legal framework of evaluation that may take place.

The use of international evaluators is understandable for a small, relatively young country. It provides an opportunity for international benchmarking and evaluation from those who have no personal stake in the system, but it does place an onus on the agency to ensure that knowledge of and confidence in the agency accreditation processes is disseminated to local academics and the student body in other ways.

The evaluation panel members involved in the site visit felt that they were well-briefed in advance of being deployed. The process of ensuring that experienced panel members are mixed with first timers is to be commended. The accreditation panel members that the review panel spoke to had conducted a large number of evaluations over the past number of years and are now familiar with the Kosovar system.

The evaluation panel members involved in the site visit also indicated that they are not systematically surveyed after each evaluation. As explained in the section about ESG 3.6, surveys seem to take place on an annual basis, and it is likely that memories of the evaluation could diminish over time. To improve the quality and consistency of evaluations, it is important that the survey process is comprehensive and systematised and takes place in a timely manner.

Panel commendations

The agency has made strong efforts to ensure that high-quality academic evaluators are used in the external evaluation committees. KAA has selected and procured academic evaluators from well-established foreign HEIs to benchmark the quality of HE in Kosovo.

The process of ensuring that experienced panel members are mixed with first timers is also to be commended.

Panel recommendations

The panel strongly recommends ensuring that the students involved in evaluation panels have recent experience of attending HEIs at Bachelor or Master level, so that they are able to comment on the current student experience for the kind of programme accreditations mostly conducted by KAA.

Panel suggestions for further improvement

The panel suggests that the agency widens its stakeholder base for accreditations to include members from the world of work and particularly from the regulated professions. This could form part of any discussions on changes in the legal framework of evaluation that may take place.

Panel conclusion: Compliant

ESG 2.5 CRITERIA FOR OUTCOMES

Standard:

Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

2019 review recommendation

Monitor how the existing rules for assessing standards and for decision-making work out in reality. If needed, improvements both in decision rules and by way of training, may have to be considered.

Evidence

For accreditation procedures (institutional, programme including doctoral level) the criteria for decision-making are published in the Accreditation Manual (Chap. 1). Decisions are made and applied separately for each campus / branch of the HEI, for each organisational form of a study programme (full- or part-time) and for each teaching language in the study programme. According to the Manual, these are considered distinct process instances and are subject to separate accreditations.

Monitoring activities concern the areas identified in KAA Methodology on Monitoring and Post-Accreditation Procedures: programme holders, academic staff, lecture and exercise schedules, infrastructure and resources. For these activities, the objective is to verify if the conditions of the last (re-)accreditation are still met and implemented by the HEI.

So far, based on the information provided by senior staff of the agency during the site visit, there has been only one case in which the decision by the SCQ diverged from the report by the external experts.

A four-level compliance scale is defined: fully compliance, substantial compliance, partial compliance, non-compliance, whereas the compliance applies to an area:

- Institutional and programme accreditation at Bachelor and Master level: for each area, specific standards are defined (and for each standard, indicators are provided). For each level, the Manual provides a range in terms of percentage of standards which must be fulfilled for the area to be considered fully/substantially/partially compliant. For example, if 30-70% of the standards in one area are fulfilled, the area is to be considered as partially compliant. The overall compliance is then determined as the most frequent compliance level.
- Programme accreditation at doctoral level: for each area, core standards and supplementary standards are defined. For each compliance level, the Standards for Evaluation of Doctoral Programmes define how many core and supplementary standards are to be fulfilled.

At least a substantial compliance level in the overall judgement is required for an institution or programme to get a positive accreditation. Moreover:

- For institutional accreditation, the areas Learning and Teaching as well as Learning Resources and Facilities are mandatory: substantial compliance is required in both areas.
- For programme accreditation at Bachelor and Master level, the areas Academic Staff and Infrastructure and Resources are mandatory: substantial compliance is required in both areas.

For full compliance, an accreditation for five years will be granted. For substantial compliance, three or five years are possible. For partial compliance, only three years will be granted.

For all external evaluators (newcomer and experienced) KAA offers every year two training sessions before the start of the reviews (typically in January or February), containing introductions to the national QA system, to the activities and procedures of KAA and to the standards and application of the definitions. These trainings were deemed particularly useful by the evaluators who met the panel during the site visit, in terms of ensuring understanding of the system and consistency across the review teams, and to pass on experiences or adaptations of existing procedures.

The international expert reviewers the panel met during the site visit also confirmed that the rules for judgement and decision-making have been improved based on their feedback, for example in that the description of how to calculate standard compliance has been made more precise, thus making the application of the rules clearer and more transparent, thus leading to a better consistency across the processes.

As monitoring does not include external evaluators (as explained in the Introduction to this document), training and information / involvement only concern accreditation at institutional and programme level (including doctoral programmes).

The discussions with the HEIs during the site visit confirmed that there are no issues with the criteria against which the HEIs are being evaluated and they expressed no concerns about inconsistencies in report findings or recommendations.

Analysis

The standard requires that any outcomes or judgements made as a result of external QA should be based on explicit and published criteria that are applied consistently.

Moreover, the recommendation from the 2019 ERR requires KAA to monitor how the existing rules for assessing standards and for decision-making work out in reality. If needed, improvements both in decision rules and by way of training, may have to be considered.

The evidence shows that during the last years KAA made strong efforts in two directions:

First of all, all KAA procedures have been updated and improved in recent years, in an effort of transparency and professionalisation, leading to clear and explicit criteria and rules for their application. This effort involved HEIs as well as external evaluators and international experts and led to well-defined criteria and mechanisms, all of them publicly available on KAA's website. In this sense, the recommendation from the 2019 ERR is considered to be fulfilled.

On the other hand, KAA made efforts to improve the application of the criteria and procedures in terms of consistency. Attention was paid while updating the corresponding documents to also better explain how decisions (e.g. on the level of compliance) are to be made by the external evaluators. In addition, KAA improved and extended its training offer to the external evaluators, making it more comprehensive and offering it twice per year so that more evaluators can participate. Furthermore, the praxis of mixing on purpose experienced evaluators with newcomers was introduced, as commended by the panel in the section about ESG 2.4.

All these measures contribute to consistency in the application of the defined and published criteria, so that the panel feels confident that the requirements of the standard are met.

Panel conclusion: Compliant

ESG 2.6 REPORTING

Standard:
Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

2019 review recommendation

Improve the quality of reports and make sure that they contain deeper analysis and a better connection with evidence and that the full reports are regularly published.

Evidence

The publication of the decisions of KAA (in Article 7, §3) and of the results of quality assessments (in Article 15, §8, specific about accreditation) is required by the Law on KAA and defined in the Accreditation Manual as part of the outcomes of the process (§3.2): "KAA publishes its decision together with the External Review Report on its official website not later than two weeks after the meeting of the State Council of Quality and the education provider is being given the final report".

For monitoring, the same is required in this Methodology document (§1.1): "The report of the monitoring procedure together with the decision of the SCQ for the relevant institution of higher education is published on the official website of the KAA.", even if in this kind of procedure, no external expert is involved, as established by the Law.

For external reports of accreditation procedures, templates have been introduced, as indicated in the SAR (§5.6) and the Accreditation Manual (§3.2) and for follow-ups in the Methodology on Monitoring and Post-Accreditation Procedures (§2.4.6 and §2.5.9).

Evaluation reports include the following main elements: (i) introduction, to provide context information; (ii) institution / study programme valuation as the main content of the report, related to each area according to the manuals, including compliance level and recommendations; (iii) overall evaluation and judgement of the panel.

The full reports are published on the website based on their category:

- institutional (re-)accreditation reports and programme (re-)accreditation reports including for doctoral programmes are organised per institution and year; accordingly, the decisions of the Board are published with this same logic
- monitoring reports are organised per year; in this case there is no additional decision by the SCQ, the monitoring report itself is the result of the process.

During the site visit, the panel members noticed that some of the published programme (re-) accreditation reports seem not to fulfil the requirement of having at least two external experts involved, as only one expert is listed in the report itself. The Director and the Heads of the Departments explained that commonly larger institutions apply for (re-)accreditation of a large suite of study programmes. To make things manageable, a panel is nominated for the whole suite, and during the different sessions of the site visit sometimes the panel members get divided up, based on their expertise, for interviews/sessions specific to one study programme. The report in some of these cases shows only the name of this one "dedicated" expert for these specific sessions, while the accreditation was carried out together by the whole panel.

At the time of the site visit, some reports for 2023 were still missing on the website, because they had not yet been approved by the SCQ. For 2024 there are no reports available yet.

Analysis

The standard requires that full reports by the experts are published and are clear and accessible to any interested individuals.

Moreover, the recommendation from the 2019 ERR requires that KAA improves the quality of reports and makes sure that they contain deeper analysis and a better connection with evidence and that the full reports are regularly published.

The panel confirms that the agency publishes its evaluation reports on its website in an accessible manner. Monitoring reports have only been published more recently (and they are not prepared by external experts, as already explained in the Introduction to this document and in reference to other standards).

In general, although there still is potential for improvement in terms of quality, depth, detail of the reports, the panel considers that KAA has put adequate focus on raising the overall quality of the reviews and of the corresponding reports, and in ensuring that the reports from the external experts are regularly published on the website. Thus, the standard and the recommendation from the 2019 ERR are considered fulfilled by the panel.

Nevertheless, an analysis of the published reports (from KAA's website) by the panel member shows that in several cases, it has been the practice where several programmes are being evaluated as part of a site visit (in a bundle), that the panel members are divided up between the different programmes for some sessions of the site visit, meaning that some panel members are assigned to specific study programmes. This leads to some published programmatic reports appearing to indicate that only one external academic expert was present for the evaluation. The panel feels that it is important that the structure of the evaluation process is very clearly communicated to the external audience, who may wish to read the reports of the evaluations. This clarity of communication is even more important, in the case where local academics and students are not involved in the external evaluation processes and are therefore less familiar with how they operate in practice.

Panel recommendations

The panel recommends that follow-up reports and reports of monitoring activities are discussed and approved by the SCQ as well as published on the website in good time after the completion of the procedures.

The panel also strongly recommends that the performed evaluation process and the involved experts as well as their role and specific involvement are more transparently indicated and explained in the published reports, especially in the programmatic and monitoring reports.

Panel conclusion: Compliant

ESG 2.7 COMPLAINTS AND APPEALS

Standard:
Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Evidence

After drafting a revised version of the Accreditation Manual in February 2024, KAA also adapted the Regulation on the Work of the Appeals Committee, which is also available on the agency's website, together with the role and composition of the Committee and with the possibility of a direct contact via email if needed. The Regulation is based on the conditions defined in the Law on KAA (Article 22, 23 and 24), which establishes rules for the composition, appointment and dismissal of the Committee members, the Committee being a permanent body of KAA. The Committee consists of five members, three being lawyers and two being university professors. No student member is foreseen. The appointment period is four years.

HEIs have 30 days to file an appeal following a decision by the SCQ on any of KAA's procedures (institutional accreditation, programme accreditation, evaluation of doctoral programmes, monitoring). Rules for review and decision-making by the Committee are defined in Articles 5 and 6 of the Regulation:

- a decision has to be made within 30 days from the day of receipt of the appeal and supporting documentation, whereas no evidence or information can be considered which was not made available to the SCQ for the decision which is to be reviewed; in complex cases, one postponement of 30 days is possible;
- decisions require a majority decision among the members of the Appeals Committee; it can either reject the appeal – in this case the decision is a final one; or it can return the case to the SCQ for reconsideration.

Final decision-making (for the cases which the Committee positively decides after examination to return to the SCQ for consideration) is within the competence of the SCQ. According to Article 6 of the Regulation, HEIs can file the decision and initiate an administrative dispute within 30 days of receiving the information about the result.

Due to the large number of negative decisions by the SCQ during the last years, the number of appeals to the Committee was and is still relatively high, as reported in the SAR (§5.7):

	2021	2022	2023
Appeals (total)	18	23	20
approved	0	4	5
rejected	18	15	12
withdrawn	0	4	3

Table 8 - Overview of appeals 2021-2023

HEIs confirmed during the site visit that they have had positive experiences with the Appeals Committee, and they felt that even in case of a negative decision (rejection of the appeal) the institutions were dealt with in a transparent and consistent way.

Nevertheless, based on information collected during the site visit, in the last years fifteen cases were brought to court by the appellate HEI. In thirteen cases the court confirmed the decision by the SCQ.

Beside formal appeals, complaints on minor or operative aspects of the procedures can be delivered by the HEIs to the staff of the agency, for example via email or via a "report" button on KAA's website (publicly available, no login needed). In this case, KAA's staff from the Department(s) involved in the procedures will revise the procedure and provide feedback to the HEI. Institutions confirmed during the site visit that they use this possibility as needed, as part of a general feedback after the procedure or as an exchange e.g. in working groups. There is no statistical or structured analysis or documentation of complaints and of their results.

Analysis

The standard requires that complaints and appeals processes be clearly defined as part of the design of external QA processes and transparently communicated to the HEIs.

There is an appeals commission in place for the purpose of reviewing decisions of the SCQ for which HEIs submitted an appeal. The commission has 30 days for its review and corresponding decision (with one additional postponement of 30 days in complex cases) and can either reject the appeal after reviewing the case or decide that the appeal is well founded and thus return the case to the SCQ for revisiting its decision. Rejection by the appeals commission is a final decision, while when returning the case to the SCQ it is this Board which makes the final decision. Anyway, HEIs can also file these decisions in a civil court. The composition of the appeals commission as well as the conditions of the reviews and of decision making are defined in a Regulation and published on the website. As there are quite a number of negative decisions taken by the SCQ, it is unsurprising that there are a significant number of appeals annually. The quality officers from the HEIs indicated that they had been involved in a number of appeals and that they were satisfied with the appeal process. The process is considered fair, transparent and timely by the HEIs.

For minor or operative issues which occurred during a procedure, HEIs can also directly submit complaints to KAA's staff in a less structured and official manner, simply via email, or use the corresponding button on KAA's website. In this case, there is no specific procedure for dealing with the complaint, and KAA's staff itself will examine it and provide feedback. No documentation is collected in a structured way on such cases, so that no statistics is possible.

The panel considers that the necessary formal process for appeals is in place and well communicated, as well as fairly and transparently implemented, based on the feedback by the HEIs involved in the site visit. For more informal complaints, there is no specific structure in place, but the HEIs confirmed making use of this possibility.

Panel conclusion: Compliant

CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 3.6	The involvement of education transparency bodies from the civil society of Kosovo as active stakeholders in the work of the agency is to be commended, as it shows the strong commitment to independence and transparency.
ESG 2.4	The agency has made strong efforts to ensure that high-quality academic evaluators are used in the external evaluation committees. KAA has selected and procured academic evaluators from well-established foreign HEIs to benchmark the quality of HE in Kosovo. The process of ensuring that experienced panel members are mixed with first timers is also to be commended.

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

ESG 3.1	Partially compliant	The agency is strongly recommended to implement as soon as possible the representation of a student (voting) member and of two industry (non-voting) members in the SCQ, as defined by the Law on KAA (2023). These three members should be nominated and directly involved in the meetings and the activities of the SCQ at soon as possible. The panel strongly recommends translating KAA's Strategic Plan in a (multi-year) implementation plan, setting out measures / activities and the corresponding time plan, which are necessary to ensure that the goals are reached in all areas.
ESG 3.2	Compliant	-
ESG 3.3	Compliant	-
ESG 3.4	Compliant	The panel recommends that thematic analyses are developed more regularly, that they build upon the standardisation of the agency's activities and procedures and the data collected from its external QA procedures through the agency's developing IT-platforms and that such analyses be created with the participation of KAA's staff to ensure knowledge transfer and capacity building, and that the topics address the needs of the Kosovo HE sector as identified by KAA itself.
ESG 3.5	Partially compliant	The panel recommends matching the planned expansion in human resources by a clear and specific plan on how such staff are to be deployed in the future, where more enhancement-oriented work of the agency could take place and consequently which skills are needed for such activities. The panel strongly recommends establishing whether it is possible for the agency to create sub-council structures to assist the SCQ in its deliberations. The effectiveness of the

		current governance system is to be evaluated, and it is to be determined whether the SCQ can be expanded. External expertise should assist in this audit process.
ESG 3.6	Partially compliant	The panel strongly recommends developing more systematic approaches to the internal QA of the agency and to implement them in a structured and systematic way. The panel recommends regular, standardised, timely surveys to be directed to all involved stakeholders after the conclusion of every procedure conducted by KAA, and the results to be analysed and used for the further development of KAA's activities.
ESG 3.7	Compliant	-
ESG 2.1	Compliant	KAA is strongly recommended to ensure that student representatives are met by the panels as part of all activities of institutional accreditation, programme accreditation and evaluation of doctoral programmes, except for the accreditation of new higher education institutions. Students from other programmes of the same institution can assess general aspects of the student experience.
ESG 2.2	Compliant	KAA is strongly recommended to widen the systematic and structured involvement of all groups of stakeholders, including local students, student representatives and members of the national academic community, in the design and improvement of QA methodologies. The panel strongly recommends that the agency engages with HEIs and MESTI for a future amendment to the Law on KAA, opening the possibility for further extending the accreditation period at institutional and programme level.
ESG 2.3	Partially compliant	The panel strongly recommends revising the follow-up process, focusing more on providing sufficient opportunity for the HEIs to demonstrate how they are enhancing their processes following evaluation, and on implementing the processes as required by the laws and by KAA's manuals.
ESG 2.4	Compliant	The panel strongly recommends ensuring that the students involved in evaluation panels have recent experience of attending HEIs at Bachelor or Master level, so that they are able to comment on the current student experience for the kind of programme accreditations mostly conducted by KAA.
ESG 2.5	Compliant	-
ESG 2.6	Compliant	The panel recommends that follow-up reports and reports of monitoring activities are discussed and approved by the SCQ as well as published on the website in good time after the completion of the procedures. The panel also strongly recommends that the performed evaluation process and the involved experts as well as their role and specific involvement are more transparently indicated and explained in the published reports, especially in the programmatic and monitoring reports.
ESG 2.7	Compliant	-

In light of the documentary and oral evidence considered by it, the review panel considers that, in the performance of its functions, KAA was not, at the time of the review visit substantially compliant with the ESG. The panel, however, believes that the deficiencies in relation to Standards 3.1 and 3.5 could be rectified relatively quickly. The agency is recommended to take appropriate action to achieve compliance in all standards at the earliest opportunity.

SUGGESTIONS FOR FURTHER DEVELOPMENT

The panel made further suggestions, which KAA may wish to consider when reflecting on its further development, as signalled in the previous sections:

ESG 3.1	The stakeholder basis for the further development of QA in Kosovo should be enlarged. A stronger and wider, regular and structured, involvement of students and student representatives, of employer / industry representatives, of civil society in the work of KAA would be beneficial – beside ad hoc working groups or consultations. This could be realised through consultative bodies, either through an adaptation of the Law, or on a voluntary basis on the part of KAA and SCQ. Industry / professional representatives could also be included in accreditation panels.
ESG 2.3	For the monitoring procedures, the panel suggests moving from a quality control to more focus on enhancement, e.g. integrating monitoring in the follow-up procedures.
ESG 2.4	The panel suggests that the agency widens its stakeholder base for accreditations to include members from the world of work and particularly from the regulated professions. This could form part of any discussions on changes in the legal framework of evaluation that may take place.

ANNEXES

ANNEX 1: PROGRAMME OF THE SITE VISIT

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
Tue 02.07.2024 (8:30-17:30) – Day 1			
-	8:30-9:00 (30 min)	Review panel's private meeting	-
1	9:00-9:45 (45 min)	Meeting with the **Director**	Director of Department for Evaluation and Accreditation Director of Department for Follow-up and Monitoring Procedures
-	9:45-10:00 (15 min)	Review panel's private discussion	
2	10:00-10:45 (45 min)	Meeting with the President and the members of the **SCQ**	President of SCQ Vice President of SCQ Member of SCQ (1) Member of SCQ (2) Member of SCQ (3) Member of SCQ (4) Member of SCQ (5)
-	10:45-11:00 (15 min)	Review panel's private discussion	
3	11:00-11:45 (45 min)	Meeting with staff from the **Department of Evaluation and Accreditation**	Director of Department for Evaluation and Evaluation Head of Division for Evaluation and Accreditation Head of Division for Legal Issues Senior Officer for Evaluation and Accreditation Senior Legal Officer
-	11:45-12:00 (15 min)	Review panel's private discussion	-
4	12:00-12:45 (45 min)	Meeting with staff from the **Department of Monitoring and Post-Accreditation Procedures**	Director of Department for Monitoring and Post-Accreditation Procedures Head of Division for Post-Accreditation Procedures Senior Officer for Monitoring Procedures (1)

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
			Senior Officer for Monitoring Procedures (2) Senior Officer for Post-Accreditation Procedures
-	12:45-13:45 (60 min)	Lunch (panel only)	-
5	13:45-14:30 (45 min)	Meeting with KAA staff involved in **internal QA, international projects and training for staff**	Director of Department for Monitoring and Post-Accreditation Procedures Director of Department for Evaluation and Evaluation Head of Division for Evaluation and Accreditation Head of Division for Post-Accreditation Procedures
-	14:30-14:45 (15 min)	Review panel's private discussion	-
6	14:45-15:30 (45 min)	(Hybrid) Meeting with **donors / consultants involved in international projects / activities** with KAA	Austrian Development Agency (1) Austrian Development Agency (2) Kosovo Education Center Bonevet ORCA Responsible for revision of KAA BA and MA Standards and Guidelines **(online)** Head of experts' team for development of thematic analysis for KAA **(online)**
-	15:30-15:45 (15 min)	Review panel's private meeting	-
7	15:45-16:30	Meeting with **employers, industry representatives, local community** involved in working groups / stakeholder activities	American Chamber of Commerce, Industry and employer representative British Gymnasium of Technology Head of the Physiotherapy Chamber of Kosovo EdGuard
-	16:30-17:30 (60 min)	Wrap-up meeting among panel members and preparations for day 2	-
-	Liburnia Restaurant	Dinner (panel only)	-
Wed 03.07.2024 (8:30-18:00) – Day 2			
-	8:30-9:30 (60 min)	Review panel's private meeting	-
8	9:30-10:15 (45 min)	Meeting with **ministry** representatives	Advisor to the Minister of Education, Science and Technology Head of ENIC/NARIC Center

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
			Kosovo Pedagogic Institute at MESTI Senior Officer at MESTI
-	10:15-10:30 (15 min)	Review panel's private discussion	-
9	10:30-11:15 (45 min)	Meeting with the **Heads / Senior staff of public HEI** involved in institutional / programme accreditation	Rector of University of Applied Sciences in Ferizaj Rector at University of Peja Rector at University of Gjilan Vice Rector at IBCM College Dean at University of Prishtina
-	11:15-11:30 (15 min)	Review panel's private discussion	-
10	11:30-12:15 (45 min)	Meeting with the **Heads / Senior staff of private HEI** involved in institutional / programme accreditation	President at Universum College Rector of Heimerer College Vice Rector at UBT College Dean at RIT
-	12:15-12:30 (15 min)	Review panel's private discussion	-
11	12:30-13:00 (30 min)	Meeting with **quality officers of public HEIs and/or programme chairs/coordinators and/or quality committee chairs/members** involved in institutional / programme accreditation	Head of QA at University of Prishtina Head of QA at University of Mitrovica Head of QA at IBCM College
-	13:00-14:00 (60 min)	Lunch (panel only)	-
12	14:00-14:30 (30 min)	Meeting with **quality officers of private HEIs and/or programme chairs/coordinators and/or quality committee chairs/members** involved in	Head of QA at AAB College Secretary at UBT College Head of QA at RIT Kosovo Head of QA at Universum College

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
		institutional / programme accreditation	
-	14:30-14:45 (15 min)	Review panel's private discussion	-
13	14:45-15:30 (45 min)	(Online) Meeting with **(non-student) reviewers / experts** involved in institutional / programme accreditation activities	University of Masaryk, Czech Republic Vice Rector at University of Bucharest EPDAD, Turkey Hohenheim University
-	15:30-15:45 (15 min)	Review panel's private discussion	-
14	15:45-16:15 (30 min)	(Online) Meeting with **student reviewers** involved in institutional / programme accreditation activities	University of Latvia Malmo University University of Warsaw Central European University
-	16:15-16:30 (15 min)	Review panel's private discussion	-
15	16:30-17:00 (30 min)	Meeting with **student representatives** involved in working groups or other stakeholder activities	Former President of Students Union in Kosovo President of Students Union at University of Prishtina President of Students Union at AAB College President of Students Union at UBT College
-	17:00-18:00 (60 min)	Wrap-up meeting among panel members: preparation for day 3 and provisional conclusions	-
-	Swiss Diamond Hotel	Dinner (panel only)	-
Thu 04.07.2024 (8:30-12:30) – Day 3			
-	8:30-9:30 (60 min)	Meeting among panel members to agree on final issues to clarify	-
16	9:30-10:30 (60 min)	Meeting with the **Director** to clarify any pending issues	General Director of KAA Director of Department for Evaluation and Accreditation Director of Department for Follow-up and Monitoring Procedures

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
-	10:30-12:00 (90 min)	Private meeting between panel members to agree on the main findings	
17	12:00-12:30 (60 min)	Final de-briefing meeting with staff and Board members of the agency to inform about preliminary findings	SCQ members KAA staff

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

External review of the Kosovo Accreditation Agency (KAA) by ENQA

Annex I:

TRIPARTITE TERMS OF REFERENCE BETWEEN KAA, ENQA AND EQAR

March 2024

1. Background and context

Established in 2008, the Kosovo Accreditation Agency (KAA) is an independent agency responsible for the external evaluation (accreditation, re-accreditation, validation and follow-up) of higher education institutions in Kosovo.

KAA's mission is to support quality development in higher education institutions through external evaluation processes and to assure Kosovo society that quality of higher education is at international standards level.

Accreditation is mandatory by law and KAA applies two types of accreditation one of them being institutional accreditation and the other being programme accreditation. There are approximately four hundred study programmes being provided from 17 Higher Education Institutions, of which nine are public HEI's and eight are private HEI's. Due to the national context, KAA only provides evaluation which ends up with a final decision issued by the board, hence an institution is accredited. KAA also does recognition of accreditation, with the condition that the evaluating agency is a member of ENQA and registered EQAR. Evaluation is based on a set of standards and additional criteria are added in order to comply with the local context.

KAA has been an affiliate of the European Association for Quality Assurance in Higher Education (ENQA) since 2022

KAA is applying for inclusion on the European Quality Assurance Register for Higher Education (EQAR).

2. Purpose and scope of the review

This review will evaluate the extent to which KAA (the agency) complies with each of the standards of Parts 2 and 3 of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG) and support the agency in its efforts to continually review and enhance its work. Such an external review is a requirement for agencies wishing to apply for EQAR registration.

2.1 Activities of the agency within the scope of the ESG

To apply and EQAR registration, this review will analyse all of the agency's activities that fall within the scope of the ESG, e.g., reviews, audits, evaluations or accreditations of higher education institutions or programmes that relate to teaching and learning (and their relevant links to research and innovation). All activities are reviewed irrespective of geographic scope (within or outside the EHEA) or whether they are obligatory or voluntary in nature

The following activities of the agency must be addressed in the external review:

- Institutional accreditation
- Programme Accreditation

- Monitoring Procedures
- Evaluation of Doctoral Programmes

Considering the KAAs application to EQAR, the self-evaluation report and the external review report are expected to give specific attention to the issues where the Register Committee concluded in its last decision, that the agency was not compliant with the ESG, namely ESG 3.3[9].

Should any substantive changes occur in KAA between now and the review (e.g., organisational changes, the introduction or changes of activities within or outside of the scope of the ESG), the agency should inform EQAR at its earliest convenience.

3. The review process

The review will be conducted following the methodology of ENQA Agency Reviews. The process is designed in line with the *Guidelines for ENQA Agency Reviews* and the requirements of the *EQAR Procedures for Applications*.

The review procedure consists of the following steps:

- Formulation of, and agreement on the Terms of Reference for the review between KAA, ENQA and EQAR (including publishing of the Terms of Reference on ENQA's website[10]);
- Nomination and appointment of the review panel by ENQA;
- Notification of EQAR about the appointed panel;
- Self-assessment by the agency, including the preparation and publication of a self-assessment report;
- A site visit of the agency by the review panel;
- Preparation and completion of the final review report by the review panel;
- Scrutiny of the final review report by ENQA's Agency Review Committee;
- Publication of the final review report;
- A decision from the EQAR Register Committee on the agency's registration on EQAR;
- Follow-up on the panel's recommendations to the agency, including a voluntary progress visit.

3.1 Nomination and appointment of the review panel

The review panel consists of four members: one or two quality assurance experts (at least one of which is currently employed by an ENQA member agency), an academic employed by a higher education institution, a student member, and potentially a labour market representative (if requested). One of the members serves as the chair of the review panel, and another member as a review secretary. For ENQA Agency Reviews at least one of the reviewers is an ENQA nominee (most often the QA professional[s]). At least one of the reviewers is appointed from the nominees of either the European University Association (EUA) or the European Association of Institutions in Higher Education (EURASHE), and the student member is always selected from among the ESU-nominated reviewers. If requested, the labour market representative may come from the Business Europe nominees or from ENQA. An additional panel member may be included in the panel at the request of the agency. In this case, an additional fee is charged to cover the reviewer's fee and travel expenses.

The panel will be supported by the ENQA Review Coordinator (an ENQA staff member) who will monitor the integrity of the process and ensure that ENQA's requirements are met throughout the

[9]See EQAR Register Committee decision from 01/03/2018 https://backend.deqar.eu/reports/EQAR/2018-02_Exclusion_Decision_C22_KAA.pdf

[10] The agency is encouraged to publish the Terms of Reference on its website as well.

process. The Review Coordinator will not be the secretary of the review and will not participate in the discussions during the site visit interviews.

Current members of the ENQA Board are not eligible to serve as reviewers.

ENQA will provide the agency with the proposed panel composition and the curricula vitarum of the panel members to establish that there are no known conflicts of interest. The reviewers will have to agree to a non-conflict of interest statement that is incorporated in their contract for the review of this agency.

3.2 Self-assessment by the agency, including the preparation of a self-assessment report

The agency is responsible for the execution and organisation of its own self-assessment process and must adhere to the following guidance:

- Self-assessment is organised as a project with a clearly defined schedule and includes all relevant internal and external stakeholders;
- The self-assessment report is expected to contain:
  - a brief description of the HE and QA system;
  - the history, profile, and activities of the agency;
  - a presentation of how the agency addresses each individual standard of Parts 2 and 3 of the ESG for each of the agency's external QA activities, with a brief, critical reflection on the presented facts;
  - opinions of stakeholders;
  - the instances of partial compliance noted in the most recent EQAR Register Committee decision of inclusion/renewal and any other aspects that may have been raised by the EQAR Register Committee in subsequent change report decisions (if relevant);
  - reference to the recommendations provided in the previous review and actions taken to meet those recommendations;
  - a SWOT analysis;
  - reflections on the agency's key challenges and areas for future development.
- All the agency's external QA activities (as defined under section 2.1) are described and their compliance with the ESG is analysed in the SAR.
- The report is well-structured, concise, and comprehensive. It clearly demonstrates the extent to which the agency performs its tasks of external quality assurance and meets the ESG.

The self-assessment report is submitted to the ENQA Secretariat, which has two weeks to carry out a screening. The purpose of a screening is to ensure that the self-assessment report is satisfactory for the consideration of the panel. The Secretariat will not judge the content of information itself but rather whether or not the necessary information, as outlined in the *Guidelines for ENQA Agency Reviews*, is present. If the self-assessment report does not contain the necessary information and fails to respect the requested form and content, the ENQA Secretariat reserves the right to ask for a revised version within two weeks.

The final version of the agency's self-assessment report is then submitted to the review panel a minimum of eight weeks prior to the site visit. The agency publishes the completed SAR on its website and sends the link to ENQA. ENQA will publish this link on its website as well.

3.3 A site visit by the review panel

The review panel will draft a proposal of the site visit schedule which must be submitted to the agency at least six weeks before the planned dates of the visit. The schedule is to include an indicative timetable of the meetings and other exercises to be undertaken by the review panel during the site

visit, the duration of which is usually 2,5 days. The approved schedule must be given to the agency at least one month before the site visit to properly organise the requested interviews.

In advance of the site visit (ideally at least two weeks before the site visit), the panel will organise an obligatory online meeting with the agency. This meeting is held to ensure that the panel reaches a sufficient understanding of:

- The specific national/legal context in which the agency operates;
- The specific quality assurance system to which the agency belongs;
- The key characteristics of the agency's external QA activities.

The review panel will be assisted by the ENQA Review Coordinator during the site visit. The review coordinator will act as the panel's chief liaison with the agency, monitor the integrity of the review process and its consistency, and ensure that ENQA's overall expectations of the review are considered and met.

The site visit will close with a final debriefing meeting in which the panel outlines its general impressions and provides an overview of the judgement on the agency's ESG compliance. The panel will not comment on whether or not the agency would be granted registration on EQAR.

3.4 Preparation and completion of the final review report

Based on the review panel's findings, the review secretary will draft the report in consultation with the review panel. The report will follow the purpose and scope of the review as defined under sections 2 and 2.1. It will also provide a clear rationale for the panel's findings concerning each standard of Parts 2 and 3 of the ESG. When preparing the report, the review panel should also bear in mind *EQAR's Policy on Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies*[11] to ensure that the report contains sufficient information for the Register Committee to consider the agency's application for registration on EQAR.

A draft will first be submitted to the ENQA Review Coordinator who will check the report for consistency, clarity, and language, and it will then be submitted to the agency – usually within 10 weeks of the site visit – for comment on factual accuracy and grave misunderstandings only. The agency will be given two weeks to do this and should not submit any additional material or documentation at this stage. Thereafter, the review panel will take into account the agency's feedback on possible factual errors and finalise and submit the review report to ENQA.

The report should be finalised within three months of the site visit and will normally not exceed 40-50 pages in length.

3.5. Publication of the report and a follow-up process

The agency will receive the review panel's report and publish it on its website once the Agency Review Committee has validated the report. The report will also be published on the ENQA website together with the statement of the Agency Review Committee validating external review reports by assessing the integrity of the review process and checking the quality and consistency of the reports. Importantly, during this process, and prior to final validation of the report, the Agency Review Committee has the option to request additional (documentary) evidence or clarification from the review panel, review coordinator or the agency if needed. The review report will be published on ENQA website regardless of the review outcome.

[11] Available at: https://www.eqar.eu/about/official-documents/#use-and-interpretation-of-the-esg

As part of the review's follow-up activities, the agency commits to react on the review recommendations and submit a follow-up report to ENQA within two years of the validation of the final external review report. The follow-up report will be published on the ENQA website.

The follow-up report may be complemented by an optional progress visit to the agency performed by two members of the original panel (whenever possible). The visit, which normally takes place 2-3 years after the verification of the final external review report (and after submission of the follow-up report), aims to offer an enhancement-oriented and strategically driven dialogue that ordinarily might be difficult to truly integrate in the compliance-focused site visit. The progress visit thus does not have the objective of checking the agency's ESG compliance or how the agency has followed up on the recommendations, but rather provides an arena for strategic conversations that allow the agency to reflect on its key challenges, opportunities, and priorities. Should the agency not wish to take advantage of this opportunity, it may opt out by informing the ENQA Review Coordinator about this.

4. Use of the report

ENQA will retain ownership of the report. The intellectual property of all works created by the review panel in connection with the review contract, including specifically any written reports, will be vested in ENQA.

The report is used as a basis for the Register Committee's decision on the agency's registration on EQAR. The review report should only be considered final after validation by the Agency Review Committee. After submission to ENQA but before validation by the ARC, the report may not be used or relied upon by the agency, the panel, or any third party and may not be disclosed without ENQA's prior written consent. The approval of the report is independent of the decision on EQAR registration.

For the purposes of EQAR registration, the agency will submit the review report (once validated by the Agency Review Committee) to EQAR via email. The agency should also include its self-assessment report (in a PDF format), a Declaration of Honour, and any other documents that may be relevant for the application (i.e., annexes, statement to the review report, updates). EQAR is expected to consider the review report and the agency's application at its Register Committee meeting as stipulated in the indicative review schedule below.

5. Indicative schedule of the review

Agreement on Terms of Reference	February 2024
Appointment of review panel members	March 2024
Self-assessment completed	26 April 2024
Screening of SAR by ENQA Review Coordinator	April 2024
Preparation of the site visit schedule and indicative timetable	May 2024
Briefing of review panel members	May 2024
Review panel site visit	July 2024
Draft of review report and its submission to ENQA Review Coordinator for verification of its compliance with the Guidelines	July/August 2024
Draft of review report to be sent for a factual check to the agency	August 2024
Agency statement on the draft report to the review panel (if necessary)	September 2024
Submission of the final report to ENQA	September 2024
Validation of the review report by the Agency Review Committee	October 2024
Publication of report	November 2024
EQAR Register Committee meeting and initial consideration	Spring 2025

Decision on ENQA membership by the ENQA Board	N/A

ANNEX 3: GLOSSARY

BAC	British Accreditation Council
ENIC/NARIC	European Network of Information Centres / National Academic Recognition Information Centres in the European Union
ENQA	European Association for Quality Assurance in Higher Education
EQAR	European Quality Assurance Register for Higher Education
ESG	*Standards and Guidelines for Quality Assurance in the European Higher Education Area*, 2015
HE	higher education
HEI	higher education institution
INQAAHE	International Network for Quality Assurance Agencies
KAA	Kosovo Accreditation Agency
KEC	Kosovo Education Center
KITU	Coalition for Integrity and Transparency in the University
MESTI	Ministry of Education, Science, Technology and Innovation
ORCA	Organisation for Increasing Quality of Education
QA	quality assurance
SAR	self-assessment report
SCQ	State Council of Quality (KAA's Board)
ZSI	Centre for Social Innovation

ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY KAA

1. Self-Assessment Report of the Kosovo Accreditation Agency (KAA)
2. Annex 1 to the SAR: Budget appropriations defined by the Law on Budget Appropriations for the years 2021, 2022,2023 and 2024
3. Annex 2 to the SAR: Expenditures for the years 2021,2022 and 2023 structured according to the Source Funds and Economic Categories
4. Annex 3 to the SAR: Collected own source revenues and the budget appropriations
5. Documents linked in the SAR (in the order of their first appearance):
   - 5.1. Kosovo Higher Education Law (2011)
   - 5.2. Administrative Instruction for Accreditation of HEIs in Kosovo (2018)
   - 5.3. Law on KAA (2023)
   - 5.4. Standards for Evaluation of Doctoral Programmes (2020)
   - 5.5. Accreditation Manual (2022, on the website a draft version 2024 is also available)
   - 5.6. Rregullore mbi punen e Keshillit Shteterore te Cilesise (KSHC) (in Albanian; Work Regulations of the SCQ, 2018)
   - 5.7. Regulation on the Work of the Appeals Committee of the Kosovo Accreditation Agency (2024)
   - 5.8. Regulation on Internal Organization and Systematization of Jobs in the Kosovo Accreditation Agency (2024)
   - 5.9. Template for Application for Accreditation (2021)
   - 5.10. Template for List of Publications (2024)
   - 5.11. Template Self-Evaluation Report for Institutional Accreditation (2021)
   - 5.12. Template Self-Evaluation Report for Programme Accreditation (2021)
   - 5.13. KAA Methodology on Monitoring and Post-accreditation Procedures (2022)
   - 5.14. Regulation on the Selection, Engagement, and Compensation Procedures of External Experts (2024)
   - 5.15. Kosovo Accreditation Agency Strategic Plan 2021-2025 (2020)
   - 5.16. Manuali per Vlersimin e Jashtem te Institucionevete Arsimit te Larte (in Albanian; Manual for External Evaluation of Higher Education Institutions, 2021 – see the English version in the list of the additional documents below)
   - 5.17. Increasing Student Participation in Internal and External Quality Assurance Processes in Kosovo – Research Report (2022)
   - 5.18. Guidelines for Student Engagement in Internal and External Quality Assurance of Kosovo Higher Education (2023)
   - 5.19. Regulation on the procedures for appointments to senior management positions in the civil service of the Republic of Kosovo (in Albanian; 2018)
   - 5.20. Law on the Civil Service of the Republic of Kosovo (in Albanian)
   - 5.21. Guidelines on conducting thematic analyses by Kosovo Accreditation Agency (2021)
   - 5.22. Preparation of the Kosovar Graduates for the Labor Market – Employer and Alumni Perspective – Thematic Analysis
   - 5.23. Thematic Analysis for Institutional Accreditation of Kosovar Higher Education Institutions (2021)
   - 5.24. Thematic Analysis of Processes Involved in Accreditation / Reaccreditation of Study Programs (2024)
   - 5.25. Manual for Internal Staff Evaluation (2021)
   - 5.26. Digitalization Feasibility Study (2021)

5.27. Monitoring Report of the State Quality Council in the Kosovo Accreditation Agency (by Organization for the Improvement of Quality in Education – ORCA, 2022)

6. Additional documents requested by the panel and provided by the agency prior to the site visit:
   6.1. List of additional documents (the document itself contains additional information)
   6.2. Detailed overview/breakdown of the HEIs which underwent an institutional accreditation between 2021 and 2023
   6.3. Internal Quality Assurance Policy Kosovo Accreditation Agency (2024)
   6.4. Example of a filled-in Questionnaire for HEIs
   6.5. Example of a filled-in Questionnaire for experts
   6.6. Example of feedback received from stakeholders (HEIs) (in Albanian)
   6.7. Draft questionnaire for employers
   6.8. Draft questionnaire for students
   6.9. Example of the composition of a working group
   6.10. List of experts as of 2024, including student experts
   6.11. Number of experts involved in 2023, including student experts
   6.12. Overview about the countries where the experts come from (as of 2024)
   6.13. Manual for External Evaluation of Higher Education Institutions (2021 – the SAR contained a link to the Albanian version)
7. Additional documents requested by the panel and provided by the agency during the site visit:
   7.1. Template for a site visit agenda for institutional accreditation
   7.2. Template for a site visit agenda for programme accreditation
   7.3. Template for a site visit agenda for evaluation of doctoral programme
   7.4. List of monitoring activities 2023 and 2024
   7.5. Five draft reports of monitoring activities 2024, not yet approved by the SCQ

OTHER SOURCES USED BY THE REVIEW PANEL

8. Website of the agency, English version (https://akreditimi.rks-gov.net/ access on 13.7.2024), especially for examples of reports and for other public documents of the agency
9. ENQA Agency Review: Kosovo Accreditation Agency (KAA) (2019 ERR)
10. Exclusion of the Kosovo Accreditation Agency from the Register (EQAR Register Committee 2018)
11. Website of ENQA (especially for the documentation of the external review 2019)

ENQA AGENCY REVIEW **2024**

THIS REPORT presents findings of the ENQA Agency Review of the Kosovo Accreditation Agency (KAA), undertaken in 2024.

enqa.
European Association for Quality Assurance in Higher Education

LAW NO. 08/L-110

ON KOSOVO ACCREDITATION AGENCY

Assembly of the Republic of Kosovo;

Based on Article 65 (1) of the Constitution of the Republic of Kosovo,

Adopts:

LAW ON KOSOVO ACCREDITATION AGENCY

CHAPTER I
GENERAL PROVISIONS

Article 1
The purpose

This Law shall regulate the status of the Kosovo Accreditation Agency as a regulatory agency in the processes and responsibilities of accreditation, re-accreditation, validation, monitoring in order to ensure quality in higher education in the Republic of Kosovo.

Article 2
Scope

The scope of this Law is to define the role of the Kosovo Accreditation Agency, in internal and external quality assurance, including accreditation, monitoring, validation and all other quality assurance processes in higher education institutions and their programmes of study in the Republic of Kosovo, according to international best practices, including in particular the relevant European standards in the field of quality assurance in higher education.

Article 3
Definitions

1. Terms used in this Law shall have the following meaning:

1.1. **Kosovo Accreditation Agency (KAA)** - is a regulatory agency for quality assurance in higher education in the Republic of Kosovo, which is responsible for the evaluation, accreditation, re-accreditation, validation, quality control and monitoring of higher education institutions and their study programmes;

1.2. **Ministry** – relevant Ministry for Education;

1.3. **State council of quality (SCQ)** – a collegial decision-making body for ensuring the quality in higher education, which is independent in exercising the competences determined by this Law;

1.4. **Accreditation** - a formal process of quality assessment of a higher education institution and/or its study programmes through which the Kosovo Accreditation Agency (KAA) determines that the required quality standards and criteria have been met;

1.5. **Institutional accreditation** - a formal process of quality assessment, which

determines the official status of recognition granted by the KAA for the institution of higher education which enables the development of academic activity and the right to award qualifications for a certain period of time;

1.6. **Accreditation of the study programme** - formal process of quality assessment, which determines the official status of recognition granted by the KAA, which enables the higher education institution to award qualifications for the relevant field within a certain period of time;

1.7. **Quality Assurance** - means the set of policies, processes and activities at the state and institutional level for quality assurance and advancement in higher education. Quality assurance also relates to teaching and learning in higher education, including the learning environment and links with research and innovation;

1.8. **Quality control and promotion** - regular periodic process carried out through the processes of evaluation, control and monitoring by the KAA through which it is ensured that the minimum quality criteria of higher education institutions and their study programmes are continuously implemented;

1.9. **Internal evaluation** - the regular process of internal evaluation by the institution of higher education through which quality is maintained and compliance with established standards and criteria of quality assurance;

1.10. **External evaluation** - formal quality evaluation process performed by KAA, which results in giving a recommendation for accreditation, non-accreditation;

1.11. **External evaluator** – is an international expert engaged by KAA in the process of accreditations, re-accreditation, post-accreditation procedure and superior expertise;

1.12. **Validation** - accreditation recognition procedure granted by an internationally known and recognized accreditation institution;

1.13. **Monitoring** - a formal process carried out by the KAA through which it is assessed that the higher education institution meets and implements the accreditation conditions given in the KAA decision and in the evaluation report;

1.14. **Post-accreditation procedure** - process conducted by the external experts which is related to the evaluation of fulfilment scale of KAA recommendations in compliance with the accreditation conditions and commitments of HEI;

1.15. **Study programme** - a programme that leads to a qualification or diploma, awarded by a provider of higher education as defined in the decision of SCQ;

1.16. **New study programme** – is a new study programme which has not been accredited before;

1.17. **Superior expertise** – expertise conducted by international experts regarding the previous report of external evaluation on a study programme or higher education institution;

1.18. **Standards** - requirements, criteria and rules which define the level required by higher education institutions and study programmes for making a positive decision on accreditation.

1.19. **Higher Education Institution (HEI)** - any institution authorized to provide educational services in higher education, which are subject to evaluation and monitoring

by the KAA;

1.20. **Public, private and public-private higher education institution –** shall be the institutions established as defined in the Law on Higher Education;

1.21. **European Higher Education Area** - means an organization in the higher education sector in Europe, according to the meaning set out in the Declaration of the European Ministers of Higher Education in Bologna (1999) as well as other subsequent documents of the Bologna Process;

1.22. **Recognized Accreditation Body** - Kosovo Accreditation Agency, or a similar body which is currently a full member of the European Quality Assurance Register for Higher Education (EQAR), by the United States Department of Education (USDE) or Council for Higher Education Accreditation (CHEA);

1.23. **ENQA** - European Network for Quality Assurance in Higher Education;

1.24. **EQAR** - European Quality Assurance Register for Higher Education;

1.25. **USDE** - United States Department of Education;

1.26. **CHEA** - Council for Higher Education Accreditation;

1.27. **ENIC** - European Network of Information Centres;

1.28. **NARIC** - National Academic Recognition Information Centre;

1.29. **ESG** - European Standards and Guidelines for Quality Assurance in the European Higher Education Area;

1.30. **ECTS -** European Credit Transfer and Accumulation System, which assigns credits to course components, based on the workload of students required to achieve the objectives of a particular field of study.

1.31. **AC** - Appeals Commission.

Article 4
Principles

1. The basic principles on which the work of KAA is based are:

1.1. Equality - equal treatment and equal opportunities for all institutions of higher education, unless otherwise provided by a special Law on the protection of the public interest as an area of national priority;

1.2. Ethics and integrity - KAA ensures that all evaluation and quality control processes, which lead to a formal result, are credible and professional processes based on values such as: integrity, honesty, truth, ethical conduct, transparency, respect for others, trust, accountability, impartiality, equality, justice and social justice, objectivity, academic freedom;

1.3. Inclusiveness - active involvement of relevant actors in drafting the regulations, procedures and standards of accreditation and re-accreditation, monitoring and in continuous development of dialogue with higher education institutions, students and industry, on issues aimed at developing the quality assurance system in Kosovo;

1.4. Foreseeability- KAA shall, in its activity, be ensured that there shall not be infringed the legal security and foreseeability;

1.5. Application of European standards - KAA ensures that its standards and procedures for the quality of higher education in Kosovo in all its processes, are in line with European standards and guidelines for quality assurance in higher education (European Standards and Guidelines for Quality Assurance in Higher Education - ESG).

CHAPTER II
GENERAL PROVISIONS

Article 5
Status of the Kosovo Accreditation Agency (KAA)

Kosovo Accreditation Agency (KAA) is a regulatory agency for ensuring the quality in higher education which operates in the entire territory of the Republic of Kosovo.

Article 6
Duties and responsibilities of the Kosovo Accreditation Agency (KAA)

1. KAA duties and responsibilities shall be:

1.1. accreditation and re-accreditation of institutions and programmes of higher education institutions (hereinafter: “HEI”);

1.2. accreditation of new institutions of higher education and their study programmes including accreditation and re-accreditation of branches of institutions and programmes offered in branches;

1.3. accreditation of new programmes in accredited institutions of higher education;

1.4. accreditation, re-accreditation and validation of programmes including online and distance programmes;

1.5. accreditation, re-accreditation and validation of programmes in foreign languages, joint programmes and dual diploma programmes;

1.6. validation of internationally accredited institutions and programmes;

1.7. continuous quality control and advancement in accredited institutions and their study programmes;

1.8. monitoring of higher education institutions and their programmes for the implementation of accreditation criteria;-

1.9. withdrawal or revocation of the accreditation of a higher education institution or study programme according to the procedures defined by this Law;

1.10. cooperation with the Ministry regarding the issuance, amendment, restriction or revocation of licenses;

1.11. drafting and approval of rule and procedures, criteria, forms of accreditation, re-accreditation, validation, external evaluation, quality control, monitoring and selection of international experts;

1.12. inclusion and close cooperation with the academic community as well as a wide social dialogue with all stakeholders in the process of drafting the rules, procedures and standards for accreditation, re-accreditation, validation, external evaluation, quality control and monitoring;

1.13. application for periodic external evaluation of KAA by international institutions for quality assurance in higher education;

1.14. budget planning and execution in accordance with the Law on Public Financial Management and Accountability and legislation into force;

1.15. drafting and development of the strategic plan of KAA;

1.16. drafting of sub-legal acts on internal organization and systematization of job positions in KAA according to the legislation into force;

1.17. cooperation with the Ministry regarding the implementation of higher education policies for quality assurance;

1.18. cooperation with the Ministry regarding the harmonization of the legal deadlines of the accreditation and licensing process;

1.19. implementation of the nomenclature of qualifications in higher education in accordance with the legislation into force;

1.20. undertaking activities in compliance with European and international standards for accreditation, re-accreditation, monitoring, validation in order to ensure quality in higher education in Kosovo.

Article 7
Reporting and publications of the KAA

1. KAA shall draft an annual report on accreditation process and quality assurance in higher education, which is submitted to the Ministry and the Assembly.

2. KAA compiles annual thematic analysis of quality assurance trends in higher education. In certain cases, the KAA may design thematic analyses for certain study fields.

3. KAA publishes policies, regulations, documents, guidelines, standards and criteria for the evaluation process, accreditation, quality control, monitoring, validation, reports and other quality assurance processes on its official website.

4. The KAA shall be ensured that the parties affected by the KAA decisions are informed in line with the legal deadlines determined in the legislation into force.

5. KAA shall inform the Ministry about the taken decisions which are related to accreditation, re-accreditation and validation.

Article 8
KAA organization

1. The organizational structure of KAA consists of:

1.1. State council of quality (SCQ);

1.2. General Director and administration of KAA;-

1.3. Appeals Commission (AC).

Article 9
State Council of Quality

1. State Council of Quality is a collegial decision-making body for ensuring the quality in higher education, which is independent in exercising its competencies determined in this Law.

2. The State Council of Quality consists of nine (9) voting members, as follows:

2.1. five (5) members from the academic staff;

2.2. one (1) member among the students;

2.3. three (3) international members.

3. Non-voting members of the SCQ are:

3.1. General Director of KAA, ex officio;

3.2. two (2) industry representative.

4. A higher education institution can not have more than three (3) SCQ voting members.

5. During the exercise of the mandate, the SCQ local member according to sub-paragraphs 2.1 and 2.2 of this Article, shall not have the right to move from a HEI to another HEI.

6. The industry representatives to SCQ shall be appointed by the Minister, after the consultation with the representatives of the respective institutions.

7. The Assembly of the Republic of Kosovo appoints the members of the SCQ upon the proposal of the Ministry and the approval of the Government.

8. According to legislation into force the SCQ composition ensures gender representation.

9. SCQ has at least one (1) local member for each below groups of the study fields:

9.1. human sciences;

9.2. social sciences, justice and economy;

9.3. natural sciences, agriculture and environment;

9.4. medical sciences;

9.5. architecture, engineering and technology.

10. The mandate of SCQ members shall be (4) years, with exception of the student member mandate, which shall be (2) years.

11. SCQ elects the chairperson and vice-chairperson with majority votes of all voting members. Chairperson shall be elected among the ranks of local academic members.

12. After the end of the firs mandate, the SCQ member may be reappointed only for a second mandate, according to the procedure foreseen in this Law.

13. The SCQ constitutive meeting shall be convened by the Minister and shall be chaired by the oldest SCQ member until the election of the chairperson.

Article 10
Duties and responsibilities of the chairperson of the SCQ

1. Duties and responsibilities of the chairperson of the SCQ shall be:

1.1. leads the work of SCQ;

1.2. convenes and chairs meetings of SCQ;

1.3. signs decisions, rules and procedures as well as other work documents adopted by SCQ;

1.4. represents the SCQ in activities home and abroad;

1.5. coordinates cooperation and serves as liaison between the KAA and Ministry;

1.6. performs other tasks that fall under the SCQ responsibility but that are not defined by this Law.

2. In the absence of the chairperson of SCQ, the duties and responsibilities foreseen in paragraph 1 of this Article shall be exercised by vice-chairperson according to the procedures determined in the internal regulation adopted by SCQ.

Article 11
Duties and responsibilities of the SCQ

1. Duties and responsibilities of the SCQ are as follows:

1.1. reviews and decides on the applications of HEI for accreditation, re-accreditation, institutional validation and study programmes according to the procedures and criteria provided for in this Law;

1.2. decides on accreditation, re-accreditation, institutional validation as well as study programmes;

1.3. reviews and takes decisions regarding the monitoring reports sent by the KAA administration;

1.4. reviews and takes decision on the reports of post-accreditation procedures;

1.5. decides on the withdrawal of accreditation of a higher education institution and/or its study programmes, in case there is ascertained the violation of criteria based on which the accreditation is awarded;

1.6. reviews and decides on the various requests of HEIs on issues related to quality assurance and accreditation, validation and monitoring;

1.7. upon the request of HEI, SCQ engages a superior expertise regarding the previous decision based on the external evaluation by the international experts;

1.7.1. superior expertise shall be conducted by international experts from the list approved by SCQ;

1.8. approves the accreditation standards, quality assurance procedures and external evaluation criteria of HEIs prepared by KAA;

1.9. drafts and approves the statute of the KAA, the internal quality assurance guide, regulations and other documents necessary for the functioning of the KAA;

1.10. on the proposal of the KAA Director, reviews and decides on the list of international accreditation experts;

1.11. reports for its work on regular and ad-hoc basis before the relevant local authorities;

1.12. provides relevant information for the Appeals Commission of KAA;

1.13. approves the annual work plan of KAA;

1.14. promotes and advances the higher education quality in the Republic of Kosovo;

1.15. drafts and approves its work regulation;

1.16. decides for the time limits and the cycle of institutions accreditation and HEI programmes.

Article 12
Criteria for selection of SCQ members

1. Candidates for SCQ members should meet the following criteria:

1.1. local members to be citizens of the Republic of Kosovo;

1.2. members from the academic staff must have the degree of Doctor of Science, internationally recognized research experience, relevant academic experience at least five (5) years and experience in the field of quality assurance in higher education;

1.3. in case the local members are graduates outside Kosovo, to have a diploma recognition in the national centre for recognition, equivalence and academic information ENIC-NARIC;

1.4. to have considerable knowledge about the functioning of higher education and quality assurance in Kosovo which is evidenced through engagement or participation in relevant activities, projects, positions;

1.5. to have considerable knowledge, experience for the functioning of the European Higher Education Area and international quality assurance standards in higher education;

1.6. member from amongst the students shall be attending Master or Doctoral studies in the HEIs of Kosovo;

1.7. three (3) international members must be experts in the field of quality assurance in higher education with academic experience, who are not and have not been citizens of the Republic of Kosovo and engaged in any higher education institution in Kosovo in last five (5) years.

Article 13
Incompatibility to be a member of the SCQ

1. SCQ member cannot be the person that:

1.1. has exercised a political post in Kosovo in the last three (3) years;

1.2. has been founder, co-founder, shareholder and member of the Steering Council in HEI in the last five (5) years;

1.3. has current engagement in more than one higher education institution in Kosovo and abroad;

1.4. has been punished by the Court final decision for a criminal offense punishable by imprisonment more than six (6) months according to Criminal Code of the Republic of Kosovo;

1.5. it is ascertained that there is a conflict of interest according to the legislation in force.

Article 14
Proposals for SCQ members

1. The Ministry publishes the public call for the nomination of SCQ local members.

2. For the selection of international members, the Ministry calls on international development partners and agencies of states that are full members of ENQA / EQAR and the US Department of Education to nominate experts from their respective countries who meet conditions required by this Law.

3. Ministry shall, by sub-legal act, determine the procedures and criteria for the proposals for SCQ members.

Article 15
Commission for reviewing the documentation of applicants for SCQ members

1. The Ministry establishes the temporary Commission for the review of applications for SCQ members.

2. The temporary Commission according to paragraph 1 of this Article shall have the following composition:

2.1. representative from the Ministry, one (1) member;

2.2. representative- an academic from the Academy of Science and Arts of Kosovo, one (1) member;

2.3. representative from the Rectors conference, one (1) member;

2.4. representative of an active international development partner in the education field in Kosovo, one (1) member;

2.5. representatives from civil society active in the education field, one (1) member.

3. The Commission reviews the applications and prepares the short list of candidates, which should be at least twice the number of members elected respecting the fields and gender composition and recommends it to the Minister.

Article 16
Selection of local SCQ members

1. From the shortlist proposed by the Temporary Commission, the Minister selects six (6) local members.

2. Three (3) international candidates for SCQ members shall be added to the list of local candidate members.

3. After obtaining the personal written consent of each of the selected candidates, the Minister forwards the list to the Government for approval.

4. The Government proceeds to the Assembly the candidates to be appointed SCQ members.

Article 17
Procedure for dismissal of SCQ members

1. A SCQ member shall be dismissed if:

1.1. finding that he/she has been appointed a member of the SCQ based on illegal documentation;

1.2. he/she has been punished by the Court final decision for a criminal offense punishable by imprisonment more than six (6) months according to Criminal Code of the Republic of Kosovo;

1.3. physical or mental disability ascertained by the medical commission;

1.4. abuse of official duty;

1.5. finding that there is a conflict of interest during the exercise of the function as a member of the SCQ;

1.6. refusal to perform the duties defined by the rules of procedure of the SCQ;

1.7. absence without reason based more than twice in a row in SCQ meetings.

2. Procedure for dismissal of the SCQ member can be initiated by the Assembly or Ministry.

3. For the dismissal of the SCQ member, the Minister shall, within fifteen (15) days, establish a temporary Commission composed of the:

3.1. representative from the Ministry, one (1) member;

3.2. representative- an academic from the Academy of Science and Arts of Kosovo, one (1) member;

3.3. representative from the Rectors conference, one (1) member;

3.4. representative of an active international development partner in the field of higher education in Kosovo, one (1) member;

3.5. representatives from civil society dealing with higher education, one (1) member.

4. The Commission submits to the Minister a report and a proposal for the appropriate measures related to the dismissal initiative.

5. The Minister makes a decision based on the proposal of the Commission.

6. Government proceeds to the Assembly for dismissal the SCQ member/s.

Article 18
General Director of KAA

1. The Agency is led by the General Director.

2. The General Director is the chief administrative official of the KAA.

Article 19
Election of the General Director of the Kosovo Accreditation Agency

1. The General Director is elected based on the respective legislation in force.

2. In addition to the criteria set by the legislation in force, additional criteria which apply to the election of the director of the KAA are:

2.1. at least three (3) years of specific work experience with quality assessment and assurance mechanisms and instruments;

2.2. knowledge and expertise for the field of quality assurance of higher education in the Republic of Kosovo;

2.3. knowledge of the European quality assurance system and European standards and guidelines for quality assurance in higher education (ESG).

3. The mandate of the agency director is determined based on the legislation in force.

Article 20
Duties and responsibilities of the General Director of KAA

1. The General Director has the following duties and responsibilities:

1.1. leads and organizes the work of the Agency and advises the Minister on accreditation and quality assurance issues;

1.2. coordinates the work with the Ministry and other relevant institutions;

1.3. coordinates the activities with the SCQ and the Appeals Commission and implements their decisions;

1.4. coordinates the drafting of the Strategic Plan and the work plan of the KAA and delivers them to the SCQ for approval;

1.5. drafts the annual performance report of the Agency for the Ministry and Government;

1.6. organizes all actions and processes of external evaluation for the accreditation of higher education institutions and their study programmes, including accreditation visits, monitoring with external experts;

1.7. compiles reports in the framework of quality monitoring and delivers them to the SCQ for review;

1.8. submits and presents the external evaluation reports to the SCQ for approval;

1.9. compiles and updates the list of external evaluators and proposes them to the SCQ for annual approval;

1.10. oversees the recruitment and evaluation of the work of the Agency staff;

1.11. represents the agency home and abroad, coordinates the application in relevant international organizations and agencies and enters into agreements with other local and international institutions, in accordance with the law into force;

1.12. manages the budget of the Agency and is responsible for the way of expending it;

1.13. participates in activities aimed at increasing the international cooperation of KAA;

1.14. cooperates with the Ministry on issues related to the licensing and inspection process of higher education accredited providers;

1.15. coordinates thematic analyses and informs the Ministry and other relevant authorities on the state of the quality assurance system in higher education institutions in Kosovo.

Article 21
Administration of KAA

Tasks, job descriptions and organogram shall be determined by the regulation on internal organization and systematization of KAA job positions, according to the legislation into force.

Article 22
Appeals Commission

1. The Appeals Commission is a body of the KAA, which handles complaints filed by higher education institutions against SCQ decisions.

2. AC consists of five (5) permanent members.

3. AC has as subject of review only the procedural aspect of the accreditation process, monitoring related to the relevant decision.
4. AC can support or reject the complaint, the submission of the HEI.

5. AC will not consider information or evidence that was not presented at the time of the first decision.

6. AC decides by majority votes of its members.

7. If the AC finds that the complaint of the institution is ungrounded, it makes a decision to reject the complaint. In this case, the AC decisions are final and the parties dissatisfied with their decision, address to the department for administrative matters within the competent court.

8. If the AC finds that the complaint filed by the institution is grounded, then it refers the matter to the SCQ for reconsideration and final decision.

9. SCQ makes the final decision regarding the assigned case.

10. The party dissatisfied with the final decision of the SCQ addresses the competent court for administrative dispute.

11. AC handles the complaint within thirty (30) working days from the date of its receipt.

11.1. the appeal is filed within thirty (30) days from the day the party was notified of the SCQ decision;

11.2. AC may double the deadline for reviewing the complaint after prior notice to the parties.

12. The AC work is helped by the KAA administration.

13. AC can request additional information from KAA.

14. The Appeals Commission during the handling of the complaint, has the right to invite the party who has filed a complaint for a hearing.

15. AC compiles and adopts the work regulation which is published on the KAA web page.

Article 23
Appointment of the Appeals Commission members

1. AC members are elected based of a public competition opened by the KAA.

2. All persons who meet the following criteria shall have the right to apply for AC:

2.1. three (3) AC members should be lawyers, while two (2) members should be university professors;

2.2. also, they must prove knowledge of the higher education system in the Republic of Kosovo and knowledge of quality assurance;

2.3. lawyer members must have at least five (5) years of professional experience.

3. The AC members are elected for a four-year mandate, with the possibility of being elected for another mandate.

4. KAA establishes a temporary commission who make the selection of AC members from the applicants' ranks.

5. The selection commission is composed of:

5.1. representative from the Ministry- one (1) member, the chairperson;

5.2. representative from the KAA, one (1) member;

5.3. representative from the Rectors conference- one (1) member;

5.4. full professor from the Law Faculty - one (1) member;

5.5. representative of a development partner in the field of higher education– one (1) member.

Article 24
Dismissal of the Appeals Commission members

1. AC members are dismissed in the following cases:

1.1. physical or mental inability to exercise their function;

1.2. it is found that there is a conflict of interest;

1.3. he/she is convicted of a criminal offense with effective imprisonment;

1.4. abuse of official duty;

1.5. refusal to perform the duties defined by the work regulation;

1.6. absent more than twice in a row in meetings of the AC without reasonable justification.

2. Procedure for dismissal of AC member can be initiated by the Minister, SCQ or the majority of AC members.

3. For the dismissal of the AC member, the KAA establishes a temporary Commission composed of the:

3.1. representative from the Ministry, one (1) member;

3.2. representative from the KAA, one (1) member;

3.3. representative from the Rectors conference, one (1) member;

3.4. full professor from the Law Faculty - one (1) member;

3.5. representative of an active international development partner in the field of higher education in Kosovo, one (1) member.

4. The Commission makes a decision regarding the proposal for dismissal by a majority vote of all its members.

5. The dismissed member of AC has the right to appeal according to the legislation in force.

CHAPTER III
ACCREDITATION

Article 25
Application for accreditation

1. Higher education institutions functioning in the Republic of Kosovo and offering programmes, including distance and online programmes, leading to an academic degree or a professional degree, are obliged to apply for accreditation/validation in the KAA.

2. Only the accredited provider of higher education has the right to award the degrees and diplomas specified in the accreditation decision.

3. Accreditation of an HEI may be required by:

3.1. the institution itself, or two or more local and international institutions of higher education;

3.2. the Ministry responsible for higher education.

4. Institutional accreditation, accreditation of programmes and validation by the KAA, as well as licensing by the Ministry shall be a precondition for the provision of study programmes and the exercise of academic activity in higher education.

Article 26
Accreditation types

1. Higher education institutions compete for these accreditation types:

1.1. institutional accreditation and re-accreditation;

1.2. accreditation and re-accreditation of the study programme;

1.3. institutional accreditation and re-accreditation of the branch and of the study programmes that are offered in that branch;

1.4. accreditation of distance programmes and online study programmes;

1.5. validation of international accreditations, recognized by member agencies of EQAR, CHEA and USDE, through an evaluation process by KAA.

Article 27
The right to accreditation

1. All higher education institutions, public and private, operating in Kosovo and offering study programmes leading to an academic and/or professional degree may be candidates for accreditation.

2. The accredited institution of higher education is subject to re-accreditation on a periodic basis in accordance with the duration set out in the decision of the KAA.

3. In case the public institutions of higher education apply for accreditation or re-accreditation of any study programme which, by a decision of the Government or based on any state strategic document, is assessed as a programme of national interest, it may be granted a conditional accreditation by the SCQ for a period of one (1) year even if it does not meet any of the accreditation standards.

4. The levels of study programmes for which accreditation is required are defined by the Law on Higher Education and the National Qualifications Framework.

5. Accreditation of institutions and programmes of applied and professional sciences:

5.1. professional programmes, applied science programmes, security and defence programmes and so-called short programmes at post-secondary levels estimated with ECTS credits can be offered by applied science institutions, security and defence educational institutions and HEIs;

5.2. institutions of Applied Sciences may also offer academic degrees, as defined by this Law;

5.3. the content of the programme (curriculum) in higher vocational schools and institutions of applied sciences should lead to the achievement of a professional diploma qualification of level 5 or 6 according to the National Qualifications Framework;

5.4. professional and applied science qualifications must be supported by a field of industry, which will prove that these qualifications are useful and recognized in that particular field of industry;

5.5. qualifications must have a structure which clearly reflects the National Qualifications Framework and is in line with the European Qualifications Framework.

Article 28
Accreditation procedures, criteria and standards

1. KAA drafts and reviews accreditation standards, procedures and regulations.

2. Procedures and regulations define the framework of conditions that will be met by HEIs and institutions of applied sciences, professional for the provision of quality services in higher education.

3. KAA criteria, procedures and standards are based on European Quality Assurance Standards and Guidelines and international good practices.

4. Accreditation standards are laid down in the form of rules which define the required level of quality of services to be achieved by the institution of higher education.

5. Accreditation procedures, criteria and standards for institutions of higher education and institutions of applied sciences are determined by internal acts issued and approved by the SCQ.

6. Accreditation standards are applied in all quality assurance processes, including the evaluation of the higher education institution, the study programme, the branch and the recognition of accreditation.

7. New accreditation standards shall enter into force one (1) year after their approval by SCQ.

8. New accreditation standards shall not be applied in the existing cycle of the accreditation process and in programmes that are accredited.

9. Study programme of all levels BA/BSc, MA/MSc and PhD must have a number of providers in proportion with the number of programme ECTS.

10. The respective Ministry for Education shall issue an administrative instruction for the programme providers from paragraph 9 of this Article, for study programmes of non-majority communities.

11. Study programme providers must have at least relevant scientific degrees and relevant titles acquired in compliance with the provisions of the Law on Higher Education.

12. Scientific degrees or other professional, scientific and artistic achievements, including the pedagogical experience of the programme provider must be in compliance with the scientific profile or certain curricular contents of the study programme.

13. In realization of a study programme, beside the providers according to paragraphs 9, 11 and 12 of this Article, there are engaged teachers who shall have at least relevant scientific degrees and relevant titles acquired in compliance with the provisions of the Law on Higher Education.

14. Study programme providers and teachers according to paragraph 13 of this Article are engaged in full employment relationship with the HEI through the foreseen transparent, competitive and meritocratic procedures in compliance with the legal provisions into force.

15. The respective Ministry for Education shall issue an administrative instruction to determine the manner of compatibility assessment of programme provider with the programme field the accreditation is applied to.

16. Administrative instruction according to paragraph 15 of this Article shall analyse the compatibility of the programme provider taking into consideration the scientific degrees,

professional, scientific and artistic achievements as well as pedagogical experience in relation to all scientific fields.

17. Detailing and diversification of criteria for the providers of study programme shall be carried out by SCQ by respecting the specifics of study fields and guaranteeing the academic mobility.

18. Criteria for the providers of study programmes from paragraphs 9, 11 and 12 of this Article shall apply to professional programmes which lead to obtaining of a professional diploma. This field shall be regulated by a special Law.

19. Standards drafted by KAA shall be adopted in SCQ.

Article 29
Areas of standards for accreditation

1. Areas of standards for institutional accreditation, re-accreditation, include:

1.1. institution mission/study programme and institutional objectives, including strategic planning, governance and administration;

1.2. resources and financial management;

1.3. academic integrity, responsibility and accountability;

1.4. quality management;

1.5. teaching and learning;

1.6. research;

1.7. staff, employment processes and professional development;

1.8. student administration and support services;

1.9. learning environment, equipment and resources;

1.10. institutional cooperation and liaison with the labour market;

1.11. internationalization; and

1.12. other areas of standards approved by the SCQ.

2. Areas of standards for accreditation, re-accreditation of study programmes should include:

2.1. study programme mission, objectives, administration and resources;

2.2. quality management;

2.3. academic staff;

2.4. research;

2.5. students;

2.6. curricula and teaching plans;

2.7. learning environment, equipment and resources;

2.8. other areas of standards approved by the SCQ.

3. Accreditation of a higher education institution and/or its study programmes are based on the achievements of the substantial level of all standards set by the KAA in relevant sub-legal and administrative acts.

4. KAA ensures that the process of drafting these procedures involves relevant stakeholders, in particular higher education institutions and students.

5. KAA should ensure that accreditation procedures, criteria and standards support the development of quality assurance by HEIs.

Article 30
Deadlines and application manner for accreditation

1. The higher education institution applies for accreditation, re-accreditation, institutional or programme validation by submitting the application to the KAA by July 31st of the previous year.

2. In the case of applications for institutional accreditation, HEIs must provide evidence from the competent authorities that the founders and senior management have not been convicted by a final decision for committing a criminal offense intentionally in the last five (5) years.

3. The deadline for submitting the application for accreditation, re-accreditation, validation and declaration of academic staff is July 1 - 31 of each calendar year.

4. KAA must handle the request of the institution for accreditation, re-accreditation and validation and respond to the institution within one year from the deadline for receipt of the application.

5. KAA will handle the request for accreditation, re-accreditation, validation according to the deadlines set with the exception of:

5.1. natural disasters;

5.2. national and international emergent situations;

5.3. in certain circumstances, based on the evaluation of SCQ, KAA can administer aspects of the accreditation process even in electronic form (online).

6. KAA drafts and adopts guidelines and procedures for online evaluation.

7. Application format for accreditation, documentation and procedures should be according to the KAA requests, set out in the Accreditation Manual.

8. Higher education institution shall have the right to withdraw from the accreditation process until before the submission of self-assessment report. In case of withdrawal or refusal to undergo the accreditation process after the submission of the self-assessment report, it shall be considered that the application for accreditation has been rejected.

Article 31
Internal evaluation

1. Prior to the implementation of the external evaluation, within the accreditation and re-accreditation process, HEIs are obliged to organize an internal consultation process and draft a self-evaluation report.

2. During the internal evaluation process, the HEI ensures the inclusion of all structures and relevant stakeholders.

3. The self-assessment report shall be submitted to KAA fifteen (15) working days after receiving the notification from KAA for receipt of the application.

4. The self-assessment report is drafted based on internal acts and the KAA Accreditation Manual.

Article 32
External evaluation

1. KAA organizes the accreditation process for higher education institutions on the basis of an external evaluation, which is carried out by international accreditation experts consisting of:

1.1. two (2) evaluators up to seven (7) external evaluators, depending on the number of study programmes being evaluated;

1.2. at least one (1) student;

1.3. evaluators from sub-paragraph 1.1 shall have the relevant academic and professional degree in the programme field which is undergoing the assessment process.

2. External evaluation cannot be performed without reviewing a self-evaluation report prepared by the institution under evaluation according to the format required by KAA.

3. Carrying out external evaluation means organizing a visit with international accreditation experts.

4. The accreditation visit is structured in such a way as to meet the requirements of the accreditation process.

5. The result of the visit should be the drafting of an external evaluation report by international accreditation experts, based on the criteria and standards set by the KAA, which should ascertain whether the institution under evaluation meets the accreditation standards.

6. The external evaluation report contains the recommendation for accreditation or refusal of accreditation.

7. The external evaluation report contains the number of students per academic year and the duration of accreditation.

Article 33
External evaluators

1. The tasks of external evaluators are:

1.1. review of documents submitted by the institution before the visit to the institution;

1.2. carrying out the visit to the higher education institution arranged by KAA;

1.3. drafting the evaluation draft report after the site visit;

1.4. review of comments submitted by the institution on the factual situation recorded in the draft report;

1.5. finalization of the external evaluation report for the higher education institution;

1.6. the final report should contain a recommendation on the number of students who can enrol for one academic year in the relevant programme and the duration of accreditation;

1.7. submission of the external evaluation report to the KAA.

Article 34
Decision for accreditation

1. SCQ reviews the HEI application and the external evaluation report and based on them it shall take a respective decision regarding the accreditation, re-accreditation and validation.

2. Upon decision on accreditation, re-accreditation or validation, the SCQ decides on the conditions and duration of accreditation.

3. The decision on accreditation, re-accreditation determines:

3.1. accredited programmes;

3.2. duration of accreditation;

3.3. programme naming;

3.4. naming the study degree;

3.5. number of credits earned (ECTS);

3.6. number of students enrolled for one academic year;

3.7. programmes providers and level of studies.

4. The transfer of students can be done within the allowed quota of students in the decision for accreditation of the programme.

5. The transfer of students can only be done in programmes that have compliance in programme content of at least seventy percent (70%).

6. The defined number of students is applied for all years of study for the accreditation period.

7. KAA notifies the Ministry in writing and forwards all copies of decisions for accreditation/re-accreditation and validation.

8. If an institution fails to be re-accredited at the institutional level, this will result in organizing another re-accreditation process after one (1) year.

9. The institution that fails for the first time to obtain institutional re-accreditation, is prohibited to enrol new students for the respective academic year, while it is allowed to continue with the current enrolled students until the second evaluation defined in paragraph 6 of this Article.

10. If the higher education institution fails to be re-accredited at the institutional level for the second time in a row, the KAA will notify the Ministry of further procedures.
11. The institution which even after the second evaluation does not receive institutional accreditation, is obliged to ensure the completion of the studies for all enrolled students.

12. In case of impossibility of completing the studies according to paragraph 11 of this Article, the respective HEI is obliged to ensure the transfer of the students to HEIs with which it has agreements for the transfer of the students upon the dissolution.

13. In compliance with paragraph 5 of this Article, SCQ shall issue a decision on the compliance of the quotes of HEI that admits the students transferred only from the dissolved HEI.

14. HEI which fails in the accreditation process, is obliged to provide the students and the accepting institution of the transferred students with all the relevant documentation.

Article 35
Duration of accreditation

1. The duration of institutional accreditation is three (3) years. The duration of institutional accreditation is three (3) or five (5) years.

2. The duration of the programme accreditation is three (3) years. The duration of programme re-accreditation is three (3) or five (5) years.

Article 36
Costs of the accreditation, re-accreditation and validation process

1. The higher education institution bears the cost for the process of institutional accreditation and re-accreditation and study programmes, branch and accreditation validation.

2. Accreditation, re-accreditation and validation tariffs shall be as follows:

2.1. five hundred (500) Euro for application for new programme accreditation and validation;

2.2. one thousand (1.000) Euro for application for institutional accreditation of new institution;

2.3. three thousand and three hundred (3.300) Euro for international expert engaged for accreditation or re-accreditation;

2.4. two thousand and four hundred (2.400) Euro for student expert engaged for accreditation or re-accreditation.

3. Costs for superior expertise shall be paid by the HEIs as follows:

3.1. for superior expertise at programme level in the amount of ten thousand (10.000) Euro;

3.2. for superior expertise at institutional level in the amount of twenty thousand (20.000) Euro.

4. Compensation for the SCQ and AC members shall be determined according to the legislation into force.

Article 37
Obligations of higher education institutions after accreditation

1. Higher education institution is obliged to adhere to the accreditation conditions provided in the report of external evaluators and in the SCQ decision.

2. The institution is obliged to submit to the KAA, the plan for the implementation of recommendations, according to the time limits and the format determined by the KAA.

3. Higher education institutions are obliged to notify the KAA in writing of any significant changes, including:

3.1. changing the name of the institution;

3.2. changing the headquarter and location;

3.3. changing the ownership of the institution;

3.4. statute of the institution after approval by the Ministry/Assembly of Kosovo;

3.5. changes to contracts with academic staff;

3.6. the change of the study programme more than thirty percent (30%).

Article 38
Withdrawal of accreditation

1. KAA withdraws the accreditation given in cases when:

1.1. it is found that the conditions given upon accreditation have been violated;

1.2. it is found that the institution has submitted false information and documentation, which has affected the granting of accreditation;

1.3. the monitoring report finds that the institution no longer meets the required quality criteria based on which the accreditation has been given;

1.4. the follow-up procedure report by international external evaluators finds that the accreditation recommendations have not been implemented according to the deadlines set out in the report;

1.5. it is found that the factual situation in the institution of higher education is severely damaged in terms of quality;

1.6. it is found the exceeding of the student quotas defined in the decision on accreditation.

2. Any ascertainment, finding or relevant report according to the provisions of this Article, should be sent to HEIs for comment or provision of relevant evidence.

3. In each case, the higher education institution has the right to be heard and provide additional clarifications to the SCQ, before making the decision to withdraw the accreditation.

Article 39
Recognition of international accreditation

1. KAA handles and decides on applications for recognition of international accreditation of higher education institutions which operate within the territory of the Republic of Kosovo and their diplomas are subject to verification by MESTI.

2. Application for recognition of international accreditation is required in the following cases:

2.1. if a higher education institution requires external evaluation at the institutional level and/or study programmes from an international quality assurance agency;

2.2. if an institution accredited by KAA, in cooperation with any international partner university, decides to bring to Kosovo study programmes which in their country of origin are accredited by the respective Agency for Accreditation.

3. In all cases, the accreditation recognition is made only if the relevant accreditation agencies are full members of EQAR or the US Department of Education or Council for Higher Education Accreditation (CHEA) as defined by this Law.

4. The institution that submits a request for validation must obtain prior approval from the SCQ, through which the minimum criteria set by the legislation into force are met and eventual evaluation criteria which are set by the KAA through its guidelines and standards.

Article 40
Accreditation recognition procedures and criteria

1. In case of the institution's request to undergo the process of external evaluation by an international accreditation agency according to this law, the following procedures are applied, among others:

1.1. the institution should consult in advance KAA, for the terms of reference and the methodology of external evaluation;

1.2. the terms of reference and the external evaluation methodology by the international accreditation agency should be drafted in full compliance with the ESG or American standards;

1.3. the external evaluation methodology by the international accreditation agency may include criteria, standards and indicators complementary to the domestic ones, but in no way can they contradict the legislation of Kosovo;

1.4. the higher education institution which intends to be subject to external evaluation by the international accreditation agency, can start the external evaluation procedure only after submitting to the KAA the terms of reference and the methodology of external evaluation in order to prove that they are in accordance with domestic legislation;

1.5. only if the SCQ decides on the approval of the terms of reference, the higher education institution has the right to proceed with the external evaluation procedure with the international accreditation agency;

1.6. the evaluation report and the decision of the international accreditation agency for the external evaluation of the institution are sent to the SCQ;

1.7. if the SCQ finds that the external evaluation report and the decision are in full compliance with domestic legislation, it decides on the recognition of accreditation;
1.8. KAA publishes on its website the terms of reference, the methodology of external evaluation, the decision of the international accreditation agency and the decision of the SCQ for recognition of accreditation for the respective institution;

1.9. the detailed procedure for external evaluation by the international accreditation agency is defined in a special regulation and is published on the official website of the KAA.

2. If an institution accredited by KAA, in cooperation with any international partner university,

decides to bring to Kosovo study programmes which in their country of origin are accredited by the relevant accreditation agency, the following procedures are applied, among others:

2.1. the higher education institution must submit to the KAA the decision for accreditation of the programme by the international accreditation agency from the country of origin;

2.2. cooperation agreement and details of implementation of that agreement in Kosovo;

2.3. submitting an institutional and programme self-assessment report which elaborates the curriculum, the form of programme delivery, the academic staff and the quality management.

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3. The format and detailed procedure of this process is determined by internal acts of the KAA.

CHAPTER IV
QUALITY CONTROL AND MONITORING

Article 41
Quality control and monitoring of standards compliance

1. Quality control aims to ensure that the established quality standards and criteria are being met by accredited institutions.

2. Quality control in administrative aspect shall be conducted by the KAA staff through the monitoring process according to this Law by drafting the relevant report for SCQ.

Article 42
Monitoring

1. Monitoring aims to ensure that the minimum criteria are met by HEIs throughout the entire accreditation period.

2. KAA may at any time monitor HEI and their study programmes.

3. Monitoring is performed by KAA staff.

4. The cost of the monitoring process is covered by the KAA.

5. The monitoring process is performed at least once in an academic year.

6. For every monitoring there is drafted a report which shall be submitted for review to the SCQ.

7. In case of failure of HEI to meet the minimum criteria, the SCQ has the right to withdraw accreditation, according to Article 38 of this Law.

Article 43
Monitoring forms

1. KAA organizes these forms of monitoring:

1.1. with or without warnings monitoring;

1.2. general monitoring;

1.3. monitoring according to special standards;

1.4. special post-accreditation monitoring of HEI institutions and programmes in order to verify the fulfilment of the relevant recommendations of external experts and the plans of HEIs for the implementation of these recommendations;

1.5. monitoring at the request of the Ministry in accordance with the provisions of this Law;

1.6. monitoring at the request of the HEI;

1.7. ad-hoc monitoring according to the KAA evaluation.

2. Monitoring and quality control in the professional aspect of the field/programmes, and for the purpose of verifying that the recommendations and accreditation conditions specified in the accreditation decision or in the external evaluation report are being met, shall be performed by external international evaluators through a follow-up procedure.

3. If the higher education institution fails to meet the required criteria even after obtaining accreditation, the SCQ has the right to withdraw accreditation as defined in this Law.

Article 44
Post-accreditation procedure

1. The aim of the post-accreditation procedure is to ensure the fulfilment of recommendations of international experts by the HEIs.

2. All HEIs are obliged to submit the plan for implementation of the recommendations to the KAA by September 30.

3. The plan for implementation of the recommendations must clearly define the time limits and the form of implementation of the recommendations.

4. Evaluation of the implementation of the recommendations shall be performed by external international evaluators.

5. The reports of foreign international evaluators are submitted to the SCQ for review.

6. In case of failure of HEIs in fulfilment of recommendations of external international evaluators, SCQ shall have the right to withdraw the accreditation.

Article 45
Rights of higher education institutions

1. Higher education institutions are guaranteed the following rights in external quality assurance processes:

1.1. equal and fair treatment in external evaluation procedures performed by KAA;

1.2. access to procedures and criteria of external quality assurance procedures applied by KAA;

1.3. the right to be heard in all processes undertaken by the KAA that lead to formal results which have legal consequences for HEIs;

1.4. equal right to develop scientific activity and processes of promotion of the academic

staff in accordance with the provisions of this Law and the domestic legislation;

1.5. the right to participate in the drafting and design of quality assurance policies and strategies organized by the KAA;

1.6. the right to appeal based on transparent and professional appeal procedures.

Article 46
Obligations of higher education institutions

1. HEIs implement primary and secondary legislation regulating the field of quality assurance and accreditation in higher education in the Republic of Kosovo.

2. HEIs assure students that their admission and registration in their institution will be only if the institution and their programme has valid accreditation from KAA and is licensed by MESTI.

3. For the purpose of transparency and public information, HEIs publish all SCQ decisions on their websites and licensing/relicensing decisions issued by the Ministry, as well as data on their study programmes, academic staff and other relevant data.

4. Under no circumstances can HEIs start working without first being provided with accreditation and/or institutional re-accreditation, accreditation and/or re-accreditation of the study programme/s, licensing and/or re-licensing of institutions and programmes by the Ministry.

Article 47
Representation of students in quality assurance procedures

1. Students attending higher education institutions in the Republic of Kosovo are guaranteed participation in quality assurance processes.

2. Student representatives are members of all decision-making, executive and advisory bodies of higher education institutions.

3. Student representatives are participants in the drafting of quality assurance policies and strategies by the KAA.

Article 48
Financing of KAA

1. Funds for financing the work of KAA shall be provided from the budget of the Republic of Kosovo, own source revenues, donations and other alternative financings in compliance with the legislation into force.

2. All own source revenues realized by KAA shall be deposited to the state budget and shall be allocated according to the legislation into force.

CHAPTER V
TRANSITIONAL AND FINAL PROVISIONS

Article 49
Transitional provisions

1. The current members of the SCQ continue to exercise their function until the end of their mandate.

2. The Director of KAA continues to exercise the function in the capacity of General Director until the end of the current mandate.

3. The current members of the Appeals Commission continue to exercise their function until the end of their mandate. The Appeals Commission is filled with new members in accordance with the provisions of this Law.

Article 50
Sub-legal acts

1. Sub-legal acts foreseen by this Law shall be issued within six (6) months from the entry into force of this Law.

2. Until the issuance of sub-legal acts foreseen in paragraph 1 of this Article, there shall be implemented the sub-legal acts into force that are not in contradiction with this Law.

Article 51
Entry into force

This Law shall enter into force fifteen (15) days after the publication in the Official Gazette of the Republic of Kosovo.

Law No. 08/L-110
7 June 2023

Promulgated by Decree No. DL-117/2023 dated 22.06.2023 President of the Republic of Kosovo Vjosa Osmani-Sadriu

Republika e Kosovës
Republika Kosova - Republic of Kosovo

Agjencia e Kosovës për Akreditim
Agencija Kosova za Akreditaciju
Kosovo Accreditation Agency

Politika për sigurimin e brendshëm të cilësisë së Agjencisë së Kosovës për Akreditim (AKA)

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1. Hyrje

Agjencia e Kosovës për Akreditim (AKA) është institucion i pavarur, përgjegjës për sigurimin e brendshëm dhe të jashtëm të cilësisë, përfshirë akreditimin, ri/akreditimin, monitorimin, validimin dhe të gjitha proceset tjera të sigurimit të cilësisë në institucionet e arsimit të lartë dhe programet e tyre të studimit në Republikën e Kosovës, sipas praktikave më të mira ndërkombëtare, përfshirë në veçanti standardet përkatëse evropiane në fushën e sigurimit të cilësisë në arsimin e lartë.

Misioni i AKA-së është: "*të mbështesë zhvillimin e cilësisë në institucionet e arsimit të lartë përmes procesit të vlerësimit të jashtëm dhe të sigurojë shoqërinë e Kosovës se cilësia e arsimit të lartë është në nivelin e standardeve ndërkombëtare*".

Qëllimet e Agjencisë së Kosovës për Akreditim (AKA) janë:

- të promovojë, përmirësoj dhe rrisë cilësinë e arsimit të lartë;
- të rrisë transparencën dhe llogaridhënien në sistemin e arsimit të lartë;
- të përmirësojë cilësinë e studimeve në institucionet e arsimit të lartë;
- të inkurajoj përmbajtje inovative në arsimin e lartë;
- të sigurojnë krahasueshmërinë e kualifikimeve nga institucionet e arsimit të lartë të Kosovës me ato të dhëna nga programet ndërkombëtare;
- të zbatojë objektivat për integrimin e Kosovës në Zonën Evropiane të Arsimit të Lartë dhe të kontribuojë në zhvillimin e saj.

Sikurse në sistemin e arsimit të lartë në Kosovë, AKA promovon një kulturë të cilësisë edhe brenda vet institucionit. AKA ndjek një qasje sistematike të përmirësimit të brendshëm të cilësisë për arritjen e qëllimeve dhe objektivave të saj. Kjo përfshinë hartimin dhe zbatimin e një sërë dokumenteve sikurse rregullore, udhëzues dhe politika të tjera përmes së cilave AKA siguron se procedurat e saj të vlerësimit të jashtëm dhe çdo fushë tjetër e veprimit të saj realizohet në mënyrë cilësore dhe janë subjekt i përmirësimit të vazhdueshëm të cilësisë.

Politika për sigurimin e brendshëm të cilësisë së AKA-së vendos dhe përshkruan në mënyrë formale të gjitha veprimet e AKA-së të cilat realizohen me qëllim të zbatimit të sigurimit të brendshëm të cilësisë. Kjo politikë shërben si mekanizmi kryesor i AKA-së për reflektim të brendshëm dhe është në përputhje të plotë me angazhimin e AKA-së për vendosjen e një sistemi të funksionimit i cili është i krahasueshëm me agjencitë evropiane të sigurimit të cilësisë.

2. Sigurimi i brendshëm i cilësisë së AKA-së

Përmirësimi i vazhdueshëm i cilësisë në AKA sigurohet duke aplikuar ciklin PDCA (planifiko – bëj – kontrollo – vepro). Planifikimi dhe realizimi me kohë dhe në mënyrë të rregullt i proceseve të vlerësimit të jashtëm përpos që parashihet me legjislacionin në fuqi, është indikator kyç i performancës së AKA-së. Në anën tjetër, mbledhja e të dhënave përmes kontrollimit dhe monitorimit dhe rishikimi i procedurave të brendshme janë parakusht për përmirësimin e vazhdueshëm të cilësisë. Proceset e vlerësimit të brendshëm kontribuojnë edhe në rritjen e transparencës së veprimeve të AKA-së karshi shoqërisë në përgjithësi. Në këtë drejtim, AKA angazhohet në përfshirjen e akterëve relevant, informacionet kthyese të të cilëve shërbejnë si bazë e rëndësishme për informimin e politikave të AKA-së.

Për AKA-në, zbatimi i planit PDCA nënkupton:

(P) planifikimin e procesit të akreditimit dhe të monitorimit si dhe planifikimin e aktiviteteve të tjera të punës së AKA-së;
(D) realizimin e proceseve të punës në bazë të planifikimit, dokumentimin e realizimit të tyre, dhe mbledhjen e informatave kthyese përmes pyetësorëve apo instrumenteve të tjera kualitative;
(C) analizimin e të dhënave të pyetësorëve dhe vlerësimin e rezultateve të procesit të akreditimit dhe të monitorimit; dhe
(A) hartimin dhe zbatimin e planeve të përmirësimit në bazë të të dhënave të vlerësimit.

AKA harton një raport vjetor të vlerësimit të brendshëm i cili i fillimisht diskutohet mes stafit administrativ të AKA-së. I njëjti raport pastaj dërgohet për shqyrtim tek KSHC.

KSHC mban të paktën një mbledhje në vit e cila i dedikohet diskutimit të rezultateve të vlerësimit të brendshëm.

Raporti vjetor i vlerësimit të brendshëm publikohet në ueb faqen e AKA-së.

Përgjegjës kryesor për të siguruar zbatimin e planit PDCA është Drejtori i AKA-së.

3. Afatet kohore për implementimin e sigurimit të brendshëm të cilësisë

Procesi i sigurimit të brendshëm të cilësisë planifikohet brenda një afati kohor i cili i mundëson AKA-së marrjen e informacioneve kthyese dhe realizimin e përmirësimeve duke mbyllur kështu ciklin e marrjes së informacioneve kthyese (closing the feedback loop).

Planifikimi i procesit të sigurimit të brendshëm të cilësisë realizohet si në vijim:

Më së largu deri në muajin janar, AKA:

- vendos objektivat e procesit të akreditimit dhe monitorimit;
- planifikon procesin e akreditimit dhe monitorimit;

- planifikon punëtoritë, trajnimet dhe aktivitetet për zhvillimin profesional të stafit, tryezat dhe konferencën vjetore, takimet me akterë të jashtëm, vizitat studimore;

Nga muaji shkurt dhe më së largu deri në muajin korrik, AKA:

- zbaton procesin e akreditimit dhe të monitorimit;
- realizon aktivitetet për zhvillimin profesional të stafit;
- përfundon përgatitjet për mbajtjen e tryezave/debateve/konferencën vjetore/takimeve me akterët relevant;

Nga muaji korrik dhe më së largu deri në muajin shtator, AKA:

- mbledh të dhënat përmes pyetësorëve me akterë për procesin e akreditimit dhe të monitorimit;
- bën vlerësimin e performancës së stafit administrativ;
- harton raportin e vlerësimit të brendshëm dhe planet për përmirësim;

Nga muaji tetor dhe më së largu deri në muajin dhjetor, AKA:

- zbaton përmirësimet e nevojshme përmes rishikimit të procedurave apo proceseve të akreditimit dhe të monitorimit;
- standardizon praktikat e mira të identifikuara gjatë procesit të akreditimit dhe të monitorimit;
- përgatitet për planin e radhës së punës.

4. Plani vjetor i punës

Në bazë të planit strategjik, AKA harton plane vjetore të punës të cilat përpos punëve rutinë përfshijnë aktivitete të cilat hyjnë në funksion të përmbushjes së objektivave strategjike të AKA-së. Planifikimi vjetor i punës në AKA përfshinë:

- vendosja e objektivave të procesit të akreditimit dhe të monitorimit – nënkupton vendosjen e indikatorëve të cilësisë të cilat kanë për synim përmirësimin e cilësisë së procesit të akreditimit dhe të monitorimit;
- planifikimi i procesit të ri/akreditimit – bazuar në platformën e-Akreditimi, AKA parashikon numrin e institucioneve të arsimit të cilat të cilave iu skadon akreditimi në nivelin institucional dhe të programeve të studimit. Së dyti, AKA mban komunikim të rregullt me përfaqësuesit e IAL-ve, përmes postës elektronike dhe takimeve fizike. Në këtë mënyrë, AKA informohet për planet e IAL-ve për hapjen e programeve të reja, rrjedhimisht dorëzimin e aplikacioneve të reja për akreditim. Këto të dhëna shërbejnë si pikë kryesore reference për planifikimin e procesit të akreditimit, përfshirë planifikimin e numrit të ekspertëve ndërkombëtarë dhe numrin e vizitave të akreditimit;
- planifikimi i procedurave pas akredituese – në përputhje me Metodologjinë për Procedurat Pas akredituese dhe procedurën e Monitorimit, varësisht nga kohëzgjatja e akreditimit në nivelin institucional apo të programeve të studimit, dhe varësisht nga rekomandimet e ekspertëve ndërkombëtarë të akreditimit të dhëna në raportet e vlerësimit të jashtëm, AKA identifikon

programet e studimit dhe/apo institucionet e arsimit të lartë të cilat duhet të jenë subjekt i kontrollimit të përmbushjes së rekomandimeve të dhëna nga ekspertët ndërkombëtarë;

- planifikimi i procesit të monitorimit – në përputhje me Metodologjinë për Procedurat Pas akredituese dhe procedurën e Monitorimit, AKA bën një planifikim vjetor të procesit të monitorimit. Kjo nënkupton planifikimin e monitorimit të përgjithshëm dhe planifikimin e monitorimit sipas standardeve të akreditimit;
- planifikimi i mbledhjeve të KSHC-së – KSHC vendos për numrin minimal të mbledhjeve të saj. Varësisht nga dinamika e punëve të AKA-së, KSHC mund të shpeshtojë mbledhjet e saj për të përmbushur nevojat për adresimin e kërkesave dhe çështjeve të ngritura nga procesi i akreditimit, monitorimit apo çështjeve të tjera relevante për punën e AKA-së. Datat e mbledhjeve të KSHC-së bëhen publike në ueb faqen e AKA-së;
- planifikimi i punëtorive mes stafit administrativ dhe KSHC-së - me qëllim të diskutimit të progresit dhe identifikimit të sfidave gjatë realizimit të punëve të AKA-së, planifikohen së paku dy punëtori brenda vitit në mes të stafit administrativ dhe anëtarëve të KSHC-së. Këto punëtori mund të përfshijnë edhe pjesëmarrjen e akterëve të tjerë sikurse ekspertë të jashtëm, student, anëtarë të stafit akademik, anëtarë të MASHT, anëtarë të OJQ-ve, etj.;
- planifikimi i zhvillimit profesional të stafit - AKA planifikon të paktën një aktivitet brenda vitit i cili ka për qëllim zhvillimin profesional të stafit administrativ;
- planifikimin e aktiviteteve ndërkombëtare - nënkupton planifikimin e vizitave studimore të stafit të AKA-së apo anëtarëve të KSHC-së në forume, ngjarje, konferenca ndërkombëtare të sigurimit të cilësisë;
- rishikimi i dokumenteve/rregulloreve dhe politikave të AKA-së dhe hartimi i dokumenteve të reja – varësisht nga rrethanat, AKA planifikon brenda një viti inicimin e rishikimit të dokumenteve ekzistuese apo hartimin e dokumenteve të reja. Kjo nënkupton mbledhjen dhe analizimin e të dhënave, identifikimin e ekspertizës ndërkombëtare (nëse aplikohet), identifikimin e donatorëve për mbështetjen me ekspertizë profesionale dhe për burime financiare për realizimin e rishikimit/hartimit të dokumenteve relevante për AKA-në;
- planifikimi i takimeve me akterë relevantë – AKA planifikon të paktën një herë në vit takime formale me IAL-të, student, anëtarë të stafit akademik, punëdhënësit apo asociacione të bizneseve, oda ekonomike, apo oda të tjera profesionale. Këto takime shërbejnë si mjet për mbledhjen e informata kthyese nga akterët e jashtëm në lidhje me nevojat dhe kërkesat e sektorit të arsimit të lartë dhe si mjet për informimin e politikave dhe procedurave të AKA-së;
- planifikimi i tryezave, debateve apo konferencave në të cilat diskutohen çështje lidhur me avancimin e sigurimit të cilësisë në Kosovë – të paktën një herë në vit, AKA realizon tryeza, debate apo konferenca në të cilën mbledh akterët kryesor vendor për të diskutuar çështje që kanë të bëjnë më ngritjen e cilësisë në arsimin e lartë.
- pjesëmarrja në aktivitetet në kuadër të projekteve të përbashkëta me donatorë – AKA përfiton nga mbështetja përmes donatorëve të cilat kanë për synim përmirësimin e cilësisë së arsimit të lartë në Kosovë. Varësisht nga dinamika e planifikuar nga projektet, AKA planifikon realizimin e aktiviteteve të cilat mbështesin proceset e AKA-së, përmirësimin e rregulloreve dhe udhëzuesve të AKA-së, apo aktivitetet për zhvillimin profesional të stafit të AKA-së.

Plani vjetor i punës shërben si udhërrëfyes për punën e stafit administrativ të AKA-së, si dhe anëtarët e KSHC-së. Çdo takim javor dhe vjetor mes stafit administrativ dhe çdo punëtori e mbajtur mes stafit

administrativ dhe anëtarëve të KSHC-së duhet t'i referohet planit vjetor të punës për të siguruar realizimin me kohë dhe në mënyrë efektive aktivitetet e përcaktuara në plan.

Plani vjetor i punës së AKA-së rishikohet dhe aprovohet nga KSHC.

Plani vjetor i punës së AKA-së publikohet në ueb faqe.

5. Raportimi

Në përputhje me kërkesat ligjore në fuqi, AKA në fund të çdo viti përgatit një raport vjetor të punës të cilën e dërgon në Kuvendin e Republikës së Kosovës dhe në Ministrinë e Arsimit, Shkencës, Teknologjisë dhe Inovacionit (MASHT).

Përpos institucioneve shtetërore, raporti vjetor i punës së AKA-së publikohet në ueb dhe i shpërndahet në formë elektronike të gjithë akterëve relevant dhe bashkëpunëtorëve të AKA-së.

Raporti përgatitet më së largu deri në tre mujorin e parë të vitit të ardhshëm kalendarik (mars).

Raporti përfshin vlerësimin e përmbushjes së planit vjetor të punës, me fokus kryesor realizimin e procesit të akreditimit dhe monitorimit. Raporti vjetor i AKA-së për procesin e akreditimit përfshinë së paku të dhënat sikurse: numrin e aplikacioneve të dorëzuara në AKA, numrin e aplikacioneve të aprovuara formalisht dhe të refuzuara nga KSHC, numrin e vizitave të akreditimit, numrin e ekspertëve ndërkombëtarë të përfshirë në vlerësimin e institucioneve, numrin e vendimeve pozitive dhe negative të KSHC-së. Këto të dhëna përgatiten ndarazi në nivelin institucional dhe në nivel të programeve të studimit.

Raporti i punës gjithashtu përfshin të dhëna rreth realizimit të procedurave të monitorimit, aktiviteteve të tjera sikurse realizimin e punëtorive, përfundimin e rishikimit/hartimit të dokumentacionit të ri, realizimin e projekteve, realizimin e arkitekteve të zhvillimit profesional të stafit, realizimin e vizitave studimore, realizimin e aktiviteteve të përbashkëta me karakter ndërkombëtarë, etj.

6. Komunikimi i brendshëm

AKA është duke rritur numrin e stafit administrativ në vazhdimësi. Në përputhje me Ligjin e ri, AKA ka përfunduar procesin e riorganizimit të brendshëm, çka nënkupton se stafi administrativ tani e tutje funksionon në departamente dhe divizione të ndara ashtu siç e parasheh organogrami i ri. Kjo nënkupton, se AKA duhet të formalizojë procedurat e brendshme sikurse vendosjen e agjendave të punës, ndarjen e punëve, shkëmbimin e vazhdueshëm të informacioneve mes divizioneve dhe departamenteve, harmonizimin e punëve mes divizioneve dhe departamenteve, etj. me qëllim të rritjes se efektivitetit të punës së AKA-së.

Në këtë drejtim, AKA mban takime të rregullta javore dhe mujore me stafin administrativ si dhe punëtori të përbashkëta me KSHC-në:

- **takimet javore** - mbahen me departamentet përkatëse të cilat zgjasin së paku një orë. Në këto takime vendosen prioritetet javore, bëhet ndarja e detyrave dhe sigurohen burimet e nevojshme për realizimin e detyrave. Në fund të çdo takimi javor përgatitet përmbledhje e shkurtë e diskutimeve e cila qarkullohet mes stafit administrativ.
- **takimet mujore** - mbahen me të gjithë stafin bashkërisht të cilat zgjasin së paku një orë. Në këto takime sigurohet shkëmbimi i vazhdueshëm i informacioneve dhe të dhënave mes stafit, diskutohen proceset e punës, vlerësohen arritjet e detyrave të punës, identifikohen sfidat dhe koordinohen aktivitetet mes vete në mënyrë që proceset e punës të AKA-së të harmonizohen në mes të departamenteve dhe divizioneve. Takimet mujore mbahen në bazë të një rendi të ditës dhe në fund të takimit përgatit një përmbledhje e diskutimeve e cila qarkullohet mes stafit administrativ.
- **organizimi i punëtorive** - përpos takimeve mes stafit administrativ, AKA mban punëtori të rregullta edhe me KSHC-në. Varësisht nga koha dhe burimet financiare, këto punëtori të përbashkëta organizohen jashtë vendit si formë e stimulimit dhe përkrahjes së stafit administrativ. Punëtoritë shërbejnë si platforma në të cilat diskutohen sfidat e punës së AKA-së, mundësitë për përmirësimin e tyre, diskutohet progresi i arritur i aktiviteteve të AKA-së si dhe propozohen masat shtesë në rast se aktivitete të caktuara nuk janë realizuar sipas planit të punës. Punëtoritë mbahen në bazë të një rendit të ditës dhe në fund përgatitet procesverbal.

7. Zhvillimi profesional i stafit

AKA siguron të realizojë aktivitetet e zhvillimit profesional të stafit në mënyrë të drejtë dhe proporcionale për të gjithë stafin administrativ. Aktivitetet për zhvillimin profesional të stafit nënkuptojnë:

a) realizimin e vizitave studimore në agjenci evropiane të sigurimit të cilësisë që kanë për qëllim marrjen e përvojave dhe praktikave më të mira evropiane;
b) pjesëmarrjen në trajnime apo punëtori të organizuara nga ENQA apo akterë të tjerë evropiane;
c) organizimin e trajnimeve brenda Kosovës (të financuara nga AKA apo donatorë);
d) aktivitete të tjera të cilat sipas të gjykuarit të AKA-së janë relevante dhe të dobishme për fushëveprimin e AKA-së.

AKA siguron se të paktën një herë në vit organizon trajnim specifik për secilin pjesëtar të stafit administrativ. Varësisht nga fushëveprimi i departamentit, AKA angazhon ekspert vendor apo ndërkombëtarë për ofrimin e trajnimit.

Varësisht nga prioritetet e punës, AKA siguron se të paktën një herë në vit stafi administrativ i Divizionit për Akreditim dhe Divizionit për Monitorim, realizojnë një vizitë studimore jashtë vendit në agjenci relevante të sigurimit të cilësisë me qëllim të marrjes së praktikave të mira evropiane.

Stafi administrativ i cili përfiton nga një aktivitet i zhvillimit profesional, ndan përvojat e tij/saj me kolegët e tjerë përmes takimeve të përbashkëta.

Vlerësimin i performancës së stafit administrativ realizohet në përputhje me dispozitat e legjislacionit vendor në fuqi si dhe Manualin për Vlerësimin e Stafit të AKA-së.

8. Sigurimi i cilësisë i procesit të akreditimit

AKA kujdeset për sigurimin e cilësisë së procesit të akreditimit dhe të monitorimit duke siguruar veprimet e mëposhtme:

- procesi i akreditimit planifikohet në kohë;
- kriteret dhe procedurat për përzgjedhjen e ekspertëve ndërkombëtarë respektohen plotësisht;
- mbahet trajnimi dhe informimi i ekspertëve ndërkombëtarë;
- shmanget konflikti i interesit ndërmjet ekspertëve dhe institucionit në vlerësim;
- caktohen koordinatorët e procedurës së akreditimit për çdo institucion në vlerësim;
- shkëmbehet informacion i vazhdueshëm me ekspertët ndërkombëtarë dhe institucionet e arsimit të lartë në çdo fazë të procesit të vlerësimit të jashtëm.

Një aktivitet më rëndësi është organizimi i takimeve individuale dhe kolektive me institucionet e arsimit të lartë përpara fillimit të çdo procesi akreditimi. AKA përmes këtyre takimeve ofron udhëzime të detajuara për procesin e akreditimit dhe siguron sqarime të plota për çdo paqartësi që IAL-të mund të kenë.
Krahas kritereve formale dhe ligjore të përcaktuara me legjislacionin vendor, përmes planit vjetor të punës AKA përcakton standarde të procesit të akreditimit dhe të monitorimit. Kjo nënkupton vendosjen e indikatorëve të matshëm të performancës (%) që lidhen me:

- përmirësimin e saktësisë së periudhës kohore të realizimit të procesit të akreditimit dhe të monitorimit;
- përmirësimin e kënaqshmërisë së institucioneve të arsimit të lartë dhe të ekspertëve ndërkombëtarë me realizimin e procesit të akreditimit dhe të monitorimit;
- përmirësimin e kënaqshmërisë së përfaqësuesve të industrisë me procesin e akreditimit dhe me cilësinë e arsimit të lartë në Kosovë;
- përmirësimin e pjesëmarrjes së studentëve në proceset e akreditimit dhe të monitorimit;
- përmirësimin e dokumentimit të praktikave të mira gjatë procesit të akreditimit dhe të monitorimit;

Pas përfundimit të procesit të akreditimit, AKA krahason rezultatet e procesit me standardet e vendosura në fazën e planifikimit. Në këtë mënyrë, AKA identifikon çdo devijim të procesit dhe identifikon shkaqet për mos përmbushjen e procesit sipas planifikimit.

Pas analizimit të të dhënave, AKA harton një raport përmbledhës i cili përmban plane për përmirësimin e cilësisë së procesit të akreditimit. Përmes analizimit të të dhënave, AKA gjithashtu identifikon dhe dokumenton praktikat e mira.

9. Informatat kthyese nga akterët

Me qëllim që të sigurohet se procesi i akreditimit realizohet në përputhje me dispozitat ligjore në fuqi dhe se rezultatet e akreditimit përmbushin misionin dhe vizionin e AKA, AKA mbledh informata kthyese nga akterët relevant. Mbledhja e informatave kthyese bëhet përmes pyetësorëve, përmes takimeve apo organizimit të tryezave të diskutimit.

Pyetësorët administrohen në formë sistematike, zakonisht pas përfundimit të procesit të ri/akreditimit për vitit përkatës (me IAL-të dhe ekipet e ekspertëve) ndërsa takimet dhe tryezat e diskutimit organizohen në përputhje me planin e punës së AKA-së dhe adresojnë tema të caktuara sipas interesit të përgjithshëm.

Administrimi i pyetësorëve realizohet si në vijim:

Institucionet e arsimit të lartë

- AKA harton pyetësorë të cilët kanë për qëllim vlerësimin e cilësisë, rregullsisë dhe transparencën e procesit të akreditimit, duke filluar nga procedura e aplikimit, administrimin e dokumentacionit të ri/akreditimit nga AKA, planifikimin, organizimin dhe zbatimin e vizitës së akreditimit, si dhe procedurat pas përfundimit të vizitës së akreditimit.
- Koordinatori i AKA-së i dërgon pyetësorin në formë elektronike personit kontaktues të institucionit të arsimit të lartë i cili ka qenë subjekt i procesit të ri/akreditimit në nivel institucional apo në nivel të programit të studimit.
- Pyetësori dërgohet tek institucioni pas pranimit të komenteve mbi gjendjen faktike të draft raportit.
- Plotësimi i pyetësorit nga IAL, rekomandohet të përfundohet më së largu brenda një jave.

Anëtarët e ekipeve të ekspertëve

- AKA harton pyetësorë të cilët kanë për qëllim të vlerësojnë planifikimin, organizimin dhe zbatimin e vizitës së akreditimit, mbështetjen e ekipit të ekspertëve nga koordinatorët e AKA-së si dhe anëtarët kolegë të ekipit të ekspertëve.
- Koordinatori i AKA-së i dërgon pyetësorin në formë elektronike secilit anëtarë të ekipit të ekspertëve i cili ka qenë i angazhuar në procesin e vlerësimit të institucionit të arsimit të lartë.
- Pyetësori dërgohet tek eksperti pas pranimit të raportit final të vlerësimit.
- Plotësimi i pyetësorit nga ekspertët, rekomandohet të përfundohet më së largu brenda një jave.

Studentët

- AKA harton pyetësor të cilët kanë për qëllim që të vlerësojnë organizimin e procesit të akreditimit, me fokus përfshirjen e studentëve në proceset e sigurimit të brendshëm dhe të jashtëm të cilësisë.
- AKA identifikon studentët për plotësimin e pyetësorëve përmes një liste e cila dërgohet nga IAL.
- Pyetësorët me student realizohen një herë brenda vitit, zakonisht në muajin qershor të vitit përkatës.

Punëdhënësit dhe industria

- AKA harton pyetësor për punëdhënësit dhe industrinë të cilët kanë për qëllim që të vlerësojnë kënaqshmërinë e punëdhënësve me të diplomuarit në tregun e punës. Fokusi kryesor i pyetësorit është relevanca e programeve të studimit me shkathtësitë dhe kompetencat e fituara nga ndjekja e arsimit të lartë nga të diplomuarit dhe identifikimi i nevojave për përmirësim.
- AKA identifikon një listë me punëdhënësit potencial dhe organizatat relevante sikurse odat ekonomike të cilëve në formë elektronike iu dërgohet pyetësori.
- Pyetësorët me punëdhënësit dhe industrinë realizohet një herë në dy vite.

Rezultatet e pyetësorëve të secilit akterë prezantohen dhe diskutohen në formë përmbledhëse në një mbledhje të AKA-së pas përfundimit të procesit të akreditimit për vitin përkatës (zakonisht në muajin korrik).

Çështjet e ngritura nga akterët e mësipërm përmes pyetësorëve, shërbejnë si bazë për rishikimin/përmirësimin e procedurave të ardhshme të aplikuara nga AKA.

Rezultatet e pyetësorëve dhe propozimet konkrete për rishikimin/përmirësimin e procedurave diskutohen edhe në mbledhjen e KSHC-së.

Një përmbledhje e të gjeturave nga pyetësorët publikohen në ueb faqen e AKA-së.

AKA siguron që të paktën një herë brenda vitit të realizojë takime me student, me aktërë të ndryshëm qeveritarë, me ministritë e linjës, me organizata të biznesit, Odat Ekonomike, si dhe punëdhënës individual, me të cilët diskuton trendët në arsimin e lartë, mangësitë e të diplomuarve në tregun e punës, inovacionet në tregun e punës dhe rrjedhimisht përshtatjen e plan programeve me ndryshimet e shpejta teknologjike, etj.

The General Director of the Agency,

Pursuant to Article 28 paragraph 4 of Law No. 06/L-113 on Organization and Functioning of the State Administration and Independent Agencies, Article 9 paragraph 8 of Regulation (GRK) No. 01/2020 on Standards of Internal Organization, Systematization of Jobs and Cooperation in State Administration Institutions and Independent Agencies, dated 23.01.2024,

Adopts:

REGULATION

(KAA) NO. 02/2024

ON INTERNAL ORGANIZATION AND SYSTEMATIZATION OF JOBS

IN THE KOSOVO ACCREDITATION AGENCY

CHAPTER I
GENERAL PROVISIONS

Article 1
Purpose

This Regulation aims to define the internal organization of the Kosovo Accreditation Agency (hereinafter, the Agency).

Article 2
Scope

1. This Regulation shall apply to the Kosovo Accreditation Agency as the regulatory agency for ensuring quality in higher education in the Republic of Kosovo.

2. The duties and responsibilities of the Agency are defined by the relevant Law on the Kosovo Accreditation Agency and other legislation in force.

CHAPTER II
INTERNAL ORGANIZATION AND SYSTEMATIZATION OF JOBS IN THE KOSOVO ACCREDITATION AGENCY

Article 3
Mission of the Agency

In line with the Law on the Kosovo Accreditation Agency and the relevant Law on Higher Education, the mission of the Agency as a regulatory agency is internal and external quality assurance, including accreditation, reaccreditation, monitoring, validation and all other quality assurance processes in higher education institutions and their study programmes in the Republic of Kosovo, according to the best international practices, including in particular the relevant European standards in the field of quality assurance in higher education.

Article 4
Organizational structure of the Agency

1. The organizational structure is as follows:

1.1. Office of the General Director;
1.2. Departments, and
1.3. Divisions.

2. The number of employees in the Agency is thirty-two (32).

Article 5
Office of the General Director

1. The Office of the General Director consists of:
    1.1. General Director;
    1.2. Certifying official;
    1.3. Senior human resources official.

2. The duties and responsibilities of the General Director are defined by the relevant Law on Organization and Functioning of the State Administration and Independent Agencies, the relevant Law on Kosovo Accreditation Agency and other legislation in force.

3. The duties and responsibilities of the staff of the Office of the General Director are defined according to the relevant legislation on public officials.

4. The number of employees in the Office of the General Director is three (3).

Article 6
Departments and Divisions within the Agency

1. Departments and Divisions within the Agency are as follows:

1.1. Department of Evaluation and Accreditation:

    1.1.1. Division of Evaluation and Accreditation;
    1.1.2. Division of Legal Affairs, Analyses, International Cooperation and Projects.

1.2. Department of Monitoring and Post-Accreditation Procedures:

    1.2.1. Division of Monitoring;
    1.2.2. Division of Post-Accreditation Procedures;

1.3. Division of Budget and Finance;
1.4. Division of General Services.

Article 7
Department of Evaluation and Accreditation

1. The mission of the Department for Evaluation and Accreditation is the development of policies, strategic documents, procedures and standards related to quality assurance in higher education, the drafting of legislation, as well as the provision of analyses, advice and expertise for evaluation and accreditation of institutions and higher education programmes.

2. Department of Evaluation and Accreditation has the following duties and responsibilities:
   2.1. Develop policies in the field of quality assurance in higher education, evaluation and accreditation and provide recommendations within the responsibilities of the Department;
   2.2. Provide advice, legal opinions and clarifications on legal issues in the scope of the agency;
   2.3. Attend in drafting of legislation related to the work of the Agency;
   2.4. Legal evaluation of documents developed by the organizational units of the Agency, prior to approval from the Director;
   2.5. Advice, instruct and support stakeholders on policies in the field of quality assurance in higher education, evaluation and accreditation, and ensure inclusion in the policy-making processes;
   2.6. Review, compare and harmonize local policies with the policies, standards and procedures applicable in the European Higher Education Area (EHEA);
   2.7. Contribute to the decision-making process of the State Council of Quality (SCQ) by providing detailed data and analyses to support the process;
   2.8. Plan statistics and data as well as thematic analyses on evaluation and accreditation of higher education institutions (HEI);
   2.9. Ensure international cooperation for the purpose of internationalization and networking with counterpart organizations and agencies;
   2.10. Support and monitor the development and workflow of projects, including activities, outcomes and their financial costs;
   2.11. Verify and propose study programmes and their providers to SCQ according to evaluation and accreditation criteria and standards;
   2.12. Identify needs and plan the training of international experts;
   2.13. Plan all actions and processes of external evaluation for the accreditation of higher education institutions and their study programmes, including accreditation visit, reports, etc.;
   2.14. Represent the Agency in legal proceedings against external parties;
   2.15. Ensure inter-institutional communication with all the relevant parties.
3. The Director of the Department of Evaluation and Accreditation reports to the General Director of the Agency.
4. The number of employees in the Department of Evaluation and Accreditation is thirteen (13).

Article 8
Division of Evaluation and Accreditation

1. The Division of Evaluation and Accreditation has the following duties and responsibilities:
   2.1. Implement policies in the field of quality assurance in higher education, evaluation and accreditation and produce recommendations within the responsibilities of the Division;
   2.2. Provide instructions to stakeholders in the field of quality assurance in higher education, evaluation and accreditation;
   2.3. Contribute to the decision-making process by ensuring data that support the process;
   2.4. Support the relevant department in developing policies related to the process of evaluation and accreditation;
   2.5. Support the process to facilitate the development and implementation of evaluation plans and relevant reports, communicate with experts and other involved parties;
   2.6. Verify the study programmes and their providers according to the criteria and standards of evaluation and accreditation;
   2.7. Organise and coordinate the external evaluation activities and processes for the accreditation of higher education institutions and their study programmes, including accreditation visits, reports, etc.
   2.8. Ensure compliance in the development of all expert reports, including changes, comments on drafts, and final reports;
   2.9. Organize capacity building trainings;
   2.10. Organize trainings for the international team experts involved in evaluation and accreditation processes;
   2.11. Ensure communication with all relevant parties.

2. The Head of the Division of Evaluation and Accreditation reports to the Director of the Department of Evaluation and Accreditation.

3. The number of employees in the Division of Evaluation and Accreditation is eight (8).

Article 9
Division of Legal Affairs, Analyses, International Cooperation and Projects

1. Division of Legal Affairs, International Cooperation and Projects has the following duties and responsibilities:

1.1. Provide advice, legal opinions and clarifications to the Director, State Council of Quality and the Appeals Commission of the Agency on legal issues in the scope of the agency;
1.2. Evaluations from the legal perspective of documents developed by other units of the Agency prior to approval by the Director;
1.3. Represent the Agency in legal proceedings against external parties;
1.4. Monitor legal amendments affecting the functioning of the Agency;
1.5. Participate in the drafting of legislation related to the work of the Agency;
1.6. Identify and address legal gaps during the implementation of legislation;
1.7. Implement policies in the field of quality assurance in higher education related to research, analyses and statistical data;
1.8. Implement policies in the field of quality assurance in higher education related to internationalization, networking and international cooperation;
1.9. Implement policies in the field of quality assurance in higher education related to application, implementation and monitoring of projects;
1.10. Provide instructions to stakeholders in the field of quality assurance in higher education relate to analyses and data, reports, internationalization and projects;
1.11. Propose policies related to analyses, internationalization and projects;
1.12. Identify needs and conduct analyses, research and statistics on higher education as well as recommend development priorities of the agency;
1.13. Develop and supervise development projects related to the objectives of the agency;
1.14. Develop activities for the purpose of internationalization and networking with counterpart organizations and agencies;
1.15. Draft reports and publications on the quality of higher education in Kosovo.

2. The Head of the Division of Legal Affairs, International Cooperation and Projects reports to the Director of the Department of Evaluation and Accreditation.

3. The number of employees in the Division of Legal Affairs, International Cooperation and Projects is four (4).

Article 10
Department of Monitoring and Post-Accreditation Procedures

1. The mission of the Department of Monitoring and Post-Accreditation Procedures is to develop policies, strategic documents, procedures and standards related to quality assurance in higher education, as well as provide analyses, advice and expertise for monitoring and Post-Accreditation procedures in higher education institutions and study programmes.

2. Department of Monitoring and Post-Accreditation Procedures has the following duties and responsibilities:

2.1. Develop policies in the field of quality assurance in higher education, monitoring and post-accreditation procedures and provides recommendations within the responsibilities of the Department;
2.2. Advice, instruct and support stakeholders on policies in the field of quality assurance in higher education, monitoring and post-accreditation procedures, and ensure inclusion in policymaking processes;
2.3. Analyse, compare and harmonize local policies with the policies, standards and procedures applicable in the European Higher Education Area (EHEA) regarding monitoring and post-accreditation procedures;
2.4. Contribute to the decision-making process in the State Council of Quality by ensuring detailed data and analyses that support the process;
2.5. Summarize and propose reports to the SCQ with recommendations from the monitoring process and post-accreditation procedures;
2.6. Identify needs and plan the training of international experts on post-accreditation procedures;
2.7. Plan all actions and processes for monitoring and post-accreditation procedures in higher education institutions and their study programmes, including visits to HEI, reports, etc.;
2.8. Ensure inter-institutional cooperation with all the relevant parties.

3. The Director of the Department of Monitoring and Post-Accreditation Procedures reports to the General Director of the Agency.

4. The number of employees in the Department of Monitoring and Post-Accreditation Procedures is ten (10).

Article 11
Monitoring Division

1. The Monitoring Division has the following duties and responsibilities:

   1.1. Implement policies in the field of quality monitoring in higher education institutions and study programmes and provide recommendations within the responsibility of the Division;
   1.2. Provide instructions to stakeholders in the field of quality assurance and monitoring in higher education;
   1.3. Plan, develop and supervise the activities of the Division and ensure its efficient functioning;
   1.4. Contribute to the decision-making process by providing data that support the process;
   1.5. Support the relevant department on policy design related to the quality monitoring process in HEI and study programmes;
   1.6. Plan, draft, monitor and analyse the budget and other activities of the Division;
   1.7. Support the process to facilitate the development and implementation of monitoring plans and relevant reports, and maintain communication with the parties involved;
   1.8. Organize and coordinate the monitoring activities and processes in higher education institutions and their study programmes;
   1.9. Ensure compliance in the development of all monitoring reports, including changes, comments on drafts and final reports;
   1.10. Organize capacity development trainings;
   1.11. Ensure communication with all relevant parties.

2. The Head of the Monitoring Division reports to the Director of the Department of Monitoring and Post-Accreditation Procedures.

3. The number of employees in the monitoring division is six (6).

Article 12
Division of Post-Accreditation Procedures

1. The Division of Post-Accreditation Procedures has the following duties and responsibilities:

   2.1. Implement policies in the field of post-accreditation procedures in higher education institutions and their study programmes and provide recommendations within the responsibility of the Division;

2.2. Provide instructions to stakeholders in the field of post-accreditation procedures and quality assurance in higher education;
2.3. Contribute to the decision-making process by providing data that support the process;
2.4. Propose policies related to post-accreditation procedures in HEI and study programmes;
2.5. Support the process to facilitate the development and implementation of post-accreditation procedures plans and relevant reports, communication with experts and involved parties;
2.6. Organize and coordinate activities and processes related to post-accreditation procedures, including international expert visits, report drafting, etc.;
2.7. Ensure compliance in the development of all reports and post-accreditation procedures, including changes, comments on drafts and final reports;
2.8. Organize capacity building trainings for the staff;
2.9. Organize trainings for the international expert team involved in post-accreditation processes;
2.10. Ensure communication with all the relevant parties.

2. The Head of the Division of Post-Accreditation Procedures reports to the Director of the Department of Monitoring and Post-Accreditation Procedures.

3. The number of employees in the Division of Post-Accreditation procedures is three (3).

Article 13
Division of Budget and Finance

1. Division of Budget and Finance is an organizational unit whose mission is to deal with issues of planning, management, and expenditures of the budget allocated to the Kosovo Accreditation Agency in accordance with the legislation in force.

2. The Division of Budget and Finance has the following duties and responsibilities:

2.1. Manage the budget of the Agency in line with the Mid-Term Expenditure Framework, the Law on Public Financial Management and Accountabilities, the Budget Law for the relevant year approved by the Kosovo Assembly and other procedures and regulations applicable in Kosovo for budget administration;
2.2. Draft the annual budget of the Agency and requests for budget allocations;

2.3. Respect the budget circulars and administrative instructions of the Ministry of Finance on drafting, review and execution of the agency's budget, and approves salaries, deductions and other necessary budgetary actions;
2.4. Coordinate budgetary issues for all organizational structures of the agency;
2.5. Monitor budget expenditures for all economic categories and comment, evaluate and approve on the financial aspect;
2.6. Forward and report on budget execution;
2.7. Ensure that financial expenditures are made in line with the budgetary regulations and procedures;
2.8. Manage cash reserves and ensure that internal financial control is based on principles of accountability and transparency;
2.9. Ensure close cooperation with the internal and external auditor in drafting the budgetary and financial statements for audits.

3. The Head of the Division of Budget and Finance reports to the General Director.

4. The Head of the Division of Budget and Finance is at the same time the Chief Financial Officer who manages public finance in the accordance with the legislation in force.

5. The number of employees in the Division of Budget and Finance is three (3).

Article 14
Division of General Services

1. Division of General Services is organizational unit within the Agency, whose mission is to provide general services to ensure that duties and responsibilities of the Agency are exercised in line with the legislation in force during their planning and implementation.

2. Division of General Services has the following duties and responsibilities:

2.1. Manage and maintain assets and other material in the warehouse, and provide administrative and logistic support;
2.2. Ensure the implementation of procedures for the management of all vehicles available to the agency, their maintenance and servicing, in line with the legislation in force;
2.3. Identify, plan and make requests to the relevant institution for information technology for active maintenance of all information technology programmes in the agency;
2.4. Ensure the organization of administrative work of the physical and electronic archive of internal documents of the agency;

2.5. Instruct the staff in implementing daily activities of the division and ensure that this activity is in line with the legislation, institutional policies and relevant standards;

2.6. Support and provide advice to the General Director in the division's scope of responsibilities.

2.7. Perform other tasks according to the request of the General Director related to the work of the division.

3. The Head of the Division of General Services reports to the General Director of the Agency.

4. The number of employees in the Division of General Services is three (3).

Article 15
Certifying Officer

1. The mission of the Certifying Officer is to undertake actions to ensure that the expenditure of public funds is done in accordance with the legislation in force on public finance.

2. The Certifying Officer has the following duties and responsibilities:

2.1. In accordance with the supervisor, draft the work plans for the implementation of tasks defined according to the objectives of the division/sector, and provide recommendations related to the objectives of the unit;

2.2. In cooperation with the supervisor, analyse and evaluate the achievement of objectives and work plan, and draft reports on the progress achieved and recommend improvements if requested;

2.3. Certify the execution of all budget expenditures of the Agency;

2.4. Ensure that the implementation conditions of a public contract are met before executing or authorizing payments according to the contract;

2.5. Ensure that the spending of public funds according to a public contract is done in line with the FCM Regulations, and that procurement is in line with the Law on Public Procurement;

2.6. Ensure that the conditions of the contract have been met before the payment is made, and that the request for payment is coded in the right expense item;

2.7. Ensure that the FCM rules and other legal provisions are respected when initiating and implementing procurement activities and processing expenditures.

3. The Certifying Officer in the Agency acts outside the structures of the Agency and reports directly to the General Director of the Agency.

4. The number of employees in the Certifying Officer position is one (1).

Article 16
Senior Human Resources Officer

1. The mission of the Senior Human Resources Officer is to ensure the effective management of human resources through the development of procedures, programmes and services that contribute to the distribution of tasks and responsibilities in a balanced way for the institution's employees.

2. The duties and responsibilities of the Senior Human Resources Officer are as follows:

   2.1. Provide support and advice to the General Director on human resources management;
   2.2. Ensure and exercise competences in line with the authorizations and responsibilities for the purpose of implementing the legislation, documents, requests, procedures and standards for the institution in the field of human resources;
   2.3. Administer files of civil servants of the Agency;
   2.4. Develop the annual plan of the staff, in line with the budgetary planning process of the institution;
   2.5. Provide assistance to the relevant units in drafting job descriptions, classification and systematization of jobs;
   2.6. Develop recruitment procedures for civil servants until the vacancies are filled based on the legislation in force;
   2.7. In coordination with heads of units, periodically identify and evaluate training needs of civil servants of the institution as well as professional capacity development through trainings for career development and promotion;
   2.8. Monitor the training implementation plan for Agency’s staff;
   2.9. Manage process related to appointments, discharges, transfers, suspensions, retirements, confirmations of civil servants in the Agency and other categories according to the relevant law on public officials;
   2.10. Ensure the implementation of performance assessment procedures and work attendance;
   2.11. Manage disciplinary procedures and procedures of complaints and disputes for civil servants and public officials;
   2.12. Draft the annual report and work plan on human resources management.

3. The Senior Human Resources Officer reports to the General Director of the Agency.

3. The number of employees in the position of Senior Human Resources Officer is one (1).

CHAPTER III
FINAL PROVISIONS

Article 17
Final provisions

Annex I which details the total number of all employees in the Agency and the specific number for each unit, as well as Annex II which covers the visual organogram are constituent parts of this Regulation.

Article 18
Division of responsibilities within the department in case of overload

Regardless of the division of work according to job descriptions, in case of overload of one department or division, the General Director of the Agency may divide the tasks to other departments or divisions.

Article 19
Entry into force

This Regulation shall enter into force on the date of its approval by the General Director of the Agency.

Naim Gashi

_____

General Director

Kosovo Accreditation Agency

23.01.2024

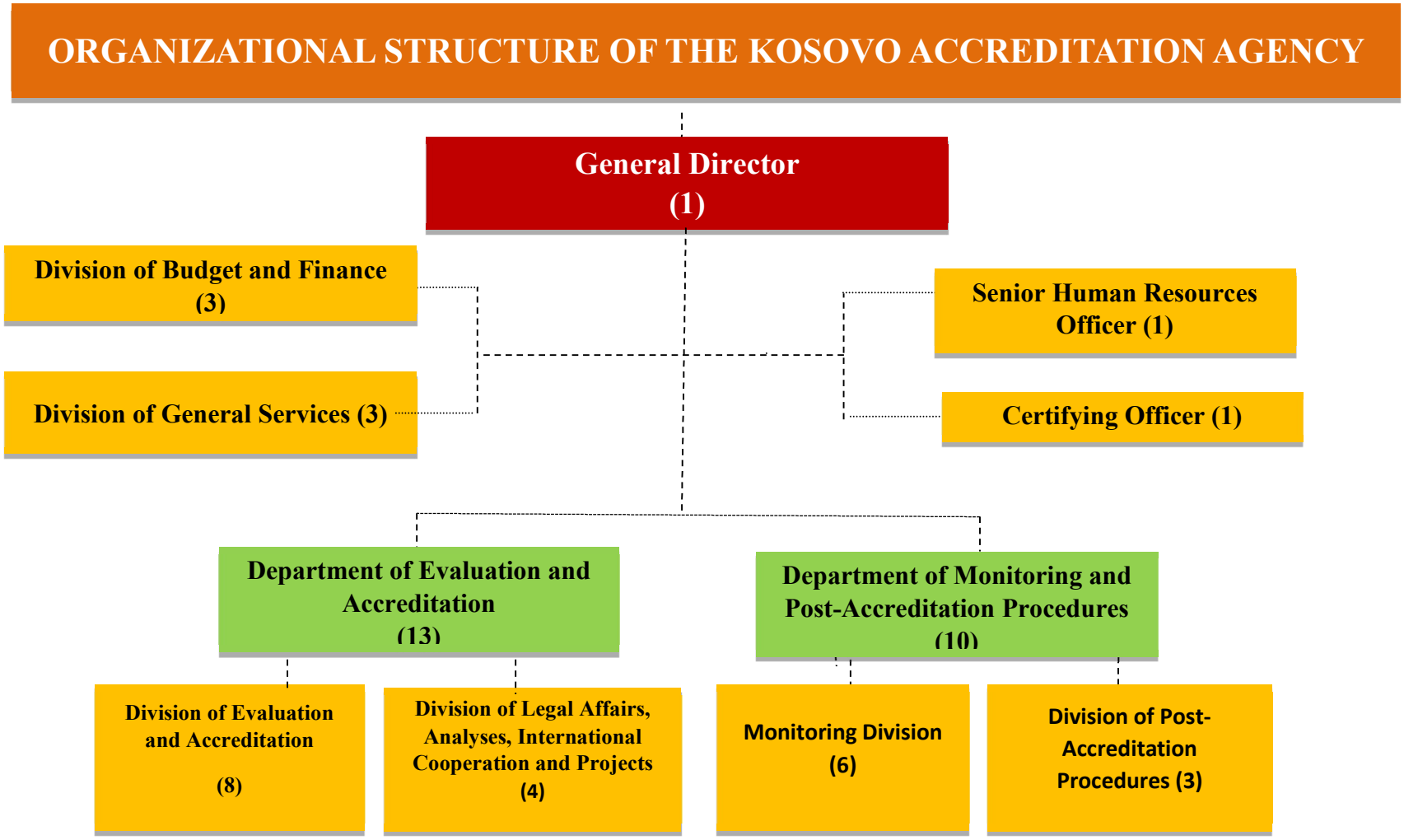
Annex No. 1: TOTAL NUMBER OF EMPLOYEES IN THE AGENCY AND SPECIFIC NUMBER FOR EACH UNIT

Position/Structure	Class	General or specific group	Number/Total
1. General Director	Senior Manager 1	**N/A**	**1**
1.1. Certifying Officer	Professional 1	**3.Gr. Budget Specialist**	**1**
1.2. Senior Human Resources Officer	Professional 1	**Gr.7. Human Resources Specialist**	**1**
2. Department of Evaluation and Accreditation - Director of Department	Middle Manager	**N/A**	**1**
2.1. Division of Evaluation and Accreditation - Head of Division - Senior Evaluation and Accreditation Officer	 Lower Manager Professional 1	 **N/A** **Gr.58. General Administration Specialist**	 **1** **7**
2.2. Division of Legal Affairs, Analyses, International Cooperation and Projects - Head of Division - Senior Analyses and Projects Officer - Senior International Cooperation Officer - Senior Legal Officer	 Lower Manager Professional 1 Professional 1 Professional 1	 **N/A** **Gr.58. General Administration Specialist** **Gr.58. General Administration Specialist** **Gr. 1. Legal Specialist**	 **1** **1** **1** **1**
3. Department of Monitoring and Post-Accreditation Procedures - Director of Department	 Middle Manager	 **N/A**	 **1**

3.1. Monitoring Department - Head of Division - Senior Monitoring Officer	Lower Manager Professional 1	**N/A** **Gr.58. General Administration Specialist**	**1** **5**
3.2. Division of Post-Accreditation Procedures - Head of Division - Senior Post-Accreditation Procedures Officer	Lower Manager Professional 1	**N/A** **Gr.58. General Administration Specialist**	**1** **2**
4. Division of Budget and Finance - Head of Office - Senior Budget and Finance Officer - Senior Commitments Officer	Lower Manager Professional 1 Professional 1	**N/A** **Gr.4. Economy Specialist** **Gr.4. Economy Specialist**	**1** **1** **1**
5. Division of General Services - Head of Division - Senior Software and Database Administrator - Administration and Logistics Officer	Lower Manager Professional 1 Professional 2	**N/A** **Gr. 51. Database Specialist** **Gr. 58. General Administration Specialist**	**1** **1** **1**
Total number of employees in the Kosovo Accreditation Agency			**TOTAL: 32**

Annex No. 2:

ORGANOGRAM OF THE KOSOVO ACCREDITATION AGENCY



Republika e Kosovës
Republika Kosova - Republic of Kosovo

Agjencia e Kosovës për Akreditim
Agencija Kosova za Akreditaciju
Kosovo Accreditation Agency

Regulation (KAA) No. 04/2024 for the Manual of Accreditation/Reaccreditation and Validation of Higher Education Institutions and Study Programs at the Bachelor's and Master's Level

February 2024

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State Quality Council,

In support of Article 11 paragraph 1.1, 1.8 and 1.9, Article 28 paragraph 1 and 19 as well as Articles 25, 26, 27, 28, 29, 30, 32 and 33 of Law no. 08/L-110 on the Kosovo Agency for Accreditation, at the meeting held on _20_/_05_/2024, approves:

Regulation (KAA) No. 04/2024 for the Manual of Accreditation/Reaccreditation and Validation of Higher Education Institutions and Study Programs at the Bachelor's and Master's Level

(further Accreditation Manual)

CHAPTER I

GENERAL PROVISIONS

Article 1

Purpose

1. The purpose of this regulation is to establish the implementation of fair and transparent accreditation procedures that fully align with the context and system of quality assurance in Kosovo and are in accordance with the applicable local legislation, with the goal of continuous improvement of the quality of higher education institutions.

2. In accordance with Law No. 04/L-037 on Higher Education in the Republic of Kosovo and Law No. 08/L-110 on the Kosovo Accreditation Agency, the AKA will organize the accreditation procedures of higher education institutions and their study programs.

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3. This document will serve as a guide for the AKA, higher education institutions, international experts, and the general public in implementing fair and transparent accreditation and reaccreditation procedures.

4. This document fulfills the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), which requires quality assurance agencies aiming for the continuous improvement of higher education institutions to establish accreditation/reaccreditation procedures and standards. Therefore, through this document, the AKA presents accreditation/reaccreditation procedures and standards that fit the context of Kosovo's quality assurance system, in accordance with applicable local legislation and international higher education standards.

Article 2

Scope

This Regulation is applied by the Kosovo Accreditation Agency to all institutions to which the accreditation and reaccreditation procedures and standards of Higher Education Institutions (HEIs) apply, unless otherwise specified.

Introduction

The KAA Accreditation Manual, hereafter „the manual", reflects the provisions of the Law on Kosovo Accreditation Agency No. 08/L-110, the Law no. 04/L-037 on Higher Education in the Republic of Kosovo, and other administrative bylaws based on the respective laws in force.

The manual is applicable for external quality assurance processes, as follows:

a. the re/accreditation of higher education institutions;
b. the re/accreditation of bachelor and masters study programs.

The scope of the manual is to evaluate the higher education institutions' performance againstthe standards included in Part II of the manual, through the analysis of the self-evaluation documentation, as well as through the information and impressions recorded by the expert panels during the site visit; secondly, it is in the scope of the present manual to evaluate the progress the HEI has made since the previous external evaluation having in mind the continuous enhancement of quality and institutional capacity building of the higher educationsector in Kosovo.

Based on this scope, the external quality assurance processes conducted based on the presentmanual and thus with the European Standards and Guidelines aim to:

- certify the compliance of the higher education institutions with the standards included in Part II of the manual;
- consolidate the internal quality assurance systems at institutional level;
- support the higher education institutions in the quality enhancement and continuous development of their operations;
- increase the transparency and accountability of higher educationinstitutions;
- strengthen the involvement of members of the academic community at theinstitutional and

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study program level and encourage continuous cooperation with external stakeholders;
- increase the quality of student learning outcomes across the Kosovar highereducation sector;
- enhance the student learning experience at the higher education institutions.

The manual is addressing:

a. Representatives of higher education institutions – management at institutional, facultyand unit level, heads of departments, members of the academic community: students, academics, researchers and administrative staff;
b. Committees and other structures directly responsible for quality management and external quality assurance;
c. Beneficiaries of higher education, namely students, employers and, in a broader sense,the society at large.

The manual uses the terminology and concepts established in the Law on Kosovo Accreditation Agency No. 08/L-110, the Law no. 04/L-037 on Higher Education in the Republic of Kosovo and other administrative bylaws based on the respective laws in force for the accreditation of higher education institutions in the Republic of Kosovo and is continuously developed by KAAin accordance to the laws, in order to strengthen its practical character and to better serve its beneficiaries and their concrete requirements. In achieving this, KAA is working closely with all interested higher education institutions, the respective Ministry of Education, representatives of students, rectors conference and unions, civil society organisations and international organisations operating in Kosovo.

Article 3

Glossary of terms

In line with the provisions of the Law on Kosovo Accreditation Agency No. 08/L-110, the termsused in this manual have the following meaning:

Accreditation - a formal process of quality assessment of a higher education institution and/orits study programs through which the Kosovo Accreditation Agency (KAA) determines that the required quality standards and criteria have been met;

Accreditation of the study programs - formal process of quality assessment, which determines the official status of recognition granted by the KAA, which enables the higher education institution to award qualifications for the relevant field within a certain period of time.

ECTS - European Credit Transfer and Accumulation System, which assigns credits to course components, based on the workload of students required to achieve the objectives of a particular field of study

European Higher Education Area - means an organization in the higher education sector in Europe, according to the meaning set out in the Declaration of the European Ministers of Higher Education in Bologna (1999) as well as other subsequent documents of the Bologna Process;

External evaluation - formal quality evaluation process performed by KAA, which results in giving a recommendation for accreditation or non-accreditation;

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External evaluator – is an international expert engaged by KAA in the process of accreditations, re-accreditation, post-accreditation procedure and superior expertise;
Higher Education Institution - any institution authorized to provide educational services in higher education, which are subject to evaluation and monitoring by the KAA.
Institutional accreditation - a formal process of quality assessment, which determines the official status of recognition granted by the KAA for the institution of higher education which enables the development of academic activity and the right to award qualifications for a certain period of time;
Institutional accreditation - a formal process of quality assessment, which determines the official status of recognition granted by the KAA for the institution of higher education which enables the development of academic activity and the right to award qualifications for a certain period of time; Internal evaluation - the regular process of internal evaluation by the institution of higher education through which quality and compliance with established standards and criteria of quality assurance is maintained;
Kosovo Accreditation Agency (KAA) - is a regulatory agency for quality assurance in higher education in the Republic of Kosovo, which is responsible for the evaluation, accreditation, re-accreditation, validation, quality control and monitoring of higher education institutions and their study programs;

Monitoring - a formal process carried out by the KAA through which it is assessed that the higher education institution meets and implements the accreditation conditions given in the KAA decision and in the evaluation report;
Program Holder – a member of the teaching staff with a relevant academic title (or equivalent for professional programs), with knowledge and expertise, responsible for the development and continuous improvement of the program.
Quality Assurance - means the set of policies, processes, and activities at the state and institutional level for quality assurance and advancement in higher education. Quality assurance also relates to teaching and learning in higher education, including the learning environment and links with research and innovation;
Recognized accreditation body - Kosovo Accreditation Agency, or a similar body which is currently a full member of the European Quality Assurance Register for Higher Education (EQAR), or the United States Department of Education (USDE) or Council for Higher Education Accreditation (CHEA);
Recognized Accreditation Body - Kosovo Accreditation Agency, or a similar body which is currently a full member of the European Quality Assurance Register for Higher Education (EQAR), by the United States Department of Education (USDE) or Council for Higher Education Accreditation (CHEA); Standards - requirements, criteria and rules which define the level required by higher education institutions and study programmes for making a positive decision on accreditation. State council of quality (SCQ) – a collegial decision-making body for ensuring the quality in higher education, which is independent in exercising the competences determined by the Law;
The study program - a programme that leads to a qualification or diploma, awarded by a HEI as defined in the decision of SCQ;

Validation - accreditation recognition procedure granted by an internationally known and recognized accreditation institution;

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I

Developments in the quality assurance of higher education

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CHAPTER II

DEVELOPMENTS IN THE QUALITY ASSURANCE OF HIGHER EDUCATION

Article 4
The quality assurance system of higher education

1. The quality assurance system of higher education has been continuously evolving. Whether impacted by internal or external factors, the higher education system in Kosovo has beensubject to many developments that have prompted a national debate on the importance of having a consolidated and independent quality assurance system.

2. The need to remain compliant with the European Standards and Guidelines (ESGs) and European Association for Quality Assurance in Higher Education (ENQA) panel recommendations has placed the topicof quality assurance as an important item on the government's agenda.

3. The independence of the Kosovo Accreditation Agency (KAA) has been carefully preserved through transparent and competitive election processes for the State Council of Quality members and the KAA administration.

4. The independent work of KAA has been monitored by civil society organizations through regular reportings, which has safeguarded KAA from the interference of third parties.

5. The strategic aim to regain ENQA's full membership has also allowed KAA to receive increased support from international donors, who have contributed with high-level expertise for the drafting and implementation of essential documents and procedures related to KAA's activities.

6. At the same time, higher education institutions have benefited from donor support to establish and define operational processes based on best international practices, draft strategic documentation and policies, and further consolidate internal quality assurance practices.

Article 5

The collective support

1. The collective support towards a consolidated and improved quality assurance system has culminated with the adoption of the new Law on Kosovo Accreditation Agency in 2023. The new law not only enforces the status of the agency as an independent body that is responsible for accreditation, monitoring, and quality control but also supports KAA in assuming its role as the main body for promoting and encouraging the quality enhancement of higher education in the Republic of Kosovo.

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2. Over the past five years, there have been tens of institutional accreditation procedures and hundreds of study program assessments. These procedures, at times, have resulted in negative outcomes, which the HEIs have used as a basis to redefine their organizational structures and policies and enforce their internal quality assurance arrangements in order to meet therequired standards of the present manual.

3. On the other hand, there have been positivedevelopments in the higher education system in Kosovo, which can specifically be attributedto the adoption of the first Accreditation Manual in 2018. The scope of internal quality assurance arrangements is widened: the instruments for internal quality assurance systemsare diversified, the perspectives of all members of the academic community are constantly integrated into the decision-making processes, and results of quality assurance assessmentsare becoming more transparent.

4. The cooperation with various members of the academic community is increased, and the communication between industry, employers, and graduates is being defined and formalized. There has been an increase in the transparency of institutionaloperations, and student's access to higher education has been facilitated with increasedcommunication between prospective students and university administrators.

5. KAA has also initiated monitoring and follow-up procedures that aim to complement the accreditation process. A new legal framework has been established, and several monitoring exercises have been conducted at public and private institutions.

6. While there remains a lot tobe done, KAA is strategically committed to increase the number of administrative staff to ensure full implementation of the follow-up and monitoring procedures.

7. The appeals procedure has been set up, and it is becoming a reliable mechanism to addressthe dissatisfaction of HEIs in case of failure to accredit respective institution/programs.

8. While the primary activities of KAA and its mission remain the same, KAA has recognized the developments that have taken place in the past years and has initiated a revision of the accreditation standards for the bachelor and masters programs.

9. The revised standards reflect the changing needs and requirements of the higher education system, aim the advancement of standards for quality assurance in higher education in accordance with ESG, and strive toensure the state and society about the quality of the higher education system in the Republicof Kosovo.

10. According to the new law on KAA, KAA's primary activities concern:
    - 10.1. Accreditation, re-accreditation and/or validation of HEIs and study programs and their branches where applicable;
    - 10.2. Accreditation, re-accreditation and/or validation of programmes including online and distance programmes;
    - 10.3. Accreditation, re-accreditation and/or validation of programmes in foreign languages, joint programmes and dual diploma programmes;
    - 10.4. Continuous quality monitoring and quality enhancement in accredited institutions and their

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study programmes;

10.5. Monitoring of higher education institutions and their programmes for the implementation of accreditation criteria;

11. In carrying out these activities KAA aims, among others, to:
    11.1. Promote, improve and develop the quality assurance of the HE sector;
    11.2. Encourage and assist the quality enhancement at HEIs; and
    11.3. Ensure transparency in the interest of HEIs, students, the labour market and society.

12. KAA aims to encourage innovative forms and content in higher education and to ensure the comparability of degrees from Kosovo HEIs with those awarded by international programs.

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CHAPTER III

BASIC PRINCIPLES OF THE ACCREDITATION MANUAL

Article 6

Accommodation of legal provisions in the development and evaluation of quality in higher education in the internal and external dimension

1. According to the legislation, the development and evaluation of quality has both external and internal dimensions.

2. The external dimension is established by the European requirements and the compliance with the European Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). By positioning the Kosovar higher education institutions within the European Higher Education Area will ultimately ensure confidence in the quality and academic recognition of professional qualifications.

3. The internal dimension of academic quality is built on the legislative framework and pertains to the particularities of each higher education institution such as tradition and cultural heritage of the respective higher education in the country. Internal quality assurance falls under the full responsibility of each higher education institution; in this respect, it becomes a process adapted to theparticular institutional framework and it is established as a mechanism through which results,and academic performance are always improved.

Article 7

Basic Principles

1. The Accreditation Manual is built on top of the core principles of the European Standards andGuidelines for Quality Assurance in the European Higher Education Area which are:

1.1. Higher education institutions have primary responsibility for the quality of their provision and its assurance;
1.2. Quality assurance responds to the diversity of higher education systems, institutions, programs and students;
1.3. Quality assurance supports the development of a quality culture;
1.4. Quality assurance takes into account the needs and expectations of students, all other stakeholders and society.

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2. Secondly, the Accreditation Manual is being built on the following principles:
- 2.1. Public accountability: Higher education institutions need to demonstrate the quality of the education to all stakeholders and public at large, through the following:
- 2.2. achieving quality levels that respond to the expectations of students and employers;
- 2.3. underlining higher education as a public good;
- 2.4. communicating consistent, clear, and coherent information to the public at large about the real results obtained and the intentions of improvement.

3. European reference: the higher education system and higher education institutions in Kosovo adhere tothe European Higher Education Area standards and strive to ensure quality levels in line with, and competitive at the European and international level. For this purpose, both the recognized accreditation providers, as well as higher education institutions commit tobenchmark their institutional processes against comparable institutions at European and international level;

4. Institutional responsibility: the responsibility for quality and quality management lies with each HEI, in accordance with institutional autonomy;

5. Improving quality: quality is not an end in itself. Continuous improvement and institutional management of quality is the primary objective of the external evaluations;

6. Fit for purpose: quality assurance process should be defined and designed specifically to ensure their fitness to achieve the aims and objectives set for them;

7. Institutional diversity: diversity of institutions, their mission and goals are respected and encouraged by external quality assurance;

8. Transparency: a key concept helping to build mutual trust and better recognition of qualifications, programs, and other provision. At systemic level, transparency does not only increase the trust in the quality assurance structures operations, but also in the education itself. Institutionally, transparency encourages engagement of the entire academic community and development of quality culture.

9. Focus on results: learning outcomes and performance in research lie at the core of quality assurance. External quality assurance imply that higher education institutions demonstrate their results and performance in learning and in research as well as their correspondence with the actual reality of the institution, including verification of student activity in relation to the stated standards;

10. Stakeholder engagement: internal stakeholders should develop and implement quality assurance policies through appropriate structures and processes, while involving external stakeholders;

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11. Quality enhancement: continuous improvement of quality and institutional management is the primary objective of the external evaluation. Every self-evaluation document must present the particularities of quality culture across the higher education institution and ensure the continuous performance improvement.

12. Ethics and integrity - KAA ensures that all evaluation and quality control processes, which lead to a formal result, are credible and professional processes based on value.

13. Objectivity and Impartiality: Accreditation processes of HEI should be conducted with objectivity and impartiality, free from bias (prejudice), undue influence, or conflicts of interest. Decisions should be based on evidence, data, and recognised criteria.

14. Efficiency and effectiveness: Are fundamental principles to the standards of accreditation for higher education institutions as they promote quality assurance, continuous improvement, student success, accountability, transparency, and global competitiveness.

15. These principles provide a reference framework for KAA activity and the present manual. Their aim is to promote a quality culture that consistently contributes to the achievement of a qualitative higher education system.

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CHAPTER IV

CRITERIA FOR DECISION MAKING IN EXTERNAL QUALITY ASSURANCE PROCEDURES

Article 8
KAA decisions

1. KAA decisions for re/accreditation of study programs are made and apply separately for each location (main campuses/branches), form of delivery and teaching language. These are considered distinct processes and are subject to separate submissions for accreditation to KAA; each submission is expected to individually meet the minimum level of quality standards included in the present manual.

2. Study programs that are regulated by EU Directives should be compliant to, and evaluated based on Part II of the Accreditation Manual, respective EU Directive and, if applicable, local requirements formally approved by relevant authorities.

3. Foreign education providers, regardless of their accreditation status with other recognised quality assurance bodies abroad, that deliver education on the territory of the Republic of Kosovo, in their individual capacity or in a partnership with a domestic HEI, will undergo all external quality assurance processes described in the Law on Kosovo Accreditation Agency andthe respective regulation approved by the SCQ.

4. The assessment of higher education institutions and/or study programs is done based on a four-level compliance scale, as follows:
- **4.1.** Fully compliant;
- **4.2.** Substantially compliant;
- **4.3.** Partially compliant;
- **4.4.** Non- compliant

Article 9

Overall compliance of the higher education institution (institutional and/or program level)across all general areas

1. The overall compliance level is determined by the level of compliance across all general areas. The most frequent compliance level across the general areas determines the overall compliance level.

2. In order to be granted a positive decision for the program and institutional re/accreditation, every HEI has to demonstrate at least a substantial compliance level in the overall judgment. Therefore, failure in meeting at least an overall substantial compliance level entails delaying, withdrawing, suspending, or denying accreditation.

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3. Standards on evaluation of Higher Education Institutions, Standard Area 6 related to Learning and Teaching, and Standard Area 10 related to Learning Resources and Facilities are mandatory. Within standard area 6, standards 6.2 and 6.3 should be at least substantially compliant. No accreditation on institutional level can be granted unless the above mentioned standards havebeen fulfilled to either substantially or fully compliant level.

4. Standards on evaluation of Bachelor and Masters study programs, Standard Area 3 related to Academic Staff, and Standard Area 7 related to Infrastructure and Resources are mandatory. Within Standard Area 3, standard 3.2 is mandatory as well. No accreditation of programs on Bachelor or Master level can be granted unless the two above mentioned standards havebeen fulfilled to either substantially or fully compliant level.

Article 10

Special standards for General Medicine (Dr. Med)

1. For programs that lead to obtaining a degree in General Medicine (Dr. Med), in addition to the standards set out in this manual, the HEI must prove with adequate documentation that it has functional and in possession the following clinics, health services and Institutes:

1.1 Clinics:

1.1.1 Neurosurgery Clinic;
1.1.2 Surgery Clinic;
1.1.3 Pediatric Surgery Clinic;
1.1.4 Plastic Surgery Clinic;
1.1.5 Thoracic Surgery Clinic;
1.1.6 Vascular Surgery Clinic;
1.1.7 Ophthalmology - Eye Clinic;
1.1.8 Maxillofacial Surgery Clinic;
1.1.9 Orthopedic Clinic with Traumatology;
1.1.10 Gynecological - Obstetric Clinic;
1.1.11 ENT Clinic;
1.1.12 Urology Clinic;
1.1.13 Anesthesia Clinic;
1.1.14 Clinic of Medical Biochemistry;
1.1.15 Radiology Clinic;
1.1.16 Hematology Clinic;
1.1.17 Nephrology Clinic;
1.1.18 Cardiology Clinic;
1.1.19 Rheumatology Clinic;
1.1.20 Gastroenterology Clinic;
1.1.21 Infectious Diseases Clinic;
1.1.22 Psychiatry Clinic;
1.1.23 Neurology Clinic;
1.1.24 Dermatovenerology Clinic;
1.1.25 Pediatrics Clinic;

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1.1.26 Neonatology Clinic;
1.1.27 Pulmonology Clinic;
1.1.28 Physical Clinic with physical rehabilitation;
1.1.29 Medical Oncology Clinic;
1.1.30 Allergy Clinic with Immunology;
1.1.31 Endocrinology Clinic;

2. Services:

2.1 Cardiac Surgery Service;
2.2 Emergency Service;
2.3 Nuclear Medicine Service;
2.4 Orthoprosthetics Service;
2.5 Morgue Service;

3. Institutes:

3.1 Institute of Forensic Psychiatry;
3.2 Preclinical Institutes:
3.3 Institute of Anatomy;
3.4 Institute of Physiology;
3.5 Institute of Histology;
3.6 Institute of Pathological Anatomy;
3.7 Institute of Pathological Physiology;
3.8 Institute of Pharmacology; and
3.9 Institute of Forensic Medicine.

Article 11

Criteria for Accreditation of HEI branches

1. Branches of HEIs can offer only bachelor level programs (Level VI according to theNQF);
2. Each branch must possess a development plan separate from the main campus;
3. The branch institution must prove that it has a separate managerial / organizational and quality assurance structure from the central campus;
4. The management / organizational structure of HEI branches should consist of at least:
5. Branch Director/Manager;
6. A coordinator for each study program offered at the branch;
7. The above stated management / organizational structure in the branch, cannot be the same as the management / organizational structure of the main campus;
8. The quality assurance structure should consist of a quality assurance unit whose members are not part of the academic staff.;

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9. The institution must prove with self-evaluation reports and other QA mechanisms that it conducts regularly within the internal QA in the branch;
10. The HEI must prove that it has administrative counselling and career guidance services and Alumni Office which are separate from the main campus;
11. Each branch must have cooperation agreements with the relevant industry with which the branch operates;
12. The HEI must prove that laboratories and other concretization means are available;
13. HEIs must prove that there is sufficient availability of physical and online books, as well as access to online research platforms;

Article 12

Criteria for program holders

1. For every 60 ECTS there must be one program holder appointed. The program holdermust have a PhD degree from the field of the study program and/or publications fromthe study field of the program. The program holder must also have the academic titleof at least professor assistant.

2. The following criteria are used to evaluate the compatibility of the programholder with the program application:
   2.1. Erasmus Subject Area Code from program application;
   2.2. Majority of the program application learning outcomes.

3. The following criteria can also be considered:
   3.1. Professional, scientific and artistic achievements in relation to the program application;
   3.2. Pedagogical/academic experience in relation to the program application.

4. In addition to the criteria set by the administrative bylaws in force, program holdersentering the accreditation process at the BA/BSc level must have at least one scientific publication in the field of study / program, and in MA/MSc level program holder musthave at least two scientific publications from the field of study program published in the last five years. For these publication to be recognized, the respective journal needs to be indexed in WEB OF SCIENCES or SCOPUS and the program holder to be listed as first or corresponding author. Ina publication co-authored by two authors, where the corresponding author is notclearly noted by the publication or journal, for the purpose of this manual the secondauthor will be considered as the corresponding author.
   4.1. In addition to the criteria set by the administrative bylaws in force, program holdersentering the process of accreditation, re-accreditation or validation at the BA/BSc and at the MA/MSc level they must have at least the academic title Prof. Ass.
   4.2. For BA professional programs, program holders must have at least a Master degree inthe study field and at least five years evidenced professional experience in the field of study/program.

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II

Standards for external quality assurance

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CHAPTER V

STANDARDS FOR EXTERNAL QUALITY ASSURANCE

Article 13

For the accreditation/reaccreditation processes of Higher Education Institutions at the institutional level, the following general areas of activity will be followed:

1. PUBLIC MISSION AND INSTITUTIONAL OBJECTIVES (ESG 1.1)

Standard 1.1 The higher education institution has a well-defined mission statement that comprises three main pillars: teaching, research, and community service and it is publiclyavailable.

Indicators:

1.1.1. The HEI has clearly identified itself as a higher education institution and/or research institution through its mission and other documents (for example, Statute).

1.1.2. The HEI's mission is to contribute to society's development by focusing on education and/or research, and other goals specific to higher education institutions and their position in society.

1.1.3. The HEI has a well-defined and specific mission statement that reflects its uniqueness and position within the national higher education system and the European Higher Education Area.

1.1.4. During the development and definition of the mission statement, participation and input of representatives from both internal and external stakeholder groups is ensured (example of how stakeholders are included in decision- making).

1.1.5. The HEI has a systematic and established approach for formulating, approving, implementing, and periodically reviewing its mission. The institution's mission accomplishment is achieved through its institutional strategies.

Standard 1.2 The institutional mission is clearly reflected in the strategic plan, decision makingand long-term institutional objectives.

Indicators:

1.2.1. The mission statement provides the basis for strategic planning processes and the achievement of strategic goals.

1.2.2. Medium and long-term institutional objectives are consistent with, and support the mission.

1.2.3. The mission is reflected in operational planning and implementation processes.

1.2.4. The mission is evident in the development of curricula and in the implementation of quality assurance measures.

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Article 14

2. STRATEGIC PLANNING, GOVERNANCE AND ADMINISTRATION (ESG 1.1, ESG 1.6)

Standard 2.1 The HEI has developed a comprehensive strategic plan that covers all aspects of itsoperations for a minimum of five years. This plan includes teaching, learning, research, artistic work, quality assurance, student services, investment in infrastructure, and community serviceinitiatives, leadership, HR, internationalization etc. The plan was created in consultation with both internal and external stakeholders to ensure it meets the needs of all parties involved.

Indicators:

- **2.1.1** The strategic plan is elaborated for short, medium and long terms and is updated regularly based on operational developments, formative evaluation and higher education context.
- **2.1.2** The strategic plan comprises strategic goals, an operational plan, specific timeframes, financial considerations, and monitoring mechanisms.
- **2.1.3** The implementation of the institutional strategy is reflected in a detailed action plan, which enables monitoring of short and medium-term targets, and it is distributed to all levels of management of the HEI.
- **2.1.4** The strategic plan is directly linked to the information management system that provides regular feedback on current activities.
- **2.1.5** The HEI is responsible for monitoring key performance indicators and taking necessary actions to advance strategic initiatives.

Standard 2.2 The strategic planning is supported by the annual and long-term budgeting process, allowing for frequent updates and adjustments.

Indicators:

- **2.2.1** The HEI has set up an effective reporting and management system, and provides evidenceof progress.
- **2.3.1** The HEI has implemented risk assessment which is an integral component of planning strategies and developed effective mechanisms to minimize financial risk.

Standard 2.3 The HEI has established a responsible, efficient, and effective internal organization structure, procedures and policies, with the involvement of stakeholders in decision-making.

Indicators:

The HEI has established transparent and publicly available procedures for election processes of its decision-makers and other elected positions (for example, the election decision, etc.).

- **2.3.2** The HEI has established transparent and publicly available internal policies to regulate the scope of work, internal structure, decision-making methods, and the rights and obligationsof all stakeholders at all levels (for example, the HEI Statute, regulation on job descriptions, internal structure, organogram, etc.).
- **2.3.3** The HEI ensures that the owners' roles and competencies are distinct from the management and decision-making related to academic affairs.
- **2.3.4** The HEI ensures that its consultative and decision-making bodies are comprised of

members of academic and administrative staff and students.

2.3.6 Students are given opportunities and encouraged to be active members of the HEI's committees with the right to vote.

2.3.7 The process of electing student representatives in decision-making and consultative bodiesis fair, transparent, and free from discrimination.

2.3.8 The structures and processes for student representation are in place and they are fair, transparent and free from discrimination.

Standard 2.4 The HEI has appropriate and sufficient administration that demonstrates effectiveness and supports the HEI in daily operations.

Indicators:

2.4.1 The administration is highly specialised and equipped to fulfil their duties with clearly defined responsibilities.

2.4.2 The administration utilizes digital platforms to facilitate efficient internal and external communication regarding administrative and academic affairs.

2.4.3 The HEI provides opportunities and plans to increase the competencies of the administration through different trainings and programs.

2.4.4 The administrative staff are subject to performance evaluation, including evaluation from students and academic staff, and the results are considered for further decision-making and planning.

Article 15

3. FINANCIAL PLANNING AND MANAGEMENT (ESG 1.6)

Standard 3.1 The HEI demonstrates that it has sufficient financial resources in the short andmedium term to reach its mission and objectives set out in the strategic plan and can demonstrate financial sustainability.

Indicators:

3.1.1 The HEI possesses reliable financial provisions and a range of financing sources, which are essential for maintaining financial stability.

3.1.2 The HEI has a realistic annual budget and a five-year budget plan, as well as financial policies which address its financial sustainability.

3.1.3 The HEI demonstrates financial sustainability and efficiency throughout all its operations and levels in line with its mission.

3.1.4 The sources of funding and all the conditions related to funding are transparent and donot limit institutional autonomy and promote the flexibility to accommodate all planned activities in line with the strategic plan.

Standard 3.2 The HEI ensures appropriate funding for educational activities.

Indicators:

3.2.1 The HEI ensures that each study program has a solid financial plan that guarantees its sustainability for at least the next five years.

3.2.2 The HEI acquires additional funding for its study programs through partnerships with local communities, business partners, and participation in national and international projects.

3.2.3 The HEI invests extra financial resources in developing and enhancing their study programs (for example, projects, external cooperation, etc.).

3.2.4 The appropriate financial resources have been allocated for the acquisition, cataloguing, and development of equipment, services, and systems to enhance teaching and learning resources.

Standard 3.3 The HEI has officially approved a research budget that is sufficient to support its institutional research objectives, including funds for research equipment and facilities.

Indicators:

3.3.1 The HEI has a policy or procedure to properly verify funds allocated for specific purposes for research through the accounting systems to ensure they are utilized accordingly.

3.3.2 The policies are in place to continuously improving the quality of education and research through regular investments in new facilities, equipment, and staff training.

Standard 3.4 A senior governing body (or Specialized Office) is responsible for overseeing and managing the institution's budgeting and accounting functions. They ensure that financial auditing reports are regularly prepared and published.

Indicators:

3.4.1 The HEI implements internal auditing protocols to ensure that it fulfils its commitments with utmost diligence and maintains public accountability.

3.4.2 The expenditures and commitments are closely monitored against budgets, with reports prepared at least once a year. Any discrepancies from expenditure estimates are thoroughly explained, and their impact on annual budget projections is assessed.

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Article 16

4. ACADEMIC INTEGRITY, RESPONSIBILITY, AND PUBLIC ACCOUNTABILITY (ESG 1.1,ESG 1.8)

Standard 4.1 The HEI has policies and effective mechanisms for monitoring unethical behaviourand all the employees and students are informed thereof.

Indicators:

- **4.1.1** The HEI prioritizes and promotes academic integrity and freedom, maintains ethical standards, and safeguards academic integrity and freedom.
- **4.1.2** The HEI has a Policy of ethics and academic integrity that prevents all forms of academic dishonesty and assures the integrity and ethical behaviour of all academic staff, administrative staff and students (for example, Policy of Ethics, includes defined procedures for detecting plagiarism, academic cheating, forging of results, etc.).
- **4.1.3** The HEI actively supports academic integrity and freedom and has functional structures and procedures for assessing adherence to ethical standards (for example, Ethics Committee, Student Ombudsman, examples of reported and resolved cases, number of cases forwarded to a higher-level decision-making body, etc.).
- **4.1.4** The HEI effectively uses mechanisms for preventing and sanctioning intolerance and discrimination, and has a system for managing conflicts and resolving irregularities at all levels of the HEI (for example, Disciplinary Regulations).
- **4.1.5** A systematic procedure to detect plagiarism has been implemented, providing academic staff and students with evidence-based data (examples of carried out procedures for detecting and sanctioning unethical behaviour).
- **4.1.6** The HEI has established a clear procedure for intellectual property ownership from the commercialization of ideas developed by academic staff and students.

Standard 4.2 The HEI ensures the availability of information on important aspects of its activities(teaching, scientific/artistic and social activities).

Indicators:

- **4.2.1** The HEI ensures transparency and clarity in its communication by providing comprehensive and precise information on its academic staff, research and teaching and social activities.
- **4.2.2** The HEI ensures transparency and clarity in its communication by providing comprehensive and precise information on its program offerings, student enrollment, the intended learning outcomes, awarded qualifications, assessment procedures, student rights and responsibilities, available services and facilities, program pass rates, diverse learning opportunities, graduate employment prospects, scholarship options, ongoing research projects, and tuition and administrative fees (for example, HEI website, social networks, open doors day, brochures, flyers etc.).
- **4.2.3** The student's final theses are published by the HEI in a publicly accessible repository.
- **4.2.4** The HEI informs stakeholders about the outcomes of previous evaluations.

Article 17

5. QUALITY MANAGEMENT (ESG 1.1, ESG 1.2, ESG 1.7, ESG 1.9)

Standard 5.1 The HEI has established and implemented a highly structured and efficient quality assurance and improvement system, which is continuously being improved.

Indicators:

5.1.1 The HEI has implemented a publicly available quality assurance policy as part of its strategic management. This policy is achieved through the implementation of a strategy and action plan.

5.1.2 The HEI has put in place procedures to consistently monitor, evaluate, and enhance the performance of its quality assurance system through tracking, measuring, analysing, assessing, and implementing necessary changes - closing the loop.

5.1.3 The higher education institution's internal quality assurance system encompasses and assesses various activities, including study programs, teaching processes, student support, assistance for under-represented and vulnerable groups, learning resources, scientific/artistic endeavours, professional activities, and more. The system also provides relevant documentation to support these evaluations.

5.1.4 The HEI established the Quality Committee and Quality Management Office as its specialized unit that includes representatives from all stakeholders and has clear roles and responsibilities.

5.1.5 The HEI provides sufficient resources to ensure the functioning of the quality assurance system.

5.1.6 The results of external reviews are used to improve the performance of the HEI.

Standard 5.2 The HEI has quality policies and procedures that include the collection and analysis of relevant data, with the purpose of ensuring and improving the quality of all institutionalactivities (academic activity, student services, administration, etc.). These procedures include all stakeholders of the higher education institution (students and external stakeholders - employers, alumni, representatives of professional organizations, civil society organizations and internalstakeholders).

Indicators:

5.2.1 The HEI has set up mechanisms to systematically collect and analyse data on its processes, resources, and outcomes. It effectively uses this information to enhance its activities and ensures that all collected data contribute to the HEI's further development - closing the loop, (for example, analyses based on gathered data and feedback from various stakeholders, and relevant action plans; examples of improvements based on the gathered information and conducted analyses).

5.2.2 There are effective mechanisms in place to collect, analyse and compare reliable data referring to the profile of the student population, student progression, success and drop-out rates, student's satisfaction with their programs, learning resources and student support available, and career paths of graduates. The statistical data is used for quality assurance purposes, as well as in supporting decision-making.

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5.2.3 The central database retains statistical data readily accessible to departments and units. This information is regularly used to assist in preparing reports on indicators and other quality monitoring tasks.

5.2.4 All academic and administrative units, including the governing body and middle management, are involved in quality assurance procedures to ensure continuous improvement.

5.2.5 Students are encouraged to actively participate in quality assurance processes.

Standard 5.3 The HEI established a formal process for the design and approval of its studyprograms.

Indicators:

5.3.1 The study programs have undergone a thorough internal quality assurance process and have been formally approved by the higher education institution. Plans for their continuous improvement are in place.

5.3.2 The procedures and policies for the development and approval of the study programs are well defined and include internal and external stakeholders.

5.3.3 The HEI has defined procedures and key indicators for monitoring the quality of the delivery of the study programs and the methods of collecting the necessary information.

Standard 5.4 The HEI periodically monitors and reviews the study programs to ensure that theprograms are in line with mission and the institutional strategy. The monitoring of the studyprograms involves active stakeholder participation.

Indicators:

5.4.1 The procedures to monitor, review and improve the quality of study programs are defined and in place (for example, employers' surveys on the necessary competencies in the labour market, analysis carried out in cooperation with the stakeholders, examples of the improvements based on the stakeholder feedback study programs).

5.4.2 The periodical monitoring procedure checks whether ECTS allocation, learning outcomes,and workload estimates are feasible, practical, and suitable.

5.4.3 All relevant stakeholders (students, staff, alumni, and employers) are involved in the monitoring processes of the study programs which also include questionnaires and the results of questionnaires on student workload, achievement of learning outcomes, academic success, resources, employment of graduates, etc.

5.4.4 If the student practice is an integral part of the study programs, procedures for monitoring and improving the quality of student internships are clearly defined, continuously implemented, and involve stakeholders' feedback (for example, students, mentors and employers' questionnaires, examples of improving student practice).

5.4.5 The information is collected and analysed regularly and the programs are adapted accordingly, making sure they are up-to-date.

5.4.6 The results of the monitoring processes and the resulting action plans are communicated to all stakeholders and published on the HEI website.

5.4.7 The revised and up-to-date study programs are published on the HEI website.

Article 18

6. LEARNING AND TEACHING (ESG 1.2, ESG 1.3)

Standard 6.1 The HEI has established policies and procedures that apply to all study programs. The institution actively monitors the implementation of these policies and procedures to ensuretheir effective realization.

Indicators:

6.1.1 The HEI has established key performance indicators (KPIs) for every study program. These metrics are evaluated at least once a year by senior administrators in charge of academic affairs, the institution's quality body, and the senior academic body. The institution's overall performance is then formally reported to the governing structure

6.1.2 The study programs are carefully monitored and supported by specialized internal structures.

6.1.3 Internal structures and procedures are in place to develop effective and innovative pedagogical technologies to ensure success.

Standard 6.2 The study programs' intended learning outcomes are formulated clearly, precisely, and comprehensively according to the best practices; they are aligned with the publishedmission and strategic goals of the higher education institution, and they are publicly available.

Indicators:

6.2.1 The HEI procedures and structures are in place to ensure that the study programs' intended learning outcomes are aligned with the HEI's mission and its strategic goals (proof of alignment of each intended learning outcome with the mission and strategic goals of the higher education institution, examples, list of learning outcomes of the study programs, published mission statement and strategic goals of the HEI).

6.2.2 The HEI proves that the study programs intended learning outcomes are aligned with the general goals and objectives of the study programs (proof of alignment of each intended learning outcome with the stated goals and objectives of the study programs).

6.2.3 The study programs intended learning outcomes are written from a student perspective and they distinguish knowledge, skills, and competences (published and explained on the HEI website).

6.2.4 The HEI proves that it used examples of good practices in defining intended learning outcomes (ECTS Guide, 2015).

6.2.5 Intended learning outcomes include the development of generic and specific competencies distinguished into skills, knowledge and values.

6.2.6 Intended learning outcomes are comparable with similar study programs in EHEA.

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Standard 6.3 The HEI demonstrates that each study program is designed considering the correlations between learning outcomes, teaching methodology and assessment.

Indicators:

6.3.1 The study programs are presented in the form of a series of documents which include: the general and specific objectives of the programs; the curriculum, with the subjects' weight expressed in ECTS credits and courses distributed over the study period; thematic programs and syllabuses expressing learning outcomes in the form of knowledge, skills and values achieved by a course; the assessment methods for each course taking into consideration the planned learning outcomes.

6.3.2 The HEI has established a collaborative approach between departments to ensure the successful implementation of interdisciplinary study programs. They facilitate student mobility within the institution through credit transfers and the accumulation of ETCS credits.

6.3.3 The structure of the study programs is flexible and allows each student to choose their learning direction corresponding to their interests and skills.

6.3.4 The study program's content is regularly updated with the latest scientific research findings, which includes the research conducted by the teachers themselves.

Standard 6.4 The HEI ensures that ECTS allocation is appropriate.

Indicators:

6.4.1 The ECTS credits for each course are allocated according to the guidelines provided in the " ECTS Users' Guide".

6.4.2 The HEI allocates ECTS credits in accordance with the actual student workload, based on the analyses of feedback from stakeholders in the teaching process, or other procedures.

Standard 6.5 The study program's intended learning outcomes comply with the National Qualification Framework and the European Qualifications Framework level descriptors.

Indicators:

6.5.1 The HEI proves that their study programs' intended learning outcomes comply with the National Qualification Framework and the European Qualifications Framework level descriptors (study programs syllabus and curriculum).

6.5.2 The HEI proves if the study programs are delivered at the graduate level that the intended learning outcomes of the study programs differ from the learning outcomes achieved atthe undergraduate level of the study programs.

6.5.3 The HEI proves that the study program's intended learning outcomes are aligned with the level and profile of qualifications gained.

Standard 6.6 If the HEI study programs lead to degrees in regulated professions, they are alignedwith the national and EU Directives and recommendations issued by the national and international professional associations.

Indicators:

- **6.6.1** The HEI proves that the study programs are compatible with prescribed conditions definedin EU Directives.
- **6.6.1** The HEI proves that it has taken into account and applied the recommendations issued by professional associations (opinion of the professional chambers, possibility of license examinations).

Standard 6.7 The higher education institution ensures student-centred teaching and learning.

Indicators:

- **6.7.1** The HEI encourages various pedagogical methods in study programs delivery in accordance with the intended learning outcomes.
- **6.7.2** Various teaching methods are used that encourage interactive and research-based learning, problem-solving and creative and critical thinking.
- **6.7.3** The learning methods and friendly environment are student-centred and stimulate students' motivation, self-reflection and engagement in the learning process.
- **6.7.4** The HEI continually evaluates and adapts teaching methods and different modes of the study programs delivery.
- **6.7.5** Teaching methods are adapted to a diverse student population.
- **6.7.6** The HEI provides /enables the study programs to be executed using modern technology.

Standard 6.8 The HEI ensures that evaluation and assessment are objective and consistent and ensures that intended learning outcomes are achieved. (ESG 1.3.)

Indicators:

- **6.8.1** The HEI ensures that the criteria and method of assessment, as well as criteria for grades are published in advance and all students are informed about it.
- **6.8.2** The HEI provides support to the academic staff in the development of skills related to testing and assessment methods.
- **6.8.3** The HEI ensures objectivity and reliability of grading.
- **6.8.4** Students receive feedback on the evaluation results that identify their strengths and weaknesses, and if necessary, guidelines for the learning process based on these evaluations.

Standard 6.9 The HEI ensures that a functional procedure and mechanism for student appeals isin place. (ESG 1.3.)

Indicators:

- **6.9.1** Students are informed about a clearly defined appeals procedure in a timely manner,which is consistently implemented (examples of appeals procedures).

Article 19

7. RESEARCH

Standard 7.1 The HEI has developed a research strategy which is integrated within the institutional strategy and aligns with its institutional mission. This strategy is reflected in adetailed action plan, which includes clearly specified performance indicators and is made publiclyavailable.

Indicators: The research strategy is aligned with the mission and vision of the higher education institution.

- **7.1.1** The research strategy has been introduced to identify and utilize the expertise of academic and research staff, as well as students, to provide research and development services to the community.
- **7.1.2** The HEI has an adequate number and profile of researchers for the implementation of its strategic research agenda, and they are supported by a senior position for research and/or research units.
- **7.1.3** The HEI has set up research and development units that can identify and promote institutional expertise, commercial development opportunities, and assist in creating proposals and business plans. They offer aid in preparing research proposals and contracts. They can help develop spin-off companies, as needed.
- **7.1.4** The institutional research performance reports are published periodically, and they include records of research activities conducted by individuals, departments, and colleges.

Standard 7.2 The HEI ensures that academic staff are committed to the achievement of high-quality research work and/or professional activity.

Indicators:

- **7.2.1** The HEI has an internal policy that regulates the research work and professional activities of its academic staff.
- **7.2.2** The academic staff's research and professional activities are recognized through their contributions to scientific and applied research publications, artistic creations, technology transfers, consultancy services, scientific parks, and/or professional achievements.
- **7.2.3** The academic staff publishes their work in high-quality scientific and/or professional publications (national requirements and criteria for publications and advancement of academic staff must be respected).
- **7.2.4** Every member of the academic staff publishes their work in high-quality scientific and/or professional publications (national requirements and criteria for publications and advancement of academic staff must be respected).
- **7.2.5** Academic staff actively promotes research and/or professional achievements at national and international conferences.
- **7.2.6** The HEI encourages the applied research work or projects of their academic staff.

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Standard 7.3 The HEI ensures that the academic staff has a proven track record of researchresults on the same topics as their teaching activity.

Indicators:

7.3.1 The HEI ensures that academic staff are encouraged to include in their teaching the results of their research and information about their scholarly activities relevant to the courses they teach.

7.3.2 The HEI has effective mechanisms in place for recognizing and encouraging the excellence of its academic staff, including a reward system based on research and/or professional productivity.

7.3.3 The HEI proves that students are engaged in research activities with the academic staff.

7.3.4 The HEI ensures support to the junior teaching staff in the development of their research programs through mechanism as mentoring by senior colleagues, project teams, assistance in developing research proposals, and seed funding.

Article 20

8. STAF, EMPLOYMENT PROCESSES AND PROFESSIONAL DEVELOPMENT (ESG 15.)

Standard 8.1 Teacher recruitment is in line with national legislation, internal regulations in effectand it is based on objective and transparent procedure.

Indicators:

8.1.1 The HEI advertises vacancies which contain systematic information on required teaching (and, if applicable, research skills) nationally and internationally (for example, HEI website, Official Gazette).

8.1.2 The HEI has clear, objective and transparent process for staff recruitment and conditionsfor employment (examples of completed carried out teacher recruitment procedures, copies of vacancy announcements, the composition of selection committees, reports of selection committees and the decision made by expert bodies).

8.1.3 The HEI has adequate methods in place for selection of the best candidates for each position (teacher recruitment procedures arise from the development goals of the HEIand they are aligned with the legislation and internal regulations in effect).

8.1.4 Candidates for employment are provided with full position descriptions and conditions of employment (for example, HEI internal regulations, Code of Ethics for teachers and students). The HEI guarantees that both teaching and administrative staff have access toa thorough set of policies and regulations, which are outlined in an employee handbookor manual. This includes vital information regarding their rights and obligations, code ofethics and conduct, recruitment and promotion procedures, supervision, participation inprojects, performance evaluation, support procedures, as well as professional development and digital skills.

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Standard 8.2 The higher education institution has enough permanent academic staff adequatelyqualified for the delivery of the study programs.

Indicators:

8.2.1 The HEI ensures that there are enough qualified academic staff to carry out the study programs and conduct scientific and professional activities at the required level (for example, CV, data on the percentage of courses delivered by full-time academics for the study programs, number of teachers with the doctoral degree).

8.2.2 The HEI proves that the academic staff do not cover, within an academic year, more thantwo teaching positions (one full-time, one part-time), regardless of the educationalinstitution where they carry out their activity.

8.2.3 Teaching staff can be engaged in a maximum of three courses per semester (winter/summer).

8.2.4 The HEI provides information that at least 50% of the academic staff involved in deliveringthe study programs are full-time HEI employees (example, employment contracts).

8.2.5 The HEI provides information that for each student group (defined by the statute of theHEI) and for every 60 ECTS in the study program, the HEI has employed at least one full- time staff with doctoral degree or equivalent title in the case of artistic/applied scienceinstitution.

8.2.6 Based on the specifics of the study programs, the ratio of students and academic staffcannot be more than 1:30 (for example, student-teacher ratio and alterations thereof over time; future plans regarding student-teacher ratio).

8.2.7 The HEI provides information that the academics' workload aligns with relevant legislation and bylaws, regulations issued by competent bodies, etc.

8.2.8 The HEI provides information that the academics' workload ensures the appropriate distribution of teaching obligations, professional and/or scientific work, professional and personal development and administrative duties (including mentoring of students) and community service.

8.2.9 The HEI ensures that they employ a sufficient number of qualified academic staff for the mentoring of final thesis.

8.2.10 Members of academic staff who are involved in delivering professional bachelor study programs have appropriate and relevant qualification in accordance with the legislationand qualifications framework.

Standard 8.3 The promotion and re-appointment of teaching staff is based on objective andtransparent procedures and policies which are publicly available, which include the evaluation ofexcellence and they arise from the higher education institution's mission and strategic plan.

Indicators:

8.3.1 A long-term operational plan for developing academic staff that is in line with the institution's mission and strategic plan has been established.

8.3.2 The HEI provides information that teacher promotion procedures are transparent and objective (examples of completed carried out teacher recruitment procedures, copies of vacancy announcements, the composition of selection committees, reports of selection committees and the decision made by expert bodies).

8.3.3 The HEI proves that the promotion of academic staff into higher grades is based on excellence and important achievements (national criteria or legislation, teaching

activity, international activity in the scientific discipline, high-impact publications, projects, supervision of final thesis, textbooks, feedback from the students, etc.).

8.3.4 The HEI ensures that the promotion process for academic staff is carried out promptly once they have met the necessary promotion requirements.

8.3.5 The HEI has implemented a staff performance evaluation system that includes feedback from students, supervisors, peers, and self-assessment. The results of this evaluation are taken into account when promoting and reappointing teaching staff, as well as renewing their contracts.

Standard 8.4 The higher education institution ensures and supports academic staff in their professional development.

Indicators:

8.4.1 The HEI has a plan for the professional development of its academic staff.

8.4.2 The HEI management ensures that academic staff is involved in professional development programs (for example, language training, digital skills trainings, etc.).

8.4.3 The HEI proves that its academic staff participates in international mobility programs, study visits at foreign HEI, international projects, networks etc., which are relevant to thestudy program, and academic staff are encouraged and supported by their own HEI toparticipate in such activities.

8.4.4 The HEI proves that it organizes specific training for its academic staff on the method of preparation and delivery of teaching and introduces them to the regulations and practices in higher education (for example, ECTS credits, learning outcomes, teaching methods, assessment methods etc.).

8.4.5 The HEI ensures that newly employed teachers undergo adequate training to strengthen teaching competencies before their teaching activity at the HEI.

8.4.6 The HEI ensures an onboarding procedure for all newly employed staff members to ensure their familiarity with the key strategic, research, ethical and other goals and procedures of the HEI.

Standard 8.5 The HEI ensures that its external associates have adequate qualifications and work experience to deliver study programs in line with the program's objectives and intended learningoutcomes.

Indicators:

8.5.1 The external associates include the latest research, trends and know-how from the labour market in the teaching process.

8.5.2 The HEI proves that it organizes specific training on the method of preparation and delivery of teaching for external associates who are coming from the business sector and/or from abroad and introduces them to the regulations and practices in highereducation (for example, with ECTS credits, learning outcomes, teaching methods, assessment methods).

8.5.3 The HEI encourages formal participation of external associates in the supervision of finaland graduation theses (examples of co-supervision)

Article 21

9. STUDENT ADMINISTRATION AND SUPPORT SERVICES (ESG 1.4, ESG 1.6)

Standard 9.1 An admission policy is clearly defined and is made publicly available.

Indicators:

9.1.1 The admission requirements to the study programs, the criteria which are used to decideabout the admission of candidates, and the admission process itself are defined clearly and comprehensively and they are published (for example, clear admission criteria, previous education, high school grades, State Matura points or results, Bachelor degree,elective exams, additional assessments of knowledge and skills).

9.1.2 The admission requirements and process for international students to enrol in study programs are easily understood, transparent and publicly available.

9.1.3 The HEI makes sure that all necessary information about the institution is transparent for prospective students. This includes details about the range of available programs and courses, program requirements, student rights and responsibilities, available services and facilities, scholarship opportunities, as well as tuition and administrative fees. This information is publicly accessible before students apply for admission (HEI website, open days, etc.).

9.1.4 The HEI ensures that the students enrolled in the study programs possess a high school graduation diploma or other equivalent documents of study, according to MESTI requirements.

9.1.5 The admission mechanisms are in place to ensure that students who are beginning their education are adequately prepared and capable of following the courses at the HEI (for example, defined decision-making procedure in relation to the admission criteria).

9.1.6 The admission processes and procedures are consistently and fairly applied for all students and they prevent discrimination and favour underrepresented groups in a transparent way.

9.1.7 The HEI has a transparent procedure for the recognition of periods of study (for example, Erasmus programs).

9.1.8 The HEI has adequate procedures for recognition periods of the study.

Standard 9.2 The HEI collects and analyses information on student progression and takes appropriate actions to ensure students completion of the study program.

Indicators:

9.2.1 The HEI has established a functional system for monitoring students' progress and gives assistance and/or counselling to those who face difficulties.

9.2.2 The HEI ensures that students are informed about the availability of teaching staff (for example, information on consultation hours provided to students).

9.2.3 The HEI annually monitors student progression and completion rates and takes appropriate actions if necessary.

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Standard 9.3 The HEI ensures appropriate conditions and support to outgoing and incomingstudents (national and international students).

Indicators:

9.3.1 The HEI supports its students in international exchange mobility programs (for example, Office for International Cooperation).

9.3.2 The HEI on regular bases gives information to students on the possibilities of international exchange mobility programs.

9.3.3 The HEI has regulations in place for recognizing ECTS credits, and students need to be informed in advance about the recognition of parts of their studies.

9.3.4 The HEI publishes information on application procedures and conditions as well as study program admission in foreign language.

9.3.5 The HEI actively attracts foreign students and provides support when studying at a domestic HEI.

9.3.6 The HEI provides courses on foreign language to foreign students.

9.3.7 The HEI collects and analyses feedback from national and international students and takes appropriate measures to improve procedures of international exchange.

9.3.8 The HEI provides information on how many students enrolled in the study program participated in international mobility for up to three months and more than three monthsin the period of the last five years (outgoing mobility).

9.3.9 The HEI provides information on how many international students participated in the study for up to three months and more than three months in the period of the last fiveyears (incoming mobility).

Standard 9.4 The higher education institution ensures adequate resources for student support.The needs of a diverse student population (part-time students, mature students, students fromabroad, students from under-represented and vulnerable groups, students with learning difficulties and disabilities, etc.) are taken into account.

Indicators:

9.4.1 The higher education institution employs an adequate number of qualified and committed professional, administrative and technical staff who are involved in providing student support.

9.4.2 The HEI provides students with information about various services, information packages for new students, regulations on studies, and internal organization. The institution makes available a comprehensive student handbook that covers all phases of the student lifecycle, including admission, progression, recognition, and certification. The handbook includes information on regulations, student rights and responsibilities, disciplinary actions, duties of officers and committees, and potential penalties. This handbook is widely accessible throughout the institution.

9.4.3 Specialized staff identify and address the requirements of students with special needs to ensure they receive appropriate support.

9.4.4 The HEI provides guidance on study and career opportunities to students (for example, tutors, supervisors and other advisers as support to student learning and progress) and students are informed about it.

9.4.5 The student complaint procedures are outlined in the regulations, which are publishedand

made widely available within the institution. These regulations clearly state thereasons for which complaints may be made, as well as the criteria for decision-makingand the available remedies. The complaint process ensures unbiased consideration byindividuals or committees not affiliated with the parties involved.

9.4.6 The HEI offers a variety of scholarships and financial assistance to students. These resources come from both the institution and external parties and serve to incentivize and reward academic achievement, as well as support students from underprivileged backgrounds. The scholarships and financial aid are categorized separately and can be combined if applicable.

9.4.7 The HEI informs and supports students in their extracurricular activities and HEI has available funds available for student initiatives (for example, HEI has objects for sports and recreation, for cultural and voluntary activities).

9.4.8 The HEI ensures that a senior staff member is assigned to oversee and develop student support services.

Article 22

10. LEARNING RESOURCES AND FACILITIES (ESG 1.6)

Standard 10.1 The HEI ensures adequate premises and equipment for performing education processes and research.

Indicators:

10.1.1 The HEI has adequate premises and dedicated equipment for performing educational activities and research.

10.1.2 The HEI documents on premises and equipment (property deeds, lease contracts, inventories, invoices etc.) are valid for a minimum of five years.

10.1.3 The laboratories at the HEI have adequate equipment for all compulsory courses within the curriculum, wherever the analytical syllabus includes such activities and they are well-equipped with IT technologies.

10.1.4 The HEI has adequate software for the courses of study programs included in the curriculum, with a valid license.

10.1.5 The space, equipment and the entire infrastructure (laboratories, IT services, work facilities, etc.) are appropriate for the delivery of the HEI study programs and are sufficient for the achievement of the HEI study program's intended learning outcomes (panel member tourof the facilities during the site visit to the HEI, information about facilities, ownership documents, document proving the right to use the premises and equipment in the periodof five years, optimal number of students enrolled in the study program with regard to available space, equipment and the number of teachers).

10.1.6 The HEI ensures that premises and equipment are adjusted to the students with special needs.

10.1.7 The HEI ensures that the academic staff members have sufficient office space.

10.1.8 The HEI provides the facilities for cultural, sporting and other extracurricular activities for students.

10.1.9 The adequate food service facilities are provided to meet the needs of both staff and students.

10.1.10 A senior staff member is assigned the responsibility for oversee and development of infrastructure and resources.

Standard 10.2 The HEI ensures adequate library resources for their study programs.

Indicators:

10.2.1 Library is equipped with reading rooms, group work rooms and its own book stock according to the disciplines included in the curricula.

10.2.2 Library ensures that the number of seats in the reading rooms corresponds to at least 10% of the total number of students in each of study program.

10.2.3 Library must ensure that the number of seats in the group work rooms corresponds to atleast 10% of the total number of students in each study program.

10.2.4 Library has its own book stock and other electronic resources from domestic and foreign specialty literature, enough to cover the courses within the curricula, out of which at least 50% should represent book titles or speciality courses of recognized publishers, from the last 10 years.

10.2.5 Library has its own book stock with a sufficient number of books to cover the needs of all students.

10.2.6 Library has a sufficient number of subscriptions to domestic and foreign electronic resources, according to the stated mission.

10.2.7 The library and its services are accessible beyond regular class hours to accommodate users' needs. The reliable systems are in place to track book borrowing and returns.

Article 23

11. INSTITUTIONAL COOPERATION

Standard 11.1 The HEI has formulated and implemented a proactive institutional collaborationplan that aligns with its mission institutional strategy. This plan is clearly reflected in theinstitution's decision-making and resource allocation in this field.

Indicators:

11.1.1 The HEI has a well-defined strategy for choosing the institutions with which it forms memorandums of understanding or partnership agreements. Any such document mustbe accompanied by a comprehensive action plan (example: evidence of existing co-operation).

11.1.2 The institutional strategy includes a well-defined section on internationalization.

11.1.3 The scientific, artistic, and professional accomplishments of the HEI are acknowledgedon a national, regional and/or international level.

11.1.4 The HEI hosts various events such as conferences and summer schools that have gained international recognition and attract a large audience.

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Standard 11.2 The HEI has implemented mechanisms to facilitate collaboration with nationaland/or international higher education institutions, networks and organizations. The HEI provides support to teaching staff to establish partnerships with the academic community, locally and/orglobally.

Indicators:

11.2.1 The HEI encourages international cooperation and mobility of its teachers and researchers and analyses the implementation of this international experience in their activities.

11.2.2 The HEI enables the international visibility of its staff by supporting their participation in different study mobility, forums, events, internships, summer schools, seminars, etc.

11.2.3 The HEI has resources and special units that deal with international cooperation.

Standard 11.3 The HEI established and maintain relationships with local industry, public sector, employers and local community.

Indicators:

11.3.1 The HEI has established partnerships with local and/or regional industries and employers to facilitate program delivery. These partnerships may include work-study programs, part-time job opportunities, and identifying issues for analysis in student project activities. Additionally, the HEI collaborates with these partners to participate in various institutional activities and HEI bodies (for example, Industrial Boards).

11.3.2 The HEI promotes collaboration with nearby industries and other research organizations. This cooperation can include working together on research projects, sharing equipment, and developing cooperative strategies when appropriate.

11.3.3 The HEI and its academic departments work together to create community support or professional service agencies that cater to the needs of the community. The staff members' expertise is utilized in this process.

11.3.4 The HEI maintains communication with local schools, providing help and guidance in their areas of expertise. They also inform schools about their programs and activities, aswell as potential career opportunities, and organize additional educational events for them.

Standard 11.4 The HEI has established and maintains relationships with its alumni.

Indicators:

11.4.1 The HEI maintains consistent communication with its alumni by updating them about the institution's progress, inviting them to participate in events, and encouraging them tosupport its growth (for example, regular meetings, HEI website or newsletter, etc.).

11.4.2 The HEI supports its' alumni association.

Article 24

For the accreditation/re-accreditation of Bachelor and Master study programs, the fields will be applied general as follows

1. MISSION, OBJECTIVES AND ADMINISTRATION

Standard 1.1 The study program is in line with the higher education institution's mission andstrategic goals, needs of society and it is publicly available. (ESG 1.1)

Indicators:

- **1.1.1** The content and structure of the study program are in line with the institution's/academic unit's mission and strategic goals and it is publicly available.
- **1.1.2** The study program recognizes the specifics of the HEI's position in the target geographic and/or research area.
- **1.1.3** The intended learning outcomes of the study program are in line with the institution's/academic unit's mission and strategic goals and they are publicly available.
- **1.1.4** The delivery of the study program is supported by a needs analysis conducted by the higher education institution/academic unit of the higher education institution (employment perspectives, demand for the programme by potential students, etc).
- **1.1.5** The study program is justified by the higher education institution through a rational argumentation of the optimal number of students it indents to enrol.
- **1.1.6** Facilities and equipment dedicated for the implementation of the study program are capable to cater the number of students intended to be enrolled.

Standard 1.2 The study program is subject to policies and procedures on academic integrity andfreedom that prevent all types of unethical behaviour. The documents are publicly available, andstaff and students are informed thereof. (ESG 1.1)

Indicators:

- **1.2.1** The study program is subject to written procedures and mechanisms to address plagiarism, academic dishonesty, and other forms and types of discrimination. (for example, Code of Ethics, Ethics Committee, Student Ombudsman, appropriate software).
- **1.2.2** There is evidence that the study program implements the procedures that especially define what happens with the outcomes of the anti-plagiarism software and the exact process that students, academic staff, and administrative staff, must follow.
- **1.2.3** Ethical standards are in place governing teaching and research of the study program, andall students, lecturers and other stakeholders are acquainted with them (for example, minutes of the Ethics Committee meeting, HEI informs students via student packages, student handbooks, statistical data about the use of antiplagiarism software, syllabuses containing information about ethical standards).
- **1.2.4** Mechanisms for monitoring any potential unethical behaviour of students, lecturers and other stakeholders involved in the study program are efficient, regularly implemented and disseminated among all relevant groups (example or proof of how higher education institution solves the case of unethical behaviour or conflict, anonymized decisions of the Ethics Committee about certain cases).

Standard 1.3 Relevant information is collected, analysed and used to ensure the effective management of the study program and other relevant activities and such information is publiclyavailable. (ESG 1.7)

Indicators:

1.3.1 The information management system includes relevant, updated and reliable information. Furthermore, concrete action plans are in place to monitor the implementation of the study program).

1.3.2 Ethical norms and government policies with respect to data protection and the privacy of the students are considered for the delivery of the study program.

1.3.3 Students and staff of the study program are involved in providing and analysing information and planning follow-up activities.

Standard 1.4 The delivery of the study program is supported by appropriate and sufficient administrative support to achieve its goals in teaching, learning, research, and community service. (ESG 1.6)

Indicators:

1.4.1 All study program activities and operations are subject to a policy and review process that ensures adequate and efficient administrative staff and budgetary support.

1.4.2 The study program has sufficient administration to support the teaching and learning needs of students and academic staff.

1.4.3 The administrative staff engaged in the delivery of the study program is subject to a professional development plan.

1.4.4 The management of the HEI proves that administrative staff is structurally involved in professional development programs (for example, language training, etc.)

Standard 1.5 The recommendations for quality improvement of the study program fromprevious internal and external quality assurance procedures are implemented. (ESG 1.10)

Indicator:

1.5.1 The recommendations for improvement of the study program are analysed and activitiesand actions on the basis of previous internal and external quality assurance processes are undertaken (for example, action plans and reports on implementation based on recommendations of the expert panels, examples of results achieved based on recommendations from previous internal and external quality assurance procedures).

Article 25

2. QUALITY MANAGEMENT

Standard 2.1 The study program delivery is subject to an established and functional internalquality assurance system, in which all relevant stakeholders are included. (ESG 1.1)

Indicators:

2.1.1 The HEI established an internal quality assurance system in line with national regulations, ESG and other international standards.

2.1.2 There is a quality assurance policy covering all aspects related to the delivery of the study

program which is publicly available.

2.1.3 Internal quality assurance procedures for the study program are defined by the internal regulations of HEI (for example, quality assurance regulation, quality assurance guideline, etc.).

2.1.4 The study program is supported by the institution's/academic unit's quality assurance coordinators who do not have teaching obligations and are in charge of monitoring the study program.

2.1.5 The policies and processes of the internal quality assurance system form a cycle for continuous improvement (PDCA).

2.1.6 There is an adequate monitoring plan for the implementation of the quality assurance procedures for the study program, and all stakeholders are involved in its continuous revision.

Standard 2.2 The study program is subject to a process of design and approval established bythe HEI. (ESG 1.2)

Indicators:

2.2.1 The development of the study program aligns with the institution's/academic unit's mission and strategic goals.

2.2.2 The study program underwent an adequate and transparent internal quality assurance process and was formally approved by the designated strategic management bodies of the institution. Its continuous improvement is planned.

2.2.3 The process for the development and approval of the study program is well-defined and includes internal and external stakeholders, including specific subject experts.

2.2.4 Key performance indicators for monitoring the quality of the study program delivery are defined, and the achievement of these indicators is monitored on a regular basis.

Standard 2.3 The study program is periodically monitored and reviewed to ensure its objectivesare achieved. The monitoring of the study program involves stakeholder participation. (ESG 1.9)

Indicators:

2.3.1 The study program undergoes regular monitoring to assess its relevance to the needs of society (for example, employers' surveys on the necessary competencies in the labor market, analysis carried out in cooperation with the stakeholders, examples of the improvements based on the stakeholder feedback for the study program).

2.3.2 The study program undergoes regular checks to establish whether the estimated workload (ECTS) allocation of students and the defined learning outcomes are achievable, realistic, and adequate.

2.3.3 The stakeholders, students, staff, alumni, and employers are involved in the monitoring processes of the study program which also includes questionnaires, focus group discussions, and the results of their feedback on student workload, academic success, resources, employment of graduates, etc.

2.3.4 The HEI can prove it regularly conducts stakeholder questionnaires (students, staff, alumni, employers, etc.) and includes the feedback into regular study program improvement processes.

2.3.5 If the student practice is an integral part of the study program, processes for monitoringand improving the quality of student practice are clearly defined, are continuously implemented, and involve stakeholders' feedback (for example, students, mentors and employers' questionnaires, examples of improving student practice).

2.3.6 The collected information is analysed and concrete actions are taken to ensure that the program is up to date.

2.3.7 The results of the monitoring processes and the resulting action plans are communicatedto all stakeholders and published on the HEI website.

Standard 2.4 All relevant information about the study program is clear, accurate, objective, up-to-date and is publicly available. (ESG 1.8)

Indicators:

2.4.1 All policies, regulations and guidelines pertaining to the study program are publicly available.

2.4.2 Information on admission criteria, recognition of qualifications, enrolment quotas, syllabuses, learning outcomes, credits, assessment methods, and final qualification are published.

2.4.3 Information on pass rate, dropout rate, and graduate employment are publicly availableand objectively presented.

2.4.4 The publicly available information on the study program is accurate, reliable, objectiveand is updated on regular basis.

Article 26

3. ACADEMIC STAFF

Standard 3.1 The study program delivery is supported by teaching staff who are recruited in linewith national legislation, and internal regulations in effect, and it is based on objective and transparent procedure. (ESG 1.5)

Indicators:

3.1.1 The HEI advertises vacancies nationally and internationally (for example, HEI website, Official Gazette).

3.1.2 The HEI has clear, objective and transparent processes for staff recruitment and employment conditions (examples of completed carried out teacher recruitment procedures, copies of vacancy announcements, the composition of selection committees, reports of selection committees and the decision made by expert bodies).

3.1.3 The higher education institution has adequate procedures for the selection of the best candidates for each position (teacher recruitment procedures arise from the strategic goalsof the HEI and the specific needs of study programs, and they are aligned with the legislation and internal regulations in effect).

3.1.4 Candidates for employment are provided with full position descriptions and employment conditions (for example, HEI internal regulations, Code of Ethics for teachers and students).

Standard 3.2 The study program is supported by sufficient permanent academic staff who areadequately qualified to deliver the study program. (ESG 1.5)

Indicators:

3.2.1 The number and qualifications of academic staff (elected into a grade in an appropriate field and/or area) are adequate for the implementation of the study program and for performing scientific/professional activity at the required level (for example, CV, data on the percentage of courses delivered by full-time academics for the study program, numberof teachers with a doctoral degree).

3.2.2 The academic staff engaged in the study program do not cover, within an academic year, more than two teaching positions (one full-time, one part-time), regardless of the education institution where they carry out their activity.

3.2.3 The Academic staff should not be overburdened. Their engagement should not exceed the norms compared to institutions in Europe in terms of teaching hours and the number of courses.

3.2.4 At least 50% of the academic staff who are involved in delivering the study program are full-time HEI employees (employment contracts).

3.2.5 For each student group (defined by the statute of the HEI) and for every 60 ECTS in the study program, the HEI has employed at least one full-time staff with a doctoral degree or equivalent title in the case of an artistic/applied science institution.

3.2.6 The ratio of students to full-time academics for the study program is 1:30 and is appropriate for the student's successful achievement of the program's learning outcomes (for example, student-teacher ratio and alterations thereof over time; future plans regarding student-teacher ratio).

3.2.7 The qualification of the academic staff engaged in the delivery of the study program is adequate and relevant to the courses they teach (CV; publications; books, etc.).

3.2.8 The workload of academic staff aligns with relevant legislation and bylaws, regulations issued by competent bodies, etc.

3.2.9 The workload of academic staff enables the appropriate distribution of teaching obligations (including mentoring of students), professional and/or scientific work, professional and personal development, and administrative duties and community service.

3.2.10 Sufficient number of qualified mentors are employed who provide guidance to students enrolled in the study program (for example, mentors who support students in learning and progress as well as in mentoring the final thesis).

Standard 3.3 The study program is supported by teaching staff who are subject to advancement and reappointment based on objective and transparent procedures which include the evaluationof excellence. The advancement of staff arises from the higher education institution's strategic goals, and is in line with the legislation and internal regulations in effect. (ESG 1.5)

Indicators:

3.3.1 The teacher advancement procedures engaged in the study program are transparent and objective (examples of completed carried out teacher recruitment procedures, copies of vacancy announcements, the composition of selection committees, reports of selection committees and the decision made by expert bodies).

3.3.2 The promotion of academic staff into higher grades is based on excellence and important achievements (national requirements for publishing in WoS and Scopus, teaching activity, international activity in the scientific discipline, high-impact publications, projects, supervision of final thesis, textbooks, feedback from the students, etc.).

3.3.3 The results of the feedback are taken into account in the advancement and re-appointmentof teaching staff and in the renewal of contracts (for example, the evaluation of the staffbased on students, management, the colleague's questionnaire and self-evaluation).

Standard 3.4 The academic staff engaged in the delivery of the study program is entitled toinstitutional support for professional development. (ESG 1.5)

Indicators:

3.4.1 The HEI has an annual operational plan for the professional development of the academic staff engaged in the study program and demonstrates their participation in the development activities.

3.4.2 The management of the HEI proves that all academic staff engaged in the study programis involved in professional development programs (for example, language training, etc.).

3.4.3 The HEI provides support to all academic staff of the study program in the development of skills related to testing and assessment methods.

3.4.4 The HEI proves that all academic staff engaged in the study program participates in international activities (such as mobility programs, study visits at foreign HEIs, international projects, sabbatical leaves, networks, etc.), which are relevant to the study program, and academic staff are encouraged and supported by their own HEI in these activities.

3.4.5 The HEI provides evidence that it organizes specific training for its academic staff on the method of preparation and delivery of teaching and assessment and introduces them tothe regulations and practices in higher education (for example, ECTS credits, learning outcomes, teaching methods, supervision process skills, assessment methods, etc.).

3.4.6 Newly employed teachers for the delivery of the study program undergo adequate trainingto strengthen teaching competencies before starting their teaching activity at the HEI.

3.4.7 The HEI ensures newly employed staff members undergo adequate onboarding aimed to familiarize them with HEI's standard operating practices, most importantly QA standards and procedures, standards of ethical behaviour, etc.

3.4.8 The HEI ensures support to the academic staff in the development of their research programs through different mechanism as mentoring by senior colleagues, project teams, assistance in developing research proposals, and funding.

Standard 3.5 External associates who teach at the study program have adequate qualifications and work experience for the delivery of the study program and achievement of the intendedlearning outcomes. (ESG 1.5)

Indicators:

3.5.1 External associates include the latest research, trends and know-how from the labour market in the teaching process.

3.5.2 Specific training on the method of preparation and delivery of teaching for external associates from the business sector and/or from abroad are organized. The training also introduces them to the regulations and practices in higher education (for example, with ECTS credits, learning outcomes, teaching methods, and assessment methods).

3.5.3 External associates engaged in the study program are encouraged to participate in the supervision of final and graduation theses (examples of co-supervision).

3.5.4 The workload and expectations from the external associates are clearly agreed to ensurethat the teaching is performed on high quality.

Article 27

4. EDUCATIONAL PROCESS CONTENT

Standard 4.1 The study program intended learning outcomes are formulated clearly, precisely, and comprehensively according to the best practices; they are aligned with the published institution's/academic unit's mission and strategic goals, and are publicly available. (ESG 1.2)

Indicators:

4.1.1 The study program's intended learning outcomes are aligned with the institution's/academic unit's mission and its strategic goals (proof of alignment of each intended learning outcome with the mission and strategic goals of the higher education institution).

4.1.2 The intended learning outcomes are aligned with the general goals and objectives of the study program (proof of alignment of each intended learning outcome with the stated goals and objectives of the study program).

4.1.3 The program's intended learning outcomes are written from a student perspective; they describe what a graduate of the study program will know and will be able to do (published and explained on the HEI website).

4.1.4 The HEI proves that it used examples of good practices in defining intended learning outcomes (ECTS Guide, 2015)

4.1.5 Intended learning outcomes are of the indicated level of studies and include the development of generic and specific competencies, and are divided in knowledge, skills, and competences.

4.1.6 Intended learning outcomes are comparable with similar study programs in EHEA, and the mapping of learning outcomes against other programs in EHEA has been performed

Standard 4.2 The study program intended learning outcomes comply with the National Qualification Framework and the European Qualifications Framework level descriptors. (ESG 1.2)

Indicators:

4.2.1 The study program's intended learning outcomes comply with the National Qualification Framework and the European Qualifications Framework level descriptors (study program syllabus and curriculum).

4.2.2 If the study program is delivered at the graduate level, its intended learning outcomes differ from the learning outcomes achieved at the undergraduate level of the study program.

4.2.3 The intended learning outcomes of the study program are aligned with the level and profile of qualification gained, and they avoid overlapping across different study programs.

4.2.4 The content and structure of the curriculum is coherent and enable the students to achieve the intended learning outcomes and to progress smoothly through their studies. (ESG 1.2)

Standard 4.3 The content and structure of the curriculum is coherent and enable the students to achieve the intended learning outcomes and to progress smoothly through their studies.(ESG 1.2)

Indicators:

4.3.1 The courses within the curriculum are provided in a logical flow and meet the definition and precise determination of the general and specific competencies, as well as the compatibility with the study programs and curricula delivered in the EHEA.

4.3.2 The rules defining the order of students' progression through the program courses ensure that the learning outcomes of previously successfully passed courses are sufficient to meet the prerequisites of the next courses in the curriculum.

4.3.3 The core disciplines necessary for achieving the leaning outcomes and acquiring competencies in the respective fields are adequately covered by the program courses. (mapping of competences on course level against the program learning outcomes has been performed).

4.3.4 The study program is comparable with similar study programs abroad and enables graduate students horizontal and vertical mobility and employability in the European and global market (comparative analysis of the proposed study program in relation to similar accredited study programs in the EHEA).

Standard 4.4 If the study program leads to degrees in regulated professions, it is aligned with the EU Directives and national and international professional associations. (ESG 1.2)

Indicators:

4.4.1 The study program is compatible with prescribed conditions defined in EU Directives. (Mapping of the program content and parameters against the requirements of all relevant directives has been performed).

4.4.2 The contents of the study program and other aspects of its delivery have taken into accountand applied the recommendations issued by professional associations (opinion of the professional chamber, possibility of license examination, etc.).

Standard 4.5 The intended learning outcomes of the student practise period are clearly specified, and effective processes are followed to ensure that learning outcomes and the strategies todevelop that learning are understood by students (if applicable). (ESG 1.2)

Indicators:

4.5.1 The HEI has developed a regulation for practice that includes the expected learning outcomes, rights and responsibilities of all involved parties and templates for all documents necessary for completing practice.

4.5.2 During the practice period, students have mentors assigned among the academic staff inthe study program. The practise is organized in appropriate learning environments outsidethe higher education institution, in cooperation with the labour market (contracts/agreements with employers, regulations on student practice).

4.5.3 ETCS credits are allocated to practical work that is monitored through activity reports (records of student practice).

4.5.4 The delivery of the study program is supported by cooperation agreements, contracts, or other documents with institutions/organizations/practical training units and feedback on cooperation from employers which participate in the organization of the

student practice (feedback from supervisors from or outside the higher education institution, record of student practice).

Standard 4.6 The study program is delivered through student-centred teaching and learning.(ESG 1.3)

- **4.6.1** The study program has a didactic concept which supports students in achieving the program learning outcomes.
- **4.6.2** The study program is delivered through various pedagogical methods that align with the intended learning outcomes and are adequate for the level of studies.
- **4.6.3** Various teaching methods are used that encourage interactive and research-based learning, problem-solving and creative and critical thinking, with clearly defined instructions aligned with the learning outcomes.
- **4.6.4** To deliver the study program, teaching methods and different modes of program delivery are continually evaluated and adapted.
- **4.6.5** Teaching methods are adapted to support a diverse student population on demand (parttime students, mature students, international students, students with learning difficultiesand disabilities, etc.).
- **4.6.6** The delivery of the study program is ensured through the use of modern technology.

Standard 4.7 The evaluation and assessment used in the study program are objective andconsistent, and ensures that intended learning outcomes are achieved. (ESG 1.3)

Indicators:

- **4.7.1** The program clearly describes the relation between the overall intended learning outcomes (knowledge, skills and competences) and the contribution made by each individual module to achieve those learning outcomes.
- **4.7.2** Assessment methodologies which are implemented in the program ensure systematic assessment of individual learning outcomes related to all relevant areas of knowledge, skills and competences as defined in the program learning outcomes (a mapping of assessment methods against the learning outcomes of the study program has been performed).
- **4.7.3** The assessment criteria and methods, as well as grading criteria for the study program, are published in advance and all students are informed about it.
- **4.7.4** The study program ensures objective and reliable grading of students.
- **4.7.5** Students receive timely feedback on the evaluation results that identify their strengths and weaknesses, and if necessary, guidelines for the learning process based on these evaluations.
- **4.7.6** A functional student appeals procedure for the study program is in place (examples of appeals procedures).

Standard 4.8 Learning outcomes are evaluated in terms of student workload and expressed in ECTS. (ECTS 1.2)

Indicators:

- **4.8.1** Assessment criteria must express what students know and can do as a result of demonstrating the learning outcomes.
- **4.8.2** The workload is calculated and ECTS assigned to all learning activities that lead to the program learning outcomes including the learning outcomes of the program components.

Article 28

5. STUDENTS

Standard 5.1 Clear admission policies, including requirements, criteria and processes for thestudy program are clearly defined and are publicly available. (ESG 1.4)

Indicators:

5.1.1 The requirements and criteria for admission to the study program, as well as the entire processes are defined clearly and comprehensively and they are published (admission criteria refer both to national and international students, national requirements separatelyfor the bachelor and master level, additional assessments of knowledge and skills, etc).

5.1.2 Students enrolled in a bachelor study program, possess a high school graduation diplomaor other equivalent documents of study (State Matura results) according to national requirements. For a master study program, students must possess a bachelor's degree diploma.

5.1.3 The admission process of the study program ensures the selection of candidates with appropriate prior knowledge and competencies (for example, defined decision-making procedure in relation to the admission criteria.)

5.1.4 The admission criteria and process are consistently applied and fairly applied for all students, and they prevent discrimination.

5.1.5 The HEI has adequate procedures for recognising periods of the study.

Standard 5.2 Student progression data for the study program are regularly collected andanalysed. Appropriate actions are taken to ensure the student's completion of the studyprogram. (ESG 1.4)

Indicators:

5.2.1 A functional system for monitoring students' progress is established and gives assistance and/or counselling to those who face difficulties.

5.2.2 The study program is subject to regular monitoring of student progression rates and student completion rates. Appropriate actions are taken if necessary.

5.2.3 Results of regular monitoring of student's progression are distributed to staff and students.

5.2.4 The study program clearly defines the progression possibilities in terms of continuation of study or change of study. Students are informed about what they can achieve with their qualifications).

5.2.5 The study program is subject to policies in place for the transfer or recognition of qualifications gained by other institutions.

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Standard 5.3 The study program ensures appropriate conditions and support for outgoing andincoming students (national and international students). (ESG 1.4)

Indicators:

5.3.1 Students enrolled in the study program are regularly informed about the possibilities of international exchange mobility programs.

5.3.2 Students enrolled in the study program are supported and stimulated to be involved in international exchange mobility programs (for example, Office for International Cooperation).

5.3.3 The HEI has regulation for the recognition of ECTS credits.

5.3.4 The HEI publishes information on application procedures and conditions as well as study program admission in foreign language.

5.3.5 The HEI actively attracts foreign students and provides support when studying at a domestic HEI.

5.3.6 The HEI provides courses on foreign language to foreign students.

5.3.7 The HEI collects and analyses feedback from national and international students and takes appropriate measures to improve procedures of international exchange.

5.3.8 The HEI provides information on how many students enrolled in the study program participated in international mobility for up to three months and more than three monthsin the period of the last five years (incoming and outgoing mobility).

Standard 5.4 The study program delivery is ensured through adequate resources for studentsupport. The needs of a diverse student population (part-time students, mature students,students from abroad, students from under-represented and vulnerable groups, students withlearning difficulties and disabilities, etc.) are taken into account. (ESG 1.6)

Indicators:

5.4.1 The number of professional, administrative, and technical staff who are involved in providing student support for the study program are sufficient and adequately qualified.

5.4.2 Students are informed about services (information packages for new students, regulationson the study, and regulations on the internal organization etc.) that are publicly available.

5.4.3 Students enrolled in the study program are provided with guidance on study and career opportunities (for example, tutors, supervisors and other advisers to support student learning and progress).

5.4.4 Structures and procedures for appeals and complaints for the study program are clearly defined and are transparent to all students.

5.4.5 Students enrolled in the study program are informed about extracurricular activities andthe HEI has available funds to support their initiatives (for example, HEI has spaces for sports and recreation, for cultural and voluntary activities).

Article 29

6. RESEARCH

Standard 6.1. The study program aligns with the institution's/academic unit's mission and the research strategic goals.

Indicators:

6.1.1 The study program has defined scientific/applied research objectives that are reflectedin the research development plan of the HEI (research strategy).

6.1.2 The implementation of the study program is ensured through sufficient financial, logistic,and human resources provided by the institution for achieving the proposed research objectives.

6.1.3 The study program is subject to clear policies that define recognized research and relate to international standards and established norms in the field of study program.

Standard 6.2. The academic staff engaged in the study program is committed and supported to achieve high-quality research work and/or professional activity.

Indicators:

6.2.1 The academic staff research and/or professional activity is validated through scientific and applied research publications, artistic products, technological transfers, consultancy centres, scientific parks and/or professional activity.

6.2.2 The academic staff publish their work in high-quality scientific or professional publications, research or professional achievements are presented at national and international conferences, they participated in projects as consultants (for example, for academic and scientific study programs, national requirements about publication and promotion purposes must be respected).

6.2.3 The academic staff who are involved in delivering professional bachelor study programs have a minimum master's degree and at least five years of relevant professional activities.

Standard 6.3 The academic staff engaged in the delivery of the study program is encouraged to participate in different aspects of cooperation with national and international partners.

Indicators:

6.3.1 The academic staff engaged in the study program is involved in identifying and capitalizing on its expertise and providing research and development services to the community.

6.3.2 The academic staff engaged in the study program is involved in developing collaborative research arrangements with colleagues from other HEIs from the country and abroad.

6.3.3 The teaching staff engaged in the study program is supported to cooperate with local business partners through joint research projects, cooperative strategies for development, and shared use of equipment when it is possible.

6.3.4 The teaching staff engaged in the study program is supported and involved in technology transfer and cooperation to transfer knowledge with the industry and public sector.

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Standard 6.4 The teaching staff engaged in the study program has a proven record of researchresults on the same topics as their teaching activity.

Indicators:

6.4.1 Academic staff engaged in the study program are encouraged to include in their teaching the results of their research and information about their scholarly activities relevant to the courses they teach.

6.4.2 Students enrolled in the study program are engaged in research activities with the academic staff.

Article 30

7. INFRASTRUCTURE AND RESOURCES

Standard 7.1. The HEI ensures adequate premises and equipment for performing educationprocesses and research. ESG (1.6)

Indicators:

7.1.1 The HEI has adequate premises and equipment for performing educational activities and research.

7.1.2 The laboratories (if applicable) for all compulsory activities within the curriculum of the study program, wherever the analytical syllabus includes such activities, are well equipped with IT technologies.

7.1.3 The HEI has adequate software for the disciplines of study included in the curriculum, witha valid license.

7.1.4 The space, equipment, and entire infrastructure (laboratories, IT services, work facilities, etc.) are fully functional and capable to cater for the number of students enrolled in the program. They support the achievement of the study program's intended learning outcomes separately from other study programs offered by the institution. (panel membertour of the facilities during the site visit to the HEI, information about facilities, ownership documents, the document proving the right to use the premises and equipment in the period of five years, optimal number of students enrolled in the study program with regard to available space, equipment and the number of teachers).

7.1.5 Premises and equipment dedicated to the implementation of the study program are adjusted to students with special needs.

Standard 7.2 The HEI ensures adequate library resources for study program. (ESG 1.6)

Indicators:

7.2.1 Library is equipped with reading rooms, group work rooms and its own book stock according to the courses included in the study program.

7.2.2 Library and its services are available for extended hours beyond normal class time to ensure

access when required by users.

7.2.3 Library ensures that the number of seats in the reading rooms is sufficient to the total number of students enrolled in the study program.

7.2.4 Library must ensure that the number of seats in the group work rooms is sufficient withthe total number of students enrolled in the study program.

7.2.5 Library has its own book stock and other electronic resources from Albanian and foreign specialty literature, sufficient to cover the specific courses within the curricula and the needs of all students. The library should represent adequate and recent book titles or specialty courses of recognized publishers.

7.2.6 Library has a sufficient number of subscriptions to domestic and foreign publications and periodicals.

Standard 7.3 The study program is appropriately funded to deliver its intended educationalactivities and research. (ESG 1.6)

Indicators:

7.3.1 The HEI ensures that there is a financial plan at the level of the study program which demonstrates the sustainability of the study program for the next five years.

7.3.2 The HEI gains additional sources for funding the study program through national and international projects, and through cooperation with business partners and the local community.

7.3.3 The HEI uses additional financial resources for study program development and improvement.

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III

Guidelines for external quality assurance

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CHAPTER VI

GUIDELINES FOR EXTERNAL QUALITY ASSURANCE

Article 31
Guidelines for self-evaluation

1. Aim of the self-evaluation documentation:

1.1 The self-evaluation documentation is a central point of the Expert team activity. More importantly, however, the self-evaluation documentation should inform the students, employers, other relevant stakeholders and the society at large about the institutional quality,the methods of assuring the quality of study programmes and institutionally, standards and performance indicators, and, on the other hand, about the attention the institution gives to the quality and thoroughness of the information published, driven from its commitment to accountability and public responsibility.

2. The self-evaluation documentation gives the institution the possibility:

2.1 to create the conditions which, based on the analysis and internal evaluation's results,should publicly confirm and certify by the external evaluation process, the institution'sstrengths and assess the efficiency of its policies and procedures for continuous quality assurance and enhancement;

2.2 to present its own perspective on the way the institution exercises its responsibilitiesin two fields of vital interest within the institutional evaluation: providing qualityprogrammes, publicly motivated by comparable benchmarks and, on the other hand,adequately exercising public responsibility and accountability for the education itdelivers;

2.3 to present its own evaluation on the efficiency of internal structures and mechanismsof quality assurance; the means to ensure the accuracy, as well as the complete andcredible character of the information published by the institution, its practices andprocedures concerning the mission and main objectives of institutional evaluation;

2.4 to give the Expert team the opportunity to understand the way the institution ensuresthe standards institutionally and at the level of study programs. Thus, the team can reach its conclusions regarding the level of confidence the higher education institutioncan guarantee.

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Article 32

Style and structure of the self-evaluation documentation

1. The self-evaluation documents must:

1.1 be honest and relevant;
1.2 be concise and supported by the attached documents;
1.3 be publicly available on the institution's website;
1.4 present an adequate balance between description and self-critical evaluation.

2. The self-evaluation documents must provide the Expert team with enough data to support them in understanding the main characteristics of the way the institution approaches the quality assurance process compared to the national standards, as well as its own standards and the comparable benchmarks it has set for itself. The documents must be presented effectively and concisely; the institution's self-evaluation documents must be thus elaborated as to minimise the need of additional data and clarifications the Expert team might need. As the perceptionof the Expert team depends (at least in the initial stages) on the institution's self-evaluationdocuments, it is important for them to be clear and easily verifiable in the attached documentation prepared by the institution.

3. The general structure of the self-evaluation report should include the following:

3.1 Introduction – a general presentation of the institution/study program, its mission andobjectives, leadership, management structures, administration and staffing arrangements, students and their socio-economic background, relevant contextual information about the area in which the institution operates, teaching, learning and curriculum;
3.2 Main body - comprises the institution's perspective on how it meets the standardsincluded in the present manual and, also, a SWOT analysis for each of the general areas.
3.3 In case of reaccreditation, a description of implementation mechanisms/instruments/measures to address the recommendations from the previous reports from all institutional levels (department, faculty, institution);
3.4 The main body will also include the evolution of institutional/program level performance during the period since the last external evaluation;
3.5 A section dealing with the development plans for the accreditation period.
3.6 Appendices - all the documents supporting the elements presented in the main body.This part shall only be presented in electronic format.

4. Recommendations for the elaboration of the self-evaluation documentation:In order to draft its self-evaluation documentation, the institution must:

4.1 describe, in short, the main characteristics of the institutional/program framework and of its activities for maintaining academic standards, for enhancing the quality of the institution and its study programmes and for the support of teaching and learningprocess, research and community service;
4.2 describe the mechanisms in place to continuously/periodically evaluate implementation of

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curricular elements such as learning outcomes, ECTS, teaching and assessment methods and the alignment between them;

4.3 present and analyse its own observations drawn from internal evaluations on institutional practices, subjects or curricular areas, as well as on the way challenges and difficulties were addressed, in order to promote the enhancement of institutionalprocesses;

4.4 describe the teachers' and students' internal professional rules and emphasize all theimportant changes operated at institutional level in response to their application;

4.5 mention the use of external reference sources, including the National Qualifications Framework and the Framework for Qualifications of the European Higher Education Area, as well as the standards, performance indicators and benchmarks associated tothe study programme/institution;

4.6 identify the disciplines or curricular areas that represent good practice and illustrate the performance indicators;

4.7 describe and comment its strategy for the next three years for consolidating goodpractices and for addressing the identified challenges and shortcomings;

4.8 create SWOT analysis for each general area;

4.9 present and analyse the progress recorded since the last external evaluation.

5. The higher education institution is expected to represent itself honestly and accurately tointernal and external constituencies as well as to the general public. Self-evaluation documentation should always be truthful, provide correct, reliable, and complete information,and avoid any actual or implied misrepresentations or exaggerated claims.

Article 33

Guidelines for re/accreditation processes

1. Stage 1: Initiating the external evaluation process

1.1 Higher education institutions functioning in the Republic of Kosovo and offering programmes, including distance and online programmes, leading to an academic degree or a professional degree, are obliged to apply for re/accreditation/validation at KAA.

1.2 The re/accreditation procedure of the higher education institution and its study programs implies the following successive steps:

2. Submission of the request for re/accreditation:

2.1 the HEI submits a request for re/accreditation of the study program(s) or thehigher education institution. The request is submitted together with the application forms, namely the "First Page", a template document in which theHEI must indicate the type of accreditation it is applying for (*institutional/program/branch*); provide information about the study programs to be included in the re/accreditation procedure; and provide detailed programinformation about each study program individually, as defined in the template.

2.2 the HEI submits information about the program learning outcomes and the listof courses for

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every study program mentioned in the application form (First Pages).

2.3 the HEI submits an official information about its managerial and organisational structure, including names of all positions mentioned in the structure.

2.4 the HEI submits information about its academic staff. All members of academicstaff of the educational provider must declare their full-time or part-time engagements through the declaration process conducted electronically in e- Akreditimi platform. In addition to the declaration process, academic staff mustupload their relevant evidence including but not limited to (ID, CV, Diplomas, Nostrification of diplomas (if applicable), Residence permit (if applicable), Taxproof (if applicable), Decision on academic title, Contract, Declaration under oath, List of publications, Proof of relevant experience, PhD/MA thesis, etc.) inthe platform. Following the declaration process, the HEI extracts the data in an excel sheet for every program holder of the study program according to the template defined by KAA. In addition to formal qualifications, the HEIs submitinformation about the research record of each program holder of the studyprogram.

2.5 the deadline for submitting the application for accreditation, re-accreditation,validation, and declaration of academic staff is July 1 - 31 of each calendar year.

2.6 the request for re/accreditation, the first pages, information about the managerial structure, information about the program learning outcomes, information about program holders of the study program, are submitted in printed form physically at KAA offices and electronically in the official email address of KAA.

2.7 in the case of application for institutional accreditation, HEIs must provide evidence from the competent authorities that the founders and senior management have not been convicted by a final decision for committing a criminal offense intentionally in the last five (5) years.

2.8 At least one month before the legal deadline for applying for re/accreditation, KAA electronically notifies all higher education institutions about the application procedure, including novelties in the process, if applicable.

2.9 In addition to the electronic information, KAA invites all higher education institutions to meetings either in person or online with one of the administrative officers of KAA to discuss additional details, if required by the education provider.

3. Reviewing the application for re/accreditation by the SQC:

3.1 the KAA Secretariat verifies all information submitted by the HEIs and provides an assessment against the formal criteria laid down in the national legislation;

3.2 if needed, the KAA Secretariat invites representatives of the HEIs to clarify any uncertainties related to the application forms, including the accuracy of data of academic staff;

3.3 the KAA Director is responsible for presenting the application data for each institution of higher education in one of the regular meetings of SQC;

3.4 the application forms and data of academic staff are reviewed by the State Council of Quality to ensure that the minimum criteria included in the law are fulfilled, including but not limited to the minimum numerical criteria for academic staff required by the law, the relevance of the field of study, number of scientific publications, etc.

3.5 following the SQC meeting, KAA notifies the HEI if the request for institutional re/accreditation or the re/accreditation of the study programs has been formally approved by SQCSCQ. The notification is done electronically and incudes an attachment with information about the remarks of SQC for every reviewed study program individually;

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3.6 if the application for re/accreditation has been approved, the HEI is required to submit the self-evaluation documentation within 15 working days from the date of the approval of the application by SCQ;

3.7 the self-assessment report is drafted based on the present Accreditation Manual.

3.8 The Higher Education Institution can file a request regarding the same application with new evidence for the same program holders only once;

3.9 if the application for re/accreditation has been rejected, the HEI is instructed to file an appeal against the SCQ decision to the Appeals Committee. The requests for reconsideration of decisions related to application and appeals on the same matter cannot be submitted at the same time.

4. Once the program has been accredited, the program holder can be replaced during the validity of accreditation in the following cases:

4.1 retirement;

4.2 end of employment contract;

4.3 incapacity to work

4.4 In case of the request by the HEI in alignment with their strategic planfor program and/or institutional development.

5. Submission of the self-evaluation documentation:

5.1 the self-evaluation reports (SERs) are submitted separately for the institutional re/ accreditation process and each study program regardless of the level of study (BA or MA) and the location where the program is offered (main campus or branch);

5.2 for institutional re/accreditation, besides the SER, the HEI must submit as an appendix all relevant documents referred to in the SER according to each general area, including, but not limited to, internal policies, regulation, strategies, information about the research records, institutional activities related to internationalisation, etc.

5.3 for each study program re/accreditation, besides the SER, the HEI must submit as an appendix all relevant documents referred to in the SER according to each general area, including, but not limited to, the CVs of academic staff, research records of academic staff, detailed syllabuses for each module, and other relevant study program information;

5.4 the SER is submitted only electronically, at KAA offices in Albanian and English language.

6. Appointment of the expert team:

6.1 to conduct the external assessment procedure of the HEI, KAA appoints an international panel of experts. International panel of experts assigned for the external evaluation procedure consist of two (2) up to seven (7) external experts depending on the number of study programs being evaluated and the type of evaluation (institutional or programme) and at least (1) student expert;

6.2 all international experts must have the relevant academic and professional degree in the program field which is undergoing the assessment process;

6.3 KAA Secretariat consults the HEI on the preferred dates for the site visit and agrees on the final period;

6.4 for each expert panel, the KAA Director proposes the composition to SCQ. After the

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SCQ confirms the expert panel, the KAA submits the information on the composition of the Expert Panel to the higher education institution;

6.5 KAA communicates to the HEI the team composition. The HEI is given the opportunity to object the composition of the Expert team members within 3 working days from the date of receipt of the notification. The team composition can be modified if the HEI has solid reasons to believe that the objectivity and professionalism of the evaluation process might be affected;

6.6 the provider will formally request the SQC SCQ to change the team composition if it is able to justify and argue its request. If the HEI submits its objection to the composition of the expert panel, the SQC SCQ shall decide if the objection is reasonable, based on facts. If it is reasonable, new expert/s shall be appointed. Objection to the composition of an expert panel does not affect set deadlines for the submission of the self-evaluation report and other documents;

6.7 following the approval of the expert panel, KAA formally invites the expert panel members to participate in the re/accreditation procedures. Upon the confirmation of the participation of the expert panel members, KAA communicates the agenda of the site visit to the HEI at least two weeks prior to the site visit date. All communication between the expert team and the HEI before, during and after the evaluation process is conducted through and moderated by a KAA officer, who is assigned as the coordinator of the process;

6.8 the HEI covers the accreditation expenses no later than one week after the site visit has been confirmed.

7. Preparatory meeting for the expert panel:

7.1 upon confirming their participation in the expert panel, all members are given access to the KAA Accreditation manual, self-evaluation documentation, site visit agenda and other relevant information about the site visit;

7.2 the documentation is submitted electronically to every member of the panel by the KAA coordinator;

7.3 before the site visit to the HEI, the members of the expert panel are required to participate in an online or onsite meeting with the KAA coordinator. They shall be informed on the purpose of the evaluation, procedures, their duties and responsibilities, final report writing, and other practicalities related to the visit;

7.4 the expert panel shall share their first impression of the self–evaluation report, their findings, observations, and areas of concern that should be addressed during the site visit and prepare the questions for the meetings they shall address during the site visit to the HEI;

7.5 during the preparatory meeting, the international experts shall agree on the areas of responsibilities (quality standards) between themselves;

7.6 during the preparatory meeting, the international experts shall also agree on the length of the site visit based on the size of the institution and the number of meetings required to fulfil the purpose of the accreditation site visit;

7.7 if necessary, the expert panel shall agree on the list of additional documents/evidence needs to be requested from HEI;

7.8 before the site visit is conducted, the expert panel shall agree themselves about the chair of the panel, who, among others, will coordinate the work of all international experts and

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lead discussions and chair the meetings during the site visit to the HEI;

7.9 all members of the expert panel sign a Confidentiality Statement through which they pledge to maintain the confidentiality of information obtained during the procedure.

8. Stage 2: Site visit

8.1 the expert panel evaluates, through a site visit to the headquarters of theinstitution, the compliance of the provider against the standards included in theAccreditation Manual. The site visits are arranged separately for institutional re/accreditation of the main campus and the institutional re/accreditation of the branch campuses.

8.2 in the case of re/accreditation of study programs, each location (campuses/branches), form of delivery and teaching language is considered aseparate process and is subject to a separate site visit;

8.3 the site visit is carried out according to a predefined schedule in the site visit agenda which is communicated to the expert panel and the HEI no less than one week prior to the visit to the HEI. The predefined schedule can change prior or during the visit only in agreement with the HEI;

8.4 the institutional re/accreditation site visit lasts between 1-2 days, depending on the size of the institution and the number of branches;

8.5 the study program re/accreditation site visit lasts 1 day;

8.6 the HEI is required to select in advance the persons with whom the panel will meet during the site visit, including their names and positions, and send the information to the KAA Coordinator at least one week prior to the site visit;

8.7 the maximum number of persons present in one meeting is eight (8);

8.8 the compulsory meetings of the institutional re/accreditation site visit are the following: initial meeting with the management of the organisation, meeting with the teaching staff, meeting with the QA staff and administration, meeting with current students, meeting with the persons responsible for the study programs, meeting with graduates, meeting with employers of graduates, final meeting with the management of the institution. No other external parties are allowed to participate in the meetings during the site visit. The expert team can request additional meetings to be included on the site visit agenda;

8.9 the compulsory meeting of the study program re/accreditation site visit are the following: meeting with the management of the faculty/institution, meeting with the QA staff and administration, meeting the academic staff, meeting with program holders of the study program, meeting with graduates, meeting with representatives of the industry. In case of initial accreditation of the study program, meeting with current students and graduates are not applicable;

8.10 in all types of site visits, a visit to the facilities the provider is using for its activities will be included;

8.11 during the site visit, the HEI is responsible for putting all the necessary physical and technological resources at the disposal of the international panel experts and the KAA representatives to ensure the site visit's successful completion;

8.12 the HEI must provide username and password for internet access to all panel members and the KAA Coordinator. If needed, the HEI must ensure access to printers or photocopy facilities for the panel;

8.13 the HEI must make available IT support team throughout the site visit, to ensure that translation services or online meetings (if applicable) are conducted successfully;

Article 34

Initial meeting with the management of the institution

1. The Expert team, together with the KAA Coordinator, shall first meet with the representativesof the management of the HEI. The chair of the expert team shall firstly ensure that allattendees understand the external evaluation's purpose and development. This initial meeting's agenda shall include the following aspects:
   - **1.1** clarifying and confirming the objectives and type of the evaluation;
   - **1.2** reiterating the basic characteristics of the evaluation process;
   - **1.3** stating the outcomes of the evaluation process: an external assessment against thestandards, as well as a final evaluation report published by KAA.
   - **1.4** clarifying potential comments of the Expert team on the self-evaluation documentation provided by the provider;
   - **1.5** approach any standard that the Expert team considers the input of the management representatives is valuable on.

2. After the abovementioned aspects are clarified and agreed, the panel continues with the questions related to the self-evaluation documentation against the general areas of the Accreditation Manual.

Article 35

Meeting with the students

1. Meetings with students are strictly confidential; it is only students and experts that canattend them. Students' comments are not nominally recorded.
2. To ensure diversity as well as objectivity among students in the meeting, for an institutionaland program re/accreditation procedure, the HEI will be required to submit to KAA five timesthe number of students (if applicable) intended to invite for the site visit. KAA shall randomlyselect eight (8) of them and will communicate their names to the HEI to be invited to the sitevisit.
3. For institutional re/accreditation the expert team should interview the student representatives(e.g. student organisations, student parliament).
4. Experts take notes during all the meetings with the members of the academic community with whom it will meet. These notes must have a rather analytical than descriptive character andmust refer to the documentary information sources and direct observations. Each expert summarises the positive aspects (strengths) and those which are to be improved. The experts can exchange notes that shall help the agency create a base of collective evidence used fordrafting the final assessment. The team of experts can enter the classroom and conduct a discussion with students.

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Article 36

Exit meeting with the management of the institution

1. The expert panel ends the site visit with an exit meeting with HEI's management, in which the panel chair or a person appointed by the chair (a member of the expert panel) informs the participants of the panel's observations during the site visit. In the exit meeting, the HEI will be informed about the agreed deadlines of the External Review Report. At this point, no further discussion or elaboration of standards of the Accreditation Manual are allowed.

2. Stage 3: Drafting and approving the External Review Report:

2.1 the expert team has the right to request prior or during the site visit supplementary documentation that supports them in evaluating, in a thoroughmanner, the performance of the HEI against the standards included in theAccreditation Manual. However, the expert team can only request supplementary documentation that the provider has already referred to during the site visit or through the self-evaluation report; the team cannot ask the HEIto produce new documentation. No HEI additional documents/evidence/clarification can be asked /presented to the expert panelafter the exit meeting;

2.2 the results of the evaluation are included in the External Review Report, adocument that respects the general structure provided by the present manualand its templates;

2.3 timelines for drafting the external review report are agreed collectively on thelast day of the site visit to the HEI and during the last expert panel internalmeeting;

2.4 the chair of the Expert team submits the External Review Report to KAA asagreed during the last expert's internal meeting, but no later than 2 weeks afterthe evaluation visit;

2.5 within 3 working days, the KAA Coordinator validates the report to ensure thatall quality criteria and standards have been adequately assessed.

2.6 The review report must respect the general structure provided by the presentmanual and,

2.7 the review report has to have a coherent flow between the body of the reportand the Expert team recommendation. The recommendation has to be fully supported by evidence and arguments included in the body of the report.

2.8 The validation process may include further communication between KAA Coordinator and the expert team so as to bring the External Review Report inline with the present guidelines;

2.9 the External Review Report is sent to the HEI giving it the chance to correct any potential factual errors that might have been included. During this dialogue, theinstitution cannot submit further information and evidence that have not beenalready referred to during the site visit or through the self-evaluation report.;

2.10 the HEI has the right to provide potential comments on the factual errors in 3 working days;

2.11 after receiving the potential comments from the HEI, the Expert team analyses whether any corrections should be made, finalises the reports and submits it to KAA;

2.12 the External Review Report is discussed and approved by the State Council of Quality. The SQC SCQ may request additional clarification from the international experts, if necessary;

2.13 after judging the external review report, the SQC SCQ can make one of the following decisions;

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2.14 In the case of initial institutional or study program accreditation:
- **2.14.1** Not to accredit;
- **2.14.2** Accredit for 3 years.

2.15 In the case of institutional or study program re-accreditation:
- **2.15.1** Not to accredit;
- **2.15.2** Accredit for 3 years;
- **2.15.3** Accredit for 5 years.

2.16 for all bachelor and master programs, the decision on accreditation or re/accreditation determines the number of students allowed to be enrolled forone academic year;

3. KAA publishes its decision together with the External Review Report on itsofficial website not later than two weeks after the meeting of the State Councilof Quality. Final report is also sent to the HEI;

3.1 in case of conditional re/accreditation decision by the SCQ, the provisions of theMethodology for Monitoring and Follow-up Procedures shall apply;

3.2 in case of negative accreditation decision by the SCQ, the HEI is entitled to anappeals procedure in line with the Law on KAA and the subsequent regulationsof KAA.

4. If the State Quality Council of KAA makes a negative decision, the following provisions apply:

4.1 in the case of a decision not to re/accredit a higher education institution, theHEI is prohibited to enrol new students for the respective academic year, whileit is allowed to continue with the current enrolled students until the secondevaluation;

4.2 in the case of a decision not to re-accredit/to withdraw/to suspend the accreditation of a study program, the HEI loses its right to enrol new studentsin that particular program, while the registered students continue their studiesaccording to the statute of the institution;

4.3 within one year of a KAA formal decision not to accredit/to withdraw/to suspend the accreditation of a study program, reflecting thus the failure ofmeeting the quality standards, the HEI can submit a request for a new externalevaluation;

4.4 within one year of a KAA formal decision not to accredit/to withdraw the accreditation of a higher education institution, reflecting thus the failure ofmeeting the quality standards, the HEI can submit a request for a new externalevaluation;

4.5 for HEIs that fail to meet the quality standards in two consecutive externalevaluations provisions of the article 34, paragraphs 11 and 12 of the Law on Kosovo Accreditation Agency shall apply.

5. Stage 4: Follow-up procedures:

5.1 the HEI formally responds, within the timeline decided by the SCQ decision, onhow it plans to address the recommendations provided by the expert team;

5.2 the Follow-up plan will individually approach each of the recommendations inthe External Review Report and will describe how they will be addressed andimplemented by the HEI – that will include the mechanism/instrument/measure the provider plans to use for each of therecommendations' implementation, who is the individual responsible, theplanned timeframe for completion);

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5.3 templates for follow up plans (improvement plans) are decided by KAA;

5.4 arrangements related to follow up procedures, including timelines, verification of Expert Team recommendations and potential site visit to the HEI following the accreditation process, are defined under the KAA Methodology on Monitoring and Follow-up procedures.

5.5 during the accreditation period decided by KAA, the HEI can operate changes at the level of a study program in the course content within the limit of 30%. Changes exceeding this percentage constitute a new program and will therefore be required to undergo a new accreditation procedure.

Article 37

Roles and responsibilities during the re/accreditation processes

1. Expert panels have the duty to gather, verify and exchange information and supporting elements so as to be able to check the statements made in the self-evaluation documentation, as well as during the site visits and to formulate their own assessments on the performance of the HEI against the standards included in the present manual. The experts shall discuss and exchange the collected evidence, verify the comprehensiveness and interpretation of the data and analyse various sources in order to come to a consensual, coherent and consistent conclusion through triangulation and cross-referencing.

2. The self-evaluation documentation is an important source of information, helping experts to examine the quality of the learning opportunities and academic standards. Experts are requested to assess the way gathered evidence complies with the self-evaluation carried out by the HEI and with the facts observed during the site visit, as well as to verify to what extent the evidence supports the level of standards' achievement the provider declares about itself.

3. Duties and responsibilities of expert panel before, during and after the accreditation procedure are defined under the Law on KAA and the Regulation on the Selection, engagement, and compensation procedures of external experts (KAA) No. 03/2024. In addition to the defined legal duties and responsibilities, the following guidelines also apply:

4. When preparing for the review, the expert must:

4.1 read the self-evaluation documentation and briefings thoroughly;

4.2 in case of reaccreditation read thoroughly the recommendations from the previous external evaluation report;

4.3 use pre-review evidence and self-evaluation documentation to accurately identify the further sources of information required;

4.4 formulate key areas for consideration for their allocated standards of the review;

4.5 plan the re/accreditation process efficiently for their allocated standards;

4.6 establish productive and constructive working relationships with the members of the expert team;

4.7 apply their professional knowledge effectively to the requirements of the assigned role.

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5. During the review, an expert must:

5.1 gather and record evidence systematically and accurately identify when sufficientevidence has been gathered and where further evidence is required;
5.2 conduct interviews and manage discussions in an appropriate and professionalmanner;
5.3 establish open and professional relationships with key staff and, as appropriate, withemployers and other HEI partners;
5.4 analyse and interpret data and other evidence astutely to inform judgments;
5.5 assess and evaluate the implemented measures/mechanisms/instruments that wereaddressing the recommendations of previous external evaluation report;
5.6 write clear, evaluative and comprehensive records of evidence that underpin andsupport the judgments;
5.7 make sound judgments, securely based on a wide range of evidence, for examplediscussions with students, documentation and performance data, and evidence supplied by other team members;
5.8 identify strengths, areas for improvement and recommended actions;
5.9 share evidence effectively with the other team members and with staff from the HEI;
5.10 present and substantiate judgments clearly in team meetings;
5.11 contribute constructively to team meetings and help the team reach robust judgments;
5.12 challenge judgments constructively and respond positively to the challenges of others;
5.13 provide unambiguous and constructive feedback, firmly based on evidence;
5.14 write clear, concise and authoritative contributions to the review report;
5.15 work effectively to meet all deadlines.

6. Additionally, one of the experts, will fulfil the role of chair of the team, having the following supplementary responsibilities:

6.1 ensure that the goals of the re/accreditation process are clear to all experts and thatthey understand their roles within the evaluation;
6.2 establish an open and professional relationship with the HEI that enables effective communications throughout the re/accreditation process;
6.3 provide clear leadership to the experts and build the team so to ensure that allmembers give their best;
6.4 chair the main meetings included in the site visit agenda (other meetings can beassigned to relevant experts, e.g. student member for the meeting with students);
6.5 lead expert team meetings constructively to enable the team to reach accurate androbust judgments;
6.6 provide the relevant sections in the External Review Report for the assigned standardsand performance indicators;
6.7 collate the final report, drawing on experts' contributions, and edit it to ensure that itmatches the requirements of the KAA Accreditation manual;

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6.8 ensure that the written report is a fair and accurate reflection of the HEI, is written in straightforward language and is of a quality that requires little or no further editing;
6.9 ensure that the report is produced in the timeframe agreed with the coordinators ofKAA;
6.10 respond to, and resolve, any complaints made after the review, including correctionsof potential factual errors in the External Review Report, in close consultation with theexpert team.

7. For the purpose of the re/accreditation process, each HEI is invited to nominate a quality assurance officer to act as the HEI's main link with the expert team; this person will be referredto as the officer.

8. The officer, same as any other representative of the HEI, shall not be present during themeetings taking place between the expert team and students, staff, employers, etc. The officer should have a detailed understanding of the HEI's programs and operationsincluding; preferably, the officer should be sufficiently senior to ensure the cooperation of staffat all levels before, during and after the review, as well as to have authority to carry out therole with autonomy.

9. The officer's responsibilities include:

9.1 submit or ensure the submission of the self-evaluation documentation;
9.2 provide information to KAA to enable the agency plan the evaluation process;
9.3 brief the interviewees the expert team will meet during the site visit about the arrangements of the evaluation process;
9.4 inform all students and employers about the evaluation process;
9.5 liaise with the experts and coordinators of KAA about the team's use of the provider'sfacilities, for example, working/meeting rooms;
9.6 ensure that interviewees are available for meetings as scheduled and, if need be,organise supplementary meetings as requested by the experts;
9.7 ensure that the necessary documents are available for experts and facilitate thesubmission of supplementary documents, should the expert team ask for any;
9.8 receive the External Review Report and ensure the correction of potential factualerrors;
9.9 coordinate the communication between KAA and the HEI on any other subsequenttopics, such as the Follow-up plan.

10. In order to ensure a smooth re/accreditation process, guarantee the quality of the site visits through objectivity and professionalism and coordinate a close communication between the expert teams and the higher education institutions in all stages of the process, KAA delegatesat least one representative that accompanies the expert team for the entire duration of the external assessment procedure. The KAA coordinator does not play an active role and does notcontribute to the decisions on the expert team recommendation to KAA for the HEI.

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Article 38

The KAA coordinator will have the following tasks and responsibilities

1. **Preparation of the site visit:**

1.1 ensure that the prior notice of the re/accreditation process given to the HEI issufficient in order to prepare adequately for the visit;
1.2 ensure that the HEI submits the self-evaluation documentation by the set deadline;
1.3 ensure that the expert team receives the self-evaluation documentation in time toprepare adequately for the visit;
1.4 provide guidance and address all concerns of the HEI and expert team in approaching the self-evaluation documentation;
1.5 act as an intermediary of all formal affairs and communication between the expertteam and the HEI;
1.6 ensure that all practical arrangements (accommodation and local transfer) are inorder.

2. **During the visit:**

2.1.1 Administration of the site visit:
2.1.2 ensure that all practical arrangements, such as working/meeting rooms areavailable for experts;
2.1.3 act as an intermediary of all formal affairs and communication between the expertteam and the HEI;
2.1.4 process potential requests for supplementary documentation asked by the expertteam;
2.1.5 ensure the adherence to the agreed site visit agenda – timetable, locations,attendees and adjust the site visit agenda if needed;
2.1.6 provide support in applying KAA Accreditation manual and other supporting documentation (templates, annexes, etc.);
2.1.7 offer clarifications for both the expert team and the HEI regarding all administrativesteps of the review process;
2.1.8 ensure the adherence to the KAA Code of Ethics and moderate the situation in case of potential breaches;
2.1.9 collect original signatures of the experts on the re/accreditation process relevant documentation.

3. **Coordination in the content of the review:**

3.1 organize online preparatory meeting with the expert panel prior to the site visit;
3.2 organize the training of the expert panel and brief them with relevant informationabout the Accreditation Manual and the context of the HEI to be evaluated;
3.3 attend all meetings on the site visit agenda and debriefing meetings;
3.4 supervise and ensure the expert teams cover all standards included in the KAA Accreditation manual;

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3.5 ensure the fair interpretation of all standards and performance indicators includedin the KAA Accreditation manual;

3.6 ensure the expert teams triangulate and cross reference the data sources so thatto reach sound judgments.

4. Evaluate the performance of the reviewers:

4.1 take notes for the KAA experts' performance appraisal process - the extent to whichexperts are adhering to the Code of Ethics and procedures of KAA;

4.2 complete and submit the evaluation form of the experts' performance.

Article 39

Transitional and Final Provisions

1. For all matters not covered by this Regulation, the provisions of the Law on General Administrative Procedure shall be appropriately applied.

2. The amendment and supplementation of this Regulation may be carried out according to the same procedure as its approval.

Article 40

Repeal

Upon the entry into force of this Regulation, the Manual for the Accreditation of Higher Education Institutions (updated by the decision of the SCQ Ref.932/22) is repealed.

Article 41

Entry into Force

This Regulation enters into force on the day it is approved by the State Council of Quality and signed.

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SELF ASSESSMENT REPORT OF THE KOSOVO ACCREDITATION AGENCY (KAA)

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Introduction

The Kosovo Accreditation Agency (KAA) is a regulatory agency that guarantees quality assurance in higher education in the Republic of Kosovo. Its mission is to support the development of quality in higher education institutions through external evaluation and to ensure Kosovo's society that the quality of higher education is at the level of international standards.

Since its establishment, KAA has aimed at transforming higher education in Kosovo through external evaluation, promoting reforms, and raising the awareness of higher education institutions about the importance of establishing and taking responsibility for a functional internal quality assurance system. The impact of KAA on the higher education system is evident. External quality evaluations conducted by KAA have ensured that only higher education institutions that meet the minimum quality criteria operate in the territory of the Republic of Kosovo. The external evaluations have not only allowed to keep in control the possible detrimental impact of mobility from other higher education systems without effective internal and external quality assurance but have also increased society's trust in diplomas and academic degrees obtained nationally. Throughout the years, KAA has significantly facilitated the establishment of a functional internal quality assurance system at higher education institutions, leading to the improvement of procedures and criteria for the selection of academic staff, the development of curricula that are learning outcomes based, the provision of a transparent higher education, and the better involvement of the academic community in different stages of governance and decision-making in higher education institutions.

Since its foundation, KAA has had a strategic goal of membership/registration in European quality assurance mechanisms such as the European Association for Quality Assurance in Higher Education (ENQA) and the European Quality Assurance Register for Higher Education (EQAR). To this end, KAA has designed an external quality assurance system that meets the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). Implementing the accreditation process and monitoring procedures in line with the ESG have contributed to aligning Kosovo's higher education system with the European Higher Education Area (EHEA).

KAA was subject to external evaluation for the first time in 2014. The outcome of the external review was positive, and KAA became a full member of ENQA. A year later, in 2015, KAA was also registered in EQAR. Due to interference from the political level in the agency's independence, KAA was excluded from EQAR in February 2018 and consequently subject to an extraordinary evaluation initiated by ENQA in 2019. As a result of the unfavourable circumstances for KAA at the time (lack of permanent management, limited human resources, postponed external assessment procedures, and lack of a fully independent decision-making SCQ), KAA failed to demonstrate substantial compliance

with ESG, particularly its ability to assume responsibility for independent decision-making, which consequently resulted in KAA's removal from ENQA.
KAA's removal from ENQA and EQAR caused an unprecedented social debate. As a result, over the past five years, KAA has been firmly committed to meeting the Standards and Guidelines for Quality Assurance in the European Higher Education Area and, most importantly, to restore KAA's status as an autonomous agency and to demonstrate that third parties do not influence its accreditation decisions. Throughout this period, the entire political spectrum, the academic community, civil society, international donors, etc., have supported these goals and in particular recognized the need to restore, consolidate and advance KAA's institutional and operational independence.

One of the main results of this commitment is the drafting and approval (in June 2023) of the KAA Law by the Assembly of the Republic of Kosovo. The Law consolidates KAA's independence by defining its status as a regulatory agency in the Republic of Kosovo, responsible for drafting external evaluation policies and standards, and laying out clear rules for the appointment and dismissal of its SCQ and Director to ensure that KAA is independent organizationally and in its decision-making.

The role of KAA as the regulatory mechanism of quality in higher education has evolved in recent years. Besides the formal recognition of its accreditation decisions, KAA has been considered a key partner by all governmental agencies when drafting and approving various strategic documents affecting the entire education system and the employment schemes in Kosovo. KAA has participated in numerous donor projects. Project interventions, mainly through international expertise, have strongly supported and influenced KAA's performance improvement and, in multiple cases, also resulted in positive changes in the quality assurance practices of higher education institutions.

Over the past five years, new positive developments affecting the functioning of KAA have taken place. The legislative framework has been consolidated, the number of administrative staff has increased, the decision-making independence has been safeguarded through the introduction of additional legislative norms for the appointment of the SCQ members, the number of projects that KAA has benefited from international donors has increased, etc. Majority of its improvements reflect the strategic commitments set out under the KAA Strategic Plan, with particular emphasis the strategic objective to regain full membership to ENQA and registration on EQAR. Following the substantial developments and new circumstances, KAA has undergone a self-assessment process, the results of which are presented in the following report.

1. Company Development of the self-assessment report (SAR)

To draft this self-assessment report, the SCQ has appointed a core working group consisting of SCQ president Prof. Dr. Hasnija Ilazi, the Director of KAA Mr. Naim Gashi and the Director of the Department for Follow-Up Procedures Mr. Shkelzen Gerxhaliu.

The working group has carefully reviewed the requirements of the ESG and has evaluated the KAA processes and activities against those. The first draft of the self-evaluation report was discussed among the KAA staff and members of the SCQ in a workshop held in Ohrid on 23rd December 2023. Inputs gathered from the Ohrid workshop were further integrated into the content of the SER through another workshop held in the end of January 2024 in Prishtina, among the KAA staff, members of the SCQ, international donors and two representatives of higher education institutions.

After finalizing the self-evaluation report, the document was accessible for public discussion through the webpage. In addition, KAA send via email the self-evaluation report to all institutions of higher education, international experts, representatives of MESTI, international donor agencies, representatives of NGOs dealing with higher education, and student representatives of the University of Prishtina "Hasan Prishtina".

KAA received several comments from the international experts particularly and few comments from the higher education institutions. The working groups integrated all inputs and finalized the document in April 2024.

2. Higher Education and QA of higher education in the context of the agency

The main responsible authority for the development and implementation of legal and strategic policies in the Higher Education sector in Kosovo is the Ministry of Education, Science, Technology and Innovation (MESTI). Besides developing, implementing, and overseeing the higher education policies, MESTI is also responsible for the licensing of higher education institutions in Kosovo. Specific responsibilities for quality assurance of higher education are delegated to the Kosovo Accreditation Agency (KAA), a regulatory agency. Moreover, the National Qualifications Authority (NQA), is an independent public agency responsible to develop the national qualifications framework and to regulate the national qualifications system.

The Law on Higher Education in the Republic of Kosovo supports a diverse higher education landscape in Kosovo, allowing for the development of HEIs in different modalities and formats. An accredited and licensed higher education institution in Kosovo can have the status of university, university-college, college, institute, school, or academy. According to the Law on Higher Education:

- the denomination 'University' may be granted only to an accredited provider of higher education which has provided accredited courses or programs for a minimum of at least four years in at least five different subject areas as defined in the sub legal act of the Ministry and who has issued at least one graduate with an accredited doctorate in each of these programs;
- the denomination 'University college' may be granted only to an accredited provider of higher education, which offers doctoral studies in at least three study areas which are accredited by KAA;
- the denomination 'college'
- the denomination 'institute'
- the denomination 'school of higher education'
- the denomination 'academy'

Pursuant to article 4 of the HE Law, higher education degrees are organized as following:

- First level – three (3) to four (4) years of studies during which the student obtains 180 to 240 ECTS and obtains a Bachelor's Diploma.
- Second level – one (1) to two (2) years of studies, after completion of the first level, during which the student obtains 60 to 120 ECTS and the student obtains a Master's Diploma.
- Third level – a programme of doctoral studies with an academic and independent research-scientific character; no standard length or ECTS range is defined for doctoral studies.

- Any other post-secondary education programme/offer in the levels 5, 6, 7 and 8 of the European Qualifications Framework for Lifelong Learning, for which credits may be given (ECTS), but which do not lead to a full degree/diploma.

Pursuant to article 9 of the Law on HE, public higher education institutions in Kosovo may be established by a decision form MESTI, subsequently ratified in the Kosovo Assembly. Under article 12 of the Law, private higher education institutions may be 'founded by a private company, foundation, or trust, situated in Kosovo and having a registered office in Kosovo. However, the Law allows the operation of a higher education institution only after it has been granted accreditation by KAA and licensed by MESTI under the conditions of the law.

Currently, Kosovo's higher education system consists of 26 institutions, 9 of which are public and 17 privates. There are 382 study programs, 223 offered by public higher education institutions, and 159 by private institutions. There are 71,835 students attending higher education in Kosovo, of which 41,212 are in the public sector and 30,623 in the private sector.

Type	Public		Private	
	Number	Students	Number	Students
University	7	41652	-	
University-college	-		-	
College	1	329	15	28848
Institute	-		-	
School	1	259	-	
Academy	-		2	747

3. History, profile, and activities of the agency

3.1. Brief history of the agency and its legal framework

The establishment of an agency responsible for promoting quality in higher education was mandated by the Law on Higher Education of 2002. This Law envisaged that this agency would be the main authority in Kosovo to conduct licensing, inspection, and accreditation so that the quality of higher education institutions in Kosovo could develop and improve. The Law also provided for the establishment of the State Council of Quality (SCQ), which would be responsible for issuing decisions and recommendations for accreditation. Based on this Law, in 2004, through the Administrative Instruction for the Establishment of the Kosovo Accreditation Agency, the Ministry of Education, Science and Technology (MEST) established the Kosovo Accreditation Agency (KAA). The primary responsibilities under this administrative instruction included quality assessment and accreditation of public and private institutions.

The establishment of KAA took place at a time when the higher education system was expanding at fast pace with several private institutions of higher education that were operating without any stringent quality criteria or external assurance thereof. This expansion was characterized by different types of institutional statuses that could be created relatively easily, subject to MEST licensing, a more formal and technical process than substantive.

Pending the complete establishment and functioning of the KAA, higher education quality was not thoroughly assessed externally until 2008.

In 2008, the Government of the Republic of Kosovo invited the British Accreditation Council (BAC) to conduct an initial assessment of the 31 higher education institutions with a license from MEST granted between 2003 and 2008. About 13 higher education institutions underwent the evaluation process, while the rest merged with other institutions or ceased their activity before the evaluation took place. BAC conducted the assessment with about 63 international experts, resulting in negative accreditation recommendations for 12 HEIs – i.e. all but one – that were consequently not allowed to enroll new students.

KAA became fully operational in 2009 and carried out the first accreditation process in that year. The functioning of KAA was strongly supported by international projects that contributed to the design of accreditation procedures and standards and the professional development of KAA staff. The accreditation process was conducted in public and private institutions identically. The accreditation standards for the institutional level and study programs were designed in accordance with the ESG and drawing on the good practice from similar standards applied by European agencies.

Until 2011, the decisions of SCQ for the accreditation of HEIs and their programs had to be formally approved by the Government of the Republic of Kosovo. With the approval of

the new Higher Education Law in 2011, this practice was discontinued and the SCQ itself became the final decision-making authority for accreditation.

From 2009 onwards, the number of private higher education institutions decreased, while the number of public universities began to increase. In addition to the University of Pristina, until 2014, the Government of the Republic of Kosovo established six other regional universities. As a result of the lack of human resources and fully developed processes, KAA was initially unable to fully implement all the requirements of the Administrative Instruction for Accreditation of HEIs in Kosovo, especially the requirements related to the qualification and number of academic staff. This often-allowed applicants to use the academic credentials of the same persons to reach a positive accreditation decision for several programmes, resulting in the extraordinary growth of study programs.

To address these challenges, KAA consolidated the accreditation process through the completion of legal acts and review of accreditation standards by adapting them more to the context of Kosovo and by making them more resilient against practices such as double-reporting academic staff. The accreditation procedure was re-designed in a two-step approach to enable the KAA to first verify formal criteria (e.g. availability of the minimum number of academic staff) before initiating the external evaluation with international experts. KAA gradually increased the number of administrative staff, took measures to improve the review of HEIs' self-evaluation documentation, and improved the external evaluation process. In this regard, an important role was the collection of data through the digital platforms of the KAA, which made the verification of the criteria defined in the AI for Accreditation significantly more efficient and reliable.

In addition to the accreditation process, KAA was also engaged in operationalizing other components, such as follow-up procedures and appeal procedures. KAA strategically used the projects of external donors who, through international expertise, supported the revision of standards and guidelines. Besides considering the needs and developments of the higher education system in Kosovo, the standards and guidelines for external evaluation procedures were harmonized with the ESG, which were a prerequisite for increasing the international recognition of academic degrees issued in Kosovo.

Since its establishment, KAA was committed to gaining membership and actively engage in international organizations and networks such as ENQA, CEENQA, INQAAHE, etc., and to demonstrate its compliance with the ESG by registration on EQAR. KAA became a member of ENQA in 2014 and registered on EQAR in 2015. However, following interference from the political level, infringing on the agency's independence, KAA was excluded from EQAR in 2018 and from ENQA in 2019.

In June 2023, the Assembly of the Republic of Kosovo adopted the Law on KAA, which consolidates KAA's independent status as a regulatory agency in the Republic of Kosovo and contains a number of basic provisions regarding its work, e.g. the types of

accreditations and the main areas the standards need to cover. While the Law on Higher Education remains unchanged, the more general provisions on accreditation and KAA therein have now been superseded by the more specific provisions in the Law on KAA.

Regarding internationalization, AKA regularly engages in participation in quality assurance forums and activities organized by ENQA, INQAHE, etc. In recent years, KAA has also made various visits to European quality assurance agencies to exchange good practices of external evaluation processes such as in Austria, Germany, Montenegro, visits to the ENIC NARIC of Czech Republic, etc. KAA staff have also participated in staff development programs such as in ASIIN in Germany. It is also very important to mention the twinning project between the Accreditation Agencies of Kosovo and Austria. The Kosovo Accreditation Agency (KAA) and the Austrian counterpart Agency for Quality Assurance and Accreditation, with the support of the Heras Plus project, funded by the Austrian Development Agency (ADA) have launched the twinning project. The twinning project aims at the exchange of Austrian experiences for the KAA, through mutual visits, conferences, training, and consulting in the field of ESG standards implementation. KAA staff will visit the Austrian Accreditation Agency and the Austrian partners will also visit Kosovo, where they will exchange experiences and best practices of institution management, process management, quality assurance, and supervision of results.

KAA has benefited from international expertise through the projects funded by ADA (Austrian Development Agency) and implemented by consortiums of organizations such as WUS Austria and ORCA for reviewing its policies and regulations. ADA funded projects include QAINT (The Quality, Accountability, Integrity, and Transparency in Higher Education Project – QAINT), HERAS+ (Higher Education Research and Applied Science Plus), and HEI25 (Higher Education Intervention 2025).

- QAINT was a project aimed at aligning the Kosovo higher education system with the international standards of quality, transparency, integrity, and accountability. It was implemented for three years (2019-2022) and its main targeted group was KAA. KAA benefited from the expertise through QAINT for the drafting of the KAA Follow-Up and Monitoring Methodology and drafting of the Regulation on Organization and Systematization of Jobs. QAINT supported also KAA by international expertise for the major workshops KAA held throughout the period of 2019-2022.
- HERAS+ is a project that aims at a more competitive and diversified public higher education and research sector in Kosovo in line with the European Higher Education Area (EHEA). KAA was the main beneficiary from the HERAS+. It supported the drafting of the KAA strategic plan, the drafting of the Standards for the Evaluation of Doctoral Programs, etc. Most recently, HERAS+ supported KAA with international expertise for the revision of the Accreditation Manual and the accreditation standards for institutional evaluation and program evaluation.

- HEI25 is a project that aims to support KAA as its main beneficiary. Its first output is increased usage of digital services and workflows by the KAA and improved credibility of the accreditation process. Through HEI25, KAA drafted a needs assessment through which it identified the gaps in its work processes and identified solutions for improving work processes through digitalization. HEI25 has also supported KAA with digital software equipment which have contributed significantly to the efficiency of the KAA's work.

3.2. Profile of the agency

The Kosovo Accreditation Agency (KAA) is an independent regulatory agency responsible for external quality assurance, including accreditation, re-accreditation, monitoring, validation and all other external quality assurance processes of higher education institutions and their study programs in the Republic of Kosovo, in accordance with international best practices, including in particular the relevant European standards in the field of quality assurance in higher education.

The mission of KAA is "through the accreditation process, to support the development of quality in Higher Education Institutions and assure the society of Kosovo that the quality of teaching and learning is at the level of international standards".

The goals that stem from the mission statement of the agency are the following:

- to promote, improve and enhance the quality of higher education;
- to increase transparency and accountability in the higher education system;
- to improve the quality of studies in higher education institutions;
- to encourage innovative content in higher education;
- ensure the comparability of qualifications from Kosovo higher education institutions internationally;
- contribute the objective of integration of Kosovo in the European Higher Education Area.

The values that guide the work of KAA are independence, transparency, credibility, and professionalism.

KAA is independent in drafting and approving its detailed rules, procedures and criteria for accreditation, reaccreditation, validation, external evaluation, quality control, monitoring and selection of international experts, within the overarching stipulations of the Law on Higher Education, the Law on KAA and the Administrative Instruction (AI) on Accreditation. Additionally, it drafts and develops the strategic plan of the agency, including the budget planning and execution in accordance with the applicable laws. KAA is responsible to cooperate with MESTI regarding the issuance, amendment, restriction or revocation of licenses. KAA prepares annual reports on the activities related to accreditation decisions.

KAA comprises the State Council of Quality (SCQ), the KAA Director and administration, and the Appeals Committee.

In line with the national legislation, the SCQ is a collegial decision-making body that ensures the quality of higher education and is independent in exercising its competencies. It acts as the Board of KAA. The State Council of Quality consists of nine (9) members, three of whom are international. According to the new Law on KAA among the nine members, the SCQ shall comprise a student member with the right to vote. The law further defines that besides the Director of KAA, who is an ex officio member of the SCQ, the SCQ shall include two industry representatives as non-voting members.

The SCQ is led by its president, who is elected with the majority of votes of all voting members. The president is elected from amongst the local academic members. According to the Law, the president is responsible for leading the SCQ's work, convening and chairing meetings, signing decisions and other documents adopted by the SCQ, representing the SCQ in its national and international activities, etc.

SCQ members are proposed by the Ministry of Education from a shortlist established by a selection commission, including the major stakeholders and civil society, based on an open call and specific requirements stipulated in the Law on KAA. Members are appointed by the Assembly of the Republic of Kosovo. Their mandate is four (4) years, with the exception of the student member mandate, which shall be (2) years. The current composition of the SCQ is as follows:

- Prof. Asoc. Dr. Hasnije Ilazi, President (local academic);
- Dr. Klemen Miklavič; Vice President (international);
- Prof. Asoc. Dr. Gëzim Tosuni, Member (local academic);
- Prof. Asoc. Dr. Maja Martinović, Member (international);
- Dr. Jaakko Kauko, Member (international);
- Prof. Dr. Mirlinda Batalli, Member (local academic);
- Prof. Dr. Avni Berisha, Member (local academic);
- Dr. Jetmir Haxhibeqiri, Member (local academic);
- Ex officio member, KAA General Director, Naim Gashi

Because the Law on KAA, has entered into force in June 2023, the procedure for the appointment of the student member and two non-voting members from the industry has not yet been initiated. KAA has sent a letter to the Parliament of the Republic of Kosovo based on which it expects the imminent appointment of a student representative to the SCQ by the Parliament.

The Administrative structure of KAA consists of the Director and the administrative staff, who are recruited based on the general national law on the recruitment of public officials. KAA currently employs 18 administrative officers, of which nine (9) are tasked with the

evaluation and follow-up procedures (an increase of seven (7) employees compared to 5 years ago), three (3) work in the finance, two (2) in the legal issues, two (2) in the administration, and one (1) IT who supports the digitalization of the agency. KAA plans to employ another 12 persons in accordance with its strategic plan and objectives. The increase in the number of employees from 10 in 2018 to 18 currently and subsequently to 32 by the end of September 2024 represents an incremental growth of KAA's capacities in human resources, which shall contribute to the quality of its services.

4. Activities of KAA

The primary responsibilities of KAA, according to the Law on KAA, are:

- Accreditation and re-accreditation of institutions;
- Accreditation and re-accreditation of programs of higher education institutions; including online and distance programs, programs offered in foreign languages, joint programs and dual diploma programs;
- Validation of international accredited institutions and programs;
- Follow-up and monitoring of institutions of higher education;
- Continuous quality control and advancement in accredited institutions and their study programs;

KAA's main external quality assurance activity is the periodic (re-) accreditation process conducted at institutional and study program levels. The accreditation process begins with the application, which needs to be submitted to KAA at least one year before the envisaged beginning of the accreditation period, or at least one year before expiry of the current accreditation, respectively. Applications, as a first step, are reviewed and accepted by SCQ based on the formal criteria related to the required qualifications and scientific record of academic staff. Following the formal acceptance of the application, HEIs are invited to submit their full self-evaluation documentation for KAA to proceed with the arrangement of the site visit, conducted with international experts who produce a review report. The accreditation process is completed with a decision by SCQ, based on the experts' review report. Where HEIs are dissatisfied with the final outcome of the accreditation process, they are entitled to file an appeal to the Appeals Committee of KAA.

Institutional accreditation is a formal quality assessment process that determines the official recognition status granted by the KAA for the institution of higher education. Obtaining institutional accreditation is obligatory for all higher education institutions operating in the territory of the Republic of Kosovo to develop academic activity. Institutional accreditation includes the general right to award qualifications for a certain period.

Program accreditation is a formal process of quality assessment, which determines the official status of recognition granted by the KAA to Bachelor or Master programmes, which enables the higher education institution to award qualifications for the relevant field within a certain period of time. Study program accreditation is also obligatory for all higher education institutions willing to issue a degree in the territory of the Republic of Kosovo.
Evaluation of Doctoral Programmes is a formal process of quality assessment, which determines the official status of recognition granted by KAA, which enables the higher education institution to award PhD qualifications for the relevant field within a certain period of time.

Monitoring procedures – The KAA develops monitoring procedures which aim to verify and confirm whether the given conditions of accreditation as well as the standards of the Accreditation Manual continue to be applied by the accredited higher education institutions. These procedures are implemented at the institutional level and/or at the level of study programs and are not duplicated by the follow-up procedure which focuses only on fulfilling the recommendations given in the external evaluation reports.

An overview of the applications and their formal acceptance in the last three years is presented below:

	2021		2022		2023	
	public	private	public	private	public	private
Applications for institutional accreditation	-	6	1	16	5	7
accepted for review	-	6	1	16	5	7
not accepted	-	-	-	-	-	-
Applications for programme accreditation – Bachelor	89	100	35	72	17	43
accepted for review	73	72	32	40	13	21
not accepted	16	28	3	32	4	22
Applications for programme accreditation – Master	75	40	42	36	32	25
accepted for review	63	26	29	25	21	13
not accepted	12	14	13	11	11	12
Applications for programme accreditation – PhD	5	-	5	1	2	-
accepted for review	5	-	5	-	2	-
not accepted	-	-	-	1	-	-

An overview of the accreditation process conducted in the last three years is presented below:

	2021		2022		2023	
	public	private	public	Private	Public	Private
Evaluations in institutional level	-	6	1	13	5	5
resulted in positive decision	-	3	1	11	4	3
resulted in negative decision	-	3	-	2	1	2
withdrawn	-	-	-	3	-	2
Evaluations for programme accreditation – Bachelor	73	72	32	36	13	17
resulted in positive decision	71	54	30	34	13	15
resulted in negative decision	2	11	2	2	-	2
withdrawn	-	7	-	4	-	4
Evaluations for programme accreditation – Master	63	26	29		21	13
resulted in positive decision	53	20	27	22	19	9
resulted in negative decision	10	4	2	-	2	4
withdrawn	-	2	-	3	-	-

Evaluations for programme accreditation – PhD	5	-	5	-	2	-
resulted in positive decision	1	-	2	-	2	-
resulted in negative decision	4	-	3	-	-	-
withdraw	-	-	-	-	-	-

NB: The number of accreditation processes in a year can be smaller than the number of accepted applications in case the application was accepted in one year, while the evaluation process only took place in the next year.

An overview of the expert panels engaged in the last three years is presented below:

	2021	2022	2023
Experts involved, institutional	21	28	20
Experts involved, programs	236	139	150
Student experts involved	105	94	108

Based on the laws in force, KAA can also recognize international accreditation of HEIs that operate within the territory of the Republic of Kosovo if their diplomas are subject to verification by MEST. All higher education institutions that opt for an external evaluation at the institutional or study program level by an international accreditation agency must apply for recognition at the KAA. Likewise, if an institution accredited by KAA, in cooperation with an international partner university, decides to offer in Kosovo study programs accredited by the relevant accreditation agency in their country of origin, these accreditations need to be recognized by KAA. In each case, KAA decides to recognize international accreditation only if the respective accreditation agencies are registered on EQAR, recognised by the US Department of Education (USDE) or the Council for Higher Education Accreditation (CHEA).

5. Compliance with European Standards and Guidelines (ESG) Part II

5.1. Consideration of internal quality assurance

External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.

KAA conducts accreditation process based on predefined standards which aim among others to consolidate the internal quality assurance systems at institutional level and support the higher education institutions in the quality enhancement and continuous development of their operations. To this end the accreditation process is designed to supporting higher education transform itself through the implementation of reforms and the increasing awareness of the importance of quality and quality assurance.

1. Institutional accreditation

The institutional accreditation process is obligatory for all higher education institutions operating in the territory of the Republic of Kosovo. It enables the development of academic activity and the right to award qualifications for a certain period. Institutional accreditation focuses on certifying the compliance of education providers against the standards of institutional accreditation. These focus on whether the institution has adequate general processes and resources in place to develop and deliver quality higher education, and are organized in the following general areas:

- Public mission and institutional objectives
- Strategic planning, governance, and administration
- Financial planning and management
- Academic integrity and public accountability
- Quality management
- Learning and teaching
- Research
- Staff, employment processes, and professional development
- Student administration and support services
- Learning resources and facilities
- Institutional cooperation

An elaboration of the requirements of the standards for institutional accreditation for each general area against ESG Part 1 is provided below:

ESG Part I	General areas of KAA Standards for Institutional accreditation
1.1. Policy for Quality Assurance	General Area 1) Institutional Mission and Objectives; General Area 2) Strategic Planning, governance and administration; General Area 4) Academic Integrity, responsibility and public accountability; General Area 5) Quality Management;
Accreditation at the institutional level focuses on the mission and vision of HEIs and the institutional objectives. It requires the HEIs to have clear and measurable mission statements defined and agreed upon by the academic community members. The institutional accreditation process focuses on the internal quality system of higher education institutions. HEIs must have institutional policies for QA and a dedicated unit to implement internal quality assurance processes. All accredited HEIs in Kosovo have established Quality Assurance Offices or have assigned responsibilities to a designated person. The primary QA exercise is the student questionnaires, and they are regularly implemented to assess teaching, administrative support, and infrastructure, typically on a semester basis. Some of the HEIs publish internal evaluation results and reports on their websites. In addition, KAA believes that in line with the accreditation standards, HEIs need to ensure that reports on the overall quality of the programs are prepared periodically and that they are not only produced for accreditation purposes. Further, it considers that HEIs still need to ensure that besides students and academic staff, graduates and employers are also systematically used in quality assessments of HEIs. Regarding student involvement, KAA considers that it has substantially influenced the increase of student involvement at every decision-making and consultative body of all institutions of higher education in Kosovo. Whereas the statutes of public universities sometimes allow students to vote only on student issues, KAA has advocated for alternatives and ensuring the full right to vote for students for all operations of the universities. Program accreditation (Ba/Ma as well as PhD) build on this, as all institutions undergoing program accreditation will have passed an institutional accreditation already. For this purpose, in addition to the accreditation standards, KAA has produced research reports and specific guidelines that aim to strengthen student involvement in internal quality assurance processes and policy-making and decision-making bodies of HEIs.	
1.2. Design and Approval of Programs	General Area 5) Quality Management; General Area 6) Teaching and Learning; General Area 7) Research
The accreditation standards at the institutional level address the design and approval of study programs. HEIs must have defined procedures for the drafting of curricula and structures in place that are responsible for approving the opening of new programs. Accreditation standards require that relevant academic and professional advice is considered when defining the intended learning outcomes of the study programs. Also, standards require that learning outcomes are based on knowledge, skills, and competencies. With the implementation of the Accreditation Manual, respectively, standards for BA and MA programs, KAA considers that positive developments are noted regarding the involvement of students and academic staff members in curricula design. While HEIs have made progress toward establishing communication channels with industry representatives for program design, KAA still considers that substantial work needs to be done with regard to formalizing the communication between HEIs and external stakeholders. Notable progress has been made in relation to the establishment of advisory bodies at institutional levels who provide feedback about the quality of graduates in the labor marked vis a vis the marked needs.	
1.3. Student Centred Learning – Teaching and Assessment	General Area 6) Teaching and Learning
The standard requires that HEIs organize their teaching and learning activities based on a student-centred approach. It requires HEIs to have effective systems in place for ensures that programs meet high standards of learning and teaching though initial approvals, regular changes and monitoring of performances. The standards requires that	

study programs are learning outcomes based, the learning outcomes are consistent with the NQF descriptors, that HEIs have adequate staff for the delivery of study programs, and that regularly assess the effectiveness of teaching and assessment methods.

KAA has noticed that overall HEIs have improved the learning methods and environments to become more student-centred and stimulate student's motivation, self-reflection and engagement in the learning process. However, KAA considers that more work needs to be done with regards to formulation of learning outcomes and their assessment in order to ensure that assessments methods adequately assess the achievement of the learning outcomes.

1.4. Student admission, progression, recognition and certification	General Area 9) Student administration and support services

Processes regarding student admission, progression and certification are covered generally in institutional accreditation standards, but in most detail at the program level.

HEIs are required to have transparent and clear admission procedures in place and ensure that these procedures are conducted fairly. The standards also require HEIs to provide student feedback on their performance and results and provide additional assistance if needed, to support student's progress. Likewise, institutions are required to have flexible treatment of students in special situations with respect to deadlines and formal requirements in the program and to all examinations.

A particularly positive development noted by KAA is the increased information provided by HEIs for students on the regulations and other teaching and learning aspects covering all phases of the student life cycle. Most HEIs have drafted and disseminated Student Handbooks and made them available to students upon enrolment. Whereas increased attention to the management of progression data by HEIs is also noticed, KAA considers that more work is needed to have formal arrangements in place to collect and manage student progression.

1.5. Teaching Staff	General Area 8) Staff, employment, promotion process and professional development General Area 7) Research

The presence of sufficient and highly qualified teaching staff is a key element of the Kosovo accreditation system and hence covered at both levels.

As part of the institutional accreditation process, HEIs demonstrate that they have staff development plans that formally support academic staff members in publishing papers, participating in international scientific conferences, involving students in research works, and involving research results in the study program contents.

KAA has further specified requirements for staff through an SCQ decision: full-time staff of HEIs, whom the SCQ verifies during the formal application process, are required to have papers published in Scopus and WoS platforms. The decision has subsequently increased the level of research background of academic staff.

At the study program level, the formal criteria (minimum number of staff) are checked by the SCQ at the application stage. Accreditation standards for the study programs focus on the workload of academic staff, availability of academic staff for the student groups, coverage of disciplines within the curricula, opportunities for additional professional development, assessment of academic staff, etc.

While substantial progress is made with regards to the availability of full-time staff, KAA considers that HEIs need to have more formalised procedures in place for staff development. In addition, KAA considers that HEIs have substantially improved the assessment procedures of academic staff.

1.6. Learning resources and student support	General Area 2) Strategic Planning, governance and administration; General Area 3) Financial Planning and Financial management; General Area 9) Student administration and support services;

	General Area 10) Facilities and learning resources.
The institutional accreditation standards focus on the overall strategic and financial planning in regard to learning resources and student support. The specific infrastructure and learning resources in place for each study program are assessed primarily in program accreditation. The assessment includes aspects such as libraries, online subscriptions, laboratories, software, reading rooms, etc. The standards also require HEIs to have infrastructure and facilities dedicated adapted to students with special needs. KAA has noticed substantial improvements in learning infrastructure and the expansion of student support services, with particular attention to academic counselling. Catering to students with special needs is the area in which KAA considers that most work still remains to be done in this respect.	
1.7. Information Management	General Area 5) Quality Management
Regarding information management, HEIs must have statistical data in accessible central databases that are used to prepare reports on indicators and other tasks in monitoring quality. This is primarily addressed in the standards related to quality management at institutional and program level. While the number of data collection tools has increased, KAA recognizes that HEIs need to do more actually to use those data for quality improvement processes. Also, data need to better be used to inform policies and strategic developments of the HEIs.	
1.8. Public information	General Area 4) Academic Integrity, responsibility and public accountability
The provision of public information is addressed in the institutional accreditation process. HEIs must publish accessible and detailed information regarding their academic and research activities, including detailed information about the study programs, learning outcomes, course descriptions, study conditions, etc. KAA considers that substantial progress has been made about public information. However, it considers that more information needs to be published about the final projects of students or theses and information about the student evaluation results.	
1.9. Ongoing monitoring and periodic review of programmes	General Area 5) Quality Management; General Area 6) Teaching and Learning;
KAA institutional accreditation standards address the ongoing monitoring and periodic review of programs. Institutions are requested to involve students and other stakeholders in reviewing their study programs. Specifically, accreditation standards require that the results of the internal quality assurance system be considered for further development of the study program. This includes evaluation results, investigation of the student workload, academic success, and employment of graduates. Evidence is required during the accreditation process to demonstrate changes implemented due to the reviewing process involving all academic community members. KAA has noted the number of internal quality assurance mechanisms to monitor the quality of the study programs at HEIs has increased. However, KAA considers that HEIs still need to have increased involvement of staff, graduates and relevant stakeholders when defining the learning outcomes and program objectives.	
1.10. Cyclical external quality assurance	According to the applicable legislation into force, all HEIs in Kosovo must undergo an institutional accreditation process at least every 3 to 5 years.
KAA institutional and program accreditations are cyclical. Depending on the validity of the specific institutional and program accreditations, a re-accreditation process takes place at least every 3 to 5 years for each institution and for each of its programs.	

2. Program accreditation

The study program accreditation focuses on certifying the compliance of specific study programs developed by education providers against the standards of accreditation for Bachelor/Master programmes, which are organized in the following general areas:

- Mission, objectives and administration;
- Quality management
- Academic staff;
- Educational process content;
- Students;
- Research;
- Infrastructure and learning resources.

An elaboration of the requirements of the standards for program accreditation for each general area against ESG Part 1 is provided below:

<table>
<tr><th>ESG Part I</th><th>General Areas for KAA Standards for program accreditation (Bachelor and Master)</th></tr>
<tr><td>1.1. Policy for Quality Assurance</td><td>General Area 1) Mission, objectives and administration
General Area 5) Quality Management</td></tr>
<tr><td colspan="2">Similarly, to the institutional accreditation, quality management is also an important standard that HEIs must fulfil. Quality management at the study program level focuses on the quality assurance processes that deal with all aspects of program planning and delivery, including services and resources provided by the institution. Evidence is required during the program (re-)accreditation process to demonstrate changes implemented due to the reviewing process involving all academic community members. The standard requires that HEIs collect survey data from students, graduates and employers, and that these evaluations are made publicly available.

While KAA considers that quality assurance arrangements have been improved at the study program level, it considers that more work is needed to perform quality assurance procedures that cover the overall quality of study programs. Whereas HEIs procedure SERs for the accreditation purpose, it is very rare that HEIs produce overall quality reports at study program level outside the accreditation process.</td></tr>
<tr><td>1.2. Design and Approval of Programs</td><td>General Area 5) Quality Management
General Area 4) Educational process content</td></tr>
<tr><td colspan="2">HEIs are required to have well defined procedures in place for the drafting and approval of study programs and must involve external stakeholder. Study programs are required to be referenced against the NQF respective levels and learning outcomes must be defined in knowledge, skills and competences.

Whereas substantial progress has been made with regards to the drafting of study programs, KAA still considers that HEIs need more work to do with regards to the formulation of learning outcomes.</td></tr>
<tr><td>1.3. Student Centred Learning – Teaching and Assessment</td><td>General Area 4) Educational process content</td></tr>
<tr><td colspan="2">Accreditation standards focus on the teaching, learning and assessment for all programs. It requires HEIs to draft programs that are compliance with the respective NQF descriptors, that programs are learning outcomes based (knowledge, skills and competences), that programs promote a student-teacher relationship in which each assume the responsibilities in reaching the learning outcomes. It also requires HEIs to ensure that teaching strategies are fit for different types of learning outcomes, and they are flexible to meet the needs of different groups pf students. HEIs need to have assessment mechanisms to ensue that assessments are fair and objective and meet the learning outcomes. The standards also focus on the internship and facilitation of practice stages by the HEIs.</td></tr>
</table>

Whereas KAA considers that HEIs in Kosovo provide for an environment that is student centered, that students are supported to reach their learning outcomes, have access to different learning resources, are informed in advance about their assessments and requirements to meet the preconditions of the subjects, KAA considers that more work is needed to ensure the appropriateness between learning outcomes, teaching methods and assessments forms for subject level.	
1.4. Student admission, progression, recognition and certification	General Area 5) Students
Accreditation standards for study program also focus on student admission, progression and certification. HEIs are required to have transparent and clear admission procedures in place and ensure that these procedures are conducted fairly. The standard also requires HEIs to provide student feedback on their performance and results and provide additional assistance if needed, to support students' progress. Likewise, institutions are required to have flexible treatment of students in special situations with respect to deadlines and formal requirements in the program and to all examinations.	
1.5. Teaching Staff	General Area 3) Academic staff
Academic staff is also an important standard for the study program level. Besides the formal criteria that are checked by the SCQ on the application stage, accreditation standards for the study program focus on the workload of academic staff, availability of academic staff for the student groups, coverage of disciplines within the curricula, opportunities for additional professional development, assessment of academic staff, etc. While substantial progress is made with regards to the availability of full-time staff, KAA considers that HEIs need to have more formalised procedures in place for staff development. In addition, KAA considers that HEIs have substantially improved the assessment procedures of academic staff. In line with the accreditation standards, all HEIs have formulated Regulations on Staff Performance. KAA still considers that HEIs need more efforts to consolidate the assessment on staff and not only conduct the procedure to satisfy the accreditation standards. Research at the study program level is also assessed. Accreditation standards require HEIs to have scientific/applied research objectives which are also reflected in the research development plan of the institution. Institutions need to have clear policies for defining what is recognized as research, support staff for research activities, encourage academic staff to include in their teaching information about their research and scholarly activities that are relevant to courses they teach, etc. As stated in the accreditation standards for institutional accreditation, although all program holders have published papers in SCOPUS and WoS platforms, KAA considers that research still needs to be strengthen at the institutional and study program level across all higher education institutions in Kosovo.	
1.6. Learning resources and student support	General Area 1) Mission, objectives and administration General Area 7) Infrastructure
According to the standard at the program level, HEIs need to have infrastructure and learning resources in place for study program accreditation. Libraries, online subscriptions, laboratories, software, reading rooms, etc. are checked at each study program individually. Standards also require HEIs to have infrastructure and facilities dedicated adapted to students with special needs, in which standard KAA considers that HEIs need the most work done with respect to the standard for Infrastructure and Learning Resources. Also, KAA considers that increased access to relevant databases is still needed for HEIs at the program level.	
1.7. Information Management	General Area 1) Mission, objectives and administration General Area 5) Quality Management
The accreditation standards at the program level requires that statistical data on indicators, including grade distributions, progression and completion rates are retained in an accessible central database and regularly reviewed and reported in periodic program reports. It also requires that evaluation data with graduates and employers are used to provide evidence about the appropriateness of intended learning outcomes. While KAA considers that HEIs have been substantial progress with regards to the collection and maintenance of data through digitalized platforms, it considers that HEIs need to better use this data for program review, strategic planning and policy making at the program levels.	
1.8. Public information	General Area 1) Mission, objectives and administration General Area 5) Quality Management

Accreditation standards at the program level, require HEIs to publish formal policies, guidelines and regulations dealing with academic issues. It also requires HEIs to publish information with regards to quality assessments with students and other stakeholders. Whereas all HEIs have published their internal policies on the webpage and other relevant information with regards to teaching, learning, research it considers that still improvements need to be done with regards to the level of publication of internal quality assurance reports.	
1.9. Ongoing monitoring and periodic review of programmes	General Area 5) Quality Management
KAA addresses the ongoing monitoring and periodic review of programs. In line with accreditation standards, institutions are requested to involve students and other stakeholders in reviewing their study programs. Specifically, accreditation standards require that the results of the internal quality assurance system be considered for further development of the study program. This includes evaluation results, investigation of the student workload, academic success, and employment of graduates. Evidence is required during the accreditation process to demonstrate changes implemented due to the reviewing process involving all academic community members. KAA has noted the number of internal quality assurance mechanisms to monitor the quality of the study programs at HEIs has increased. However, it considers that still more work is needed to involve staff, graduates and employers when reviewing the study programs.	
1.10. Cyclical external quality assurance	According to the applicable legislation into force, all HEIs in Kosovo must undergo program accreditation process at least every 3 to 5 years.
KAA institutional and program accreditations are cyclical. Depending on the validity of the specific institutional and program accreditations, a re-accreditation process takes place at least every 3 to 5 years for each institution and for each of its programs.	

3. Evaluation of PhD programs

For the evaluation of PhD Programs, KAA has adopted separate Standards for Evaluation of Doctoral Programmes. Due to the specific nature of Doctoral education, focused more on an individual research topic, these are organized in different general areas than the standards for BA and MA level, addressing:

- Institutional structure, administrative support, and funding
- Selection and admission criteria
- Doctoral programme structure/content
- Research environment/capacity
- Supervision
- Assessment
- Doctoral research outcomes

The focus is thus on the specific program(s) under evaluation, their curricula, the teaching methods and the resources, especially academic staff, deployed to these programs.

Standards for Doctoral programs cover seven major components. Each component is divided into two types of standards: Core and Supplementary. While core standards must be met in the process of evaluation, supplementary standards offer other desirable features that reflect good practice followed in many European universities. The Standards for

Doctoral programs assess the institutional structure administrative support and funding, where the HEIs are required to have institutional regulations for doctoral programs, sufficient human, spatial, physical and financial resources to support its doctoral programs and sufficient academic staff with doctoral degrees and research records for the last five years. For the accreditation of doctoral programs, HEIs need to have selection and admission criteria in place and organize the selection process based on competitive and transparent processes. In the selection process, doctoral candidates' potential for research should be assessed. The Standards for Doctoral programs also focus on the doctoral program structure and content, monitoring and supervision of candidates, assessment, etc. HEIs need to demonstrate Research Environment and capacity and to define the Doctoral Research Outcome.

Monitoring procedures are focused on ensuring that higher education institutions and study programs continue to comply with the accreditation standards throughout the period their accreditation is valid. Monitoring procedures do not have separate, specific standards, but they use the standards for Institutional Accreditation, Program Accreditation and Doctoral Programs as reference points.

ESG Part I	General areas of KAA Standards for Institutional accreditation	General Areas for KAA Standards for program accreditation (Bachelor and Master)	Standards for Evaluation of Doctoral Programmes
1.1. Policy for Quality Assurance	Institutional Mission and Objectives; Strategic Planning, governance and administration; Academic Integrity, responsibility and public accountability; Quality Management;	Mission, objectives and administration; Quality Management	Institutional Structure, Administrative Support and Funding (Standard 1)
1.2. Design and Approval of Programs	Quality Management; Teaching and Learning; Research	Quality Management; Educational process content	Doctoral Programme Structure/Content (Standard 3)
1.3. Student Centred Learning – Teaching and Assessment	Teaching and Learning	Educational process content	Assessment (Standard 6)
1.4. Student admission, progression, recognition and certification	Student administration and support services	Students	Selection and Admission Criteria (Standard 2); Supervision (Standard 5); 7) Doctoral Research Outcome

1.5. Teaching Staff	Staff, employment, promotion process and professional development Research	Academic staff	Institutional Structure, Administrative Support and Funding (Standard 1);
1.6. Learning resources and student support	Strategic Planning, governance and administration; Financial Planning and Financial management; Student administration and support services; Facilities and learning resources.	Mission, objectives and administration; Infrastructure	Institutional Structure, Administrative Support and Funding (Standard 1); Research environment/ Capacity (Standard 4)
1.7. Information Management	Quality Management	Mission, objectives and administration	
1.8. Public information	Academic Integrity, responsibility and public accountability	Quality Management	Doctoral Research Outcome (Standard 7); Institutional Structure, Administrative Support and Funding (Standard 1);
1.9. Ongoing monitoring and periodic review of programmes	Quality Management; Teaching and Learning;	Quality Management	Doctoral Programme Structure/Content (Standard 3)
1.10. Cyclical external quality assurance	According to the applicable legislation into force, all HEIs in Kosovo must undergo an institutional accreditation process at least every 3 to 5 years.	According to the applicable legislation into force, all program must undergo the program accreditation process at least every 3 to 5 years.	According to the applicable legislation into force, the accreditation period is between three to five years. To this end, study programs at the PhD level must undergo accreditation process at least every 3 to 5 years.

5.2. Designing methodologies fit for purpose

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.

The accreditation process is conducted per relevant documents that KAA drafts in cooperation with all members of the academic community in Kosovo. The Accreditation Manual is a document that contains three chapters, respectively:

- **Chapter I** which elaborates the context of the quality assurance framework in Kosovo and explains the implementation of the Accreditation Manual (compliance level of each general area, overall compliance, formal requirements with regards to research work of staff, etc).
- **Chapter II** defines the Accreditation Standards for Institutional Accreditation and the Standards for Study Program accreditation (BA and MA).
- **Chapter III**, Guidelines for External Quality Assessment, elaborate in detail on all phases of the accreditation process: the initiation of the accreditation procedure, the formal approval/acceptance of applications, the conduct of the self-evaluation, the appointment of the international expert panel, the organization of the accreditation site visit, the drafting of the evaluation report, decision-making by SCQ, etc. The Guidelines explicitly explain the role and responsibilities of HEIs, experts, and KAA coordinators in all phases of the process.

The Standards for Evaluation of Doctoral programs are not contained in the Accreditation Manual as they are approved separately from the accreditation standards for Bachelor and Master programs; however, the Guidelines for External Quality Assessment (Chapter III of the Accreditation Manual) apply identically for the evaluation of PhD programs as for the BA and MA programs.

The Manual was initially approved in 2018. It was drafted based on the results of the previous external evaluations conducted by KAA, the latest developments in the higher education sector in Kosovo, and the inputs of higher education institutions collected through a questionnaire. KAA presented the findings of the questionnaire together with the proposal for revising the accreditation standards at a conference in December 2016, which served as a second opportunity for receiving input from higher education institutions and for in-depth discussion with the sector. The final draft of the Accreditation Manual was distributed for public discussion through a structured questionnaire in which HEIs had the opportunity to propose concrete changes or additions to the document.

Implementing the Accreditation Manual from 2018 onwards has significantly improved the accreditation process. KAA considers that the goals of this Manual, which, among others, included verifying the fulfilment of accreditation standards by HEIs, consolidating internal

quality assurance of HEIs, supporting HEIs in enhancing their quality, increasing the quality of student learning outcomes, and improving student experience in HEIs, have been fulfilled to a substantial extent.

KAA aims to implement a regular enhancement of its process. Therefore, since its approval in 2018, it has amended/changed the Accreditation Manual with specific provisions that have aimed at clarifying and improving the application process, which have complemented the formal criteria of academic staff members, and which have affected the calculation of compliance levels. These amendments/changes have taken place in 2021, 2022 and 2024.

In **2021**, the changes/additions of the Accreditation Manual that have affected only Chapter I include:

Revision of the Accreditation Manual with regards to the compliance level for positive accreditation decision for institutional accreditation and study program accreditation. The revision includes the following two provisions:

- Standards on evaluation of Higher Education Institutions, Chapter no. 6 related to Learning and teaching, and chapter no. 10 related to Learning resources and facilities are mandatory. No accreditation on institutional level can be granted unless these two (2) chapters has been fulfilled to either substantially or fully compliant level.
- Standards on evaluation of Bachelor and Masters study programs, Chapter no 3. related to Academic staff, and chapter no. 7 related to Infrastructure and resources are mandatory. No accreditation of programmes on Bachelor or Master level can be granted unless the two up mentioned chapters has been fulfilled to either substantially or fully compliant level.

SCQ decided to complement the Accreditation Manual with one provision regarding the formal application process of General Medicine study programs. This addition, implies that within the Accreditation Manual a new provision regarding the formal application process of medical program was added, requiring HEIs to have adequate documentation that they have functional clinics and health services that include all areas of general medicine, including hospital services, in order to be able to enter the accreditation process.

SCQ decided to add one additional criterion regarding the institutional accreditation, with regards to the branches. Through this provision, it clearly stated conditions that HEIs need to implement for the branch campuses, with special focus on the number of administrative services provided to students, separate QA arrangement, separate officers for Career Offices, etc.

SQC decided to amend/change the Accreditation Manual by increasing the criteria and requirements for scientific research. Based on the results of the accreditation process, respectively the review reports of expert for institutional and program accreditation, SCQ has assessed that research is one of the fields that struggles to reach substantial compliance

by HEIs, mainly as a result of the lack of clear institutional policies for the development of scientific research or as a lack of awareness of the academic community for credible platforms to publish scientific papers. The decision of the SCQ dated 2021 establishes additional criteria for program holders of Bachelor's and Master's study programs in terms of scientific works, which have begun to be implemented in October 2021, respectively October 2022. The specific provisions added to the Accreditation Manual include:

- From October 1, 2021, in addition to the criteria set by the AI for Accreditation, program holders entering the accreditation process at the BA/BSc level must have at least 1 (one) scientific publication indexed by the field of study / program, while in MA/MSc level must have at least 2 (two) scientific publications from the field of study/program in scientific journals indexed as first author or correspondent, according to article 3, point 1.1 WEB OF SCIENCES core collection (SCIE, SSCI and AHCI) or 1.2 SCOPUS, excluding dubious magazines or publishing houses according to AI 01/2018 approved by MESTI.

- From October 1, 2022, in addition to the criteria set by the AI for Accreditation, program holders entering the process of accreditation, re-accreditation or validation at the BA / BSc level must have at least the academic title Prof. Ass. and at least 1 (one) scientific publication indexed from the field of study/program, while at the MA/MSc level they must have at least the academic title Prof. Ass. and 2 (two) scientific publications in scientific journals indexed from the field of study/program, as first or correspondent author, according to article 3, point 1.1 WEB OF SCIENCES core collection (SCIE, SSCI and AHCI) or 1.2 SCOPUS, excluding journals or suspicious publishing houses according to AI 01/2018 approved by MESTI.

- Exceptions from point 5.1 and 5.2 are the bearers of study/academic programs defined according to Article 26, point 11 of the Law on Higher Education. These programs include academic staff from the fields of arts, or academic staff engaged in professional study programs where scientific research is not required.

The accreditation standards for institutional accreditation and accreditation standards for BA and MA programs (Chapter II of the Accreditation Manual) have remained unchanged until 2023. KAA initiated the evaluation and revision process of the standards in 2021 with the support of donors and international expertise. The experience gained with implementing the standards from 2018 had highlighted some areas for improvement, including identifying some vague criteria that were considered to benefit from better structuring and articulation. The starting point of the evaluation process were two questionnaires to higher education institutions and external evaluators, who were asked to provide comments specifically on the strengths and weaknesses of the accreditation standards. After completing the questionnaires, KAA organized three workshops: an online workshop, which served as the baseline for revising the accreditation standards, and two physical workshops. Based on the results of the questionnaires as well as benchmarking KAA's practice against good European practices, taking into account especially the understanding and implementation of the 2015 version of the ESG, KAA discussed adaptations of the standards with

representatives of HEIs in the two workshops. The revision process of institutional accreditation standards and standards for BA and MA was initiated in 2023. Prior to their approval, KAA conducted a public consultation procedure with HEIs, international accreditation experts, and other external actors. The Standards for Institutional Accreditation and Study Programs 2023 reflect the requirements of the higher education system in Kosovo, align with the level of development of internal quality assurance, and aim to enhance the quality as per European quality standards. The new accreditation standards for BA and MA programs, were approved by SCQ in its 116th meeting held on September 25, 2023. They will become effective from the 2024 – 2025. KAA has uploaded the standards for accreditation of Higher Education Institutions and the accreditation of BA and MA study programmes on its webpage.

Besides the accreditation standards (Chapter II of the Accreditation Manual), following the approval of the KAA Law in 2023, the KAA has reviewed also the Chapter I and Chapter II of the Accreditation Manual. The purpose of this review was to update the introductory part of the Manual with the new legislative framework into force (Law on KAA) as well as updating the provisions regarding the accreditation process with the provisions of the Law on KAA. Whereas no substantive changes were made in the Accreditation Manual, the review process aimed that the Accreditation Manual is fully aligned and updated with the new legislative framework of KAA. The Accreditation Manual was accessible through the webpage for public consultation. The Accreditation Manual update has ended in 2024.

Besides the Accreditation Manual, other documents and regulations governing the KAA's work and external evaluation processes were reviewed. Other documents that have been revised so far include the Work Regulations of the SQC and Appeals Committee, and KAA Regulation on the Systematization of Workplaces. Before their approval by KAA, all the revised documents were distributed for public discussion through the website and electronic addresses to the entire academic spectrum in Kosovo.

To clarify the SCQ's decision-making criteria (during the phase of formal acceptance of the applications) regarding the suitability of the academic and scientific qualifications of program holders against the subject area of the study programs KAA has drafted a document titled Kosovo Subject Area Code. This document intends to help HEIs determine the which of the qualifications of program holders are relevant for the program they are assigned as holders, by clearly specifying the academic and scientific criteria. KAA discussed the document with higher education representatives in Kosovo through a public debate and distributed it for consultation through its web page. All relevant actors were invited to comment on the document's content before its final approval by the SCQ.

Evaluation of Doctoral programs

Given that doctoral programs are specific regarding the requirements for scientific research work, KAA approved the Standards for the Evaluation of Doctoral Programs in 2020. Prior to 2020, KAA conducted the accreditation process of the doctoral programs through a set

of standards, which were drafted and approved by KAA in 2009. Following the approval of the Accreditation Manual in 2018, including the Standards for BA and MA programs, it was evident that standards for the PhD program needed to be revied. For this purpose, KAA benefited from the international donor's project (HERAS+) who supported KAA with expertise for the revision of the standards for doctoral programs. This process was conducted through three workshops that were held with the international experts, KAA staff, members of the SCQ and representatives of all higher education institutions. The rationale for the Standards and the Standards themselves, were presented to representatives of Kosovo higher education institutions in October to December 2019. The resulting feedback has informed the final version of the standards. Further feedback was obtained following the placing of the draft document on the KAA website. This offered all stakeholders the opportunity to comment and make suggestions. The final version of the Standards has been adopted by the State Council of Quality, on 25.06.2020, and put in to force on 25.06.2020.

The Regulation for the Evaluation of Doctoral programs define clear quality criteria for doctoral programs regardless of their field of research. The standards have been drafted based on European policies of doctoral education and best scientific research practices. KAA has implemented these standards for evaluating doctoral programs at the University of Pristina "Hasan Prishtina", the only institution that offers programs at this level.

Monitoring

In the process of continuous improvement of external quality assessments, KAA has established procedures that preserve its mission in line with local legislation and ESG while adapting to the specific local context. One such example is complementing the follow-up procedures with the *monitoring activity*, which has arisen due to the HEIs tendencies to change the accreditation conditions without the awareness of the KAA. While monitoring may not be a typical activity of an external evaluation agency in some countries, the Kosovo context of a dynamic higher education sector with many small, relatively young, and sometimes profit-oriented institutions requires a systematic approach to ensure that accreditation standards are constantly maintained by HEIs in accordance with accreditation decisions. In addition to the "classical" follow-up procedures, the Methodology for Follow-up Procedures and Monitoring also includes remote and field/on-site monitoring that is carried out by the KAA staff. KAA may initiate extraordinary monitoring procedures if KAA becomes aware of a decline in the quality of higher education institutions and their study programs either through anonymous reporting by any stakeholder or if KAA becomes aware that the higher education institution has submitted false information at any stage of the evaluation and accreditation process.

The Methodology for Follow-up and Monitoring was drafted through the support of QAINT project that provided international and local expertise for the drafting of the document. The drafting of the Methodology took place in 2021, included several workshops between KAA staff, members of the SCQ, and international and local experts.

Prior to its approval, in December 2021, the document was published on the website for public consultation.

5.3. ESG - Implementing processes

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include: a self-assessment or equivalent; an external assessment normally including a site visit; a report resulting from the external assessment; a consistent follow-up.

In order to effectively implement its processes, KAA has developed procedures based on best international practice in the quality assurance in higher education. From the very beginning, KAA has been committed to developing its standards and procedures in full compliance with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), by adapting them in the national context.

The accreditation process is regulated and described in the following documents:

- Law on KAA, chapter III
- Administrative Instruction on Accreditation No. 15/2018, articles 9 and 10
- Accreditation Manual: detailed information about the flow of the accreditation procedure.

The accreditation process consists of four major stages described in the following. While there are three different sets of standards (for institutional accreditation, for Ba/Ma programs, for doctoral education), the accreditation process is identical in the three activities.

5.3.1. Application process

HEIs submit their request for accreditation at least one year before the expected date to obtain accreditation. The request for accreditation is compiled based on application forms (First Pages) and includes general information about the institution/study programs to be included in the re/accreditation procedure. At this stage, also a list of academic staff must be submitted for every program holder of the study program according to the template defined by KAA, including a list of publications.

To review applications for study programs, the legislation in force requires that the HEIs appoints persons responsible for the study program (otherwise known as program holders) for each study program. The legislation into force stipulates that a HEI for each group of students and each 60 ECTS of a BA and MA program, must employ at least one lecturer with full-time employment who holds a PhD degree, as well as a nostrification decision in case their studies were completed abroad.

Also, every program holder for a BA study program must have at least one scientific publication published on the SCOPUS or WoS platforms. For a MA study program, every program holder must have at least two scientific publications published on the SCOPUS and WoS platforms.

For PhD study programs, institutions must have at least 5 program holders with a PhD in the research field of the doctoral programme and have at least 3 papers, as first or corresponding author, published in international relevant publications in the last 5 years.

KAA Secretariat verifies all information submitted by the HEIs and provides an assessment against the formal criteria laid down in the national legislation. Application forms and data of academic staff are reviewed by the SCQ to ensure that the minimum criteria included in the law are fulfilled, including but not limited to the minimum numerical criteria for academic staff required by the law, the relevance of the field of study, number of scientific publications, etc.

5.3.2. Self-evaluation

Once the application for accreditation is accepted, the HEI are invited to submit the self-evaluation documentation within 15 working days from the date of the approval of the application by SCQ. The self-evaluation reports (SER) are drafted in line with the guidelines provided under the Accreditation Manual, Chapter 3, *Guidelines for re/accreditation processes*, and are submitted separately for the institutional re-accreditation process and each study program regardless of the level of study (BA. MA, PhD) and the location where the program is offered (main campus or branch). Templates for the drafting of SERs for institutional accreditation and program accreditation are also made available through KAA's website.

5.3.3. External evaluation

Appointment of the expert team

To conduct the accreditation procedure, KAA appoints an international panel of experts which consist of two (2) up to seven (7) external experts depending on the number of study programs being evaluated and the type of evaluation (institutional or programme). All expert panels, whether at institutional or study program level, should include at least one student expert.

Site visit

The site visit allows the expert panels to evaluate the compliance of the HEI against the standards included in the Accreditation Manual (for institutional accreditation and for BA and MA programs) and the Standards for the Evaluation of Doctoral programs (for PhD study programs), to gather reflections from key stakeholders/interviewees and thus to triangulate and validate the evidence provided in the SER. Depending on the size of the institution and the number of study programs, the site visit lasts between one and two days, and meetings take place according to a predefined schedule which is communicated to the

expert panel and the HEIs in advance. Compulsory meetings during the institutional assessment and study program assessment include the following stakeholders: management of the organisation, program holders, teaching staff, students, QA staff, administration, graduates, and employers. In addition, a visit to the facilities the provider is using for its activities is included.

Drafting and approving of the external evaluation report

During the site visit or after the site visit, expert panels might require additional documents that supports them in evaluating the performance of the HEI against the standards included in the Accreditation Manual or the Standards for the Evaluation of Doctoral Programs. The required additional documentation may include only information that has been referred to during the site visit or in the self-evaluation documentation, hence they are delivered within days upon the site visit has ended.

Results of the evaluation are set out in the external evaluation report. The general structure of the Report is provided by the Accreditation Manual and a template is annexed. Timelines for drafting the external review report are agreed collectively on the last day of the site visit among the panel members and are communicated to the HEI.

KAA coordinators validate the evaluation report to ensure that it includes all required information and that the experts' recommendations are fully supported by evidence and arguments included in the body of the report. Where needed, KAA coordinators might require additional communication the expert panel in order to bring the Evaluation Report in line with the KAA guidelines.

The evaluation report is sent to the HEI enabling them to correct any potential factual errors through comments within three (3) working days. At this stage, the institution is not allowed to submit new evidence that has not been already referred to during the site visit or through the self-evaluation report. After receiving the potential comments from the HEI, the expert panel analyses whether any corrections are needed, finalises the reports and submits it for discussion and approval by the State Council of Quality (SCQ).

Decision making

The accreditation procedure is finalised with a final accreditation decision from the SCQ. After judging the evaluation report and based on the expert's recommendations, the SCQ can reach one of the following decisions:

In the case of initial institutional or study program accreditation:

- Not to accredit;
- Accredit for 3 years.

In the case of institutional or study program re-accreditation:

- Not to accredit;
- Accredit for 3 years.
- Accredit for 5 years.

The Law on KAA and other sub-legal acts recognizes only accreditation or rejection of accreditation. Thus, accreditation with conditions or other forms of accreditation are not recognized within the system.

SCQ decisions elaborate the main criteria used for the decision making, including shortcomings identified by the expert teams that have led to a negative accreditation decision. The SQC decision clearly indicates the accreditation period, the number of students allowed to be enrolled in the respective study program in one academic year, and information about program holders. KAA publishes its decision together with the Evaluation Report on its official website not later than two weeks after the meeting of the State Council of Quality (SCQ).

5.3.4. Follow Up Procedures

Follow-up procedures are elaborated in the KAA Methodology for Follow-up procedures and monitoring. They are limited only to the verification of the recommendations and confirm the extent to which recommendations are fulfilled by the HEI and are not intended to re-evaluate standards of the Accreditation Manual or the Standards for the Evaluation of Doctoral Programs.

The methodology defines the procedure, the deadlines, the necessary documentation for the follow-up procedures, and the communication with HEIs and experts. Initially the methodology defines that after the completion of each accreditation procedure, HEIs shall submit improvement plans to KAA in which they individually address the expert recommendations given in the external evaluation report. The improvement plans are submitted to KAA six month after the accreditation procedure has been completed.

KAA engages an international expert to evaluate the fulfilment of the recommendations and the procedure can be carried out with a physical visit, online visit or remotely (desk based). KAA submits to the international expert the institution's improvement plan, other relevant evidence, if any, the external evaluation report as well as any other document that is necessary to meet the needs of the follow-up procedure. In case KAA or the international expert considers that the verification of the fulfilment of the recommendations cannot be done remotely (desk-based), then KAA can proceed with the organization of a physical or online visit.

The methodology stipulates that KAA organizes the follow-up procedure at least once within the duration of the accreditation of the institutional level and the study program for each accredited institution of higher education in the Republic of Kosovo. However, due to human resource limitations, KAA has yet to assess the fulfilment of recommendations

before the new accreditation period. The KAA reviews the improvement plans and includes them in the accreditation documentation for the expert teams in the following re-accreditation procedure, in which the experts verify their fulfilment by the HEI.

With regards to the monitoring procedure, according to the KAA Methodology for Follow-up procedures and monitoring, KAA develops monitoring procedures which aim to verify and confirm whether the given conditions of accreditation as well as the standards of the Accreditation Manual continue to be applied by the accredited higher education institutions and their study programs. These procedures are distinct from the follow-up procedure, which focuses only on fulfilling the recommendations given in the previous external evaluation reports. According to the KAA Methodology for Follow-up procedures and monitoring, monitoring procedures are divided into:

- *monitoring of study programs holders*: it is intended to be conducted at least once within six (6) months, and it is performed remotely by the KAA officers. Verification of programs holders is done through the verification of lecture schedule which is required to be made public on the website of the educational provider.
- *monitoring of official websites and advertising materials of HEIs*: it is intended to be conducted at least one within six (6) months and it is performed remotely by the KAA officers. The monitoring of HEI websites is done in order to ensure that the information published by HEIs regarding the accreditation of study programs is accurate and does not create confusion among students, parents or society in general.

Since the implementation of the Methodology, KAA staff has regularly conducted the monitoring of study programs and the monitoring of official website and advertising materials of HEIs. Monitoring reports performed by KAA staff are available on the website.

Monitoring according to standards of the Accreditation Manual: Monitoring according to the standards of the Accreditation Manual includes but is not limited to:

- *monitoring of academic staff*: it is intended to be conducted at least once within six (6) months, and it is performed by the KAA officers remotely or through a physical visit of the KAA with or without notice in the premises of the higher education institution. The monitoring of the academic staff is done to ensure that the higher education institution is offering the study program with the academic staff as presented in the self-assessment report.
- *monitoring lecture and exercise schedules*: it is intended to be conducted at least once within six (6) months, and it is performed by the KAA officers remotely or through a physical visit of the KAA with or without notice in the premises of the higher education institution. The monitoring of lecture schedules is done in order to ensure the compliance of the accredited curriculum according to the Self-Assessment Report, according to the Accreditation Manual (compulsory and elective courses, fund of lecture and exercise classes, practical work and the subject holder) with the schedule of lectures and exercises published by the higher education institution.

- *monitoring of infrastructure and resources*: it is intended to be conducted at least once within six (6) months, and it is performed by the KAA officers through a physical visit with or without prior notice to the premises of the higher education institution. Monitoring of infrastructure and resources is done in order to ensure that higher education institutions maintain the standards of the Accreditation Manual presented in the Self-Assessment Report, Infrastructure and resources, especially in study programs which include practice and laboratory.

Extraordinary monitoring: includes but is not limited to:

- *monitoring initiated after receiving complaints from external parties*: KAA may accept at any time complaints submitted by individuals or organizations which indicate a decline in the quality of higher education institutions and/or their study programs. In case the SCQ considers that the complaint submitted to the KAA is credible and justified, then the SCQ requests from the relevant institution to submit a report within a certain period of time which presents its position towards the submitted complaint. The SCQ in the next regular meeting, reviews the report of the institution. If the SCQ considers that the reasoning of the institution is well-founded and that the institution has not suffered a decline in quality, the SCQ does not initiate proceedings against the institution. If the SCQ considers that the reasoning of the institution is unfounded, the SCQ formally requests from the institution the improvement of the situation within a time limit which is determined by the SCQ and/or the organization of a monitoring visit by the KAA officials
- *Submission of false evidence to the KAA*: In case the KAA becomes aware that, in order to decide on accreditation, re-accreditation or validation, the higher education institution has submitted false information at any stage of the evaluation and accreditation process, the KAA officially notifies the SCQ at the next meeting. In case the SCQ considers that the notification of the KAA is grounded, then the SCQ requests from the relevant institution that within a certain period of time to submit a report which presents its position towards the notification of the KAA.
- *Monitoring in cooperation with the Education Inspectorate of MESTI*: The KAA may have a request from the Education Inspectorate of MESTI to conduct a physical monitoring visit to accredited higher education institution in the Republic of Kosovo. Such monitoring visits, in which KAA officials participate, are limited to verifying the technical conditions given for accreditation

It is worth mentioning that in all procedures elaborated above, the KAA Methodology provides continuous communication between the education provider and the KAA. For each monitoring procedure, KAA requests from the institution a written justification in order for the institution to make an official statement regarding its position on the initiated procedure. Likewise, the institutions are given time to complement/improve the documentation such as for example replace the program holders provided that they meet the formal criteria as defined in the national law. The SCQ cannot reach any formal

outcome with respect to the monitoring procedures, without the prior involvement of the education provider in the procedure.

Since the implementation of the Methodology, KAA staff has conducted several monitoring visits to the higher education institutions to monitor the academic staff, the lecture and exercise schedules and monitor the infrastructure and resources of the HEIs. According to the Methodology, for each monitoring procedure performed, it is required to draft a monitoring report. Until now, for each performed monitoring procedure, KAA officials have drafted monitoring reports which are available on the website.

5.4. Peer-review experts

External quality assurance should be carried out by groups of external experts that include (a) student member(s)

KAA has traditionally engaged only international experts in its accreditation procedures. Kosovo's higher education was characterized by a lack of awareness among HEIs of the purposes of external quality assessments according to the European perspective. To this end, the lack of professionals with experience in external assessments, the probability of interference in the objectivity of the evaluations, and the competition between the educational providers were considered the determining factors for the establishment of an assessment model with international expertise.

The engagement of international experts has been a key feature of the system, widely supported by stakeholders and provided invaluable expertise to KAA in reaching accreditation decisions that are in line with the national quality criteria. In addition, international experts have contributed to the quality improvement of HEIs through their recommendations, which are based on best international practices. Given the relatively limited access to international developments, the engagement of international experts has helped higher education institutions gain visibility on international developments and trends in higher education and quality assurance practices. More importantly, considering the national context, which consists of a small academic community, the usage of international expertise has enabled KAA to maintain a fair and objective level of assessment.

As stated below, the accreditation process is carried out exclusively by international experts who are selected by KAA based on pre-defined criteria and transparent procedures. Regulations on the appointment of international experts are part of:

- Law on Higher Education, article 15, paragraph 8: "*Quality assessment of programs of accredited providers of higher education shall be conducted from KAA for each program within the cycle time that lasts no more than 5 years, KAA appoints international expert panels of relevant fields*"

- Law on KAA, article 32, External Assessment, paragraph 1: "*KAA arranges the accreditation process for the higher education institutions, based on an external review which is conducted by international experts*"
- Administrative Instruction on Accreditation of HEIs No. 15/2018: criteria for the selection of the experts, the composition of panel teams, as well as the duties and responsibilities.

In February 2024, KAA adopted a Regulation on the Selection, Engagement and Compensation Procedures of External Experts. The Regulation incorporates provisions which have already been applied by KAA in line with the Administrative Instruction on Accreditation No. 15/2018, but which are harmonized with the new Law on KAA. To this end, the Regulation adds further clarity on the overall selection procedure of expert panels and their involvement in the external evaluation procedures.

The regulation also introduces two main novelties that are important to highlight:

a) *Confirmation of the panel members by the SCQ* - until recently it was the responsibility of the Director to appoint the expert panels based on the pool of experts, which was approved by the SQC. The Regulation envisages that KAA Director proposes the composition of each expert panel to the SCQ. The SCQ shall confirm the proposed panel members or require changes to the panel composition based on, but not limited to, reasonable doubts regarding the integrity of the process.
b) *Gathering feedback from international experts* - while KAA has previously collected some qualitative feedback by international experts during the site visits, the Regulation envisages that KAA establishes a procedure to systematically collect feedback from experts at the end of the evaluation procedure. In line with the KAA's internal quality assurance policy, this feedback will serve to quality improvements at KAA. The format and deadlines for the feedback of international experts is further explained under the KAA Internal QA Procedure.

Selection process of international experts
KAA maintains a list of international experts (referred to as the pool of experts), which is regularly revised. The list consists of 189 experts from various fields of study, including QA professionals and students. They come from European countries such as Croatia (42), Germany (14), Rumania (13), Austria (10) Georgia (9), etc. The list of experts is maintained in an electronic database of KAA, which is gradually becoming part of the e-Akreditimi platform. Data about experts, including the history of their engagement in Kosovo HEIs, are continuously recorded and kept up to date.

KAA updates its list of international experts yearly based on a public call for the nomination of experts published on in its website. The call includes information on the requirements, selection criteria, the responsibilities, renumeration, practical arrangements, etc.

The calls for experts are also disseminated by other agency websites, including ENQA. KAA also seeks to receive recommendations by ENQA members and EQAR-registered quality assurance agencies, and of international experts individually who are interested to become part of the KAA's pool. Student experts are recommended by the ESU.

Interested candidates are invited to fill out an application form, send a CV and list of publications. All nominations received are individually reviewed by the KAA administration in line with the criteria established in the legislation.

The Director of KAA reviews the list of international experts and proposes their approval to the SCQ on yearly basis. Only the list of international experts approved by the SCQ may be used to appoint expert panels for study program or institutional assessments.

Qualifications and criteria for international experts
According to the legislation, the criteria to be met by international experts, include the following:

- Be professional in the respective area of assessment and have experience in quality assessment processes and accreditation.
- Hold a Ph.D. degree. A Ph.D. degree is not required for student experts, whose qualification may be a BA or MA degree.
- Have knowledge and experience of university teaching in the relevant field, except in cases of student experts.
- Have scientific research in the relevant field and knowledge about scientific research activities.
- Have experience in quality management and quality assurance in a higher education institution.
- Have work experience within the organisational and administrative structures of an institution or knowledge about management systems.
- Have experience in developing, implementing, and assessing curricula.

On the other side, the student expert member should be an active student and have the fundamental knowledge in higher education quality assurance.

Composition of the expert panels
According to article 32, paragraph 1.1 and 1.2. of the Law on KAA, each expert panel consist of two (2) to seven (7) experts, depending on the number of study programs under review. Each expert panel should also include at least one (1) student member. For institutional accreditation of a higher education institution, KAA engages three expert panel members, one of them being a student. For one program accreditation of a higher education institution, KAA engages minimum three panel members, one of them being a student. The profile of experts engaged in the panels are academic persons with academic Ph. D.s in various fields of study. For program accreditation, KAA selects the profile of the expert panels in accordance with their field of study and the profile of the study program under

evaluation (natural sciences, social sciences, arts, etc). For institutional assessment, KAA can also engage quality assurance professionals who have a PhD academic degree. Until now, KAA has not included industry representatives in the expert panels.

In certain cases, a panel of three experts can also evaluate two study programs if they are of a similar field of study or two levels of study (BA and MA program of the same field). Experts can be invited to evaluate similar study programs across different higher education institutions. Importantly, this doesn't imply that the experts are involved in a combined or clustered assessment procedure.

The appointment of the expert panels takes place once the applications for accreditation have been formally accepted by the SCQ. KAA Secretariat consults the HEIs on the preferred dates for the site visit. According to the new Regulation on the Selection of Experts, the KAA Director proposes the composition of the expert panel to SCQ. The SCQ members have three days to argue and object the proposed member. If SCQ members present and motivate the objection, the final decision on rejection is given within five days. If no active opposition or rejection comes from the SCQ, the proposed Expert Panel composition is considered as approved.

After the SCQ confirms the expert panel, the KAA Secretariat submits the information on the composition of the Expert Panel to the higher education institution.

The educational provider is entitled to object the composition of the expert team. The team composition can be modified if the HEI has solid reasons to believe that the objectivity and professionalism of the evaluation process might be affected. According to the Regulation on composition of the expert teams and the Accreditation Manual, the HEI should formally address the SCQ to change the composition of the expert panel and justify its request. Based on the rationale of the request, the SCQ shall decide whether to change the expert panel or to reject the provider's request.

Online training was introduced during the COVID-19 pandemic when the accreditation process shifted online and was maintained as a useful practice afterwards. Online training allows KAA to conduct training in larger groups and mainly focus on sharing general information about the Kosovo's higher education system, the national context (including information about the social, economic, political factors in Kosovo), the quality assurance framework, the size and number of HEIs, accreditation criteria and procedures, etc. Whereas training and briefing of expert panel one day before the site visit, focus only on the self-evaluation documentation of the educational provided under review. These meetings enable the panel members to know each other and share first impressions about the self-evaluation documentation of the provider. In this meeting, panel members usually agree what are the areas of assessment that need more attention and identify the potential concerns. Panel members also tentatively share the standards to be assessed and also the timelines needed to complete the review report.

A Manual on External Assessment Procedures of Higher Education Institutions is made available for the international experts.

No Conflict of Interest and Incompatibility for members of the expert panel

In the recent discussions, the SCQ is particularly sensitive regarding the integrity in the process of the external evaluations, especially the Expert Panel selection. During informal internal evaluations of the KAA work, the KAA staff and SCQ conducted extensive discussions and jointly elaborated new measures to ensure checks-and-balances in the selection procedures and high standards with regard to integrity. The new measures supporting integrity are reflected in the Regulation on the Selection, Engagement and Compensation Procedures of External Experts adopted in 2024.

According to the Regulation an expert is incompatible to become part of the expert panel if:

- an expert is/was under any other type of contract or agreement with the evaluated higher education institution at the time of the evaluation procedure, or in the last 5 years counting of the day of appointment;
- an expert participates or has participated, in any capacity, in a project carried out or involving the evaluated higher education institution between time period starting from five years from the day of appointment until the time of the evaluation procedure;
- an expert is/has in the last 5 years been a member of management, professional or advisory bodies of the evaluated higher education institution;
- an expert personally collaborates in joint academic and/or research activities
- with the staff member of the evaluated higher education institution or unit;
- an expert is a student or a graduate of the evaluated HEI.

Also, according to the Regulation, the external experts must guarantee they are not in incompatibility, by signing an Incompatibility and Ethical Statement.

KAA considers that ideally the external evaluation panels of experts would have to be selected with the "random" selection method or through designated selection bodies. However, this will be possible and feasible when the list of experts will be large enough and experts from all academic fields will be well represented.

According to the Methodology for Follow-up Procedures and Monitoring, KAA engages an international expert in the follow-up step to evaluate the fulfilment of the recommendations. KAA might invite the same international expert who has been involved before in the procedure or another expert. In case of engagement of another international expert, the KAA provides all contextual information about the institution and/or study program.

With regards to monitoring procedures, in any of its forms, monitoring is carried out by the KAA officials and in only specific circumstances can seek assistance of a third party, such as an expert or a team of international accreditation experts.

- General Monitoring (monitoring of study program holders, monitoring of official website and advertising materials of HEIs) is performed by KAA officials.
- Monitoring according to Standards of the Accreditation Manual (monitoring of academic staff, monitoring lecture and exercise schedules, monitoring of infrastructure and resource) is also performed by KAA officials. However, in case of monitoring of infrastructure, KAA may seek the assistance of a third party, such as an expert and/or team of international accreditation experts, to verify laboratory equipment which may be unknown to KAA officials. In this case, the selection and appointment procedure are done through the KAA's expert pool and through the approval by the SCQ.
- Extraordinary monitoring (monitoring initiated after receiving complaints from external parties, submission of false evidence to the KAA, monitoring in cooperation with the Education Inspectorate) are performed by KAA officials.

5.5. Criteria for outcomes

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.

KAA bases outcomes of the accreditation process on prearranged, clearly defined, and published criteria in order to ensure the fairness, reliability and consistency of external evaluation procedures. The development and establishment of all external evaluation procedures are carried out with the active participation of stakeholders.

Evaluation of Higher Education Institutions in Kosovo is performed based on the criteria which are set on three main documents:
1. Law on Kosovo Accreditation Agency,
2. Manual on Accreditation,
3. Standards for the Evaluation of Doctoral Programs.

All documents and policies are drafted upon close cooperation with the stakeholders, and their active inclusion is ensured throughout the entire process.

The Law on KAA sets out basic criteria and defines the rules and methodologies, whilst the assessment procedures of institutions and their study programmes are evaluated based on the Accreditation Manual. Thus, criteria for decision making are set by the national legislation and then elaborated by KAA in accordance with the ESG. The Law on KAA and other sub-legal acts recognizes only accreditation or rejection of accreditation. Thus,

accreditation with conditions or other forms of accreditation are not recognized within the system.

According to the Accreditation Manual, the assessment of higher education institutions and/or study programs is judged based on a four-levels compliance scale, as follows:

- Fully compliant
- Substantially compliant
- Partially compliant
- Non- compliant

The expert teams will address, through the External Review report, the compliance of the education provider against the standards included in the manual at two levels, as follows:

In order to assess the compliance level of each general area the following guidelines will be used:

- fully compliant − all the standards included in a particular general area are met. If the institution exceeds the standards and meets some of the performance indicators, commendations are appropriate. This recognition provides the institution motivation to pursue even greater levels of excellence in their quality management practices;
- substantially compliant − 70 − 90% of the standards included in a particular general area are met, while the others are not yet in line with stated expectations. Also, there is potential for requirements of the standards not to be satisfied before the next review (examples may include the loss of key faculty members due to retirements, declining student enrolment, or projected reductions in financial or personnel resources, and others);
- partially compliant – 30 − 70% of the standards included in a particular general area are met. Also, the institution lacks the strength of compliance with the standards to ensure that the quality of the institution will not be compromised;
- non-compliant − less than 30% of the standards included in a particular general area are met. The institution does not satisfy the requirements of the standards.

The overall compliance level is determined by the compliance across all general areas. The most frequent compliance level across the general areas determines the overall compliance level.

According to the Accreditation Manual, in order to be granted a positive decision for institutional accreditation the education provider has to demonstrate at least a substantial compliance level in the overall judgment. Therefore, failure in meeting at least an overall substantial compliance level entails withdrawing, suspending, or denying institutional accreditation. In order to increase further the quality of the institutions of higher education, KAA has decided to prioritize two general areas of the accreditation standards for

institutional accreditation in the Accreditation Manual. General Area 6 related to Learning and Teaching, and General Area 10 related to Learning Resources and Facilities have become mandatory. No accreditation on institutional level can be granted unless these two (2) general areas has been fulfilled to either substantially or fully compliant level.

The accreditation period for institutional accreditation lasts three (3) to five (5) years. According to the law, if an institution fails to be re-accredited at the institutional level, this will result in organizing another re-accreditation process after one (1) year. The institution that fails for the first time to obtain institutional re-accreditation is prohibited from enrolling new students for the respective academic year. At the same time, it can continue to operate with the currently enrolled students until the second evaluation. If the higher education institution fails to be re-accredited at the institutional level for the second time, the KAA will notify the Ministry of further procedures. The institution that does not receive institutional accreditation even after the second evaluation is obliged to ensure the completion of the studies for all enrolled students.

According to the Accreditation Manual, in order to be granted a positive decision for study program accreditation, Bachelor and Master, the education provider has to demonstrate at least a substantial compliance level in the overall judgment. Furthermore, KAA has decided to prioritize two general areas of the accreditation standards for study programs: General Area 3. related to Academic staff, and General Area 7. related to Infrastructure and Resources have become mandatory. No accreditation of programmes on Bachelor or Master level can be granted unless these two general areas has been fulfilled to either substantially or fully compliant level.

According to the Standards for the Evaluation of Doctoral Programs, the standards are divided in to two types, core and supplementary. There are, in total, 52 standards: 36 core and 16 supplementary standards. All the core standards are obligatory in order to achieve a positive evaluation. A doctoral programme can be accredited in the case of full or substantial compliance. To be fully compliant, doctoral programme must meet all the core standards and at least 12 of the supplementary standards. Whereas to be substantially compliant, all the core standards must be met. In addition, between 1 and 11 of the supplementary standards must be met.

The accreditation period for study program accreditation (BA; MA; PhD) lasts three (3) to five (5) years. Decisions of the SCQ for study programs clearly indicate the number of students allowed to be enrolled each academic year.

As it is explained under section on ESG 2.6 (Reporting) following the evaluation procedure, after the site visit, the expert panel drafts the evaluation report according to predefined templates by KAA. The expert panel need to conclude the evaluation report with a clear recommendation to accredit/not to accredit the institution/study program for a duration of 1/3/5 years with a specific number of students to be enrolled in the program.

The expert panel evaluation report is then used as a basis for decision making by the SCQ. All review reports are carefully read and analyzed by the SCQ ensuring that expert judgments per each general area are clearly elaborated, are evidence based and that the overall final recommendation of the expert panels complies with the compliance levels as defined in the Accreditation Manual.

Once the evaluation report is approved and the SCQ has made an accreditation decision, the legal office of KAA issues the decision which is then sent to the education provider. MESTI is also officially informed of the SCQ decisions.

One of the recommendations of the ENQA's external review report for KAA suggested that *in assessing standards and in decision-making a cautious approach to applying arithmetic should be asked for*. *One area may carry more weight than another, and the standards may not always be of equal importance*. In response, the Accreditation Manual and the Standards for PhD programs envisage the obligatory standards, i.e. the standards that must have a positive assessment grade from the Expert Panels.

As regarding monitoring, the KAA Methodology for Follow-up Procedure and Monitoring, allows SCQ to reach a formal outcome based on the results of the monitoring procedure. The formal outcomes is a) to withdraw the accreditation at the institutional or study program level or b) place the study program or the institution under the process of external evaluation. The decision-making with regards to the Monitoring is elaborated below:

General Monitoring

- Monitoring of study program holders – KAA monitors the holders of the study program for each program accredited in Kosovo. If KAA verifies that program holders, as approved by SCQ, have been changed or are no longer part of the HEI, it requires from the HEI to propose a replacement of the holder within 90 days. Following a verification process by the KAA staff to ensure that the new holder meets the formal criteria of the legislation, the SCQ decides on the approval/rejection of the new holder. In case the institution fails to propose the replacement of the holder within the time period of 90 days, SCQ, can proceed with the withdrawal of accreditation for the respective study program.
- Monitoring of official websites and advertising materials of HEIs - The monitoring of HEI websites is done in order to ensure that the information published by HEIs regarding the accreditation of study programs is accurate. In case the KAA staff confirms through reasonable evidence that the higher education institution has published information which, within the legal scope of the KAA is not accurate, including, but not limited to, the advertising of study programs without accreditation by the SCQ, submission of specializations as separate study programs contrary to the decision of accreditation by the SCQ, submission of the name of the institution contrary to the decision of accreditation by the SCQ, etc., KAA officially addresses the institution to remove the inaccurate information and ask to correct them in accordance

with the decisions of the SCQ within 5 (five) working days. In case the institution fails to replace the information within a certain period of time, KAA notifies the SCQ. If the SCQ considers that the reasoning of the institution is unreasonable and that the institution by its actions has seriously violated the given conditions of accreditation, the SCQ decides that the study program and/or the institution is placed in the process of external evaluation.

Monitoring according to standards of the accreditation manual

- Monitoring of academic staff - monitoring of the academic staff is done to ensure that the higher education institution is offering the study program with the academic staff as presented in the self-assessment report. In case the KAA officials, either through remote monitoring, or physical visit to the institution, prove through reasonable evidence that a part of the academic staff, based on which the study program has been positively evaluated by international accreditation experts, are not present in the higher education institution and they no longer have a contractual relationship with the relevant institution, the KAA requests from the institution a written justification for the reasons for leaving the academic staff. The higher education institution is obliged within three (3) working days to submit to the KAA the reasoning according to the requirements of the KAA. If the SCQ considers that the reasoning of the institution is unfounded and that the institution by its actions has seriously violated the given conditions of accreditation, the SCQ decides that the study program and/or the institution is placed in the process of external evaluation.
- Monitoring lecture and exercise schedules - monitoring of lecture schedules is done in order to ensure the compliance of the accredited curriculum according to the Self-Assessment Report. In case the KAA officials, either through remote monitoring or physical visit to the institution, prove through reasonable evidence that a part of the academic staff is not present in lectures and/or exercises and/or practice, and that the teaching process is not being held in accordance with the number of classes presented in the SER, KAA requests from the institution a written justification for the reasons for the lack of teaching staff or the change of the teaching process. The higher education institution is obliged within three (3) working days to submit to the KAA the justification according to the requirements of the KAA. If the SCQ considers that the reasoning of the institution is unfounded and that the institution with its actions has seriously violated the conditions of accreditation, the SCQ formally requests the institution to improve the situation within a time limit which is determined by the SCQ. The higher education institution within the time period determined by the SCQ provides evidence based on the KAA to improve the situation and may request a formal consultative meeting with the Director of the KAA and/or SCQ members. If even after the additional time limit is granted, the institution fails to submit relevant evidence for the improvement of the situation, the SCQ places the study program and/or the institution in the process of external evaluation.
- Monitoring of infrastructure and resources - Monitoring of infrastructure and resources is done in order to ensure that higher education institutions maintain the standards of the Accreditation Manual presented in the Self-Assessment Report. . In case the KAA

officials prove through reasonable evidence that a part of the laboratories, practical workspaces and/or laboratory equipment are not functional and/or are not used as an integral part of the teaching process, the KAA will request from the institution a written justification for the reasons for the lack of functioning of the physical infrastructure. The higher education institution is obliged within three (3) working days to submit to the KAA the reasoning according to the requirements of the KAA. If the SCQ considers that the reasoning of the institution is unfounded and that the institution with its actions has seriously violated the conditions of accreditation, the SCQ decides that the study program and/or the institution to be placed in the process of external evaluation.

Extraordinary monitoring

- Monitoring initiated after received complaints from external parties - KAA may accept at any time complaints submitted by individuals or organizations which indicate a decline in the quality of higher education institutions and/or their study programs. In case the SCQ considers that the complaint submitted to the KAA is credible and justified, then the SCQ requests from the relevant institution to submit a report within a certain period of time which presents its position towards the submitted complaint. If the SCQ considers that the reasoning of the institution is unfounded, the SCQ formally requests from the institution the improvement of the situation within a time limit which is determined by the SCQ and/or the organization of a monitoring visit by the KAA officials. The higher education institution within the time period determined by the SCQ provides the evidence either by sending it electronically to the KAA or by presenting it during the monitoring visit by KAA officials. If, even after the additional deadline, the institution fails to submit relevant evidence for the improvement of the situation, the SCQ proceeds with the initiation of an early accreditation visit at the institutional level and/or at the level of the study program.
- Submission of false evidence to the KAA - In case the KAA becomes aware that, in order to make a decision on accreditation, re-accreditation or validation, the higher education institution has submitted false information at any stage of the evaluation and accreditation process, the KAA officially notifies the SCQ at the next meeting. In case the SCQ considers that the notification of the KAA is grounded, then the CSSCQC requests from the relevant institution that within a certain period of time to submit a report which presents its position towards the notification of the KAA. If the SCQ considers that the reasoning of the institution is unfounded, the SCQ decides that the study program and/or the institution be placed in the process of external evaluation. The report of the team of international external evaluators is submitted to the CSSCQC and addressed at one of the SCQ meetings.
- Monitoring in cooperation with the Education Inspectorate - The KAA may have a request from the Education Inspectorate to conduct a physical monitoring visit to accredited higher education institution in the Republic of Kosovo. In case the minutes of the monitoring visit indicate a violation of the given conditions of accreditation according to the decision of the SCQ, the KAA sends such minutes to the SCQ for review. SCQ after reviewing the minutes requires the relevant institution to submit a report within a certain period of time to present its position. If the SCQ considers that

the reasoning of the institution is unfounded, the SCQ decides that the study program and/or the institution be placed in the process of external evaluation.

5.6. Reporting

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.

KAA has published full evaluation reports in its webpage since the initial accreditation procedure in 2009. The publication of full evaluation reports is anchored in the legal framework in place, including the Law on Higher Education and lately the Law on KAA.

KAA has updated its webpage in 2021 allowing the general public to more easily access information about the accreditation status and evaluation reports for all institutions of higher education and their study programs. Evaluation reports are published on the website for each higher education individually, separately for institutional evaluation and study program evaluation. Whereas evaluation reports are individually published, the SCQ decision might include different study programs within one decision. This depends on the number of programs the SCQ reviewed and approved within one meeting. SCQ decisions are published on the KAA website.

All evaluation reports are drafted in English. Considering that English is the primary language of the accreditation process, KAA has not faced any objection from any HEI so far. KAA believes that having English reports is good for international transparency and trust, and it is not only a side effect of experts being all foreigners.

Over the years, KAA has paid particular attention to the quality of evaluation reports. The Accreditation Manual introduced guidelines for drafting of the evaluation report and the respective templates, and these have greatly contributed to the improvement of reports with regards to their structure, clarity, analysis and elaboration of standards. According to the Accreditation Manual, the evaluation reports must ensure coherence flow between the body of the report and the expert panel's recommendations, i.e. recommendations must be fully supported by evidence and arguments included in the body of the report.

Since the approval of the Accreditation Manual in 2018, KAA has introduced a template for the evaluation reports which follows a general structure consisting of four main chapters:

- Introduction: The introductory chapter allows experts to provide information about the general context of the evaluation. Specifically, this part contains information about the institution under evaluation, the date of evaluation, the expert panel members, the coordinator of KAA, sources of information used for drafting the evaluation report,

criteria used for institutional and program evaluation, and the site visit schedule including the stakeholders with whom the panel met.

- Institutional/study program evaluation: The second chapter constitutes the core content of the evaluation report, in which experts need to insert all comment or observations, commendations and suggestion related to each general area of standards individually. After the general area has been elaborated, experts must indicate the compliance level, namely fully compliant/substantially compliant/partially compliant/non-compliant. In addition, under each general area, experts are required to provide recommendations for improvement.
- Overall evaluation and judgment of the panel: in this chapter experts describe overall observations referring to in the evaluation process, the quality at the institutional level, the institutional approach to the site visit, the main areas of concern (if applicable), etc. The experts need to conclude the evaluation with a clear recommendation to accredited/not to accredit the institution/study program for a duration of 1/3/5 years with a specific number of students to be enrolled in the program.

Information about the calculation of the compliance levels is provided for under the Accreditation Manual and are explained in detail in the training and briefing meetings with the experts before the site visit.

In case different study program are evaluated by the same expert panel, all study programs must be approached individually with the same level of details of information as described above. Most importantly, the compliance level and the conclusion need to be separately formulated for each study program individually.

Appendices: if applicable, experts may attach a specific appendix to the evaluation report, if it contributes to the clarity of the assessment or if it contains a specific recommendation elaborated in more detail.

Aiming to increase the quality of reports, KAA assigns one KAA coordinator for each evaluation procedure who maintains regular contact with the expert panel, through meetings online or through email correspondence through all stages of the evaluation process. The KAA coordinator ensures the correct application of the Accreditation Manual and that the expert teams triangulate and cross-reference the data sources (self-evaluation report, site visit and additional documentation) to reach sound judgments.

Since 2019, KAA has strengthened the validation mechanism: the KAA coordinator thoroughly reviews the draft evaluation. In cases when the report is considered of poor quality or deeper analysis and scrutiny is required, or in case if there are contradictions between the content and the final recommendation, it is sent back for further adjustments or amendments within a set deadline. Only when evaluation reports align with the KAA guidelines they are send to the HEIs for potential comments.

As for the accreditation process, KAA has drafted templates for monitoring procedures, in accordance with KAA's Methodology for Follow-up Procedures and Monitoring. They are drafted for every type of monitoring procedure that is performed by KAA officials. As a general rules, according to the templates, the reports must contain the following elements:

- The first chapter: An introduction, in which must be written the names of the KAA officials who carried out the monitoring procedure, the date of the monitoring procedure, the form of carrying out the monitoring procedure (remote, with an unannounced on-site visit, with an announced on-site visit), the persons with whom the KAA officials have met in the site visit, as well as the sources of information for the monitoring report.
- The second chapter - KAA officials must provide a brief description of the development of the procedure.
- Final assessment – KAA officials must provide a brief explanation of their findings in the monitoring report based on the monitoring procedure.
- Attachments (if applicable) - if applicable, KAA officials may attach a specific appendix to the monitoring report, if it contributes to the clarity of the report or if it contains a specific recommendation elaborated in more detail.
- Signing officials for evaluation and monitoring of KAA – the monitoring report should be signed by the KAA officials who have completed the monitoring procedure.

Monitoring reports are published in the KAA website.

5.7. ESG - Complaints and appeals

Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Appeals Committee

According to article 22 of the Law on KAA, the Appeals Committee (AC) is a permanent body of KAA, which handles appeals by higher education institutions. The Appeal Committee consists of five (5) permanent members elected based on an open call published by KAA. Members of the Appeal Committee are Kosovo nationals.

All persons who meet the following criteria shall have the right to apply for AC:

- Three (3) AC members should be lawyers, while two (2) members should be university professors. Also, they must prove knowledge of the higher education system in the Republic of Kosovo and knowledge of quality assurance.
- The lawyer members must have at least five (5) years of professional experience.

The AC members are elected for a four-year mandate, with the possibility of being elected for another mandate. KAA establishes a temporary commission who make the selection of AC members from the applicants' ranks. The selection commission is composed of:

- representative from the Ministry- one (1) member, the chairperson;
- representative from the KAA, one (1) member;
- representative from the Rectors conference- one (1) member;
- full professor from the Law Faculty - one (1) member;
- representative of a development partner in the field of higher education– one (1) member

According to the Law on KAA, HEIs can appeal[1] decisions of the SCQ and appeals are considered by the Appeals Committee. Any other dissatisfaction, misapprehensions, or potential violation of applicable regulations in the application process can be addressed through the Appeal Committee, too.

The Appeals Commission during the handling of the appeal, has the right to invite the party who has filed an appeal for a hearing. Throughout its work, all HEIs who have filed an appeal have been invited to hearing where they have presented their arguments in front of the AC members.

AC has adopted its work regulation which is published on the KAA web page.

Article 24 of the Law on KAA, also defines the dismissal of the Appeals Committee members. AC members are dismissed in the following cases:

- physical or mental inability to exercise their function;
- it is found that there is a conflict of interest;
- he/she is convicted of a criminal offense with effective imprisonment;
- abuse of official duty;
- refusal to perform the duties defined by the work regulation;
- absent more than twice in a row in meetings of the AC without reasonable justification.

Procedure for dismissal of AC member can be initiated by the Minister, SCQ or the majority of AC members. For the dismissal of the AC member, the KAA establishes a temporary Commission composed of the:

- representative from the Ministry, one (1) member;
- representative from the KAA, one (1) member;
- representative from the Rectors conference, one (1) member;
- full professor from the Law Faculty - one (1) member;

[1] The English translation of the Law uses the word "complaint", but what it describes are actually "appeals" in the ESG terminology.

- representative of an active international development partner in the field of higher education in Kosovo, one (1) member.

The Commission makes a decision regarding the proposal for dismissal by a majority vote of all its members. The dismissed member of AC has the right to appeal according to the legislation in force.

Appeals

The grounds for appeal and hence the review by the Appeals Committee is limited to the procedural aspect of the accreditation process outcomes. That is, appeals can be made if KAA has not correctly followed the applicable rules of the Law or Accreditation Manual, but HEIs cannot appeal the substantial judgement of the expert panel and SCQ.

If the Appeals Committee finds that the appeal filed by the institution is substantiated, then it refers the matter back to the SCQ with a suggestion to reconsider their initial decision. The SCQ then needs to make a new decision.

If the Appeal Committee finds that the appeal of the institution is unsubstantiated, it rejects the appeal. In this case, the original SCQ decision is final. The HEI may still address the issue to the department for administrative matters within the competent court.

The Appeal Committee is very active and has treated all the appeals within the prescribed deadlines. The following table gives an overview of appeals during the last three calendar years:

Year	2021	2022	2023
Appeals made	18	23	20
approved	0	4	5
rejected	18	15	12
withdrawn	0	4	3

While KAA considers that the accreditation process and decision-making is fully based on the procedures defined by the law and the Accreditation Manual, the Appeals Committee still accepts appeals that are submitted formally without strong basis for appeal. Therefore, in some cases, HEIs are withdrawn from the appeal process.

According to the KAA's Methodology for Follow-up Procedures and Monitoring, any decision reached by the SCQ with regards to any of the monitoring procedures, the higher education institution can file an appeal according to the legislation of the KAA and the general laws in force. However, the Appeals Procedure has yet to be revised to include appeals with regards to the SCQ decisions for the monitoring procedure.

Complaints

Besides the appeals procedure, all higher education institutions are entitled to file complaints about the process, experts or KAA staff. This implies that HEIs do not seek directly to change the decision of the SCQ but are entitled to officially complain about certain parts of the procedure, the behaviors of experts or the staff of KAA. Depending on the nature of complaint received, these complaints are handled by the KAA staff or the SQC and through a less formal process than appeals. With the approval of the new Law on KAA, KAA has revised many of its regulations and policies. To this end, KAA still needs to draft a separate policy for complaints.

6. Compliance European Standards and Guidelines ESG (Part III)

6.1. Activities, policy, and processes for quality assurance

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.

KAA is a regulatory quality assurance agency that conducts its responsibilities based on policies, standards, and regulations drafted and approved by the agency. The primary responsibilities of KAA (*see also section 5 above for a full overview*) include accreditation and re-accreditation of higher education institutions and their study programs, regardless of the form (online, distance, double degrees) and language offered, including branches, if applicable. KAA is also responsible for recognizing international accreditation and for monitoring, i.e. performing periodic quality controls to advance quality in accredited institutions of higher education continuously. Accompanying its primary, statutory responsibilities, KAA engages in local and European projects related to quality assurance and in international exchange with agencies and other partners, e.g. as ENQA affiliate.

The primary legal documents that define the work of KAA are the Law on Higher Education and the Law on the Kosovo Accreditation Agency. Prior to the adoption of the Law on KAA, the Administrative Instruction for the Accreditation of HEIs in Kosovo No.15/2018 was a sub-legal act deriving from the Law on Higher Education, which defined the procedures, criteria, and processes of external evaluation, including the functioning of the KAA bodies. With the new Law on KAA, a similar Administrative Instruction on Accreditation deriving from the Law on KAA is being drafted and is expected to be approved.

In addition to legal and by-laws, for each external evaluation process, KAA has drafted specific documents such as the Accreditation Manual, which defines the standards of institutional accreditation and accreditation of study programs at BA and MA levels, the Regulation for the Evaluation of Doctoral Programs, the Methodology of Follow-Up Procedures and Monitoring, the Regulation on Procedures and Criteria for external evaluation by International Accreditation Agencies, etc.

KAA has also approved documents that regulate its operations, including guidelines and strategic documents.

6.1.1. KAA Strategic Plan

KAA has approved its Strategic Plan 2021-2025, which serves as a basic document to determine the strategic orientation of the organization for the next 5 years. The strategic

plan was drafted in accordance with KAA's mission which has served as a guide for setting strategic objectives that enable the continuous evaluation of the effectiveness of the KAA's actions. KAA has ensured that the strategic objectives are set out in accordance with the requirements and needs of the higher education system in Kosovo and are suitable for the context within which the Kosovo's quality assurance system is developed. The KAA Strategic Plan underwent a thorough drafting process led by the Agency's staff. The design of the strategy also included four external experts who contributed to the formulation of the strategic objectives and individual actions per each objective. In addition, with support from the Heras+ project, the strategic plan was revised by an international expert who provided input to ensure that the document aligned with the ESGs and the recommendations of the ENQA's panel in the KAA's external review report (2019). For this purpose, a workshop was held, where in addition to the international expert, a few HEI representatives were invited ensuring comprehensive input and representation. Following the drafting process, KAA disseminated the strategic plan for consultation to institutions of higher education, international donors, international experts, and representatives of civil society organizations in Kosovo.

Strategic objectives are set based on the following intervention areas: legal framework, management and administration, external quality assurance, digitalization, and internationalization. They are defined as follows:

First strategic objective

"To regain the KAA membership in The European Association for Quality Assurance in Higher Education- ENQA and registration in EQAR".

Second strategic objective

"To consolidate the legal framework that guarantees KAA institutional and financial independence in performing external quality assurance processes".

Third strategic objective

"To advance the KAA management and administration by increasing physical and professional capacities".

Fourth strategic objective

"To improve quality in higher education sector with efficient and effective accreditation and follow-up procedures".

Fifth strategic objective

"To advance KAA procedure digitalization for an effective external evaluation procedure information and data management".

Sixth strategic objective

"To strengthen KAA cooperation with external quality assurance international agencies".

As part of the strategic plan, KAA drafted a framework of activities with well-defined deadlines and performance indicators. This document guides KAA's annual activities, including the assessment of strategic objective achievements. KAA evaluates the implementation of strategic objectives annually, ensuring continuous improvement through regular reviews.

6.1.2. Annual work plan

In accordance with its strategic plan, KAA drafts annual work plans which are reviewed and approved by the SCQ. The annual work planning typically begins with a forecasting of expiring accreditations at the institutional and study program levels of higher education institutions and planning of monitoring visits. In addition, continuous communication with HEIs representatives enables KAA to be informed about their plans for initial accreditations. In addition to the accreditation process and monitoring procedures, other activities include review of the documents, organization of trainings with international experts, organization of study visits for the administrative staff, other activities for the professional development of the staff, communication with the relevant actors, etc. Annual work plans are evaluated at the end of each calendar year and evaluation reports are published on the web page.

6.1.3. Engagement of stakeholders

KAA includes and cooperates closely with the academic community and ensures social dialogue with all stakeholders in drafting rules, procedures, and standards of accreditation, validation, quality control, and monitoring. The recently adopted Law on KAA has significantly improved the engagement of stakeholders through provisions for a student member of the SCQ as well as two non-voting members representing industry/professional practice. KAA has encouraged the Government of Kosovo to speed up the process of appointment of the student member of SCQ and the two non-voting employers' representatives, however the procedure has not yet been initiated.

6.1.4. External quality assurance activities

Accreditation process

KAA's main external quality assurance activity is accreditation. Accreditation is a formal quality assessment process that determines the official status of recognition given by KAA for an institution of higher education and/or study programs. KAA organizes accreditation in time intervals of no more than five (5) years and it is conducted by reviewing a self-assessment report of the providers and through a direct inspection at the HEI premises by an international accreditation expert panel.

Monitoring procedures

Monitoring procedures which aim to verify and confirm whether the given conditions of accreditation as well as the standards of the Accreditation Manual continue to be applied by the accredited higher education institutions. These procedures are implemented at the institutional level and/or at the level of study programs and are not duplicated by the follow-up procedure which focuses only on fulfilling the recommendations given in the external valuation reports. Monitoring procedures procedures are described in detail in the Methodology for Follow-Up Procedures and Monitoring, a public document on the KAA website. The methodology aims to ensure a continuous interaction between the HEIs and the KAA to ensure that the goal of the improvement procedures, namely the quality enhancement of the HEIs, is continuously achieved. An overview of the different activities carried out in the previous five years is included in page 16 of this report.

KAA has also contributed to the drafting of documents that serve HEIs in improving their teaching and learning activities and the quality assurance system. An important example is the project supported by the University Support Grants Program through the U.S. Embassy in Kosovo and administered by the Kosovo United States Alumni, entitled "Increasing student participation in Internal and external quality assurance processes in Kosovo." The project aimed to encourage student participation in activities related to quality assurance which will contribute to improving the teaching and learning process. The project resulted in drafting a research Report on Student Engagement which provides a background, drawn from both theory and practice, grounding the Guidelines for student engagement in internal and external quality assurance of Kosovo Higher Education. In doing so, the research report is based on an international benchmarking analysis of best practice in Europe, a national diagnosis assessment of the KAA accreditation reports and the legal requirements in place, as well as a national survey conducted amongst more than 1000 students from both public and private Kosovar higher education institutions. In addition a "Guideline for Student Engagement in Internal and External Quality Assurance of Kosovo Higher Education" was drafted and two informative sessions with students were organized. In addition to informative sessions with students, KAA held meetings with HEIs through which it encouraged further student engagement.

6.2. Official Status

Agencies should have an established legal basis and should be formally recognized as quality assurance agencies by competent public authorities.

Based on the legislation in force, KAA is a regulatory agency responsible for external quality assessment activities, including the accreditation of higher education institutions and their study programs.

Accreditation decisions have a clear legal status and are widely accepted by state authorities, by the stakeholders and the public in general. Article 15 of the Law on Higher

Education, Accreditation and Quality Assessment, paragraph 1, stipulates that "*All providers of higher education shall be subject to procedures for audit procedures and quality evaluation by the KAA in accordance with this Law and sub-legal acts*".

In addition, article 16 of the Law on Higher Education, Degrees and Diploma, paragraph 1, stipulates that "*An accredited provider of higher education shall have the right to award degrees and diplomas specified in its accreditation certificate: These may include degrees and diplomas offered jointly or as dual qualifications with one or more other institutions approved by the KAA*". Further, paragraph 7 of the same article, stipulates that "*Only those degrees and diplomas issued by accredited and licensed providers of higher education shall be recognized by the Government for the purposes of employment, to obtain public office or to perform the function of international recognition, as defined in sub-paragraph 1.7 of paragraph 1.and paragraph 2. of Article 6 this Law*".

An important milestone for the official status and independence of KAA was the approval of the Law on Kosovo Accreditation Agency by the Kosovo Assembly. It reiterates in Article 5: "*Kosovo Accreditation Agency (KAA) is a regulatory agency for ensuring the quality in higher education which operates in the entire territory of the Republic of Kosovo.*"

KAA's commitment to this direction is continuous. Several important activities are planned under the KAA Strategic Plan, Objective 1, Measure 1.4., which include participating in working groups for the planning and improvement of higher education in Kosovo and the region, attending meetings with the industry, international donors, professional associations, etc.,

6.3. Independence

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.

KAA is the main authority in the Republic of Kosovo responsible for ensuring the quality of higher education. Accreditation process is conducted through the quality standards and criteria defined and approved by the KAA and the State Council of Quality (SCQ) is the final authority to issue a decision on accreditation.

KAA's organisational, operational, and decision-making independence was significantly reinforced through the Law on KAA that was adopted in June 2023. Drafting the KAA Law was supported by all the main actors in higher education in Kosovo and other relevant institutions. The drafting process was comprehensive and included many public discussions at various levels. Placing the KAA Law on the state agenda was a commitment of the entire political and professional spectrum, who unanimously supported strengthening the role of KAA as an independent quality assurance agency.

The law's approval completed the full restoration and consolidation of KAA's independence after the events leading to KAA's exclusion from EQAR and ENQA in 2018. While the dismissal of the SCQ and Director in 2017 was possible through a lack of clear regulations in the former legal framework, the Law on KAA now rules out that officials are dismissed except for a well-defined list of exceptional circumstances.

6.3.1. Organisational independence

The Law on Higher Education No. 04/L-037, article 7, paragraph 1, stipulates that "*Kosovo Accreditation Agency KAA is an independent agency responsible for assessing and promoting quality of higher education in Kosovo. Through professional and transparent processes of quality assessment and quality audit and by other means deemed appropriate by it, which meet international best practices, KAA ensures that the standards and quality of higher education in Kosovo meet the demands and expectations of the European Network of the Association for quality assurance in higher education. (ENQA).*

Article 5 of the Law on KAA determines the status of the KAA as a regulatory agency for quality assurance in higher education operating throughout the territory of the Republic of Kosovo. The subsequent article 6, Duties and Responsibilities of the KAA, further elaborates on the scope of the KAA, which includes its operations concerning accreditation, validation, monitoring, continuous quality assessment and improvement, etc.

KAA consists of the State Council of Quality (SCQ), the KAA Director and Administration, and the Appeals Committee. The SCQ is a collegial decision-making authority for quality assurance in higher education, independent in exercising its functions defined under the Law on Higher Education and the Law on KAA.

Based on the provisions of these laws, the SCQ is responsible for deciding on the accreditation, reaccreditation, validation, follow-up procedures, monitoring, reviewing, and deciding on all requests of HEIs filed to the KAA concerning quality assurance procedures, including accreditation, validation, and monitoring. The SCQ is also responsible for approving the accreditation standards, the quality assurance procedures, and external evaluation criteria; it also approves the annual work plans of KAA and drafts and approves the internal regulations of KAA, such as internal quality assurance guidelines. The SCQ reports for its work regularly and ad-hoc to the relevant local authorities and society in general.

The work of SCQ is further defined in the Regulation on the Work of the State Council of Quality (SCQ) which is drafted and approved by the SCQ.

According to the legislation in force, members of the SCQ are selected based on predefined criteria (set out in the Law on KAA, articles 12 and 13) and a transparent selection procedure of the SCQ members (set out in the Law on KAA, articles 15 and 16). Based on the law, SCQ members are proposed by the MESTI and approved by the Assembly of the Republic of

Kosovo. Different stakeholders are involved in the selection process of SCQ members, including members from MESTI, an active international development partner in the field of education in Kosovo, members of civil society, members from the Academy of Sciences of the Republic of Kosovo, and members from the Rector's Conference.

According to the Law on KAA, the selection and appointment procedure of the SCQ members is conducted as follows:

Article 12 of the Law on KAA, defines that Candidates for SCQ members should meet the following criteria:

- local members to be citizens of the Republic of Kosovo;
- members from the academic staff must have the degree of Doctor of Science, internationally recognized research experience, relevant academic experience at least five (5) years and experience in the field of quality assurance in higher education;
- in case the local members are graduates outside Kosovo, to have a diploma recognition in the national centre for recognition, equivalence and academic information ENIC-NARIC;
- to have considerable knowledge about the functioning of higher education and quality assurance in Kosovo which is evidenced through engagement or participation in relevant activities, projects, positions;
- to have considerable knowledge, experience for the functioning of the European Higher Education Area and international quality assurance standards in higher education;
- member from amongst the students shall be attending Master or Doctoral studies in the HEIs of Kosovo;
- three (3) international members must be experts in the field of quality assurance in higher education with academic experience, who are not and have not been citizens of the Republic of Kosovo and engaged in any higher education institution in Kosovo in last five (5) years.

Incompatibility to be a member of the SCQ, is defined under 13 which stipulates that, a SCQ member cannot be the person that:

- has exercised a political post in Kosovo in the last three (3) years;
- has been founder, co-founder, shareholder and member of the Steering Council in HEI in the last five (5) years;
- has current engagement in more than one higher education institution in Kosovo and abroad;
- has been punished by the Court final decision for a criminal offense punishable by imprisonment more than six (6) months according to Criminal Code of the Republic of Kosovo;
- it is ascertained that there is a conflict of interest according to the legislation in force

The Ministry publishes the public call for the nomination of SCQ local members. For the selection of international members, the Ministry calls on international development partners and agencies of states that are full members of ENQA / EQAR and the US Department of

Education to nominate experts from their respective countries who meet conditions required by the Law on KAA.

After the public call has been closed, the Ministry establishes the temporary Commission for the review of applications for SCQ members. Article 15 of the Law on KAA defines that, the temporary Commission according to paragraph 1 of this Article shall have the following composition:

- representative from the Ministry, one (1) member;
- representative- an academic from the Academy of Science and Arts of Kosovo, one (1) member;
- representative from the Rectors conference, one (1) member;
- representative of an active international development partner in the education field in Kosovo, one (1) member;
- representatives from civil society active in the education field, one (1) member

The Commission reviews the applications and prepares the short list of candidates, which should be at least twice the number of members elected respecting the fields and gender composition and recommends it to the Minister of Education. According to article 16, from the shortlist proposed by the Temporary Commission, the Minister of Education selects six (6) local members. Three (3) international candidates for SCQ members shall be added to the list of local candidate members.

After obtaining the personal written consent of each of the selected candidates, the Minister of Education forwards the list to the Government for initial approval who proceed the selected candidates to be voted by the Assembly of the Republic of Kosovo.

Prior to the adoption of the Law on KAA, similar criteria and procedures were in place. The provisions for the appointment of the SCQ members were defined in the Law on Higher Education whereas the criteria and procedures were set out in the Administrative Instruction No. 06/2018 on the Criteria and Procedures on the Appointment of the Members of the State Council of Quality (SCQ) of KAA. This AI that was introduced to enhance the regulations after the dismissal of the SCQ in 2017 and the following exclusion of KAA from EQAR. It is important to note that because the Law on KAA has become effective last year, all present members of the SCQ have been elected based on this AI and the provisions of the Law on Higher Education.

The Appeals Committee is a KAA body responsible to review the appeals of higher education institutions filed against the decisions of SCQ. Its composition and election procedure are defined under the Law on KAA. Prior to the adoption of the Law on KAA, similar criteria and procedures were defined under the AI on Accreditation of HEIs No.15/2018. The Appeals Committee's work and responsibilities are regulated under the Regulation on Appeals Committee.

In order to preserve the independence of the SCQ and the Appeals Committee, the Law on KAA has extensively elaborated not only on their nomination and composition, but also regulates the procedure to dismiss the members of the SQC (article 17) and the procedure to dismiss the members of the Appeals Committee (article 24). These provisions now contain a clear and narrow list of exceptional circumstances that objectively justify the dismissal of a member, for example to make sure that the SCQ stays operational in case of a member refusing to exercise their responsibilities or to allow that an SCQ member can be dismissed in case they committed a serious criminal offence.

Article 17 of the Law on KAA, defines that a SCQ member shall be dismissed if:

- finding that he/she has been appointed a member of the SCQ based on illegal documentation;
- he/she has been punished by the Court final decision for a criminal offense punishable by imprisonment more than six (6) months according to Criminal Code of the Republic of Kosovo;
- physical or mental disability ascertained by the medical commission;
- abuse of official duty;
- finding that there is a conflict of interest during the exercise of the function as a member of the SCQ;
- refusal to perform the duties defined by the rules of procedure of the SCQ;
- absence without reason based more than twice in a row in SCQ meetings.

Procedure for dismissal of the SCQ member can be initiated by the Assembly or MESTI. For the dismissal of the SCQ member, the Minister shall, within fifteen (15) days, establish a temporary Commission composed of the:

- representative from the Ministry, one (1) member;
- representative- an academic from the Academy of Science and Arts of Kosovo, one (1) member;
- representative from the Rectors conference, one (1) member;
- representative of an active international development partner in the field of higher
- education in Kosovo, one (1) member;
- representatives from civil society dealing with higher education, one (1) member.

The Commission submits to the Minister a report and a proposal for the appropriate measures related to the dismissal initiative. The Minister decides based on the proposal of the Commission and the Government proceeds to the Assembly for dismissal the SCQ member/s.

The Director of KAA is selected based on the Regulation no. 17/2018 on the procedures for appointments to senior management positions in the civil service of the Republic of Kosovo. The regulation stipulates that the Government of the Republic of Kosovo sets the overarching policy framework for appointing senior management positions. Administrative support for this system is provided by the Ministry of Public Administration, while the Commission on Senior

Management Positions oversees policy implementation. The relevant ministry, in this case MESTI, was tasked with initiating the recruitment procedure for the Director of KAA, whilst assessing the need for specific selection criteria beyond those outlined in the regulation. The Minister of MESTI proposed the announcement of the competition to the Ministry of Public Administration and the Commission screened the applicants to ensure eligibility. Following a selection process aimed at identifying the most suitable candidate, the Commission presented the top three candidates, along with their scores, to the Ministry of Public Administration. The Ministry of Public Administration forwarded this information, along with its conclusions drawn by the Commission, to the MESTI who decided about the preferred candidate. The preferred candidate decided by the Minister of MESTI, Mr. Naim Gashi, was appointed by the Government to the position of KAA Director for two consecutive mandates, in 2020 for the first mandate, and again in 2023 for the second mandate.

It is important to add, that in addition to the general criteria set out in the above regulation, additional criteria are set under the new Law on KAA. Article 19 include specific experience in quality assurance, knowledge in the field of quality assurance of higher education of the Republic of Kosovo, including knowledge about the European system of quality assurance in higher education.

KAA Administrative staff are recruited based on the Law No. 03/L- 149 on the Civil Service of the Republic of Kosovo. Their duties and responsibilities in addition to being defined according to the general law, are also defined under the Regulation on the Internal organisation and systematisation of works which is adopted by KAA in 2024. It is important to note, that besides the overall procedure defined by the Ministry of Public Administration, which KAA has to respect, the KAA organises the recruitment process of its administrative staff and decides about their employment independently from MESTI.

6.3.2. Operational independence

The legal basis allows KAA freedom in deciding accreditation standards and criteria within the general framework set by Article 29 of the Law on KAA, prescribing the general areas/topics that accreditation standards need to cover. KAA is also free to decide all other documents and policies that regulate KAA's work.

Article 7, paragraph 3 of the Law on Higher Education defines that "*KAA shall publish its policies, criteria and standards for accreditation and its decisions, recommendations and advice in respect of particular institutions and programmes. It shall publish an Annual Report*". Likewise, article 6 of the Law on KAA, paragraph 1.11., defines that KAA "*is responsible for drafting and approval of rules and procedures, criteria, forms of accreditation, re/accreditation, validation, external assessment, quality control, monitoring and election of international experts*".

The documents that are decided and approved by KAA range from accreditation criteria and standards to accreditation procedures, including guidelines, such as: The Accreditation Manual

(including the Standards for the Institutional/Study program Accreditation), Accreditation Standards for PhD programs, Methodology on Monitoring and Post-Accreditation Procedures, the SCQ Regulations, KAA's Strategic Plan, etc. As explained under ESG 3.1, KAA involves and cooperates closely with the academic community when drafting and revising its quality standards and other criteria. Following the public discussions, the final approving body of the documents is the State Council of Quality (SCQ).

Through drafting the regulations and documents mentioned above, KAA is independent in establishing an external quality assessment model and designing the accreditation procedure. The main legal basis that determines the assessment form is the Law on Higher Education, the Law on KAA and the Administrative Instruction on Accreditation; however, the Accreditation Manual and other regulations, such as the newly approved Regulation by the SQC for the Appointment, Engagement, and Compensation of International Accreditation Experts, define in detail KAA's procedures and operations for organizing the accreditation procedures.

In the external evaluation process, KAA uses the list of international experts, which is regularly updated by the Director of KAA and approved by the SCQ. Based on the Law on KAA, KAA decides the criteria and procedure for the selection of international experts and independently decides on their engagement based on transparent and public procedures. KAA considers it helpful that key provisions, such as the use of international experts, are part of the Law on KAA to ensure that there is broad societal consensus and to avoid these principles from being changed too easily.

With the new Appointment, Engagement, and Compensation of International Accreditation Experts, the SCQ shall approve the composition of each expert panel for each institution, thus serving as a second filter that examines the suitability of the expert panels for evaluating the given institution of higher education.

6.3.3. Independence of formal outcomes

The Law on Higher Education and the Law on KAA respectively, recognise the State Council of Quality (SCQ) as the decision-making body for quality assurance in higher education. The primary responsibilities of SCQ are to decide on the accreditation, re/accreditation and validation of higher education institutions at institutional and program level. SCQ can also withdraw the accreditation of a higher education institution or its study programs, in case there is evidence that criteria based on which the accreditation is granted are violated.

SCQ decisions are based on evaluation reports drafted by international expert panels, which are appointed by SCQ from amongst the pool of experts managed under the authority of SCQ. Both the expert panels and SCQ are supported by the responsible KAA coordinator. No external actors are involved in the preparation of reports and the decision-making of SCQ.

Decisions of the SQC are final and do not need any endorsement from any other governmental authority. Institutions are entitled to file an appeal against the SCQ decision to the Appeals Committee as a first instance, leading to an internal and independent review of the appeal, however limited to procedural grounds (see ESG 2.7) HEIs may still address the competent court for an administrative contest.

6.4. Thematic Analysis

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

In line with its Strategic Plan (*see strategic objective 1*, "*Meeting recommendations of the ENQA's external review team"),* KAA has undertaken concrete actions to conduct thematic analyses during the past years. Initially, KAA increased the number of instruments for data collection and improved its digitization infrastructure, which enabled the extraction and evaluation of relevant data from the external evaluation processes and reports. In addition, KAA has continuously strived to standardise its external evaluation reports so as to facilitate the usage of data from a range of reports.

KAA holds annual international conference where various aspects of QA in higher education are discussed with the participation of Kosovar higher education community, external stakeholders (industry, professional associations) and international guests. The discussion is supported by the findings of the analyses and serves as a feedback mechanism for identification of most relevant issues and areas for improvement.

KAA's initial activity to this direction was drafting the Guidelines for conducting thematic analyses by the Kosovo Accreditation Agency, adopted in July 2021. Drafting a guideline before drafting an actual policy was intended to initially provide a clear framework and set of instructions that would precede the adoption of the policy. The Guideline was drafted within the project "Supporting KAA in achieving some of ENQA recommendations" within the University Support Grants Program of the US Embassy in Kosovo. It includes the definition of the purpose or the purposes of thematic analyses and the definition of thematic analysis. To this end, the aim of establishing a methodology for implementing thematic analyses is to assess the overall impact of KAA's accreditation procedures, contribute to further reflections and discussions, and improve quality assurance practices in a national and international context. KAA considers as important to conduct three types of thematic analysis, namely the systematic use of quality assurance reports for analysis, thematic reports for specific topics, and additional gathering of information. KAA has not yet

Following its Guideline, KAA, in the last three years has conducted the following thematic analyses:

Preparing Kosovar Graduates for the Labor Market - The Perspective of Employers and Graduates.

The thematic analysis on "Preparation of the Kosovar graduates for the labour market – employer and alumni perspective" aims to serve to higher education policymakers and other stakeholders as a good base for general discussions and decisions for the relevance of the entire higher education sector and its cooperation with the business community. Moreover, it aims to contribute to raising awareness of Kosovo HEIs and policy-makes on the quality of the preparation of graduates for the labour market. The thematic analysis was conducted by developing a questionnaire for graduates and another questionnaire for employers that have employed graduates from the higher education providers in Kosovo.

Thematic Analysis for Institutional Accreditation for HEIs

This thematic analysis on Institutional Accreditation of Kosovar Higher Education Institutions aimed to serve to higher education policy makers and other stakeholders as a good base for general discussions and decisions for the entire higher education sector. The relevance of the thematic analysis on Institutional Accreditation of Kosovar Higher Education Institutions is on meeting the criteria set by the KAA. The analysis of all self-evaluation reports prepared by HEIs, and experts reports, gave a comprehensive picture of the current state of the quality of higher education institutions in Kosovo. Therefore, this thematic analysis was conducted by collecting the expert teams reports of the institutions that have applied for institutional accreditation at KAA during the academic years 2019-2020 and 2020-2021.

Thematic Analysis of Processes Involved in Accreditation/Reaccreditation of Study Programs.

KAA in collaboration with an American professor Christine Austin, has developed the Thematic Analysis of Processes Involved in Accrediting/Reaccrediting Study Programs: A Three-Year Review of Accreditation Processes for a Study Program (at both bachelor's and master's levels) at three public and three private institutions in the Republic of Kosovo. At the core of this analysis is the reflection of the interaction between accreditation standards governing the program evaluation process.

As part of this activity, an analysis of self-assessment reports of higher education institutions and final reports of international experts engaged by KAA was conducted. This analysis included 6 institutions (3 public/3 private) over a 3-year timeframe with the aim of identifying common points and differences during the evaluation processes as well as identifying areas for improvement, challenges, and trends within the evaluation processes themselves. This initiative was developed within the framework of the Fulbright Specialist Program, sponsored by the U.S. Department of State and funded by the U.S. Government, and implemented by World Learning.

In addition to the strategic objective 1, drafting of the analysis simultaneously contributes to the KAA's Strategic Objective 4 "*Improving quality in the higher education sector through efficient and effective accreditation and monitoring procedures*." KAA intends to continue with preparing thematic analysis in line with its approved Guidelines. After the accreditation process of HEIs for this year will be completed, KAA will be particularly

interested in exploring the field of study programs in economics, computer sciences, and information technology.

KAA still needs to draft the policy for thematic analysis; based on its work plan, the Thematic Analysis Policy is expected to be drafted and approved by the end of 2024.

6.5. ESG - Resources

Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

6.5.1. Financial Resources

Funds for financing the work of KAA are provided from 1. The budget of the Republic of Kosovo, 2. Own revenues (fees by HEIs) and 3. Donations, grants, or similar funds in compliance with the legislation in force. These funds are dedicated to Salaries and Allowances, Goods and Services, Utilities and Capital Expenditures.

The annual budget is compiled based on the Medium-Term Expenditure Framework, which is the Kosovo government's main three-year policy and budget planning document. It is through this document which the KAA presents new policies and budget requirements. Annex 1 presents the details about the budget appropriations for the years 2021-2024, according to the Law on Budget Appropriations for each year. The unused funds in the fund Own Source Revenues are carried over to the budget of the next year, since in accordance with the law, if the approved amount in the own revenues is not spent in the current year, they are carried over to the next year.

In terms of own revenues, KAA collects fees from the higher education institutions who cover the cost of the accreditation process, including the process of institutional and study program accreditation and re-accreditation, the cost of international experts (depending on the number of experts engaged per panel), costs of branch accreditation, and the costs of super expertise at institutional level and program level. The costs for the monitoring process and post-accreditation procedures are covered by KAA through the economic category Goods and Services.

The budget appropriations were sufficient to cover the expenses incurred during the years 2021-2023. Annex 2. presents the incurred expenditures structured by economic category for the years 2021, 2022 and 2023. All own revenues shall be deposited in the state budget fund and shall be allocated according to the legislation into force. If the collected revenues exceed the amount of budget limit from this fund source, KAA can only use the amount defined by the Law on budget appropriations for each year.

Annex 3. presents details for the revenues that are collected through the years 2021, 2022 and 2023, and the budget limit approved to be used for each year.

All annexes can be found as a joint file in this link.

6.5.2. Human Resources

Human resources are one of the areas where the current management has put the most efforts in. The last ENQA reviewed report has served as a guiding tool for KAA into making the adequate changes and improvements, ensuring KAA's substantial compliance with the ESG. As pointed out in ENQA's external review report in 2019, the workload of the administrative staff of KAA has been high and this had consequently affected the effectiveness of activities. As such, with the new Law on KAA, a new organogram is created which foresees an increase of the number of administrative staff. In order to ensure that each function and responsibility of each administrative staff and structural unit is clearly defined and established, in January 2024, KAA approved the Regulation on Organization and Systematisation of Jobs.

When considering the staff capacity and the workload, one should be aware of the scope of tasks that KAA is trusted to perform. In comparison to other European counterparts, the most outstanding is the re-accreditation of study programmes that takes place every 3 or 5 years. This increases considerably the workload but is also necessary since Kosovo legislation allows a relatively liberal approach to the variety of entities that can provide higher education.

KAA currently employs 18 persons, of which nine (9) works in sector of evaluation and follow-up (an increase of 7 employees compared to 5 years ago), three (3) in the finance sector, two (2) in the legal issues sector, two (2) in the administration, one (1) IT and all these are led by the Director of KAA.

KAA is planning to announce a new competition for the remaining 12 vacant positions and complete the recruitment procedures by September 2024. The increase on number of employees from 10 to 18 currently and to 32 by the end of September represents an incremental growth of KAA's capacities in human resources, which is a reflection of the management to work in the increase of our capacities and the quality of our services.

The professional development of our staff is another key element of KAA's internal regulations and policies. Staff have a diverse option of in-house and external trainings which are provided, such as:

- Trainings carried out by external trainers and other staff with relevant experience (most of them directors of QA Agencies already members of ENQA/EQAR);
- Participation in workshops, conferences, seminars, forums, and study visits;
- Trainings provided in central level with regards to administration, human resources, legal issues etc.;
- Trainings and certifications provided by ENQA and CHEA;

- Mobility for career purposes, etc.

Beside multiple trainings that KAA's staff undergoes on yearly basis, it is important to highlight the following:

- ENQA Leadership Development Programme which was attended by two employees of KAA.
- TAIEX project, a training provided by Sandra Bezjak, which was aimed to helping KAA to further align its rules and procedures with the ESG, Part 3.
- The twining project with AQ Austria which has helped KAA to familiarize with the ESG but also train its staff on how to better conduct evaluation processes (all trainings being provided by the senior staff and board members of AQ Austria).
- Staff exchange through CEENQA Staff Exchange Project, resulting in KAA sending one of their staff to ASIIN for one month in order to familiarize with the processes of other agencies.
- KAA staff being certified by ATMAE as peer reviewers, resulting in KAA's staff taking part on evaluation of study programmes in USA etc.

In 2021, KAA has approved a Manual on the KAA Staff Internal Evaluation that sets out the rules and procedures for staff performance evaluation. Not much legacy has been produced yet due to the fact that the policies were adopted recently. KAA is, however, satisfied with the initial outcome of these rules and procedures, since they take into account all the aspects which derives from national law on civil servants but also the specifics of KAA. The main objective of these tools is to increase staff involvement in the works of the Agency, to carry out result-oriented management, to improve the effectiveness of each staff member, to increase the quality of delegation, responsibility, accountability, reporting, to develop the staff competency, to enhance the planning of the work etc.

6.5.3. IT and Material resources

KAA has more than 32 all-in-one Desktops, and each employee is provided also a laptop. Projector, Smartboards (2), audio and video equipment, teleconferencing tools, and other software equipment are made available to each member of the staff, in order to ensure productivity.

KAA premises are located in the central part of Prishtina, close to the University of Prishtina "Hasan Prishtina" campus. KAA spaces are approximately 300 sq. m. which is an increase of almost 200 meters compared to the last evaluation. This increase reflects the growth of staff and the need for more workspaces.

KAA has established electronic platforms through which it conducts its works, each serving a specific purpose. First one is the e-Akreditimi, an enterprise resource planning (ERP) - like system and a multidisciplinary platform serving the process of accreditation and follow-up procedures. The platform helps 6 different actors (namely: the SCQ, KAA

secretariat, peer reviewers, HEI's, professors, students, and members of the industry with whom KAA collaborates) to communicate digitally, in accordance with their roles and responsibilities in the accreditation process. The platform ensures transparency, accountability, and integrity within the process. The platform has more than 3.000 users, and KAA is able to organize the accreditation process via the platform which helps our staff in regard to workload, efficacy, efficiency, transparency and accountability. The platform also serves as a tool to collect data, which helps the KAA to be provided with accurate data regarding the thematic analysis.

KAA's commitment to improving its work processes is also reflected in the projects supported by donors. With support of the Fulbright Specialist Program financed by the US Embassy in Prishtina, an US expert Dr. Trenia Walker conducted a feasibility study on the potential of digitalization of the KAA operations. As part of this initiative, HEIs were contacted to ask for their contribution to this project by providing feedback via a survey. The report on the digitisation feasibility study was completed in 2021 and is published in the KAA webpage.

Another concrete example is the HEI'25 Project, through which KAA has assessed the agency's needs with a focus on the digitization of accreditation processes in order to identify the need for intervention in an informed manner. KAA used the modified measuring Bruner Foundation instrument for evaluative thinking to conduct the needs assessment. To ensure a comprehensive approach to the assessment process, two separate workshops were held: one with KAA staff and the other with members of the State Council of Quality (SCQ) and members of the Appeals Committee. Also, the relevant documentation was analysed, and several meetings were held with the KAA Director to ensure that the evaluation process is relevant. The evaluation's findings clearly show that KAA should continue the digital transformation process that has started. This will increase the quality of the accreditation process and transparency and accountability to actors of higher education in Kosovo. Based on the assessment findings, concrete recommendations are given for how KAA can adopt information technology in the accreditation process and in its internal procedures.

6.6. Internal quality assurance and professional conduct

Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

As in the higher education system in Kosovo, KAA promotes a culture of quality within the organisation itself. KAA strives to follow a systematic approach of internal quality improvement to achieve its goals and objectives. This includes the drafting and

implementation of a series of documents such as regulations, guidelines, and other policies through which KAA ensures that its external evaluation procedures and any other area of its operations are carried out in a qualitative manner and are subject to continuous improvement.

Continuous quality improvement in KAA is ensured by applying the PDCA (plan – do – check – act) cycle. The planning and implementation of external evaluation processes in a timely and regular manner, in addition to what is foreseen by the legislation in force, is a key indicator of the KAA's performance. On the other hand, data collection through the control, monitoring and review of internal procedures are prerequisites for continuous quality improvement.

KAA has worked on drafting a policy for the internal quality assurance of the KAA which establishes and formally describes KAA actions which are carried out in order to implement the PDCA cycle. This procedure aims to serve as KAA's main mechanism for internal reflection and is fully in line with KAA's commitment to establishing an operating system that is comparable to European quality assurance agencies.

Some of the actions that are already implemented by KAA and are further formalized in the Internal QA Policy of KAA include:

6.6.1. Strategic Planning

KAA has approved its Strategic Plan 2021-2025 which serves as a basic document to determine the strategic orientation of its quality assurance processes in the higher education sector for the next 5 years (*see also under ESG 3.1*).

To implement the Strategic Plan, KAA has drafted a framework of detailed activities that contain clear deadlines and performance indicators. The strategic objectives of this plan are translated into annual work plans of KAA and are part of the regular evaluation and reporting of the KAA.

6.6.2. Internal communication

KAA staff holds regular weekly meetings which usually last 1 hour. Even though KAA's administration is relatively small, these meetings ensure the continuous exchange of information among administrative officials. The staff discusses the progress of their processes, announce potential challenges encountered during their work, and coordinate to harmonise the agency's activities and practices where needed.

KAA also holds regular workshops with the administrative staff and the SCQ members. If resources are available, the workshops are done in the retreats and last several days. These workshops serve as a platform to discuss the challenges, opportunities for improvement, progress achieved towards the planned activities, etc. Solutions to the challenges are elaborated and new tasks are distributed if it is considered necessary.

6.6.3. Professional development of staff

KAA follows transparent and professional procedures for recruiting administrative staff, following the legislation in force. The required education qualifications, specific skills and previous experience are defined in the respective recruitment announcement. KAA has regularly employed staff holding a university degree, have experience in education management and are fluent in Albanian and English language.

Since the quality assurance processes are specific, KAA organizes on-the-job training held by one of the KAA senior administrative staff. Other professional trainings for continuous professional development are frequent. They are provided through internal workshops by international experts or through participation in study visits that are supported by donors or international projects.

6.6.4. Quality assurance of the accreditation process

The Accreditation Manual ensures the predictability of the accreditation process, includes detailed information on deadlines, defines HEIs' responsibilities towards the external evaluation process, and provides guidelines on the drafting of the self-evaluation documentation so that the process fulfils its purpose.

KAA aims to improve the quality of the accreditation process by ensuring that the following actions have taken place:

- the accreditation process is planned on time;
- the criteria and procedures for the selection of international experts are respected;
- the training and briefing of international experts is held;
- conflict of interest between the experts and the institution under evaluation is avoided;
- individual and collective meetings with higher education institutions are held before the start of each accreditation process;
- coordinators of the accreditation procedure for each institution under evaluation are appointed;
- continuous information with higher education institutions is exchanged at every stage of the external evaluation process.

KAA reviews and revises regularly the Accreditation Manual to ensure that it remains relevant and effective in addressing current challenges and changes within the higher education sector. More information about the update and review of the Accreditation Manual is provided under Section 2.2. Designing methodologies fit for purpose.

6.6.5. Reporting

As an agency for external quality assessment, KAA is accountable for its work towards all external actors. In accordance with the legislation in force, KAA prepares annual work

reports which are published on its website. The same reports are sent to the Ministry of Education, Science, Technology, and Innovation (MESTI) and the Assembly of the Republic of Kosovo.

In addition to its annual work reports, KAA has been subject to regular monitoring by civil society organisations in recent years, who also report on KAA's work on an annual basis. In 2018, KAA reached a cooperation agreement with KITU (Coalition for Integrity and Transparency in the University), which consists of several non-governmental organizations that advocate for improving the quality of education in Kosovo, focusing on increasing transparency and integrity. As part of this cooperation agreement, the Organization for the Improvement of Quality in Education (ORCA) monitors the SCQ's work to ensure the transparency of its decisions and prepares annual reports. During 2023, ORCA monitored ten meetings of the SCQ and 11 meetings of the Appeals Committee.

6.6.6. Feedback from external stakeholders

The internal evaluation processes also contribute to increasing the transparency of the actions of the KAA towards the society in general. To this end, KAA aims to engage relevant actors, whose feedback serves as an important basis for informing KAA's policies. Feedback mechanisms include questionnaires and meetings with stakeholders such as higher education institutions, expert panels, students, employers, and the industry.

In 2024, the SCQ started with the new practice of holding meetings in the premises of higher education institutions in remote locations out of the capital city of Pristina. The occasion is used to bring the work of KAA closer to the higher education institutions and thereby increase transparency and de-mystify the role of KAA. The occasions of SCQ presence at the institutions is used also for meeting the senior management of the institution, exchange views and address the open questions.

KAA intends to systematically disseminate questionnaires with higher education institutions and the expert panels right after the accreditation procedures has ended. KAA is designing questionnaires for HEIs aimed at assessing the quality, regularity, and transparency of the accreditation process, starting from the application procedure, administration of accreditation documentation by KAA, planning, organization and implementation of the accreditation visit, as well as procedures after the completion of the accreditation visit. On the other hand, questionnaires with expert panels are intended to evaluate the planning, organization and implementation of the accreditation site visit, the support of the expert team by the KAA coordinators as well as the cooperation with peer members of the expert team.

KAA plans to disseminate questionnaires with students at least once per year, and questionnaires with employers once in two years respectively. Questionnaires with students are aimed at gathering a comprehensive and diverse range of perspectives on the quality of higher education institutions and the role of KAA in improving higher education. KAA

plans to disseminate the questionnaires to students who wish to participate voluntarily in surveys. KAA will require HIEs to submit a list of students and randomly select them from different academic programs, years of study, and demographic backgrounds.

Questionnaires with the industry will address the relevance of study programs vis a vis skills and competences gained from obtaining the degree and identify areas for improvement in curricula. While these questionnaires with the industry are not directly related to the internal quality assurance processes of KAA, they contribute to assessing how well the Kosovo HE system delivers.

In accordance with its strategic plan, KAA ensures that at least once a year it holds meetings with students, with various government actors, with line ministries, with business organizations, Chambers of Commerce, as well as individual employers, with whom it discusses the trends in higher education, the skills gap of graduates in the labour market, innovations in the labour market and therefore the adaptation of the programs to the rapid technological changes. In the last international conference held in September 2023, a panel discussion was dedicated to stakeholders. A student and employer were invited to discuss as panellists.

6.7. Cyclical external review of agencies

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

External quality assessment has been provided under the Administrative Instruction for Accreditation, article 3, paragraph 4, which stipulated that KAA is regularly subjected to external assessment. Also, the new Law on KAA, article 6 on Duties and Responsibilities of KAA, paragraph 1.13, determines that KAA is regularly subjected to external quality assessment by international quality assurance institutions in higher education.

KAA underwent an external quality review by ENQA twice. In 2014 which resulted with a positive decision to grant KAA full membership to ENQA and registration on EQAR, and secondly in 2019 which resulted with a negative decision to regain its full membership. KAA underwent an ENQA targeted review in September 2023.

External quality assessment is considered a vital process for KAA. Meeting the recommendations of the external evaluation and regaining full membership in ENQA and registration on EQAR have remained at the forefront of KAA's commitments. Since the last external assessment conducted by ENQA in 2019, KAA has worked tirelessly to fulfil ENQA's recommendations, which have substantially affected the quality of KAA's work. KAA has increased the transparency of its decisions, has advocated for the strengthening of its independence, has increased its cooperation with donors and international agencies, has introduced practices of data collection, has increased stakeholder engagement, etc. with the aim to reach substantial ESG compliance.

7. Opinions of Stakeholders

Stakeholders of KAA are considered institutions of higher education, students, international experts, MESTI, ASHAK, international donors, the Rector's Conference, NGOs dealing with higher education in Kosovo, Embassies, Chambers of Commerce, etc.

KAA involves mainly representatives of HEIs, students and NGOs in the drafting of policies/regulations/guidelines/legal acts by appointing them as members of the working groups. KAA also ensures that all above stakeholders in general contribute with inputs during public consultations of various documents. Public consultation of documents happens with the publication of the document on the KAA's website and sending the information to the stakeholders through emails about the possibility to comment or give inputs.

Discussion of documents can happen also in workshop types. Similar example is the workshop organised by the American Chamber of Commerce in Prishtina where KAA representatives discussed with private HEIs about the provisions of the new draft law on higher education. Another example is the discussion of the Kosovo Subject Area Code in a workshop that was held on held on 13.06.2022 with all representatives of higher education in Kosovo. KAA also organises meetings with the Rector's Conference where quality issues in higher education are discussed. Similar discussions have happened also with the entire higher education sector in Kosovo.

A good occasion to involve the stakeholders are also the KAA yearly international conferences where the most salient issues are debated within the Kosovar higher education community and the international guests. In the last conference that took place in September 2023 one of the three panel discussions was dedicated to the stakeholders and their involvement in higher education QA process.

While KAA has increased its communication and engagement with various stakeholders, it recognises that this engagement needs to be conducted systematically and formally based on its Strategic Development Plan. KAA also needs to collect systematic feedback from stakeholders, primarily from students, HEIs, and international experts, which feedback will contribute to the internal quality assurance procedures of KAA.

8. Recommendations and main findings from previous review and agency's resulting follow up

ESG	ENQA recommendations	KAA progress
3.1	Find as soon as possible HE-wide consensus and consequently decide on a KAA Strategic Plan, including solid activity plans with performance indicators and well-defined responsibilities, so as to prepare a sound basis for regular future activities.	In 2021, KAA adopted its Strategic Plan 2021-2025. Its drafting was preceded by a comprehensive consultation process with various stakeholders. The Strategic Plan includes clear strategic objectives, measures, action plans, and a framework for regular monitoring. In compliance with the Strategic Plan, KAA has drafted yearly activity plans that contribute to achieving the strategic objectives.
3.1	Involve students in the daily activities and the decision-making structure of KAA.	A major step towards increasing the involvement of students in the decision-making structure of KAA is the Law on KAA which foresees a student member in the State Council of Quality (SCQ) as a full member with a right to vote. The Law on KAA entered into force last year; therefore, the procedure for the student's appointment has not yet taken place. Besides this achievement, KAA has increased its attention to students by organizing meeting with them for multiple purpose. In addition, majority of working groups assigned for the drafting of legislation and regulations includes a student member. Students are as well invited in all other organisations of KAA, such as conferences, workshops, etc. In the last international conference held in September 2023, a panel discussion was dedicated to stakeholders. A student and employer were invited to discuss as panellists. To promote further the involvement of students in quality assurance procedures, KAA has implemented a project entitled "Increasing student participation in Internal and external quality assurance processes in Kosovo." The project aimed to encourage student participation in activities related to quality assurance which will contribute to improving the teaching and learning process. The project resulted in drafting a "Guideline for Student Engagement in Internal and External Quality Assurance of Kosovo Higher Education" and organizing two informative sessions with students to promote the guideline. In the new KAA Accreditation Manual, the participation of students in the process of evaluation (especially site visit) is further elaborated. Besides

ESG	ENQA recommendations	KAA progress
		the involvement of students, also student representatives should be invited.
3.3	In conducting evaluations according to the new procedures as described in the Accreditation Manual 2018 make sure that operational independence and independence of formal outcomes is guaranteed.	To ensure an independent State Council of Quality (SCQ), MESTI drafted a sub legal act which described in detail the procedures and criteria for the election of SCQ members (AI on the No. 06/2018 on the Criteria and Procedures for the Appointment of SCQ members). The election process has become transparent and is subject to scrutiny by external stakeholders such as civil society organisations. Most importantly this sub legal act, has defined clear procedures for the dismissal of SCQ members, particularly when a SCQ member qualifies as ineligible to continue to serve as a SCQ member. This particular provision has ensured that in order for the SCQ members to be dismissed a clear and transparent procedure has to be implemented and can happen only based on reasonable grounds. Another important step towards the strengthening of KAA's operational and decision-making independence is the Law on KAA adopted in June 2023. The law defines KAA as the main regulatory quality assurance agency in the Republic of Kosovo, with clear competences and responsibilities in its external quality assurance activities. Similarity to the AI for the Criteria and Procedures for the Appointment of SCQ members, the Law on KAA ensures the provisions that in order for the SCQ members to be dismissed a clear and transparent procedure has to be implemented and can happen only based on reasonable grounds. Prior to the approval of the Law by the Kosovo Assembly, the Government of Kosovo allowed KAA an increase of its administrative staff and freedom to design its administrative structure.
3.4	Use data collected during accreditation processes and other activities to carry our thematic and system-wide analysis in order to support further development of the HE system in Kosovo.	KAA has progressed towards this recommendation by developing initially a Guideline for conducting a thematic analysis. In addition, through the donor projects, KAA has drafted three thematic analyses. While the thematic analysis was produced mainly from international experts, members of KAA administration were continuously involved in the process, to employ the practices organized for such analysis.

ESG	ENQA recommendations	KAA progress
		The analyses are complemented by thematic international conferences organised on annual basis, whereby the salient issues are discussed with the higher education community, external stakeholders and international guests. KAA has yet to define and approve a Policy for Thematic analysis.
3.5	Take all necessary actions in order to assure adequate human and financial resources needed for conducting the activities expected from KAA.	In terms of human resources, KAA has progressed with the election of a permanent Director in 2020, and renewal of its mandate in 2023. In terms of number of administrative officers, KAA has increased its number of staff to 10 permanent officers. The Government of Kosovo has approved an increase of the number of administrative staff for KAA. This has resulted in the drafting of a new organogram, which foresees a total number of permanent employees of 32. The administrative structure of KAA will be organized into three central departments, namely the Department for Accreditation and Evaluation (11 officers), the Department for Monitoring and Post-Accreditation Procedures (8 officers), and the Department for Administration (11 officers).
3.6	In order to collect feedback KAA should increase and describe in documents the implementation of formal rather than informal mechanisms to create solid routines of internal quality assurance based on principles like closed-loop practices and the four-eyes system.	To address this recommendation, KAA has produced several documents in which the implementation of formal mechanism for internal quality assurance are described. To implement a consistent quality assurance system, KAA has produced a Policy on Internal QA, which serves as the KAA's main mechanism for internal reflection and improvement. KAA has lately introduced also meetings between staff and SCQ members whereby the quality and integrity of the structures, standards and procedures are addressed jointly and improved accordingly. E.g. the revised KAA Accreditation Manual (2024) and the Regulation for the Engagement of experts (2023) were drafted jointly with the support of external experts. This practice was the first step towards a regular internal stock-taking and QA process proposed by the SCQ.
2.1	Take care that in institutional and programme self-evaluations, in site visits and in review reports the ESG 2015 Standards Part I are addressed clearly.	KAA has initiated procedures for the assessment of its accreditation standards for institutional and program level (BA and MA level) and has subsequently revised them.

ESG	ENQA recommendations	KAA progress
		The new standards, which are organised within general areas of assessment, clearly indicate the ESG 2015 Part 1 in each of the standards. They aim at further consolidating and developing the internal quality assurance of HEIs and promoting quality improvement.
2.2	Make sure that during accreditation activities the workability of the methodologies is guaranteed.	KAA has revised the accreditation standards for institutional accreditation and accreditation of BA and MA study programs. The revision process has taken place with inputs collected from HEIs and other relevant stakeholders. In addition to the BA and MA programs, in 2021 KAA has separately drafted the Regulation for the Evaluation of PhD programs, which contains standards for the accreditation of PhD programs. Aiming to complement the accreditation cycle, KAA has drafted the Methodology for Follow-Up procedures and Monitoring.
2.3	Monitor and evaluate the implementation of accreditation activities from 2019 onwards thoroughly.	In the last five years, KAA has also regularly monitored the implementation of accreditation activities by producing annual reports summarizing the accreditation process. The reports include the number of applications, the number of site visits, the number of experts, the number of positive decisions, and the number of rejected applications, and all data are also available online.
2.3	Concentrate on quality improvement, when monitoring the follow-up of recommendations to HEIs provided by expert panels.	KAA has drafted the Methodology for Follow-Up procedures and Monitoring. It describes follow-up procedures, remote and field monitoring by KAA, and extraordinary monitoring procedures. KAA aims to evaluate the progress the HEIs have made since the previous external evaluation having in mind the continuous enhancement of quality and institutional capacity building of the higher education sector in Kosovo. It foresees to implement the follow up procedures at least once within the accreditation procedure of each higher education institution and study program. However, until now, due to shortages of human resources, follow-up procedures are mainly checked at a systematic level by the expert panel in the next accreditation procedure.
2.4	Make sure that the level of degree-work can and will be judged properly by the expert panels.	KAA has improved the workload of experts engaged in accreditation processes. In the last three years, KAA has engaged three-panel members for institutional accreditation process, one of them being a student. Similarly for the study program

ESG	ENQA recommendations	KAA progress
		level, KAA has engaged at three-panel members, one of them being a student.
2.4	Make sure that full students' participation in institutional reviews and program evaluations is guaranteed.	KAA has made substantial progress towards student involvement in accreditation processes. In the last three years, all expert panel involve at least one student. In the last revision of the KAA Accreditation Manual, the involvement of students was elaborated. A more representative sample of randomly chosen students is obligatory. Besides the students, in general also the student representatives must be involved.
2.4	Build a network of national experts, including students, in order to participate in activities such as monitoring of the follow-up of recommendations provided in review reports.	The current legal framework, including the new Law on KAA, foresees the participation of only international experts, limiting the possibility of Kosovar evaluators or students becoming part of the accreditation procedures as experts. KAA is planning to work on a model that allows the participation of local experts in its procedures, whilst ensuring that the provisions of the law are not breached.
2.5	Monitor how the existing rules for assessing standards and for decision-making work out in reality. If needed, improvements both in decision rules and by way of trainings, may have to be considered.	KAA has improved the existing rules for assessing standards and for decision making. They are described in the Accreditation Manual. KAA has also issued decisions to complement the Manual with specific criteria to be implemented by HEIs regarding the academic staff, such as requirements for the number of research papers. KAA has also worked on producing a "Kosovo Subject Area Code" which indicates clearly the suitability of academic staff qualifications with respect to the study program they are assigned as program holders.
2.6	Improve the quality of reports and make sure that they contain deeper analysis and a better connection with evidence and that the full reports are regularly published.	KAA has made substantial progress towards the quality improvement of evaluation reports. Since 2019, in line with the Guidelines provided for under the Accreditation Manual and its templates, all evaluation reports follow a uniform structure, and each standard of the general area are clearly judged by the expert panels. The newly revised Manual envisages a clearer instruction to the experts on how the report should be structured and sets more precise standards for drafting it. KAA has also increased its efforts to implement a validation procedure of the reports, to make sure that the general structure of the report is respected, the findings are sufficiently elaborated, and that

ESG	ENQA recommendations	KAA progress
		final recommendation is made based on evidence and aligns with the content of the report.

9. SWOT analysis

The working group assigned to draft the SAR of KAA, in regard to the SWOT analysis, has identified as:

Strengths:

- KAA is reputed for its extensive expertise in the development and implementation of effective educational quality assurance mechanisms;
- Full legal and operational independence in implementation of activities, consolidated fully by the Law on KAA;
- Strong support across the entire political spectrum for ensuring KAA's independence and status, culminating in the adoption of the Law in KAA;
- Performing of activities fully in line with the ESG 2015 and with reference to the European Qualification Framework;
- The Expert Panels are composed by international experts and students, therefore the risks of conflict of interest and incompatibility are minimised;
- The SCQ is composed by national, international members, student, KAA director and 2 employers' representatives. This structure is a guarantee for a robust blend of expertise, international and stakeholders' perspective on QA in higher education;
- Outcomes of all procedures and results of all activities are publicly available in English, enhancing international visibility of quality in Kosovo higher education;
- High participation in international projects including EU Projects and of other international donors;
- Continuous participation in international conferences, workshops, trainings etc., which results in highly professional and competent staff;
- Financial stability with sufficient resources in regard to providing staff trainings, equipment purchases, software purchases, etc.;
- Centralized processes via e-Akreiditmi software, which ensures efficiency, efficacy and transparency;
- Open minded management striving for innovation, reflecting in digitalization of processes as evidenced by its implementation of various electronic resources;

Weaknesses:

- The student member of the SCQ is yet to be appointed;
- KAA has increased the number of staff from 10 to 18 which is still not sufficient. With its new organizational chart, KAA has approved a number of 32 employees who are still in process of being recruited;
- High workload for staff, especially those working in the department for evaluation and follow-up procedures;
- Difficulty to ensure consistency on the expert panel reports despite providing strict guidelines and extensive trainings;
- Evaluation with only international experts sometimes poses difficulties in training and ensuring enough knowledge of the local system;

- Inability to establish a reward system based on performance in the public administration sector, which on the long term can affect the motivation and satisfaction of employees;
- Slow decision-making process when it comes to the appointment of new SCQ members, including students' and employers' representatives;
- Only initial phase of internal QA process – it needs to be further developed;

Opportunities:

- KAA is an institution with high flexibility in regard to changes, adapting and revision of policies;
- KAA has a high reputation inside and outside the country, resulting in awarding of a high number of projects, donations, grants etc.;
- Regaining membership in ENQA and registration on EQAR would further strengthen its status and its credibility, resulting in increased recognition of degrees from Kosovo;
- Possible future integration to the European Higher Education Area (EHEA) / Bologna Process after Kosovo joined Council of Europe will further encourage the improvements in the quality culture and curricular improvements;
- Integration to the European Research Area will further encourage the development and enhancement of the research at higher education institutions;

Threats:

- HEI's opting for evaluation with foreign QA agencies due to lower threshold or lack of awareness of foreign agencies on the local context;
- Slow economic development might reflect in the quality of offered study programmes;
- Damaged reputation as a result of former political interference;
- Tendency for establishing new study programmes from HEI's despite not fulfilling the criteria;
- Low awareness of HEI's on the importance of QA processes which limits the agency in its mission for quality enhancement;
- Kosovo still does not have a centralized system providing data on market needs, which would facilitate the orientation of study programmes towards maximizing employment opportunities for its graduates;
- Due to a very deregulated system when it comes to the types of legal entities allowed to provide higher education (including for-profit companies), the necessity of strong QA as regulatory mechanism will keep the KAA busy with control-like activity instead of moving towards a more quality culture/enhancement approach.

10.Key Challenges and areas for future development

In recent years, KAA has been continuously engaged in identifying international best practices to improve its external evaluation processes and other processes of its work. KAA has been firmly committed to amending its external evaluation documents, regulations, and standards, has actively participated in international projects, has conducted numerous study visits to European quality assurance agencies, has promoted continuous dialogue with HEIs and the academic community, and has endlessly advocated strengthening its role as an independent decision-making agency in the higher education system in Kosovo. All these actions have substantially led to addressing recommendations from previous reviews and thus enhancing KAA's compliance with the Standards and Guidelines for Quality Assurance in the EHEA (ESG).

Notwithstanding that, based on the results of several formal and informal self-assessments, it is considered that some areas still need further attention to be improved.

Regarding its internal quality assurance processes, KAA, in line with its strategic plan, needs to conduct formalized questionnaires with panel members and HEIs upon the completion of the accreditation process. It also needs to more systematically gather feedback from students and employers and integrate it to inform its policies and procedures.

In terms of human resources, while progress is made in increasing the number of staff, KAA needs to have a formal assessment of staff needs for professional development in place and, consequently, implement a staff development plan.

Whereas substantial progress has been made regarding drafting and implementing accreditation procedures that are fit for purpose, KAA still considers that it needs to distinguish standards for the initial accreditation of an HEI and its programs and the standards for the re-accreditation of programs and HEIs.

KAA must also consistently implement follow-up procedures in line with its Methodology of Monitoring and Post-Accreditation Procedures. KAA has initiated several monitoring procedures to accredited HEIs, however it needs to ensure that monitoring visits are carried for all programs within their accreditation period. In addition, more emphasis should be given on implementation of recommendations of the previous evaluations, especially where they address education process with curricular elements such as learning outcomes, assessment, student workload and teaching methods.

The standard on internal QA at the higher education institutions should gain in importance. This should be accompanied by raising quality awareness and capacity of the higher education institutions for the internal QA structures, standards and procedures. The QA system should encourage the institutions to take over full responsibility and the intensive care for assuring quality in pursuing their own mission, strategy and goals.

KAA has drafted a Guideline on drafting thematic analysis and has produced three thematic analyses so far through international support. However, KAA still needs to approve a policy for the drafting of thematic analysis that is consistently implemented. To this end, KAA also needs to increase the capacities of its administrative staff and data collection tools.

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11.Glossary of Terms

AC	Appeals Committee
ADA	Austrian Development Agency
ASHAK	Kosovo Academy of Sciences and Arts
ECTS	European Credit Transfer and Accumulation System
ENQA	European Association for Quality Assurance in Higher Education
EQAR	European Quality Assurance Register for Higher Education
HEI'25 Project	Higher Education Intervention 2025 – HEI'25
HERAS+	Higher Education Research and Applied Science Plus
KAA	Kosovo Accreditation Agency
KITU	Coalition for Integrity and Transparency in the University
LHE	Law on Higher Education
MESTI	Ministry of Education, Science, Technology and Innovation
NQF	National Qualifications Authority
ORCA	Organization for the Improvement of Quality in Education
QAINT	The Quality, Accountability, Integrity, and Transparency in Higher Education Project – QAINT
SCQ	State Council of Quality
WoS	Web of Sciences platform

ESG 2015



EUROPEAN
Higher Education Area

bologna
process

Standards and Guidelines for Quality Assurance
in the European Higher Education Area

Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)

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BUSINESSEUROPE
European Quality Assurance Register for Higher Education (EQAR)

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Foreword

The Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) were adopted by the Ministers responsible for higher education in 2005 following a proposal prepared by the European Association for Quality Assurance in Higher Education (ENQA) in co-operation with the European Students' Union (ESU),[1] the European Association of Institutions in Higher Education (EURASHE) and the European University Association (EUA).

Since 2005, considerable progress has been made in quality assurance as well as in other Bologna action lines such as qualifications frameworks, recognition and the promotion of the use of learning outcomes, all these contributing to a paradigm shift towards student-centred learning and teaching.

Given this changing context, in 2012 the Ministerial Communiqué invited the E4 Group (ENQA, ESU, EUA, EURASHE) in cooperation with Education International (EI), BUSINESSEUROPE and the European Quality Assurance Register for Higher Education (EQAR) to prepare an initial proposal for a revised ESG "to improve their clarity, applicability and usefulness, including their scope".

The revision included several consultation rounds involving both the key stakeholder organisations and ministries. The many comments, proposals and recommendations received were carefully analysed and taken very seriously by the Steering Group (SG). They are reflected in this 2015 version of the ESG.

The ESG 2015 were adopted by the Ministers responsible for higher education in the European Higher Education Area in May 2015. As a result of the participative revision we are confident that they reflect a consensus among all the organisations and ministries involved on how to take forward quality assurance in the European Higher Education Area and, as such, provide a firm basis for successful implementation.

European Association for Quality Assurance in Higher Education (ENQA)
European Students' Union (ESU)
European University Association (EUA)
European Association of Institutions in Higher Education (EURASHE)
In cooperation with:
Education International (EI)
BUSINESSEUROPE
European Quality Assurance Register for Higher Education (EQAR)

1 ESU was formerly known as ESIB – The National Unions of Students in Europe.

I. Context, scope, purposes and principles

Setting the context

Higher education, research and innovation play a crucial role in supporting social cohesion, economic growth and global competitiveness. Given the desire for European societies to become increasingly knowledge-based, higher education is an essential component of socio-economic and cultural development. At the same time, an increasing demand for skills and competences requires higher education to respond in new ways.

Broader access to higher education is an opportunity for higher education institutions to make use of increasingly diverse individual experiences. Responding to diversity and growing expectations for higher education requires a fundamental shift in its provision; it requires a more student-centred approach to learning and teaching, embracing flexible learning paths and recognising competences gained outside formal curricula. Higher education institutions themselves also become more diverse in their missions, mode of educational provision and cooperation, including growth of internationalisation, digital learning and new forms of delivery.[2] The role of quality assurance is crucial in supporting higher education systems and institutions in responding to these changes while ensuring the qualifications achieved by students and their experience of higher education remain at the forefront of institutional missions.

A key goal of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) is to contribute to the common understanding of quality assurance for learning and teaching across borders and among all stakeholders.[3] They have played and will continue to play an important role in the development of national and institutional quality assurance systems across the European Higher Education Area (EHEA) and cross-border cooperation. Engagement with quality assurance processes, particularly the external ones, allows European higher education systems to demonstrate quality and increase transparency, thus helping to build mutual trust and better recognition of their qualifications, programmes[4] and other provision.

The ESG are used by institutions and quality assurance agencies as a reference document for internal and external quality assurance systems in higher education. Moreover, they are used by the European Quality Assurance Register (EQAR), which is responsible for the register of quality assurance agencies that comply with the ESG.

Scope and concepts

The ESG are a set of standards and guidelines for internal and external quality assurance in higher education. The ESG are not standards for quality, nor do they prescribe how the quality assurance processes are implemented, but they provide guidance, covering the areas which are vital for successful quality provision and learning environments in higher education. The ESG should be considered in a broader context that also includes qualifications frameworks, ECTS and diploma supplement that also contribute to promoting the transparency and mutual trust in higher education in the EHEA.

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2 Communication from the European Commission: Opening up Education: Innovative teaching and learning for all through new Technologies and Open Educational Resources, COM(2013) 654 final, http://ec.europa.eu/education/news/doc/openingcom_en.pdf

3 Unless otherwise specified, in the document stakeholders are understood to cover all actors within an institution, including students and staff, as well as external stakeholders such as employers and external partners of an institution.

4 The term "programme" in these standards refers to higher education provision in its broadest sense, including provision that is not part of a programme leading to a formal degree.

The focus of the ESG is on quality assurance related to learning and teaching in higher education, including the learning environment and relevant links to research and innovation. In addition institutions have policies and processes to ensure and improve the quality of their other activities, such as research and governance.

The ESG apply to all higher education offered in the EHEA regardless of the mode of study or place of delivery. Thus, the ESG are also applicable to all higher education including transnational and cross-border provision. **In this document the term "programme" refers to higher education in its broadest sense**, including that which is not part of a programme leading to a formal degree.

Higher education aims to fulfil multiple purposes; including preparing students for active citizenship, for their future careers (e.g. contributing to their employability), supporting their personal development, creating a broad advanced knowledge base and stimulating research and innovation.[5] Therefore, stakeholders, who may prioritise different purposes, can view quality in higher education differently and quality assurance needs to take into account these different perspectives. *Quality*, whilst not easy to define, is mainly a result of the interaction between teachers, students and the institutional learning environment. Quality assurance should ensure a learning environment in which the content of programmes, learning opportunities and facilities are fit for purpose.

At the heart of all quality assurance activities are the twin purposes of *accountability* and *enhancement*. Taken together, these create trust in the higher education institution's performance. A successfully implemented quality assurance system will provide information to assure the higher education institution and the public of the quality of the higher education institution's activities (accountability) as well as provide advice and recommendations on how it might improve what it is doing (enhancement). Quality assurance and quality enhancement are thus inter-related. They can support the development of a *quality culture* that is embraced by all: from the students and academic staff to the institutional leadership and management.

The term 'quality assurance' is used in this document to describe all activities within the continuous improvement cycle (i.e. assurance and enhancement activities).

Unless otherwise specified, in the document *stakeholders* are understood to cover all actors within an institution, including students and staff, as well as external stakeholders such as employers and external partners of an institution.

The word *institution* is used in the standards and guidelines to refer to higher education institutions. Depending on the institution's approach to quality assurance it can, however, refer to the institution as whole or to any actors within the institution.

ESG: PURPOSES AND PRINCIPLES

The ESG have the following purposes:

- **They set a common framework** for quality assurance systems for learning and teaching at European, national and institutional level;
- **They enable the assurance and improvement of quality** of higher education in the European higher education area;
- **They support mutual trust**, thus facilitating recognition and mobility within and across national borders;
- **They provide information on quality assurance** in the EHEA.

5 Recommendation Rec (2007)6 by the Council of Europe's Committee of Ministers on the public responsibility for higher education and research, http://www.coe.int/t/dg4/highereducation/News/pub_res_EN.pdf

These purposes provide a framework within which the ESG may be used and implemented in different ways by different institutions, agencies and countries. The EHEA is characterised by its diversity of political systems, higher education systems, socio-cultural and educational traditions, languages, aspirations and expectations. This makes a single monolithic approach to quality and quality assurance in higher education inappropriate. Broad acceptance of all standards is a precondition for creating common understanding of quality assurance in Europe. For these reasons, the ESG need to be at a reasonably generic level in order to ensure that they are applicable to all forms of provision.

The ESG provide the criteria at European level against which quality assurance agencies and their activities are assessed.[6] This ensures that the quality assurance agencies in the EHEA adhere to the same set of principles and the processes and procedures are modelled to fit the purposes and requirements of their contexts.

The ESG are based on the following four principles for quality assurance in the EHEA:

- Higher education institutions have primary responsibility for the quality of their provision and its assurance;
- Quality assurance responds to the diversity of higher education systems, institutions, programmes and students;
- Quality assurance supports the development of a quality culture;
- Quality assurance takes into account the needs and expectations of students, all other stakeholders and society.

6 Agencies that apply for inclusion in the European Quality Assurance Register (EQAR) undergo an external review for which the ESG provide the criteria. Also the European Association for Quality Assurance in Higher Education (ENQA) relies on compliance with the ESG when it comes to granting quality assurance agencies full membership status in the organisation.

II. European standards and guidelines for quality assurance in higher education

The standards for quality assurance have been divided into three parts:

- Internal quality assurance
- External quality assurance
- Quality assurance agencies

It should be kept in mind, however, that the three parts are intrinsically interlinked and together form the basis for a European quality assurance framework. External quality assurance in Part 2 recognises the standards for internal quality assurance in Part 1 thus ensuring that the internal work undertaken by institutions is directly relevant to any external quality assurance that they undergo. In the same way Part 3 refers to Part 2. Thus, these three parts work on a complementary basis in higher education institutions as well as in agencies and also work on the understanding that other stakeholders contribute to the framework. As a consequence, the three parts should be read as a whole.

The *standards* set out agreed and accepted practice for quality assurance in higher education in the EHEA and should, therefore, be taken account of and adhered to by those concerned, in all types of higher education provision.[7] The summary list of standards for quality assurance is placed in the annex for easy reference.

The *guidelines* explain why the standard is important and describe how standards might be implemented. They set out good practice in the relevant area for consideration by the actors involved in quality assurance. Implementation will vary depending on different contexts.

7 The standards make use of the common English usage of "should" which has the connotation of prescription and compliance.

Part 1: Standards and guidelines for internal quality assurance

1.1 Policy for quality assurance

Standard:
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.

Guidelines:
Policies and processes are the main pillars of a coherent institutional quality assurance system that forms a cycle for continuous improvement and contributes to the accountability of the institution. It supports the development of quality culture in which all internal stakeholders assume responsibility for quality and engage in quality assurance at all levels of the institution. In order to facilitate this, the policy has a formal status and is publicly available.

Quality assurance policies are most effective when they reflect the relationship between research and learning & teaching and take account of both the national context in which the institution operates, the institutional context and its strategic approach. Such a policy supports

- the organisation of the quality assurance system;
- departments, schools, faculties and other organisational units as well as those of institutional leadership, individual staff members and students to take on their responsibilities in quality assurance;
- academic integrity and freedom and is vigilant against academic fraud;
- guarding against intolerance of any kind or discrimination against the students or staff;
- the involvement of external stakeholders in quality assurance.

The policy translates into practice through a variety of internal quality assurance processes that allow participation across the institution. How the policy is implemented, monitored and revised is the institution's decision.

The quality assurance policy also covers any elements of an institution's activities that are subcontracted to or carried out by other parties.

1.2 Design and approval of programmes

Standard:
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.

Guidelines:
Study programmes are at the core of the higher education institutions' teaching mission. They provide students with both academic knowledge and skills including those that are transferable, which may influence their personal development and may be applied in their future careers.

Programmes

- are designed with overall programme objectives that are in line with the institutional strategy and have explicit intended learning outcomes;
- are designed by involving students and other stakeholders in the work;

- benefit from external expertise and reference points;
- reflect the four purposes of higher education of the Council of Europe (cf. Scope and Concepts);
- are designed so that they enable smooth student progression;
- define the expected student workload, e.g. in ECTS;
- include well-structured placement opportunities where appropriate;[8]
- are subject to a formal institutional approval process.

1.3 Student-centred learning, teaching and assessment

Standard:
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.

Guidelines:
Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process. This means careful consideration of the design and delivery of study programmes and the assessment of outcomes.

The implementation of student-centred learning and teaching
- respects and attends to the diversity of students and their needs, enabling flexible learning paths;
- considers and uses different modes of delivery, where appropriate;
- flexibly uses a variety of pedagogical methods;
- regularly evaluates and adjusts the modes of delivery and pedagogical methods;
- encourages a sense of autonomy in the learner, while ensuring adequate guidance and support from the teacher;
- promotes mutual respect within the learner-teacher relationship;
- has appropriate procedures for dealing with students' complaints.

Considering the importance of assessment for the students' progression and their future careers, quality assurance processes for assessment take into account the following:
- Assessors are familiar with existing testing and examination methods and receive support in developing their own skills in this field;
- The criteria for and method of assessment as well as criteria for marking are published in advance;
- The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved. Students are given feedback, which, if necessary, is linked to advice on the learning process;
- Where possible, assessment is carried out by more than one examiner;
- The regulations for assessment take into account mitigating circumstances;
- Assessment is consistent, fairly applied to all students and carried out in accordance with the stated procedures;
- A formal procedure for student appeals is in place.

8 Placements include traineeships, internships and other periods of the programme that are not spent in the institution but that allow the student to gain experience in an area related to their studies.

1.4 Student admission, progression, recognition and certification

Standard:
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.

Guidelines:
Providing conditions and support that are necessary for students to make progress in their academic career is in the best interest of the individual students, programmes, institutions and systems. It is vital to have fit-for-purpose admission, recognition and completion procedures, particularly when students are mobile within and across higher education systems.

It is important that access policies, admission processes and criteria are implemented consistently and in a transparent manner. Induction to the institution and the programme is provided.

Institutions need to put in place both processes and tools to collect, monitor and act on information on student progression.

Fair recognition of higher education qualifications, periods of study and prior learning, including the recognition of non-formal and informal learning, are essential components for ensuring the students' progress in their studies, while promoting mobility. Appropriate recognition procedures rely on

- institutional practice for recognition being in line with the principles of the Lisbon Recognition Convention;
- cooperation with other institutions, quality assurance agencies and the national ENIC/NARIC centre with a view to ensuring coherent recognition across the country.

Graduation represents the culmination of the students' period of study. Students need to receive documentation explaining the qualification gained, including achieved learning outcomes and the context, level, content and status of the studies that were pursued and successfully completed.

1.5 Teaching staff

Standard:
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.

Guidelines:
The teacher's role is essential in creating a high quality student experience and enabling the acquisition of knowledge, competences and skills. The diversifying student population and stronger focus on learning outcomes require student-centred learning and teaching and the role of the teacher is, therefore, also changing (cf. Standard 1.3).
Higher education institutions have primary responsibility for the quality of their staff and for providing them with a supportive environment that allows them to carry out their work effectively. Such an environment

- sets up and follows clear, transparent and fair processes for staff recruitment and conditions of employment that recognise the importance of teaching;
- offers opportunities for and promotes the professional development of teaching staff;
- encourages scholarly activity to strengthen the link between education and research;
- encourages innovation in teaching methods and the use of new technologies.

1.6 Learning resources and student support

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

Guidelines:
For a good higher education experience, institutions provide a range of resources to assist student learning. These vary from physical resources such as libraries, study facilities and IT infrastructure to human support in the form of tutors, counsellors and other advisers. The role of support services is of particular importance in facilitating the mobility of students within and across higher education systems.

The needs of a diverse student population (such as mature, part-time, employed and international students as well as students with disabilities), and the shift towards student-centred learning and flexible modes of learning and teaching, are taken into account when allocating, planning and providing the learning resources and student support.

Support activities and facilities may be organised in a variety of ways depending on the institutional context. However, the internal quality assurance ensures that all resources are fit for purpose, accessible, and that students are informed about the services available to them.

In delivering support services the role of support and administrative staff is crucial and therefore they need to be qualified and have opportunities to develop their competences.

1.7 Information management

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

Guidelines:
Reliable data is crucial for informed decision-making and for knowing what is working well and what needs attention. Effective processes to collect and analyse information about study programmes and other activities feed into the internal quality assurance system.

The information gathered depends, to some extent, on the type and mission of the institution. The following are of interest:

- Key performance indicators;
- Profile of the student population;
- Student progression, success and drop-out rates;
- Students' satisfaction with their programmes;
- Learning resources and student support available;
- Career paths of graduates.

Various methods of collecting information may be used. It is important that students and staff are involved in providing and analysing information and planning follow-up activities.

1.8 Public information

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

Guidelines:
Information on institutions' activities is useful for prospective and current students as well as for graduates, other stakeholders and the public.

Therefore, institutions provide information about their activities, including the programmes they offer and the selection criteria for them, the intended learning outcomes of these programmes, the qualifications they award, the teaching, learning and assessment procedures used, the pass rates and the learning opportunities available to their students as well as graduate employment information.

1.9 On-going monitoring and periodic review of programmes

Standard:
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.

Guidelines:
Regular monitoring, review and revision of study programmes aim to ensure that the provision remains appropriate and to create a supportive and effective learning environment for students.

They include the evaluation of:
- The content of the programme in the light of the latest research in the given discipline thus ensuring that the programme is up to date;
- The changing needs of society;
- The students' workload, progression and completion;
- The effectiveness of procedures for assessment of students;
- The student expectations, needs and satisfaction in relation to the programme;
- The learning environment and support services and their fitness for purpose for the programme.

Programmes are reviewed and revised regularly involving students and other stakeholders. The information collected is analysed and the programme is adapted to ensure that it is up-to-date. Revised programme specifications are published.

1.10 Cyclical external quality assurance

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

Guidelines:
External quality assurance in its various forms can verify the effectiveness of institutions' internal quality assurance, act as a catalyst for improvement and offer the institution new perspectives. It will also provide information to assure the institution and the public of the quality of the institution's activities.

Institutions participate in cyclical external quality assurance that takes account, where relevant, of the requirements of the legislative framework in which they operate. Therefore, depending on the framework, this external quality assurance may take different forms and focus at different organisational levels (such as programme, faculty or institution).

Quality assurance is a continuous process that does not end with the external feedback or report or its follow-up process within the institution. Therefore, institutions ensure that the progress made since the last external quality assurance activity is taken into consideration when preparing for the next one.

Part 2: Standards and guidelines for external quality assurance

2.1 Consideration of internal quality assurance

Standard:
External quality assurance should address the effectiveness of the internal quality assurance processes described in Part 1 of the ESG.

Guidelines:
Quality assurance in higher education is based on the institutions' responsibility for the quality of their programmes and other provision; therefore it is important that external quality assurance recognises and supports institutional responsibility for quality assurance. To ensure the link between internal and external quality assurance, external quality assurance includes consideration of the standards of Part 1. These may be addressed differently, depending on the type of external quality assurance.

2.2 Designing methodologies fit for purpose

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

Guidelines:
In order to ensure effectiveness and objectivity it is vital for external quality assurance to have clear aims agreed by stakeholders.

The aims, objectives and implementation of the processes will
- bear in mind the level of workload and cost that they will place on institutions;
- take into account the need to support institutions to improve quality;
- allow institutions to demonstrate this improvement;
- result in clear information on the outcomes and the follow-up.

The system for external quality assurance might operate in a more flexible way if institutions are able to demonstrate the effectiveness of their own internal quality assurance.

2.3 Implementing processes

Standard:
External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include
- a self-assessment or equivalent;
- an external assessment normally including a site visit;
- a report resulting from the external assessment;
- a consistent follow-up.

Guidelines:
External quality assurance carried out professionally, consistently and transparently ensures its acceptance and impact.

Depending on the design of the external quality assurance system, the institution provides the basis

for the external quality assurance through a self-assessment or by collecting other material including supporting evidence. The written documentation is normally complemented by interviews with stakeholders during a site visit. The findings of the assessment are summarised in a report (cf. Standard 2.5) written by a group of external experts (cf. Standard 2.4).

External quality assurance does not end with the report by the experts. The report provides clear guidance for institutional action. Agencies have a consistent follow-up process for considering the action taken by the institution. The nature of the follow-up will depend on the design of the external quality assurance.

2.4 Peer-review experts

Standard:
External quality assurance should be carried out by groups of external experts that include (a) student member(s).

Guidelines:
At the core of external quality assurance is the wide range of expertise provided by peer experts, who contribute to the work of the agency through input from various perspectives, including those of institutions, academics, students and employers/professional practitioners.

In order to ensure the value and consistency of the work of the experts, they
- are carefully selected;
- have appropriate skills and are competent to perform their task;
- are supported by appropriate training and/or briefing.

The agency ensures the independence of the experts by implementing a mechanism of no-conflict-of-interest.

The involvement of international experts in external quality assurance, for example as members of peer panels, is desirable as it adds a further dimension to the development and implementation of processes.

2.5 Criteria for outcomes

Standard:
Any outcomes or judgements made as the result of external quality assurance should be based on explicit and published criteria that are applied consistently, irrespective of whether the process leads to a formal decision.

Guidelines:
External quality assurance and in particular its outcomes have a significant impact on institutions and programmes that are evaluated and judged.

In the interests of equity and reliability, outcomes of external quality assurance are based on pre-defined and published criteria, which are interpreted consistently and are evidence-based. Depending on the external quality assurance system, outcomes may take different forms, for example, recommendations, judgements or formal decisions.

2.6 Reporting

Standard:
Full reports by the experts should be published, clear and accessible to the academic community, external partners and other interested individuals. If the agency takes any formal decision based on the reports, the decision should be published together with the report.

Guidelines:
The report by the experts is the basis for the institution's follow-up action of the external evaluation and it provides information to society regarding the activities of an institution. In order for the report to be used as the basis for action to be taken, it needs to be clear and concise in its structure and language and to cover

- context description (to help locate the higher education institution in its specific context);
- description of the individual procedure, including experts involved;
- evidence, analysis and findings;
- conclusions;
- features of good practice, demonstrated by the institution;
- recommendations for follow-up action.

The preparation of a summary report may be useful.

The factual accuracy of a report is improved if the institution is given the opportunity to point out errors of fact before the report is finalised.

2.7 Complaints and appeals

Standard:
Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Guidelines:
In order to safeguard the rights of the institutions and ensure fair decision-making, external quality assurance is operated in an open and accountable way. Nevertheless, there may be misapprehensions or instances of dissatisfaction about the process or formal outcomes.

Institutions need to have access to processes that allow them to raise issues of concern with the agency; the agencies, need to handle such issues in a professional way by means of a clearly defined process that is consistently applied.

A complaints procedure allows an institution to state its dissatisfaction about the conduct of the process or those carrying it out.

In an appeals procedure, the institution questions the formal outcomes of the process, where it can demonstrate that the outcome is not based on sound evidence, that criteria have not been correctly applied or that the processes have not been consistently implemented.

Part 3: Standards and guidelines for quality assurance agencies

3.1 Activities, policy and processes for quality assurance

Standard:
Agencies should undertake external quality assurance activities as defined in Part 2 of the ESG on a regular basis. They should have clear and explicit goals and objectives that are part of their publicly available mission statement. These should translate into the daily work of the agency. Agencies should ensure the involvement of stakeholders in their governance and work.

Guidelines:
To ensure the meaningfulness of external quality assurance, it is important that institutions and the public trust agencies.

Therefore, the goals and objectives of the quality assurance activities are described and published along with the nature of interaction between the agencies and relevant stakeholders in higher education, especially the higher education institutions, and the scope of the agencies' work. The expertise in the agency may be increased by including international members in agency committees.

A variety of external quality assurance activities are carried out by agencies to achieve different objectives. Among them are evaluation, review, audit, assessment, accreditation or other similar activities at programme or institutional level that may be carried out differently. When the agencies also carry out other activities, a clear distinction between external quality assurance and their other fields of work is needed.

3.2 Official status

Standard:
Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

Guidelines:
In particular when external quality assurance is carried out for regulatory purposes, institutions need to have the security that the outcomes of this process are accepted within their higher education system, by the state, the stakeholders and the public.

3.3 Independence

Standard:
Agencies should be independent and act autonomously. They should have full responsibility for their operations and the outcomes of those operations without third party influence.

Guidelines:
Autonomous institutions need independent agencies as counterparts.

In considering the independence of an agency the following are important:

- Organisational independence, demonstrated by official documentation (e.g. instruments of government, legislative acts or statutes of the organisation) that stipulates the independence of the agency's work from third parties, such as higher education institutions, governments and other stakeholder organisations;
- Operational independence: the definition and operation of the agency's procedures and

methods as well as the nomination and appointment of external experts are undertaken independently from third parties such as higher education institutions, governments and other stakeholders;
- Independence of formal outcomes: while experts from relevant stakeholder backgrounds, particularly students, take part in quality assurance processes, the final outcomes of the quality assurance processes remain the responsibility of the agency.

Anyone contributing to external quality assurance activities of an agency (e.g. as expert) is informed that while they may be nominated by a third party, they are acting in a personal capacity and not representing their constituent organisations when working for the agency. Independence is important to ensure that any procedures and decisions are solely based on expertise.

3.4 Thematic analysis

Standard:
Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

Guidelines:
In the course of their work, agencies gain information on programmes and institutions that can be useful beyond the scope of a single process, providing material for structured analyses across the higher education system. These findings can contribute to the reflection on and the improvement of quality assurance policies and processes in institutional, national and international contexts.

A thorough and careful analysis of this information will show developments, trends and areas of good practice or persistent difficulty.

3.5 Resources

Standard:
Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

Guidelines:
It is in the public interest that agencies are adequately and appropriately funded, given higher education's important impact on the development of societies and individuals. The resources of the agencies enable them to organise and run their external quality assurance activities in an effective and efficient manner. Furthermore, the resources enable the agencies to improve, to reflect on their practice and to inform the public about their activities.

3.6 Internal quality assurance and professional conduct

Standard:
Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

Guidelines:
Agencies need to be accountable to their stakeholders. Therefore, high professional standards and

integrity in the agency's work are indispensable. The review and improvement of their activities are on-going so as to ensure that their services to institutions and society are optimal.

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

- ensures that all persons involved in its activities are competent and act professionally and ethically;
- includes internal and external feedback mechanisms that lead to a continuous improvement within the agency;
- guards against intolerance of any kind or discrimination;
- outlines the appropriate communication with the relevant authorities of those jurisdictions where they operate;
- ensures that any activities carried out and material produced by subcontractors are in line with the ESG, if some or all of the elements in its quality assurance activities are subcontracted to other parties;
- allows the agency to establish the status and recognition of the institutions with which it conducts external quality assurance.

3.7 Cyclical external review of agencies

Standard:
Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

Guidelines:
A periodic external review will help the agency to reflect on its policies and activities. It provides a means for assuring the agency and its stakeholders that it continues to adhere to the principles enshrined in the ESG.

III. Annex: Summary list of standards

Part 1: Standards for internal quality assurance

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.

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.

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.

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.

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.

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.

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.

1.8 Public information

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

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.

1.10 Cyclical external quality assurance

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

Part 2: Standards for external quality assurance

2.1 Consideration of internal quality assurance

External quality assurance should address the effectiveness of the internal quality assurance described in Part 1 of the ESG.

2.2 Designing methodologies fit for purpose

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.

2.3 Implementing processes

External quality assurance processes should be reliable, useful, pre-defined, implemented consistently and published. They include

- a self-assessment or equivalent;
- an external assessment normally including a site visit;
- a report resulting from the external assessment;
- a consistent follow-up.

2.4 Peer-review experts

External quality assurance should be carried out by groups of external experts that include (a) student member(s).

2.5 Criteria for outcomes

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.

2.6 Reporting

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.

2.7 Complaints and appeals

Complaints and appeals processes should be clearly defined as part of the design of external quality assurance processes and communicated to the institutions.

Part 3: Standards for quality assurance agencies

3.1 Activities, policy and processes for quality assurance

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.

3.2 Official status

Agencies should have an established legal basis and should be formally recognised as quality assurance agencies by competent public authorities.

3.3 Independence

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.

3.4 Thematic analysis

Agencies should regularly publish reports that describe and analyse the general findings of their external quality assurance activities.

3.5 Resources

Agencies should have adequate and appropriate resources, both human and financial, to carry out their work.

3.6 Internal quality assurance and professional conduct

Agencies should have in place processes for internal quality assurance related to defining, assuring and enhancing the quality and integrity of their activities.

3.7 Cyclical external review of agencies

Agencies should undergo an external review at least once every five years in order to demonstrate their compliance with the ESG.

The Standards and Guidelines for Quality Assurance in the European Higher Education Area, also known as the European Standards and Guidelines or ESG, are the basis for quality assurance in the European Higher Education Area (EHEA). They are one of the main achievements of the Bologna Process and its follow-up structure, the Bologna Follow-Up Group (BFUG) in the past decade.



ENQA
EUROPEAN ASSOCIATION FOR QUALITY ASSURANCE IN HIGHER EDUCATION

esu

EUA
European University Association

EURASHE
European Association of Institutions in Higher Education

Education International
Internationale de l'Education
Internacional de la Educación

BUSINESSEUROPE

eqar
European Quality Assurance Register for Higher Education

Republika e Kosovës
Republika Kosova - Republic of Kosovo

Agjencia e Kosovës për Akreditim
Agencija Kosova za Akreditaciju
Kosovo Accreditation Agency

GUIDELINES FOR STUDENT ENGAGEMENT IN INTERNAL AND EXTERNAL QUALITY ASSURANCE OF KOSOVO HIGHER EDUCATION

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Foreword

Kosovo Accreditation Agency (KAA) has successfully secured the support of the U.S Embassy in Kosovo for funding of the project *Increasing student participation in internal and external quality assurance processes in Kosovo*. The aim of the project was to encourage student participation in activities related to quality assurance (QA) which in turn will contribute to the improvement of the teaching and the learning process. According to the project, increasing student's involvement in QA will promote the alignment of the Kosovar higher education sector with the European Higher Education Area (EHEA) countries and thus guarantee a participatory design and implementation of the learning process. Hence, increased awareness and involvement of students in internal QA processes, will facilitate student's involvement in external QA which will contribute to the fulfillment of KAA Strategic Plan and ENQA recommendations.

The goals of the project were defined as follows:

1. To increase awareness of students about the importance of student's involvement in internal QA processes;
2. To encourage and support Higher Education Institutions to actively involve students in QA processes;
3. To support the implementation of KAA Strategic Plan with respect to student's involvement in external quality assurance.

The present document is based on an international benchmarking of best practice in Europe, an analysis of the policy in the EHEA, a national diagnosis assessment of the applicable legislation, KAA accreditation reports, as well as a national survey conducted amongst more than 1000 students from both public and private Kosovar higher education institutions (HEIs); finally, the project draws from the professional experience of the project team, made of national and international experts.

I. Context, scope, concepts and principles

Context

Since the 1990s, the role of students in the quality assurance of higher education has become recognised across Europe as being both necessary and desirable (Cockburn 2006). The involvement of students has been in various forms and at various levels. Students are involved within the quality assurance processes of their own higher education institutions, as part of the quality assurance of institutions and programmes by outside bodies; but also in the review of the quality assurance of those bodies themselves (Williams, 2006).

With the implementation of the European Higher Education Area (EHEA), initially referred to as the Bologna Process, students have been recognised as crucial stakeholders who should take part in shaping their education and overall learning experience. The Prague Communiqué signed by the all EHEA Ministers of Education declared that students are to be considered full members of the higher education community.

The Berlin Communique, 2003, expressed an unconditional approval of student participation in higher education governance: *Ministers note the constructive participation of student organisations in the Bologna Process and underline the necessity to include the*

students continuously and at an early stage in further activities. Students are full partners in higher education governance. Ministers note that national legal measures for ensuring student participation are largely in place throughout the European Higher Education Area. They also call on institutions and student organisations to identify ways of increasing actual student involvement in higher education governance.

In 2018, the Paris Communiqué included students' participation as one of the fundamental values of the process. Subsequently, the other ministerial Communiqués have increasingly made commitments for student engagement, determining therefore a major wave of European Countries that are scaling up student engagement in higher education governance generally, but also in quality assurance (QA) in particular.

As members of the academic community, students involved in the governance of higher education actively and evidently contribute to the development of policies as they are the ones benefiting directly from this public good, while also contributing to raising awareness on how different approaches can be implemented to achieve common goals. Students' participation is not only fundamental for the well-being of democratic institutions but also for our democratic society as a whole (Bologna with Students Eyes 2020, 2021).

Scope and concepts

The present document does not prescribe how the student engagement in internal and external quality assurance of Kosovo Higher Education should happen, but it aims to provide guidance on how students can contribute to quality provision and learning environments in higher education. The guidelines should also be used as a reference point when determining higher education legislation, accreditation provisions and institutional level regulations, and it is also desirable for national stakeholders and higher education institutions to contribute to their successful implementation and enforcement in practice.

The guidelines should be considered in a broader context that also understands and respects the diversity of higher education institutions - regardless of their type of ownership, funding and size - which may find proxies and additional avenues for active student engagement; however, this diversity in the profile of the institutions should not be used as an excuse for lack of student engagement in governance and quality assurance.

The focus of this document is quality assurance as an integrated and horizontal concept that works as the backbone of any higher education institution, which covers the whole range of institutional activities and units; therefore, the guidelines advocate for student engagement in the quality assurance of both academic and non-academic areas, including governance, strategic planning, policy-making, administration, among others.

A conceptual distinction between involvement and engagement of students in quality assurance should be made:

- Astin (1984) has described student involvement as the amount of physical and physiological energy that the student devotes to the academic experience, a definition referring to behavior and what students actually do rather than what they think or how they feel or the meanings they give to their experiences;
- Trowler and Trowler (2011) define student engagement as: the investment of time, effort and other relevant resources by both students and their institutions intended to optimize the student experience and enhance the learning outcomes and

development of students, and the performance and reputation of the institution. Furthermore, Kuh et al. (2007) described student engagement as the participation in educationally effective practices both inside and outside the classroom, which leads to a range of measurable outcomes. They also stated that student engagement represents two critical features: the time and effort students put into their studies and other educational purposeful activities; and how the institution deploys its resources and organizes the curriculum, other learning opportunities and support services to encourage students to participate in activities that lead to the experience-desired outcomes such as persistence, satisfaction, learning and graduation.

Although student engagement and student involvement might seem to be the same, this is not the case. Although similar in meaning they have a qualitative difference between them. A student for instance might be involved but not actively engaged. The former refers to a situation whereby for example a student who runs for a role in an organization attends a meeting and follows the discussion. The latter refers to a student who runs for a role in an organization yet he attends meetings, voices his concerns and participates actively in the discussion (Kuh et al.2007).

Principles

The present document is based on a set of principles which can assist institutions in developing a culture of engagement to embed the student in both governance and quality assurance. The principles are proposed with a conviction that proactive institutional leadership – including senior management and students representatives – are the *sine qua non* of an active and welcoming approach to student engagement.
These principles are informed in part by the pillars of the student movement (European Students Union, 2009) and the Report of the Working Group on Student Engagement in Irish Higher Education (Higher Education Authority, 2016).

Student engagement in higher education governance and quality assurance should be based on the following principles.

1. **Independence**

Students should be able to express their views autonomously, without fear of repercussion or attempt of influencing their opinions. When elections for student representatives are conducted, these should be organized by the students themselves, without the involvement of the institution or other stakeholders. The higher education institutions can, where needed, support students with logistic, administrative and organizational capacities, but this must be done in a way that ensures full autonomy of the student body to elect their legitimate representatives.
The activity of student representatives should be conducted without any influence from alumni, the HEI, political parties, or any other stakeholder.

2. **Openness**

Engaging students in the development of higher education should be an opportunity available for all students, regardless of their academic performance, year and programme of study, mode of delivery, financial status, gender, or any other discriminatory criteria. Likewise, all students must have the right to vote and to be elected for elected positions.

3. Democracy

Institutions will adhere to democratic principles, and will encourage these principles in staff, students, and in wider society. In elected roles, the representatives should be elected by all the students at the corresponding level (e.g. Students in the Senate/Academic Council to be elected by all the students at institutional level) and should be able to voice their position and vote on all matters.

4. Representativeness

In their engagement roles, students will seek to build and maintain effective communication channels with their electorate, both in collecting opinions that they later have to have an official stance on, as well as in disseminating decisions they had access to which impact the student population. In their elected roles, students have the obligation to ensure that the opinions they support are based on the electorate consultation and are not influenced by any third party (institutional management, alumni, political parties, etc).

5. Transparency

Institutions will be transparent in the life-cycle of their decision-making processes, while students will be transparent in their internal lines of governance, and in the relationship between the elected roles and the student population.

The process of election for student representatives should be based on open and transparent calls; student representatives will also develop and maintain precise regulations that ensure the formality of the process – providing the exact rights, responsibilities and obligations for students' representatives, the length of the mandate for each position, mention of the decision making avenues of representation, etc.

Student representatives will also ensure that suitable measures are in place to facilitate knowledge transfer from year to year and general capacity building of involved students and student representatives.

6. Integrity

Institutions should promote and enable the integrity of students and other stakeholders; student representatives should be understanding, accepting and choosing to act in compliance with the principles included in this section, consistently demonstrating honesty, fairness and decency and acting in firm adherence to a code of especially moral values.

7. Student as partner

The implications of perceiving students as partners, rather than as consumers or clients are substantial and deep. The student as a partner is an active member of an institution with which they share a strong sense of allegiance and commitment. This implies not only seeking student contribution in decisional, strategic, consultative and executive avenues of representation, but also assuming a genuine understanding that a student perspective can bring added value to quality enhancement at all levels.

8. Inclusivity and diversity

Institutions will actively seek to gain insights and contributions from all sectors of the academic community in their governance and decision-making processes. This will go beyond the formal legislative requirements, to provide a myriad formal and informal engagement opportunities. As local institutions and national authorities become more socially and culturally diverse, students will work to ensure that the diverse nature of the

student body is safeguarded in their representation activities by taking care that the composition of the representative bodies at the very least mirrors the level of diversity of the general population.

9. Students as co-creators

Students will be expected to take responsibility for their own learning and for their partner role in the governance and quality assurance of higher education. This implies students not only being a valuable source of feedback on the quality of their learning experiences and a source of unique perspective on the educational process, but also a reliable partner with an operational role in the processes of design, innovation and implementation. Local institutions and national authorities will embrace the active involvement from the students.

10. Collegiality and parity of esteem

Local institutions, national authorities and student representatives will promote collegiality between staff and students across the academic sector. Central to collegiality is the development of an open and trustful relationship between individual staff and students within higher education.

11. Professionalism and support

Students and their representatives will contribute fully and act in a professional manner when they are involved in the structures and processes of the HEI. This professionalism is the joint responsibility of the institution and student representatives. The institution will recognise that staff and student members on committees may have different life experiences and areas of expertise but all are equally valued in the ongoing evolution of the institution. It will be the responsibility of the institution to provide the necessary support to the student representatives as to enable them to fulfill their role.

12. Feedback and feedback loop

Institutions will welcome and encourage open and prompt feedback from students. Suitable measures will be put in place across the institution to ensure that students are facilitated in providing feedback in a safe and valued manner. Feedback practices will be transparent and the feedback loop will be closed in a timely fashion; the measures taken by the institution in response to student feedback will also benefit from efforts in dissemination and transparency.

13. Self-criticism and enhancement

Student representatives and institutions will continue to be self-analytical and self-critical of their student engagement practices. They will use evidence-based techniques to assess, critique and, based on this, continuously advance the effectiveness of their strategies for building a culture of engagement.

14. Consistency

Institutions and student representatives will ensure that the values and practices with regard to student engagement are applied consistently across institutions, and should put procedures in place to allow departments to share good practice measures, as well as stimulate exchange of experiences between student representatives.

II. Guidelines for student engagement in internal quality assurance

1. Student engagement in HEI governance

In line with the KAA Accreditation Manual (KAA, 2018), student representatives are equal members of all strategic, decisional, executive and consultative bodies at institutional, faculty and departmental levels. Student representation is effectively encouraged in the formal and informal areas of governance, and is organized in line with the principles enlisted under Section 1 of this document.

In cases where the institutions are facing legislative challenges in integrating students as full members (with voting powers) of strategic, decisional, executive and consultative bodies at both institutional and faculty levels, arrangements will be made for temporary observatory status of student members. Under such transitory arrangements, engaging the student voice can be facilitated by supporting the constructive development of a culture where students can express their voice in formal meetings, regardless of their formal membership status.

In institutions that deliver education in branch campuses, the engagement of students enrolled in the branch(es) must also be incorporated.

Taking into consideration that the notion of student participation and engagement in Kosovo higher education is in its inception, there is an ethical obligation of handing over the knowledge acquired while a student representative, independently of who is going to be the next legitimate student representative. This will contribute to capacity building and continuity of institutional memory in student representation matters. Furthermore, mechanisms of assuring accountability, transparency and the flow of information to the other student representatives and the general student population should be given special attention.

2. Student engagement in quality assurance governance structures

There is student representation in all formal and informal quality assurance committees at institutional, faculty and departmental levels; this is organized in line with the principles enlisted under Section 1 of this document. It is of key importance for the students and higher education institutions to clearly understand each other's objectives and needs in relation to quality assurance in order to enable an effective engagement of both parties in the process.

Further, students must be engaged as equal reviewers in periodical self-assessment exercises/internal audits coordinated by quality assurance committees at institution or faculty level for regular, ongoing quality enhancement, and not necessarily in relation to an external quality assurance process.

3. Strategies for student engagement

In the European Higher Education Area, student engagement is one of the main pillars for successful and effective performance of higher education institutions, in both governance and quality assurance structures. Due to the differences between institutions in Kosovo, the degree and efficiency of student engagement might vary. HEIs should make sure that they have a clear strategy and action plan to ensure students' understanding and

involvement in governance and QA, strengthened by providing sufficient support activities to students.
In this regard, relevant resources should be allocated to support student engagement.

4. Design, approval, monitoring and review of study programmes

In line with the European Standards and Guidelines for Quality Assurance in Higher Education (ESG, 2015), programmes are designed, reviewed and revised regularly with the involvement of students. This implies that students should be equal members of bodies responsible for overseeing, assessing and revising the existing study programmes.

In the case of a new programme establishment, students from similar programmes of the institution can be invited to participate, or students from the same programme delivered at other higher education institutions.

The ESG further underlines the engagement of other stakeholders in processes related to programme design, monitoring and review (such as academic and administrative staff, alumni, representatives of the labor market); whilst such engagement does not make the object of the present document, the active participation of other categories should not be overlooked by HEIs.

5. Course development

Students should have a direct involvement in course development through membership of different teams or working groups established for these purposes. This gives students an active role in shaping their learning journey, including in areas such as assessment, learning targets or teaching methods. This enforces the idea that students are part of the academic community and co-creators, which brings a very high level of trust for their ownership for their own learning journey, but also enables them to become confident autonomous lifelong learners, which is a necessity of contemporary education. In particular, students are seen as owners of their studies who know best what would supplement their studies; institutions may even consider offering students a small budget to develop their own courses and projects, to arrange speakers or to teach a topic by themselves if they are very good at it.

6. Capturing the student voice in the development and implementation of quality assurance instruments and processes

Institutions must continue to collect student feedback in relation to the whole range of institutional activities - this must not be restricted to the quality of their learning experience, but also the quality of infrastructure and facilities, administration, support services, extra-curricular activities, internships, etc. It is of key importance for institutions to act on student feedback in a timely manner by addressing the main concerns and ensuring that the resolve has been made visible to students.
Student feedback must be collected anonymously, but also analyzed and compared to the previous feedback cycles in the same course, which will then reveal if the same/similar issues are still a concern; recurring issues on courses should be targeted.

Quantitative feedback tools must be complemented with qualitative instruments, such as focus groups, student-staff consultative groups, which allow for in-depth discussion of student concerns and also increase the institutional response time.

In regards to the development of the tools themselves, students can be invited to contribute to:

- the drafting and revision of all surveys conducted by the institution; students can have a valuable input in suggesting survey content, a language that is easily understandable by students, format of questions, length of surveys, etc;
- the means of dissemination of institutional actions in response to student feedback; gaining student trust in the added value of providing feedback to institutional quality enhancement is of great importance, therefore the institution can consult student representatives on the best way to reach the student population with transparent dissemination of the actions the institution has taken in response to student feedback.

III. Guidelines for student engagement in external quality assurance

1. National level partner

Relevant national institutions such as the Prime Minister Office, the Ministry of Education, Science and Technology, the National Qualifications Authority, Kosovo Accreditation Agency should seek student engagement in all pieces of legislation regarding higher education. Furthermore, these stakeholders should support the amendment of any piece of legislation that would facilitate the integration of student members within the governance of higher education institutions and KAA, such as the Law on Higher Education, the Statute of HEIs, the relevant Administrative Instructions, among others.

It is of key importance for the Student Union of the Republic of Kosovo (USRK) to be restructured and reconsider its priorities in a way that enables the organization to meet the scope it was created for. USRK is invited to meaningfully reflect on the pillars of the student movement as included in the Student Union Development Handbook (European Students Union, 2009). There are multiple components related to student capacity building in the field of higher education generally and quality assurance specifically that need to be supported and coordinated by an autonomous student representative, instead of KAA or HEIs. This includes but is not limited to nominating students for KAA governance membership, driving student engagement in internal quality assurance, facilitating a more fit for purpose communication with the students, and representing a dialogue partner with national level institutions such as MEST for policy making purposes, among others.

2. Kosovo Accreditation Agency level

a. Engagement in the structure of the agency

Student representatives should be engaged as full members of all governance bodies of KAA - State Quality Council, Departments, Committees (including Appeals, Ethics, any other applicable) and relevant divisions.

In cases where KAA is facing legislative challenges in integrating students as full members (with voting powers), arrangements will be made for temporary observatory status of

student members. Under such transitory arrangements, engaging the student voice can be facilitated by supporting the constructive development of a culture where students can express their voice in formal meetings, regardless of their formal membership status.

Student membership should be extended in all internal, developmental and project teams established by the KAA, including self-evaluation teams, strategic planning, and projects teams submitted for external funding.

b. Engagement in drafting external quality assurance provisions

The student voice should be reflected in any policy making process coordinated by KAA, including the drafting of manuals, procedures, methodologies, as well as proposals initiated by the agency for the drafting and revision of relevant QA legislation such as Accreditation Laws, Administrative Instructions, among others.
Students could also be included in training and workshops for external QA reviewers as co-designers of the content and speakers; this will help ensure that a student perspective is embedded into the content of education delivered to peer reviewers.

c. Student engagement in (re)accreditation expert teams

In line with the European Standards and Guidelines for Quality Assurance in Higher Education (ESG, 2015), students should be engaged in all expert teams, without exception, for the (re)accreditation of all institutions and study programmes. In line with international best practice, within the expert teams, students should be treated as equal members, including equal rights and responsibilities, and equal pay as the rest of the team.

Also in alignment with the ESG, students part of the expert teams are carefully selected, have appropriate skills and are competent to perform their task and are supported by appropriate training. In this regard, the accreditation agency may establish a pool of student experts, which it selects independently and ensures appropriate training for; however, once the pool has the capacity, it should be operated by the students themselves, with the KAA support for periodical renewal of membership and retraining.

While the principle of student engagement is equally reflected if the students engaged with accreditation exercises are locals or international, KAA can consider increasing its efforts for capacity building of Kosovar student representatives through engagement in different quality assurance exercises.

3. Strategies for student engagement

National stakeholders such as MEST, KAA and National Qualifications Authority should develop strategies and action plans to ensure students' understanding and engagement in matters referring to policy making and governance in higher education nationally, strengthened by providing support activities to students. Capacity building resources should be allocated in this regard.

4. Developing a National Student Survey (NSS)

A national student survey should be established in order to help higher education institutions improve their engagement with the student body, to add national visibility to student satisfaction in each institution, to add an objective and external data point that leads to improvement, to ensure a fully confidential (externally conducted) feedback collection that students trust without fear of repercussion, as well as to inform national policy.
Such a survey would have student learning at its heart, and would seek to measure the quality of the student experience in the HEIs and how students engage with their learning environments. In turn, this will also inform prospective students' choices, will provide data that supports institutions to improve the student experience, and will support public accountability.

5. Consistent engagement in external quality assurance processes

The expert teams engaged with the (re)accreditation visits at institutional and programme level must have access to an independent and unfiltered reflection of the student voice at the institution under review, which can be supported by one or more of the the following mechanisms:

- KAA to secure access to the database of students enrolled at all institutions, from where the agency can extract for example 20 names of students that the expert team would like to meet during the (re)accreditation visit, of which the institution can choose 10;
- KAA to require the institution/programme under accreditation to publish or inform all students about the time, date and location of the meeting with the expert team, which anyone is able to attend freely;
- where student unions or other form of independent student representation is organized, these can be tasked with selecting the group of students that take part in the meeting with the expert team;
- the accreditation agency can conduct its own open survey amongst the students enrolled within the institution/programme, prior to any (re)accreditation process; the results of which are to be submitted to the expert team as preparatory materials.

References

D. Cockburn, Report of the higher education mapping exercise of student involvement in quality assurance and enhancement processes, (sparqs, 2005)

Williams P. (2006). In: Alaniska H. et al. (eds.) Student involvement in the processes of quality assurance agencies. Helsinki: European Association for Quality Assurance in Higher Education

The Prague Communiqué (2001). Towards the European Higher Education Area. Communiqué of the Conference of European Ministers Responsible for Higher Education. Prague, Czeck Republic

The Berlin Communiqué (2003). Realising the European Higher Education Area. Communiqué of the Conference of European Ministers Responsible for Higher Education. Berlin, Germany

The Paris Communiqué (2018). Communiqué of the Conference of European Ministers Responsible for Higher Education. Paris, France

European Students Union (2021). Bologna with Student Eyes 2020. Brussels, Belgium

Astin, A. W. (1984). Student involvement: A developmental theory for higher education. Journal of College Student Personnel, 25(4), 297–308

V. Trowler and P. Trowler, (2011) Student engagement toolkit for leaders. Leadership foundation for higher education and Higher Education Research and Evaluation

Kuh, G.D., Kinzie, J., Buckley, J.A., Bridges, B.K. and Hayek, J.C. (2007) Piecing Together the Student Success Puzzle: Research, Propositions, and Recommendations. ASHE Higher Education Report, Vol 32, No 5. San Francisco: Jossey-Bass

The European Students' Union (ESU) (2009), The Student Union Development Handbook, Brussels, Belgium

Higher Education Authority (2016), Report of the Working Group on Student Engagement in Irish Higher Education, Dublin, Ireland

Kosovo Accreditation Agency, 2018, Accreditation Manual

Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). (2015). Brussels, Belgium

STATUTES OF THE EUROPEAN ASSOCIATION FOR QUALITY ASSURANCE IN HIGHER EDUCATION

Adopted at the General Assembly meeting on 10 March 2021.

TITLE I. NAME AND SEAT

Article 1 – Name

The international non-profit Association is established under the name "European Association for Quality Assurance in Higher Education AISBL". Its acronym is ENQA. Hereafter it is referred to as "the Association".

The Association is subject to the Companies and Associations Code ("Code des sociétés et des associations"), and in particular to the clauses contained in Book X ("Livre X")of the Companies and Associations Code..

Article 2 – Registered Office

The Association's registered office is located in the Brussels region. The registered office may be relocated within Belgium by decision of the Board, voting in accordance with Article 41 of these Statutes and provided that the relocation does not require changing the language of the Statutes of the Association due to the applicable linguistic regulations in the new location.

TITLE II. OBJECTIVES OF THE ASSOCIATION

Article 3 – Aims

The aims of the Association are to:

- contribute to quality enhancement in higher education in the European Higher Education Area;
- develop quality assurance processes and systems in the European Higher Education Area;
- represent the members at the European level and internationally;
- influence policy making at European level on issues pertaining to quality and quality assurance in higher education;
- encourage cooperation between quality assurance agencies in Europe and worldwide;
- foster the European dimension of quality assurance of higher education.

Article 4 – Activities

The Association shall achieve its aims by engaging in different types of activities, including:

- provision of services and networking opportunities to the members and affiliates;
- dissemination and sharing of information, expertise and good practice in quality assurance of higher education to members, affiliates, stakeholders and policy makers;
- coordination of external reviews of quality assurance agencies;
- active engagement in the Bologna Process as consultative member;
- involvement in projects as leader or partner;
- publication of reports and policy papers;
- developing and strengthening partnership with stakeholder organisations in higher education in Europe and worldwide.

TITLE III. INVOLVEMENT IN THE ASSOCIATION

Involvement in the Association can be achieved through:

- Membership
- Affiliation

Membership

Article 5 – Admission conditions

Membership is open to quality assurance bodies in the field of higher education that are conducting quality assurance activities as understood in the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), are located in an EHEA member state, and act in compliance with the membership criteria.

Membership is granted at the discretion of the Board and endorsed by the General Assembly**.**

Members agree to abide by the Statutes of the Association.

Article 6 **–** Admission formalities

Applications for membership shall be in the form specified by the Board. Applications for membership are considered and decided upon by the Board on the basis of documented evidence of the agency's conformity with the membership criteria. The details of the requirements are defined in ENQA's procedures for agency reviews.

The Board's decision shall be communicated by letter to the applicant and endorsed by the General Assembly.

Detailed procedures governing the admission of members are set out in Rules of Procedure adopted by the General Assembly.

Article 7 – Rights and obligations

Members of the Association shall have the right to:

- be involved in the Association's activities;
- actively participate with voting rights in the General Assembly;
- propose items for inclusion in the agenda of the General Assembly;
- access the General Assembly documents;
- nominate candidates for membership of the Board;
- promote the dissemination of information and activities of the Association at national level;
- submit proposals on actions to the Board;
- use the ENQA logo to demonstrate their membership of the Association.

All members of the Association shall 1) pay the annual membership fee; 2) undertake to further the objectives of the Association as described in Article 3 and; 3) respect the provisions of the present Statutes.

All members agree to promote the interests of the Association at European and international level and to refrain from any individual or joint action which conflicts with those interests.

Article 8 – Resignation and exclusion

Members may resign at any time by submitting a written notification of resignation to the President. The resignation becomes effective immediately. The President shall notify the General Assembly and the Board of the resignation.

Members may be excluded by decision of the General Assembly, upon recommendation of the Board, in case of breach of the present Statutes, of the Membership criteria or in the event of any action which is likely to cause prejudice to the Association's reputation or effectiveness. The General Assembly takes this decision by a simple majority of the members present. The exclusion becomes effective immediately. The President shall notify the excluded member in writing.

In accordance with Article 35 of these Statutes, fees shall not be refundable, even in case of resignation or exclusion.

Affiliation

Article 9 – Admission conditions

Affiliation is open to bodies that do not wish to, or are unable to, apply to become members**.** Bona fide quality assurance agencies or other organisations (excluding higher education institutions) with a demonstrable involvement in the quality assurance of higher education may request affiliate status. Affiliates agree to abide by the Statutes of the Association.

Article 10 – Admission formalities

An application for affiliation should be made in the form of a letter addressed to the Board.
The Board's decision shall be communicated by a letter to the applicant and endorsed by the General Assembly.

Detailed procedures governing the admission of affiliates are set out in Rules of Procedure adopted by the General Assembly.

Article 11 – Rights and obligations

Affiliates shall be entitled to attend events organised by the Association and be given access to the password protected parts of the website. They may call themselves affiliates of ENQA but shall not be entitled to call themselves 'members' of ENQA.

Affiliates have the right to attend the General Assembly, except any closed parts of the meeting, and to speak at the invitation of the Chair. They shall have no voting rights and their representatives are not eligible for Board membership.

Article 12 – Resignation and exclusion

Affiliates may resign at any time by submitting a written notification of resignation to the President of the Association. The resignation becomes effective immediately. The President shall notify the General Assembly and the Board of the resignation.

Affiliates may be excluded by decision of the General Assembly, upon recommendation of the Board, in case of breach of the present Statutes, of the Affiliation criteria or in the event of any action which is likely to cause prejudice to the Association's reputation or effectiveness. The General Assembly takes this decision by a simple majority of the members present. The exclusion becomes effective immediately. The President shall notify the excluded affiliate in writing.

In accordance with Article 35 of these Statutes, fees shall not be refundable, even in case of resignation or exclusion.

TITLE IV. ORGANISATIONAL STRUCTURE

The Association has the following bodies:

- The General Assembly
- The Governing body (called the "Board")
- The Presidency
- The Secretariat
- The Appeals and Complaints Committee
- The Agency Review Committee

I. General Assembly

Article 13 – Composition

The General Assembly is composed of all Members of the Association, including "Members under review" as defined in the Rules of Procedure.

The General Assembly may also be attended by affiliates (see Article 11) and a limited number of observers (see Article 16).

Article 14 – Functions

The General Assembly is the sovereign policy- and decision-making body of the Association.

The General Assembly shall in particular:

- elect the Board, the President and two Vice-Presidents;
- dismiss the Board for stated reasons with a two-thirds majority;
- appoint the Treasurer;
- appoint the members of the Appeals and Complaints Committee;
- endorse the composition of the Agency Review Committee;
- approve the annual work plan, the annual report of activities of the Association, and the annual accounts;
- adopt the budget;
- appoint the external auditor on recommendation of the Board;
- discharge the Board and other accountable parties in relation to the annual accounts;
- decide upon membership and affiliation fees;
- endorse the Board's decisions for admission and decide upon exclusion of members and affiliates;
- decide upon the relocation of the Secretariat to another country, giving half-year's notice;
- decide upon amendments to the Statutes, according to the provisions of Article 41;
- decide upon the dissolution of the Association, according to the provisions of Article 40;
- adopt the Rules of Procedures.

Any proposal signed by at least one twentieth of the members and submitted to the Board at least thirty days prior to the meeting must be included in the agenda.

Article 15 – Operation

(a) Convocation of meetings
The General Assembly shall meet at least once a year. The date, place and mode of delivery of the meeting shall be decided by the Board. The President shall convene the meeting, giving at least 40 days' notice. The convocation shall be sent to all ENQA members by email with information on the date and place of the meeting.

(b) Extraordinary meetings
An extraordinary meeting of the General Assembly may be convened by the President or by the Board or by a formal request in writing from at least one-fifth of the total members of the Association.

(c) Online meetings
Should it be necessary, the Board may decide to hold an online General Assembly meeting through video-conferencing or any other means of electronic meeting with provisions for online voting or voting in writing.

(d) Chair of meetings
Meetings of the General Assembly shall be chaired by the President or, in the absence of the President, by one of the Vice-Presidents, to be nominated by the Board.

(e) Voting procedure
The quorum shall be one half of the Members. Should the quorum not be reached, a postponed General Assembly shall be convened which shall deliberate irrespective of the number of members present.

Unless otherwise specified in the Statutes, the General Assembly shall take its decisions by simple majority of the Members present.

Each Member represented may cast one vote.

Any member may nominate another member as a proxy to vote on their behalf in case they are unable to attend the General Assembly. Details of the proxy must be submitted in writing by the nominating member to the Secretariat.

A Member present shall not represent more than one other Member unless decided otherwise by the General Assembly.

(f) Minutes of meetings
The decisions of the General Assembly are entered in the minutes. All members are notified of decisions as recorded in the meeting minutes by the Secretariat. The minutes are kept at the registered office and can be consulted by the members of the Association on request or online.

Article 16 – Observers

Partner organisations, European institutions and international and regional bodies may be invited to attend the General Assembly as observers by the President or the Board. Observers have the right to speak in open discussions of the General Assembly at the invitation of the Chair, but do not have the right to vote.

II. Board

Article 17 – Composition

The Board is the governing body of the association and comprises between nine and eleven members, including the President, two Vice-Presidents and the Treasurer.

Article 18 – Functions

The Board is the executive body of the Association.

The Board is responsible for implementing the decisions of the General Assembly, and for the overall management of the Association. The Board is accountable to the General Assembly.

In particular, the Board shall

- prepare and supervise the strategic plan and annual work plan;
- prepare the annual activity report and accounts;
- prepare and monitor the budget;
- recommend the external auditor of the accounts to the General Assembly;
- approve applications for membership/affiliation of the Association and propose to the General Assembly the exclusion of members;
- propose membership and affiliation fees to the General Assembly;
- appoint the Director of the Secretariat and may, on a proposal from the President, dismiss the Director in accordance with Belgian employment law;
- decide upon the location of the Secretariat in cases not covered by Article 14;
- propose amendments to the Statutes, according to the provisions of Article 41;
- adopt Rules of Procedure regulating the details of its own operation as and when needed;
- adopt the Guidelines for ENQA Agency Reviews;
- propose the members of the Appeals and Complaints Committee for a once renewable period of 3 years, for appointment by the General Assembly;
- appoint the members of the Agency Review Committee for a once renewable period of 2 years;
- deal with third party complaints on ENQA's members according to the ENQA General Complaints Policy for Third Parties.
- approve of the suspension of members' rights on suggestion by the President;
- transfer the registeredoffice.

Article 19 – Operation

The Board is convened by the President by email at least four times a year, giving at least 10 days' notice. One of the Vice-Presidents shall deputise for the President in his/her absence. The Board can also validly meet online using appropriate means for online meetings with provisions for online voting or voting in writing, including decision-making via email.

The quorum shall be one half of the elected Board members, including the President or a Vice-President.

Unless otherwise specified, the Board shall take its decisions with a simple majority of the members present. Each member of the Board has one vote. Any Board member may nominate another Board member as a proxy to vote on their behalf in case they are unable to attend the Board meeting. Details of the proxy must be submitted in writing by the nominating member to the President. The President shall have the casting vote in case of a tie.

The decisions of the Board are entered in the minutes. All members are notified of decisions as recorded in the meeting minutes by the Secretariat. The minutes are kept at the registered office and can be consulted by the members of the Association on request or online.

Article 20 – Nomination of candidates

Members of the Association may nominate their representatives as candidates for election to the Board. Nominations for candidates shall be submitted to the Secretariat 30 days prior to the General Assembly in which elections are to take place. The nominations shall include a short curriculum vitae of the candidate. Details of candidates shall be circulated to all members prior to the General Assembly.

Article 21 – Election

The General Assembly elects the members of the Board. A regular mandate lasts three years, renewable once. Board members may not serve for more than two terms, except that members filling a partial term created by an unexpected vacancy may be elected for two subsequent terms.

Each year, the regular terms of three Board members end and three new members are (re-)elected. In electing members to the Board, the General Assembly shall have regard to gender and geographical balance of the Board.

A maximum of two persons from any EHEA member state shall be accepted for membership of the Board. The existing Board may indicate which candidates it encourages the General Assembly to elect in order to achieve gender and geographical balance and the limit on the maximum number of members permitted from any EHEA member state.

The elections of Board members, President, and Vice-Presidents shall take place using a secret ballot of members present at the General Assembly. Each member shall have one vote per Board vacancy, one vote in the Presidential election, and two votes (one for each position) in the election of the Vice-Presidents.

A simple majority of members present at the General Assembly shall determine the successful candidate(s). The election of the three new members of the Board shall take place within the same ballot and the results shall be announced to the General Assembly.

In case of a vacancy arising from a Board member leaving the Board before the end of their term, the remainder of the term shall be assigned to the newly elected Board member with the smallest number of votes, unless another newly elected Board member volunteers for it.

If two or more candidates receive the same number of votes, and the number of vacancies is insufficient to allow all to be elected, then the election between those candidates shall be re-run. If, in the second round of election, two or more candidates receive the same number of votes, the affected candidates shall be asked to agree among them who shall serve on the Board. If agreement cannot be reached among the candidates, the President shall decide who shall be designated as a Board member.

Three Board members are elected by the General Assembly to act as President and Vice-Presidents of the Association.

After the election of Board members has taken place, the new Board shall seek candidates from among themselves for the position of President if the current President's term has expired. The election shall take place immediately and the result shall be announced to the General Assembly. The Board shall then seek candidates from among themselves for the positions of Vice-President. The election shall take place immediately, and the result shall be announced to the General Assembly.

For election of the President, the election shall be re-run each time that an equal number of winning votes are cast for two or more candidates. Similarly, for the election of the Vice-Presidents, the election shall be re-run each time that an equal number of winning votes are cast for one of the positions.

Article 22 – Co-option

The Board has a maximum of two co-opted positions that it has the option of filling at any time during the year. Co-opted members shall be appointed by the Board to fulfil needs identified by the Board, such as a key area of expertise lacking on the Board, unbalanced geographical and/or gender representation.

To be eligible for co-option, the candidates shall have appropriate experience and expertise in quality assurance of higher education, as well as an understanding of related policy issues. Candidates shall represent an ENQA member agency.

Any member of the Board may nominate an individual for co-option. Nominations must be accompanied by a rationale.

Co-opted members have voting rights.

The period of office for co-options will be until the next General Assembly meeting at which regular Board elections take place. Co-option shall not be renewable immediately. Former co-opted members shall be eligible to stand for election to the Board provided that they continue to represent a member of the Association.

Article 23 - Representation of the Association

Members of the Board represent the Association by:

- fostering relations with other similar organisations;
- promoting the activities of the Association;
- representing ENQA in relevant events;
- carrying out any specific mandates given by the General Assembly, the Board, or the President, within the terms of the Statutes and Rules of Procedure.

Article 24 – End of mandate of Board members

The mandate of a Board member may also end by dismissal, resignation, retirement, termination of Membership of the agency of a Board member or death. The next General Assembly shall elect a new Board member for the remaining time of the original term of the Board member whose term had ended prematurely.

In the event of a vacancy arising prematurely for the office of President, Vice-President or Treasurer, the Board shall appoint, from amongst its members, an interim President, Vice-President or Treasurer respectively, to hold office until the next General Assembly.

Board members may be dismissed in case of wilful misconduct, fraud and gross negligence, unlawful actions or serious actions incompatible with their mandates or if they cease to fulfil the criteria to be eligible as Board member. Dismissal shall be voted by the Board with immediate effect. The Board shall notify the General Assembly of the dismissal of the Board member.

Board members may resign at any time by submitting a written resignation to the President, or in the case of the President, to the Vice-Presidents. The resignation becomes effective immediately. The

President or the Vice-Presidents shall notify the General Assembly and the Board of the resignation of the Board member.

Article 25 – Abstention from decision-making

Board members shall abstain from decision-making in a number of situations, which are set out in the Board conflict of interest policy. These rules are accompanied with an up-to-date register of the current Board members' interests.

III. Presidency

Article 26 – Composition

The Presidency shall comprise the President and two Vice-Presidents.

Article 27 – Functions

The Presidency, in conjunction with the Director:

- conducts the ongoing affairs of the Association
- prepares the meetings of the Board
- may appoint, upon terms and conditions which it shall determine, one or more deputies to the Director.

Article 28 – The President

The President shall be elected by the General Assembly from among the Board members and shall hold office until the end of his/her term as a Board member, the conditions of which are described in Article 21 of the present Statutes.

To be eligible for the position of President, a person must have served on the Board for at least one year.

The President shall:

- Lead and legally represent the Association vis-à-vis third parties and in court;
- Convene and preside over meetings of the General Assembly and the Board;
- With the endorsement of the Board, have the power to suspend the rights of members;
- Be accountable to the General Assembly;

The President may have other duties and responsibilities set out in the Rules of Procedure adopted by the General Assembly.

Article 29 – The Vice-Presidents

The Vice-Presidents shall be elected by the General Assembly from among the Board members and shall hold office for a fixed-term mandate of one year renewable until the end of his/her term as a Board member.

One of the Vice-Presidents shall deputise for the President, at the President's request or in his or her absence.

The Vice-Presidents are accountable to the General Assembly.

Article 30 – Representation in court and vis-à-vis third parties

The Association is legitimately represented in court and vis-à-vis third parties by the President of the Association, who has the authority to act alone.

IV. Secretariat

Article 31 – The Secretariat

The Association shall have a Secretariat under the responsibility of a Director to ensure the day-to-day management of the Association.

In particular, the Secretariat shall:

- carry out the activities of the Association in accordance with the annual work plan;
- assist the Board in the execution of its responsibilities;
- support the other bodies and working groups of the Association in their work;
- administer the Association's finances within agreed budgets and in conjunction with the Treasurer.

Article 32 – The Director

The Director shall be authorised to represent the Association, except in court and vis-à-vis third parties, as far as mandated by the President in a manner that is in keeping with the aims and objectives of the Association. The Director shall be authorised, in addition to the President, to sign legally binding documents on behalf of the Association. All other duties and responsibilities of the Director are set out in Rules of Procedure adopted by the General Assembly.

V. Appeals and Complaints Committee

Article 33 – Appeals and Complaints Committee

The Appeals and Complaints Committee shall hear appeals and complaints against membership decisions of the Board and the conduct of procedures in respect to membership matters.

Detailed procedures governing the operation of the Committee are set out in Rules of Procedure adopted by the General Assembly.

VI. Agency Review Committee

Article 34- Agency Review Committee

The Agency Review Committee shall deal with the internal quality assurance of the ENQA Agency reviews.

Detailed procedures governing the operation of the Committee are set out in Rules of Procedure adopted by the General Assembly.

TITLE V. FINANCIAL PROVISIONS

Article 35 – Fees

Members and Affiliates are required to pay an annual membership/affiliation fee, the amount of which shall be established by the General Assembly on a proposal from the Board.

Fees shall not be refundable, even in case of resignation or exclusion.

Members are entitled to vote only if all due membership fees have been paid.

In case where payment is overdue, membership may be suspended by the President or withdrawn by the General Assembly, on the recommendation of the Board.

The procedure for dealing with arrears is set out in the Rules of Procedure.

Article 36 – Other resources

The Association may charge for the operational costs of services provided by the Association to private or public persons or organisations, whether members or non-members.

The Association may apply for financial support from sources other than the annual membership fees for purposes as described in Title II.

The Association may receive donations from public or private sources willing to support its objectives.

Article 37 – Financial Year

The financial year of the Association shall run from the first of January to the thirty-first of December.

Article 38 – Treasurer

The Treasurer is appointed by the General Assembly from among the elected Board members and serves for a period of one year. This period can be prolonged until the end of his/her term as a Board member. The responsibilities of the Treasurer are set out in Rules of Procedure adopted by the General Assembly.

Article 39 – Audit

The accounts of the Association shall be audited by an external auditor who shall be approved by the General Assembly on the proposal of the Board.

TITLE VI. DISSOLUTION OF THE ASSOCIATION

Article 40 – Dissolution of the Association

A proposal to dissolve the Association shall be made by the Board or by more than half of the Members.

Approval of the proposal of dissolution requires a two-thirds majority of the Members present at the General Assembly.

In the event of dissolution of the Association in one country and re-establishment in another country, the assets and liabilities of the Association shall be transferred to the new Association.
In the event of permanent dissolution, any assets of the Association shall be allocated to a non-profit aim. Similarly, any liabilities shall be met by Members at the time of the dissolution, in equal shares.

Likewise, the dissolution of the Association may be pronounced following the conditions specified in Article 2: 113 of the Companies and Associations Code..

TITLE VII. AMENDMENTS TO THE STATUTES

Article 41

A proposal to amend the statutes may be made upon a written request of at least one tenth of the members or by the Board and shall be sent to all Members no later than 21 days before the General Assembly.

The present Statutes may be amended by a decision of the General Assembly at which at least two thirds of Members are present or represented. Amendments shall be adopted with at least a two-thirds majority of the votes cast at the assembly. If two thirds of the Members are not present or represented, a second meeting may be convened which shall deliberate irrespective of the number of members present or represented.

Article 2 may be amended by the Board with at least a two-thirds majority of the vote, in accordance with Article 18 of these Statutes.

Article 42

For all that is not provided in these statutes, the parties refer to the provisions of the Companies and Associations Code, and in particular Book X of the same Code, or any subsequent amendments or legal provisions in force at any given time.

Rules of Procedure

European Association for
Quality Assurance in Higher Education

Revised version adopted by the General Assembly on 10 March 2021
Date of implementation: Immediate

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CHAPTER 1 – SCOPE

Article 1

In accordance with Articles 6, 10, 13, 28, 32, 33 and 34 of the Statutes, these Rules of Procedure define practical and technical matters and procedures governing the operations of the Association.

Article 2

Should there be a difference in interpretation between the Statutes and the Rules of Procedure, the former shall prevail.

Article 3

Once approved by the General Assembly, the Rules of Procedure shall take effect immediately. Each Member shall be responsible for compliance with these Rules of Procedure.

Article 4

These Rules of Procedure apply to:

- Members and affiliates;
- The proceedings of the General Assembly;
- The Board and other constituent bodies (committees, working groups);
- The Secretariat.

CHAPTER 2 – MEMBERS

Article 5 – Membership criteria

(1) The criteria for membership is compliance with Parts 2 and 3 of the *Standards and Guidelines for Quality Assurance in the European Higher Education Area* (ESG) as adopted by the EHEA Ministers in charge of higher education in Yerevan in 2015.

Compliance with the ESG may be demonstrated through:

- EQAR registration
- an external review report

(2) Membership is granted by a decision of the Board, to be endorsed by the General Assembly. The membership is valid for a period of five years.

(3) If a member does not undergo an external review within five years of membership being granted or renewed, it shall, by decision of the General Assembly, cease to be a member of ENQA, unless an extension of membership has been granted by the Board for well-justified reasons.

Article 6 – Membership application procedure

(1) An application for membership with ENQA shall be addressed to the Board of ENQA and shall include:

- a letter indicating the motivation for becoming a member and how the applicant agency intends to contribute actively towards ENQA's objectives;
- letter confirming the agency's registration in EQAR or, for agencies not listed in EQAR, an independent external review report on the agency's compliance with the ESG.

(2) Submission of application:

- Organisations listed in EQAR and seeking membership in ENQA are requested to submit their application to the ENQA Secretariat for distribution to the members of the Board no less than 20 days prior to a scheduled meeting of the Board, at which the application is to be considered. The Board will take the membership decision on the basis of the confirmation of listing in EQAR and the agency's application letter. Organisations not listed in EQAR and using an ENQA-coordinated external review report for application are asked to submit their application for distribution to the members of the ENQA Board no less than 40 days prior to a scheduled meeting of the Board, at which the Board evaluates the agency's compliance with the ESG. The Board will take the membership decision on the basis of the external review report, including the statement annexed by the Review Committee.
- In case the review process is coordinated by another organisation and the agency is not registered in EQAR, the agency shall submit the review report and the application letter to the ENQA Secretariat no less than 40 days prior to a scheduled meeting of the Review Committee. The Secretariat then distributes the review report to the Review Committee, which will check that the review meets ENQA's requirements and that the report contains the required information. After that, the Board uses the report to evaluate the agency's compliance with the ESG. The Board will take the membership decision on the basis of the external review report, the application letter and the letter from the Review Committee.

(3) The application documents listed under point 1 of this article are examined by the Board of ENQA at their meeting. The Board takes a decision on membership in light of the presented evidence. If the Board is unable to reach a conclusion, they reserve the right to request further evidence from the agency and/or the review panel and/or the review coordinator.

(4) The decision of the Board is communicated to the agency in written form. If the request for membership is rejected, the reasons for the decision are also communicated.

(5) The agency is notified of the annual membership fee.

(6) The member is added to the ENQA mailing list and its details are uploaded in the member directory. After the payment of the membership fee, the member is given full access to

ENQA's services and networking opportunities. It is entitled to use the ENQA logo in accordance with the regulations governing the use of the ENQA Trademark, which are available on the ENQA website.

(7) The membership decision shall be endorsed by the next General Assembly meeting following the Board meeting in which the membership decision has been taken.

(8) Detailed procedures and requirements on the external review process are set out in the ENQA Agency Review Guidelines. The requirements set out in the guidelines apply also to reviews not coordinated by ENQA. In such cases, it is the responsibility of the agency under review to check with ENQA that the requirements of the ENQA Agency Review Guidelines are met.

Article 7 – Membership under review

(1) If the Board judges an existing member not to comply with the ESG and thus meet the criteria for membership, it shall be given two years to conform with the criteria, during which time the agency shall be designated as a "member under review". Equally, if an agency becomes unable to meet the membership criteria during its five-year membership period, the agency, if still otherwise eligible, will be assigned as "member under review".

(2) A further, partial review shall be carried out by reviewers nominated by the ENQA Review Committee, at the latest at the end of the two-year period and shall focus on the criteria with which the member did not previously comply. Members who become unable to comply with the ESG, and thus the membership criteria, during their five-year membership period will need to undergo either a partial review within two years, or their regular cyclical review, if it is due before two years. The details of the partial review process are outlined in the ENQA procedure for partial reviews.

(3) The Board will take a decision regarding the renewal of membership based on the outcomes of the review (partial or full). Should the outcome of the review (partial or full) be positive, membership shall be valid for five years from the date of the Board's decision on the outcome of the latest full review.

(4) An agency that, in the opinion of the Board, following the further review (partial or full), still does not comply with the ESG and thus ENQA's criteria for membership shall, by confirmation of the General Assembly, be excluded from ENQA membership. The agency may reapply after two years.

(5) Members under review maintain their membership rights and duties during the period of membership under review until the end of the review process (partial or full) and for a maximum of two years.

Article 8 – Fees

(1) As stated in Article 35 of the Statutes, the membership fee is decided by the General Assembly on a proposal from the Board. The fee can be found on the ENQA website. It is payable within three months of receipt of notification of a successful membership application. Organisations that are granted membership part-way through the calendar year shall pay the pro-rata amount of the annual fee based on the quarter in which they join.

(2) ENQA membership with full rights shall be obtained only after the payment of the due membership fee, in accordance with Article 35 of the Statutes.

Article 9 – Substantial changes

Members are required to notify ENQA immediately of any change that might affect the agency's compliance with the ESG, and thus with the ENQA membership criteria, such as changes in the legal status of the agency, the legal framework in which the agency operates, its funding mechanism, its methodology, or its area of operations. Agencies are also required to notify ENQA of all other relevant changes, such as changes in the name, address, or contact person at the agency.

CHAPTER 3 – AFFILIATES

Article 10

The Board of ENQA encourages organisations worldwide that have an interest and demonstrable involvement in quality assurance of higher education, but for whatever reason are unable to apply to become members, to consider and seek affiliation with ENQA. Individual higher education institutions are not eligible to apply.

Article 11

(1) Affiliation is granted by a decision of the Board, to be endorsed by the General Assembly, if the applicant:

- is a bona fide organisation
- has an interest and demonstrable involvement in the quality assurance of higher education in the European Higher Education Area (EHEA)
- fits the definition of an affiliate as given in the Statutes of ENQA

(2) The Board shall also consider whether it is in the interests of ENQA and its membership to enter a formal relationship with the applicant body.

Article 12 – Application procedure

(1) Organisations seeking affiliation with ENQA are requested to submit their application to the Secretariat for distribution to the members of the Board no less than six weeks prior to a scheduled meeting of the Board at which the application is to be considered.

(2) An application for affiliation with ENQA shall be made in electronic application form and shall include:

- A motivation letter indicating interest in becoming an affiliate of ENQA, signed by a legal representative of the organisation;
- Information on the organisation such as the constitution, mission, summary of current activities, goals, and governance structure;
- A statement indicating that the organisation has reviewed the Statutes of ENQA and agrees to abide by them;
- Contact details, including the website address.

(3) When receiving an application, the Secretariat shall send an e-mail to ENQA members asking whether there are any causes of concern regarding the applicant. Members are given ten working days to react.

(4) The application and any causes for concern raised by ENQA members are considered by the Board. Should the Board be unable to reach a conclusion, they reserve the right to request further information from the applicant.

(5) The decision of the Board shall be communicated to the applicant in written form. In case of approval, the letter shall explicitly mention that the affiliate may call themselves an "affiliate" of ENQA but is not entitled to call itself an ENQA member. Affiliates do not have voting rights. If the request for affiliation is rejected, the reasons for the decision shall be communicated to the applicant.

(6) Affiliation is granted at the discretion of the Board, and there is no right of appeal. The affiliate status is valid for five years.

(7) Affiliates shall reapply every five years using the same application procedure detailed above. The cause for concern procedure (as stated in item 3 of this Article) applies in the reapplication.

(8) Conditions for termination of affiliation are detailed in the ENQA Statutes.

Article 13 – Fees

(1) As stated in Article 35 of the Statutes, the affiliation fee is decided by the General Assembly on a proposal from the Board. The fee is payable within three months of receipt of notification of a successful request. Organisations that are granted affiliation part-way through the calendar year shall pay the pro-rata amount of the annual fee based on the quarter in which they join.

(2) Rights associated with affiliation shall be obtained only after payment of the fee.

CHAPTER 4 – GENERAL ASSEMBLY

Article 14 – Voting procedures

(1) In the event of a vote – other than for the election of the Board, the President, and the Vice-Presidents – the voting procedure used may be either open or closed (secret). A closed ballot shall be used if one or more members submit a request to the ENQA Secretariat at least one week in advance of the meeting.

(2) Spoilt ballots shall be counted as votes cast. Abstentions shall not be counted as votes cast.

CHAPTER 5 – PRESIDENT AND VICE-PRESIDENTS

Article 15 – The President

(1) The President of the Association is also the Chair of the Board.

(2) In addition to the functions of the President as stated in Article 28 of the Statutes, the responsibilities of the President shall also include:

- elaborating the strategic planning of the General Assembly meetings together with the Vice-Presidents and the Director;
- representing ENQA externally;
- carrying out any resolutions, decisions, or specific mandates given by the General Assembly or the Board;
- monitoring the financial situation of the Association;
- ensuring, together with the Director, that the annual work plans and budgets are followed;
- assuming any other reasonable responsibilities deemed necessary by the Board.

(3) The responsibilities of the Chair of the Board shall include:

- casting the deciding vote in the Board when no majority decision can be reached;
- planning, together with the Vice-Presidents and the Director, the agendas of the Board meetings;
- checking with the Director the material for the Board meetings and for any other events;
- following up on the Board meetings (communication of decisions, etc.) together with the Secretariat.

Article 16 – The Vice-Presidents

The responsibilities of the Vice-Presidents shall include:

- carrying out such reasonable duties as the President may request;

- carrying out the strategic planning of the Board, the General Assembly, and any other meetings and events together with the President and the Director.

CHAPTER 6 – TREASURER

Article 17

The Treasurer supervises the finances of the Association and shall present the annual accounts for the preceding year and propose the annual budget for the following year to the General Assembly for approval.

CHAPTER 7 – DIRECTOR

Article 18

Under the direct supervision of the Board, the Director shall be responsible for the general supervision and daily management of the Secretariat, as well as for the execution of the decisions taken by the Board and the General Assembly.

In addition to the provisions of Article 32 of the Statutes, the responsibilities of the Director shall include:

- Advising the Board with regard to the strategic plan and translating the strategic plan into annual workplans and functional guidelines;
- Organising and managing the Secretariat and its processes;
- Preparing and managing the annual budget of ENQA and ensuring a stable and cost-efficient financial management;
- Building and maintaining internal and external relations/partnerships to achieve optimal cooperation with stakeholders and ensuring ENQA's reputation at the European and international level;
- Managing ENQA's statutory activities and securing accurate follow-up;
- Selecting, motivating, evaluating, and supporting the development of the Secretariat staff.

CHAPTER 8 – APPEALS AND COMPLAINTS COMMITTEE

Article 19

(1) The Committee shall hear appeals against membership decisions by the Board.

(2) The Committee shall hear complaints that are related to:

- The membership decision-making procedures
- The integrity of the ENQA Agency Review process

The Appeals and Complaints committee does not deal with general third-party complaints, which are dealt with by the Board of ENQA in line with the ENQA General Complaints Policy for Third Parties (Article 18 of the Statutes).

Article 20 – Composition

(1) The Appeals and Complaints Committee shall comprise four representatives of members, one of whom shall be designated as an alternate member. No member of the Committee shall at the same time be a member of the Board, but at least one member shall be a former member of the Board.

(2) In appointing members to the Appeals and Complaints Committee, the General Assembly shall have regard to whether the candidate has:

- Experience of the review procedure gained by having served on a review panel;
- International experience gained by being involved in international activities;
- Managerial position held within an agency for at least five years.

Article 21 – Mandate

Members of the Committee are appointed by the General Assembly for a three-year term, renewable once.

Article 22 – Operation

(1) The Chair of the Committee shall be selected by the Committee.

(2) The Committee shall take decisions with a simple majority.

(3) No member of the Committee shall have had previous involvement with the appellant/complainant.

(4) In cases of conflicts of interest involving one of the members of the Committee, the alternate member shall be asked to replace the member affected by the conflict of interest.

(5) In case of a conflict of interest involving the Chair of the Committee, the remaining members select an interim chair from among themselves for that procedure.

Article 23 – Appeals and complaints procedure of ENQA membership procedure

(1) In line with the ESG Standard 2.7, ENQA has an appeals and complaints procedure for agencies that have applied for membership in ENQA. An appeal or complaint shall only be considered as official if substantiated and supported by appropriate evidence, references, and examples. An appeal/complaint shall clearly and concisely set forth the grounds for the appeal/complaint, referring to specific standards or guidelines of the ESG or to specific sections of the ENQA Agency Review Guidelines. The complaints procedure allows an

agency to state its dissatisfaction with the conduct of the process or those carrying it out. Through an appeal, an agency may question the formal outcome (the decision) of a membership application process.

(2) An appeal against a decision or a complaint concerning the review process shall be submitted to the ENQA Secretariat in writing by email or regular mail within two calendar months from the date of receipt of the Board's decision. The ENQA Secretariat shall acknowledge the receipt of appeals/complaints within seven days.

(3) The evidence supplied must be in plain text or pdf format, in English, and where the original is in another language, a certified copy in English must be submitted. Evidence shall be directly relevant and proportionate to the concerns raised.

(4) On receipt, an appeal or complaint shall be reviewed by the Secretariat to determine whether eligible grounds and supporting evidence have been presented. Where this is not the case, the appeal/complaint may either be rejected or a request for further information or evidence made. ENQA reserves the right to ignore submissions that are bogus or obviously unsubstantiated.

(5) The ENQA Secretariat shall forward the appeal/complaint for the consideration of the Board. The Board shall distribute the appeal/complaint documentation to the Committee. The Committee shall be requested to submit a report within one month of the receipt of the appeal or complaint.

(6) The Committee shall examine the appeal/complaint and undertake any further investigations that it considers necessary, as soon as reasonably practicable. This may involve obtaining documents from the appellant/complainant; speaking directly with the appellant/complainant or its representatives; speaking with the panel of experts involved in the conduct of the review process.; or with the ENQA Board.

(7) After considering the evidence, the Committee may:

- In case of an appeal, to uphold the appeal and recommend the Board to reconsider its decision, taking into account the findings of the Appeals and Complaints Committee.
- In case of a complaint, to uphold it and recommend the Board to take appropriate action proportional to the issue(s) raised by the complainant and taking into account the findings of the Appeals and Complaints Committee.
- Recommend to the Board to dismiss the appeal/complaint;

(8) The Board's decision on the appeal/complaint shall be taken in light of the Committee's report and shall be final and non-appealable.

(9) Appellants/complainants shall be notified in writing of the Board's decision within ten working days of the date of the decision.

(10) The Board reserves the right to discontinue an appeal/complaint if the appeal/complaint is pursued in an abusive, offensive, defamatory, aggressive, or intimidating manner.

CHAPTER 9 – AGENCY REVIEW COMMITTEE

Article 24 – Composition

(1) The Agency Review Committee shall be composed of 5-7 experts.

(2) Members of the Agency Review Committee shall be appointed by the Board following a proposal by the Director.

(3) The Committee as a whole will cover the following competences and experiences:

- Experience of ENQA Agency Reviews gained by having served on a review panel;
- A current or former position held within an ENQA member agency with a broad overview of the agency's functioning;
- International experience in external quality assurance gained by being involved in international activities;
- At least five years' experience in external quality assurance in an ENQA member agency.

(4) Members of the ENQA Board and of the Appeals and Complaints Committee may not serve at the same time in the Agency Review Committee.

(5) The composition of the Committee shall be endorsed by the General Assembly.

Article 25 – Mandate

(1) Members of the Agency Review Committee shall serve terms of two years (renewable once), and at least two members of the Committee should be replaced every two years to ensure rotation and continuity.

Article 26- Operation

(1) The Agency Review Committee is the body that conducts the internal quality assurance of the ENQA Agency Reviews.

(2) For the reviews coordinated by ENQA, the Committee shall scrutinise the external review reports after the reports are finalised by the review panels. For this purpose, the Committee shall produce a statement validating that the report has been produced in accordance with the Guidelines for ENQA Agency Reviews and noting any areas where the Committee disagrees with the findings of the review panel. The Committee statement shall be published on the ENQA website as an annex to the review report. The Committee shall also approve the composition of ENQA review panels once the panels are composed by the Secretariat.

(3) For the reviews that are coordinated by another organisation and intended to be used for an application for ENQA membership, the Committee shall analyse the report, assessing the integrity of the review process and quality of the report. For this purpose, the Committee produces a letter to the ENQA Board stating whether the review report has been conducted in accordance with the Guidelines for ENQA Agency Reviews and provides sufficient, clear and verified evidence to be used as the basis for a decision on ENQA membership.

(4) The ENQA Review Committee shall not take a decision on overall compliance of the agency with the ESG.

CHAPTER 10 – WORKING GROUPS

Article 27 - Operation

(1) The procedure for establishing and running a working group is outlined in the ENQA Project Management System.

(2) The composition of working groups may be open to all ENQA members or restricted (on invitation) and may be open also to affiliates or organisations from outside ENQA if considered beneficial for the aims of the working group.

(3) Signing up for a working group is voluntary, but confirmation of taking part in a group and/or attendance at a specific meeting is considered a firm commitment, for the sake of good operation of the group and practical arrangements.

(4) The meetings shall be hosted by the ENQA Secretariat or if wished, by agencies taking part in the working group. The costs of the venue and catering shall be covered by the host. The groups may also consider alternative ways of holding meetings, including video conferencing. The travel and accommodation costs are normally covered by the participating agencies unless otherwise agreed with the ENQA Secretariat.

CHAPTER 11 – PUBLICATION POLICIES

Article 28

The Association publishes full external review reports on its website, whether the review is full or partial, for all reviews carried out by the ENQA Agency review process, and regardless of the review outcome and decision on membership by the Board. Full review reports are published together with the letter on membership from the Board and the self-assessment report of the agency.

Article 29

The Association publishes review follow-up reports submitted by agencies and related letters from the Board.

Article 30

The approved minutes of the Board and General Assembly meetings may be consulted by members of the Association at any time.

CHAPTER 12 – FINANCIAL PROVISIONS

Article 31 – Auditor

The General Assembly shall appoint an auditor on a proposal from the Board. The auditor is appointed for a period of three years. The term is renewable.

Article 32 – Activity fees

Members and affiliates of ENQA may be asked to pay a fee to participate in workshops, projects, and other activities organised by ENQA.

Article 33 – Membership fees and arrear payments

(1) The ENQA Secretariat shall issue invoices for membership/affiliation fees by the end of January each year. Invoices shall be paid by the end of March of the respective year. Members/affiliates should inform the ENQA Board as soon as possible and in any case in advance of the deadline if extraordinary circumstances prevent them from paying the annual fee on time.

(2) If a member/affiliate fails to meet the above deadline, the Secretariat shall request, with a written reminder, the payment to be made by mid-May.

(3) If a member/affiliate still fails to make the payment after this first reminder, the Secretariat shall inform the Board. The Board shall officially urge the member/affiliate with a second reminder, sent through the Secretariat, to make the due payment by the end of June. A member who has not settled its fee prior to the autumn General Assembly meeting loses its voting rights, and the right to stand for election, and the Board may suggest to the General Assembly the termination or suspension of its membership/affiliation until all due payments have been received.

CHAPTER 13 – REGISTERED OFFICE

Article 34 – Registered office

The registered office of ENQA is located in Rue de l'Industrie 10, 1000 Brussels, Belgium.

CHAPTER 14 – FINAL PROVISIONS

Article 35

The President shall be responsible for the implementation of these Rules of Procedure.

Article 36 – Amendment of the Rules

The Rules may be amended by a vote of two-thirds of the General Assembly, at which at least two-thirds of the members are present.

Approval of the Application by Kosovo Accreditation Agency (KAA) for Inclusion on the Register

Application of:	**2024-02-02**		
Agency registered since:	2015-06-05		
Type of review:	Full	Site visit:	2024-07-04
External review report of:	2024-12-17	Submitted:	2025-01-24
Review coordinated by:	European Association for Quality Assurance of Higher Education (ENQA)		
Review panel members:	Giuliana Sabbatini, Natalia Greniewska, Padraig Walsh, Tomaž Deželan		
Decision of:	2025-06-27		
Registration until:	2029-12-31		
Absented themselves from decision-making:	Sandra Bezjak Aleksandar Šušnjar (Secretariat)		
Attachments:	1. External Review Report (external file), 2024-12-17 2. Minuted clarification call with KAA, 2024-03-04 3. Applicant's statement on the report, 2025-01-24 4. Additional representation by KAA, 2025-05-10		

1. The application of 2024-02-02 adhered to the requirements of the EQAR Procedures for Applications.

2. The Register Committee confirmed eligibility of the application on 2024-03-14, having considered clarification received from the agency on 2024-03-04.

3. The Register Committee considered the external review report of 2024-12-17 on the compliance of KAA with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015 version).

4. The Register Committee further considered the statement to the report by KAA of 2025-01-24.

5. The Register Committee invited KAA to make additional representation on the grounds for possible rejection on 2025-03-31. The Register Committee considered KAA's additional representation on 2025-06-27.

Analysis:

6. In considering KAA's compliance with the ESG, the Register Committee took into account the following activities:

- Institutional accreditation
- Programme Accreditation
- Evaluation of Doctoral Programmes

7. The external review process was also expected to evaluate the monitoring procedures against the ESG. From the external review report and the additional representation (of 2025-05-10), the Committee learned that the process represents a variation of the conventional follow-up procedure, rather than as a standalone activity.

8. Following this, the "Monitoring procedures" will be further analysed in connection to ESG 2.3, not as a separate external QA activity. The Register Committee underlined that the agency and the coordinator were expected to inform EQAR and request a change of the Terms of Reference at their earliest convenience (i.e. as soon as a need for a change became apparent during the review).

9. The Register Committee found that the report provides sufficient evidence and analysis on KAA's level of compliance with the ESG.

10. With regard to the specific European Standards, the Register Committee considered the following:

ESG 2.3 – Implementing processes

11. From the review report, the Register Committee learned that KAA has been primarily focused on the monitoring procedures, which consider a particular set of standards in all accreditation procedures. The panel did not identify further efforts by the agency to verify that the conditions addressed in the review reports have been appropriately addressed by the institutions.

12. In the response to the report (Annex 3), the agency explained that since the hiring of new staff (see also ESG 3.5), it had organised follow-up visits to some of the evaluated higher education institutions, resulting with three reports tackling the actions taken by the institutions.

13. The Register Committee noted that KAA had made positive steps toward ensuring that the follow-up is more purposeful for the higher education institutions. The Committee, however, could not assess whether the implementation of the follow up of the institutional actions is consistent and useful for the higher education institutions.

14. In the additional representation, KAA explained that it implemented six additional follow-up procedures that tackle the conditions addressed in its evaluation reports. **The Committee acknowledged that the agency started developing a practice of continuous follow-up as understood by the ESG. Following this, the Register Committee could not follow the panel's conclusion and found the agency to be compliant with the standard. The**

Committee, however, highlighted that the next review should pay particular attention to the usefulness of the newly implemented follow-up procedures.

ESG 2.7 – Complaints and appeals

15. KAA has separate appeals and complaints procedures that are well known and utilised by the stakeholders. The panel noted that, however, the complaints' procedure, even though existent and well-functioning, is not formally regulated in KAA's documents.

16. The Register Committee recognised that, in practice, KAA has a complaints procedure and followed the panel's conclusion of compliance. The Committee, however, highlighted that KAA should formalise the process and improve the transparency of this procedure.

ESG 3.1 – Activities, policy and processes for quality assurance

17. In the panel's view, the stakeholder representation in the policy and decision-making body of KAA, i.e. State Council of Quality (SCQ), was substandard. For example, at the time of the site visit, neither students nor employers representatives were involved in the work of the SCQ.

18. Both in the response to the report and the additional representation, the agency explained that since late 2024, one student and two employers representatives are involved in the SCQ. The latter, as stipulated in the national regulations, being members with no voting rights.

19. **The Register Committee welcomed the steps taken by KAA in order to ensure stronger stakeholders' participation in its governance. The Committee, however, could not assess, without panel insight, whether the involvement of students and industry representatives is continuous and meaningful. The Register Committee therefore concurred with the panel's conclusion and found the agency to be partially compliant with this standard.**

ESG 3.5 – Resources

20. The Committee learned that KAA, at the time of the site visit, had sufficient budgetary resources, which have not been fully used. Despite the favourable financial circumstances the agency employed only half of the required number of staff for performing its work. In order to compensate for the gap, the State Council of Quality has been performing tasks beyond its strategic and decision-making remit.

21. KAA explained in the response to the report (Annex 3) that, since the site visit, it had already employed additional personnel and is in the process of hiring more, which would increase the number of employees to two-thirds of what is envisioned in its strategic documents. The Committee, however, could not verify the progress of the hiring process, and whether the current staff numbers are suitable for managing the workload of the agency.

22. In addition, the Register Committee learned that KAA has been gradually transitioning from external quality assurance with strong focus on accountability, towards more quality enhancement oriented reviews. In the panel's view, the agency lacked a clear plan on ensuring that its staff has the appropriate skills for the future needs of the agency.

23. In its response to the report, KAA explained that in early 2025, it adopted a deployment document for addressing the skills gap among its current staff and outlined a plan for trainings which will take place in the first quarter of 2025.

24. The Register Committee welcomed the steps taken by the agency towards increasing the number of staff and improving the skills set of its employees. The Committee, however, could not assess whether the number of employees at the given time was sufficient for optimal work of the agency, and whether the plan for upskilling of the staff team was implemented.

25. In its additional representation, KAA explained that it has already hired additional staff. The agency also elaborated on its new manual for professional development of the new staff – a document that structures the training for new employees.

26. The Register Committee acknowledged that the agency has increased the number of employees and drafted new plans for staff development since the panel's site visit. The Register Committee, however, could not verify whether the human resources, including their competence profiles and professional expertise, are fit for purpose of implementing the agency's new approach in the foreseeable future. **Following this, the Committee was able to concur with the panel's conclusion and found the agency to be partially compliant with the standard.**

ESG 3.6 – Internal quality assurance and professional conduct

27. From the report, the Register Committee has learned that even though the agency gathered feedback via questionnaire after some of its review procedures, the feedback was not collected in a regular and systematic manner – e.g., not all stakeholders having a role in the external review received surveys. Furthermore, the panel could not find evidence of a structured analysis of the surveys' feedback leading to closing the quality loop (for e.g. adaptations in the review procedures or their implementation).

28. In its response to the report, KAA showcased an analysis of responses to the surveys targeted at higher education institutions that have undergone a review with KAA. Both in the response to the report and the additional representation, the agency explained that it plans to disseminate the survey to all higher education institutions in the future.

29. **The Register Committee welcomed the steps taken by the agency to strengthen its internal quality assurance process through analysis of the feedback gathered through the questionnaires. It, however, found that the agency is yet to demonstrate that the feedback tools are implemented**

systematically and that the reflections are further used for enhancing the work of the agency. Following this, the Register Committee concurred with the panel that the agency is partially compliant with the standard.

30. For the remaining standards, the Register Committee was able to concur with the review panel's analysis and conclusion without further comments.

Conclusion:

31. Based on the external review report and the considerations above, the Register Committee concluded that KAA demonstrated compliance with the ESG (Parts 2 and 3) as follows:

Standard	Review panel conclusion	Register Committee conclusion
2.1	Compliance	Compliance
2.2	Compliance	Compliance
2.3	Partial compliance	Compliance
2.4	Compliance	Compliance
2.5	Compliance	Compliance
2.6	Compliance	Compliance
2.7	Compliance	Compliance
3.1	Partial compliance	Partial compliance
3.2	Compliance	Compliance
3.3	Compliance	Compliance
3.4	Compliance	Compliance
3.5	Partial compliance	Partial compliance
3.6	Partial compliance	Partial compliance
3.7	(not expected)	**Compliance** (by virtue of applying)

32. **The Register Committee considered that KAA only achieved partial compliance with some standards. In its holistic judgement, the Register Committee concluded that these are specific and limited issues, but that IQAA continues to comply substantially with the ESG as a whole.**

33. **The Register Committee therefore approved the application for inclusion on the Register. KAA's inclusion shall be valid until 2029-12-31**[1].

34. The Register Committee further underlined that KAA is expected to address the issues mentioned appropriately and to resolve them at the earliest opportunity.

[1] Inclusion is valid for five years from the date of the external review report, see §4.1 of the EQAR Procedures for Applications.

Application by KAA for Inclusion on the Register

Clarification provided by the Agency

Register Committee

Date of the conversation:	2024-03-04
Panel members:	Shkelzen Gerxhaliu
Representative of EQAR:	Giorgi Munjishvili, Blazhe Todorovski

1. KAA has submitted on 2024-02-02 an application for inclusion on the European Quality Assurance Register for Higher Education (EQAR). On , KAA submitted the external review panel's report of .
2. In order to prepare the deliberations of the Register Committee on the eligibility of the application and KAA's activities within the scope of the ESG, EQAR contacted the Agency to clarify the matter(s) below.
3. KAA agreed to clarify the matter(s) by means of an online conversation.
4. EQAR Secretariat requested a clarification for the external quality assurance activities outlined in the KAA application form, as the same do not correspond to the external quality assurance activities in the Terms of Reference and agency's website.
5. KAA representative clarified that the agency offers two main activities, institutional accreditation and programme accreditation. The agency explained that these two activities were mentioned under the same activity in the form since they have similar procedures but they are not conducted jointly.
6. EQAR Secretariat, explained that in their interpretation these are two separate (stand-alone) activities and will be considered in such manner.
7. EQAR Secretariat further requested clarification on the other two activities, follow-up and monitoring procedures, listed together in the application form.
8. KAA representative clarified that the monitoring activity is a separate procedure that is applied in cases where positive accreditation is granted, in order to ensure that institutions maintain the quality criteria throughout the entire period that they are accredited, and that there is no degradation in quality of teaching.
9. The follow-up procedures, however, as presented by KAA are an integral part of the regular procedures, i.e., institutional and programme accreditation.
10. EQAR Secretariat, explained that based on the clarification, monitoring procedures will be kept and considered as a separate external

quality assurance activity. However, for the follow-up procedures since they are integral part of the other two procedures, will not be considered as a separate stand-alone procedure, and therefore excluded from the Terms of Reference and KAA's application.

11. EQAR Secretariat further requested information on the external quality assurance activity *Evaluation of Doctoral Programmes,* which is listed on the KAA website, but has not been listed in the application form.

12. KAA representative explained that they consider this procedure under the programme accreditation due to the similarities in the procedure. However, KAA representative outlined that the Standards and criteria for the procedure are slightly different due to the specificities of the doctoral programmes.

13. EQAR representatives explained that this should be considered as a separate activity, especially if there are different standards and criteria for this procedure.

Republika e Kosovës
Republika Kosova - Republic of Kosovo

Agjencia e Kosovës për Akreditim
Agencija Kosova za Akreditaciju
Kosovo Accreditation Agency

Progress Report of Kosovo Accreditation Agency

Dear Register Committee,

KAA officially applied for registration on EQAR on February 2024 and initiated the external review by ENQA on the same month, with the site visit taking place from 2nd July to 4th July 2024 at the KAA premises. Following the site visit, KAA received a draft of the review report in August 2024, and it had the opportunity to make a statement on the factual accuracy of the draft report to the review panel in September 2024. Following the internal ENQA procedures, the Agency Review Committee (ARC) validated the review report on 17th December 2024.

In the external review report, the review panel concluded that, in the performance of its functions, KAA was not, at the time of the review visit, substantially compliant with the ESG. The analysis by the panel, however, showed that some deficiencies, especially in relation to Standards 3.1 and 3.5, could be rectified relatively quickly.

On 19.12.2024, KAA was informed via email that the external review report (ERR) of KAA was validated at the ENQA Agency Review Committee (ARC) meeting and was further advised to proceed with the EQAR registration.

To this end, as per point 3.18 of EQAR's Procedures for Applications and following the official receipt of ENQA's Agency Review Committee (ARC) letter confirming the external review report, KAA wishes to proceed with EQAR registration.

As part of the application procedure, KAA wishes to use the right to make a statement related to the external review report and highlight substantive progress made between the time of the site visit and today, particularly in regard to standards 3.1, 3.5, 3.6 and 2.3. Despite some standards with partial compliance, KAA feels confident that it now operates in substantial compliance with the ESG.

A brief overview of the main developments is summarized below. We kindly request that the Register Committee take into account the significant progress made by KAA in the mentioned areas.

ESG 3.1. ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE

Panel's judgment:
Partial Compliance

Panel's recommendation:
The agency is strongly recommended to implement as soon as possible the representation of a student (voting) member and of two industry (non-voting) members in the SCQ, as defined by the Law on KAA (2023). These three members should be nominated and directly involved in the meetings and the activities of the SCQ as soon as possible.

The panel strongly recommends translating KAA's Strategic Plan in a (multi-year) implementation plan, setting out measures / activities and the corresponding time plan, which are necessary to ensure that the goals are reached in all areas.

KAA's progress towards this recommendation:

Election of the Student Member in the SCQ: The election process for the student member in the SCQ took place on July 2024, i.e. after the time of the site visit. The student member was elected in line with the procedure set out in the law on KAA, proposed by the Kosovo Government and officially appointed by the Parliament of Kosovo on 05.12.2024, based on the Law on Accreditation Agency, Article 9, point 2.2. The elected student member is Shkurte Bajgora and she has participated actively in the 133rd SCQ meeting.
Appointment of Industry Representatives in the SCQ: Following the site visit, the Ministry of Education, Science, Technology and Innovation (MESTI) has appointed two industry (non-voting) members of the SCQ. They are Mr. Ermal Sadiku, and Ms. Arieta Pozhegu Vula and they are actively participating in SCQ meetings and activities.
With regards to the recommendation of translating the strategic plan into a yearly implementation plan, KAA has already drafted and approved the yearly implementation plan for the year 2025.

ESG 3.4 THEMATIC ANALYSIS

Panel's judgment:
Compliance

Panel's recommendation:
The panel recommends that thematic analyses are developed more regularly, that they build upon the standardisation of the agency's activities and procedures and the data collected from its external QA procedures through the agency's developing IT-platforms and that such analyses be created with the participation of KAA's staff to ensure knowledge transfer and capacity building, and that the topics address the needs of the Kosovo HE sector as identified by KAA itself.

KAA's progress towards this recommendation:

KAA has already taken note of the recommendation. KAA believes that it has supported the professional development of several senior administrative staff ensuring the agency possesses the needed capacity to conduct a comprehensive thematic analysis. Majority of KAA senior administrative staff has already completed training programs, including staff exchanges with partner agencies across Europe. Additionally, the internal management system, known as e-Akreditimi, is continuously updated with crucial data related to the higher education sector in Kosovo, particularly focusing on the development of academic staff. To further this goal, KAA has established a dedicated working group composed of KAA staff. This group will lead a project aimed at conducting an evidence-based analysis of the academic staff landscape within Kosovo's higher education system. The analysis will examine various factors, including qualifications, research productivity, demographic trends, and distribution across study programs.

The completion of the upcoming thematic analysis is anticipated by the end of 2025.

ESG 3.5 RESOURCES

Panel's judgment:
Partial Compliance

Panel's recommendation:
The panel recommends matching the planned expansion in human resources by a clear and specific plan on how such staff are to be deployed in the future, where more enhancement-oriented work of the agency could take place, and consequently which skills are needed for such activities.

The panel strongly recommends establishing whether it is possible for the agency to create sub-council structures to assist the SCQ in its deliberations. The effectiveness of the current governance system is to be evaluated, and it is to be determined whether the SCQ can be expanded. External expertise should assist in this audit process.

KAA's progress towards this recommendation:

As outlined in the ESG 2015, resources are referred to human resources and financial resources, and this is an area where KAA has put lots of effort and made substantial improvements in both components of this ESG standard.

Specifically, regarding human resources, KAA considers that it is essential to emphasize that one of the most important developments was the increase in administrative staff. This progress has been made despite the legal constraints under the civil service regulations established by the Government of the Republic of Kosovo, which generally impose lengthy procedures.

KAA has onboarded additional new staff members, increasing the number of administrative staff from 18 at the time of the site visit to 21 members as of now. Furthermore, an active recruitment process is in the final stage for five additional positions, bringing the workforce to 26.

The recent recruitment process aligns with the newly adopted deployment plan, that KAA has developed to outline the necessary skills set for staff to meet the agency's future needs. KAA has also assessed the current roles and expertise of its staff and how these contribute to the agency's operations. To align the increase in administrative staff with KAA's vision of enhancing quality, the agency has identified the skills that are lacking among its current staff, which are essential for supporting this transition. KAA plans to implement training programs for existing staff to address these identified skill gaps. Additionally, KAA intends to ensure that new hires possess the necessary qualifications and experience to meet future demands.

The required skills and competencies needed for KAA's operations are directly linked to the strategic plan, ensuring that all operations are implemented in a structured and efficient manner.

In addition to the staff deployment plan, KAA has successfully included specific skills requirements in job descriptions, which have been approved by relevant government institutions. This is notable because civil service regulations typically mandate highly standardized job descriptions, leaving little room for the inclusion of specific skills. While this approach may have delayed the recruitment process, KAA believes that taking the time to ensure future staff possess the optimal skill set for their roles is preferable.

The team consisting of 26 staff members assigned to different functions through the deployment plan, will support KAA to implement a quality enhancement approach in its activities, reduce reliance on external expertise and meet panel's recommendations. Additionally, KAA has the flexibility to expand its workforce as needed, in alignment with the goals outlined in the new strategic document for 2026-2031.

Even though the review panel has noted the deficit between the actual staff at the time of the visit and the goal of 32, the panel's analysis has not revealed any major deficiencies in KAA's ability to perform its current functions.

In line with the panel's recommendation and the SCQ’s needs, the agency has established an SCQ Advisory Subcommittee to assist the SCQ in its deliberations, to manage workload better and to support different types of functions in a consultative manner.

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

Panel's judgment:
Partial Compliance

Panel's recommendation:
The panel strongly recommends developing more systematic approaches to the internal QA of the agency and implementing them in a structured and systematic way.

The panel recommends regular, standardized, timely surveys to be directed to all involved stakeholders after the conclusion of every procedure conducted by KAA, and the results to be analyzed and used for the further development of KAA's activities.

KAA's progress towards this recommendation:

KAA would like to highlight that it has already established internal QA processes that are aligned with the defined ESG standards to ensure the quality and integrity of its activities. In line with these efforts, KAA has initiated surveys targeted at higher education institutions (HEIs) representatives. This survey was designed to collect structured feedback regarding various aspects of the external QA process, including communication, accreditation procedures, and support provided by the KAA.

KAA plans to conduct regular, procedure-specific surveys targeting all stakeholders, including HEIs, panel members, and students. The results will be analyzed and used to implement documented improvements, closing the quality loop effectively. These measures address the panel's concerns and support the continuous improvement of KAA's activities in line with international best practices. The survey questionnaire results and reports are attached for your reference.

In its analysis the review panel criticized that experts participating in several reviews are surveyed on an annual basis rather than after each and every accreditation process. KAA was surprised by the narrow interpretation of the latter being the only acceptable practice. While we can see pros and cons for either option, annual surveys have so far served KAA and its experts best, as it limits survey fatigue but still allows experts to share key reflections in a timely manner.

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

Panel's judgment:
Compliance

Panel's recommendation:
KAA is strongly recommended to ensure that student representatives are met by the panels as part of all activities of institutional accreditation, program accreditation and evaluation of doctoral programs, except for the accreditation of new higher education institutions. Students from other programs of the same institution can assess general aspects of the student experience.

KAA's progress towards this recommendation:

KAA has already addressed the recommendation. It has already established meetings with students, as part of the accreditation process, even in programs undergoing accreditation for the first time.

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

Panel's judgment:
Compliance

Panel's recommendation:
KAA is strongly recommended to widen the systematic and structured involvement of all groups of stakeholders, including local students, student representatives and members of the national academic community, in the design and improvement of QA methodologies.

The panel strongly recommends that the agency engages with HEIs and MESTI for a future amendment to the Law on KAA, opening the possibility for further extending the accreditation period at institutional and programme level.

KAA's progress towards this recommendation:

KAA has made significant efforts in enhancing stakeholder inclusion in its policy-making processes. Key groups, such as higher education institutions (HEIs), students, and industry representatives, have actively participated in events, providing valuable input that has been considered and addressed. Furthermore, Article 4, Point 1.3 of the Law on Accreditation Agency requires the inclusion of all stakeholders in the drafting and revision of policies.

ESG 2.3 IMPLEMENTING PROCESSES

Panel's judgment:
Partial Compliance

Panel's recommendation:
The panel strongly recommends revising the follow-up process, focusing more on providing sufficient opportunity for the HEIs to demonstrate how they are enhancing their processes following evaluation, and on implementing the processes as required by the laws and by KAA's manuals.

KAA's progress towards this recommendation:

The recently established Follow-Up Division has initiated follow-up procedures to ensure HEIs have sufficient opportunity to demonstrate their progress in addressing evaluation findings and recommendations. The recent hiring of new staff has significantly facilitated this process, strengthening the division's capacity to carry out these activities effectively. As part of the follow-up procedures, external experts have been involved to evaluate through on-site visits the extent to which institutions have fulfilled the recommendations provided during the accreditation procedures. These follow-up site visits have taken place one year after their accreditation decision. These developments mark a significant step toward aligning the follow-up process with the legal requirements outlined in the Law on KAA, ensuring continuous engagement and stronger enhancement focus between accreditation cycles.

Three reports on follow-up procedures initiated by KAA, are approved in 133rd SCQ meeting and they are attached for your reference.

ESG 2.4 PEER-REVIEW EXPERTS

Panel's judgment:
Compliance

Panel's recommendation:
The panel strongly recommends ensuring that the students involved in evaluation panels have recent experience of attending HEIs at Bachelor or Master level, so that they are able to comment on the current student experience for the kind of programme accreditations mostly conducted by KAA.

KAA's progress towards this recommendation:

KAA has ensured that students involved in evaluation have recent experience in various levels of higher education, including both Bachelor's and Master's programs. Consequently, our latest update to the experts list includes three students who are currently enrolled in Bachelor's programs. Furthermore, we are still actively seeking more experts and student experts, and the call for additional candidates remains open.

ESG 2.6 REPORTING

Panel's judgment:
Compliance

Panel's recommendation:
The panel recommends that follow-up reports and reports of monitoring activities are discussed and approved by the SCQ as well as published on the website in good time after the completion of the procedures.

The panel also strongly recommends that the performed evaluation process and the involved experts as well as their role and specific involvement are more transparently indicated and explained in the published reports, especially in the programmatic and monitoring reports.

KAA's progress towards this recommendation:

KAA acknowledges the recommendation and will clearly define the specific involvement of experts in its reports. KAA engages recognized experts for evaluation processes, with their selection initially approved by the SCQ to ensure professionalism and transparency. Furthermore, the follow-up visits recently conducted at higher education institutions have been promptly published on KAA's website.

Conclusion

Based on the external review report and what we stated above, we hope that the Register Committee is able to acknowledge the significant advancements made in recent years where progress has been confirmed and substantiated, along with the recent developments detailed, particularly those related to chapters 3.1, 3.5, and 2.3.

KAA remains committed to maintaining compliance with ESG standards and addressing any remaining areas of partial compliance by continuously addressing the areas for improvement highlighted in the external review report.

Along with this statement letter, attached are the: a) Declaration of Honor by the review coordinator, b) KAA's self-evaluation report submitted for the external review, and c) the KAA's external review report. Also, evidence of substantive progress made on ESG 3.1, 3.5, 3.6, and 2.3 is attached to this report.

Respectfully,

Republika e Kosovës

Republika Kosova - Republic of Kosovo
Agjencia e Kosovës për Akreditim
Agencija Kosova za Akreditaciju
Kosovo Accreditation Agency

Additional Representation on the EQAR Register Committee's Deferral Decision Regarding KAA's Application
Received by EQAR on 10/05/2025

Following the receipt of the Register Committee's decision and the accompanying letter from the President of EQAR, please find below KAA's formal additional representation regarding our application for the EQAR Register.
We appreciate the opportunity to provide further clarification and commentary on the Committee's preliminary decision and remain committed to demonstrating our substantial compliance with the ESG.
In the sections that follow, we address the issues noted by the Committee in a structured and evidence-based manner, highlighting developments and improvements made since our last evaluation.

ESG 2.3 – Implementing processes - The Register Committee noted that KAA made positive steps toward ensuring that the follow-up is more purposeful for the higher education institutions. Further panel insight should, however, explore whether the new follow-up approach is defined, useful and consistently implemented. Due to this, the Register Committee concurred with the panel and found the agency to be partially compliant with the standard.

KAA appreciates the comments from the Register Committee regarding the progress made in follow-up procedures. In response to the Committee's note, KAA would like to provide the following statement:

a) **Whether the follow up approach is defined**

Follow up procedures are established under the Law on Kosovo Accreditation Agency No. 08 L – 110. Article 44 states that the aim of the follow-up procedure is to ensure the fulfilment of recommendations of international experts by the HEIs.

The Law on KAA defines the following procedure:

1. All HEIs are obliged to submit the plan for implementation of the recommendations to the KAA by 30 September.
2. The plan for implementation of the recommendations must clearly define the time limits and the form of implementation of the recommendations.
3. Evaluation of the implementation of the recommendations shall be performed by external international evaluators.
4. The reports of foreign international evaluators are submitted to the SCQ for review.
5. In case of failure of HEIs in fulfilment of recommendations of external international evaluators, SCQ shall have the right to withdraw the accreditation.

Based on this, follow-up procedures are defined in the KAA Accreditation Manual (see Chapter III, Article 36) as fourth stage of the accreditation process.

The follow-up procedures are detailed in further detail by the KAA Methodology on Monitoring and Post-Accreditation Procedures 2022.

Chapter II defines follow-up procedures as the process of assessing the extent to which the recommendations made by international experts and the commitments undertaken by higher education institutions (HEIs) have been fulfilled. Points 2.1 to 2.6 detail the follow-up procedures, starting from the initiation of follow-up activities up to the decision-making process.

The external review panel did not put in question that the follow-up approach is defined. All the above regulations were in place at the time of the site visit and clearly defined the follow-up procedures.

b) Whether the follow up approach is useful

In our understanding of the external review report, the panel's main concerns about the usefulness of follow-up related to (a) the time of 90 days for HEIs to submit their response and (b) the lack of engagement after submission of the implementation plan.

(a) The current time of 90 days derives from the Law on KAA, which specifies that institutions need to submit their initial implementation plans by 30 September, while KAA communicates its (re-) accreditation decisions to institutions by 30 June at latest. While KAA will propose to review the timing during the next revisions of the Law on KAA, we do not concur with the panel's assessment that 90 days are generally insufficient for HEIs to meaningfully produce a follow-up plan.

Firstly, the implementation plan only needs to outline the initially planned actions, not all implementation details. Full details are only required in a second final submission, which actually presents the progress achieved and the remaining activities necessary for the full fulfilment of the recommendations of the experts. According to the Methodology on Monitoring and Follow-up Procedures, in addition to the improvement report, the institution may submit other relevant evidence which proves the fulfilment of the relevant recommendations. Secondly, it needs to be considered that most higher education institutions in Kosovo are not particularly large and the vast majority of follow-up plans are actually at programme level. This means that the relevant governance structures can appropriately engage in drafting up the implementation plans.

(b) The lack of engagement was a result of the partial implementation in the past due to resource constraints. The newly established division responsible for follow-up procedures is operational and has resolved this. The targets set for the number of programs planned to undergo follow-up procedures are achievable.

Additionally, KAA has disseminated surveys to assess the impact and satisfaction levels of both external experts and the higher education institutions in regards to follow-up procedures. The initial results are being processed and the outcomes will be used for further improvements.

Furthermore, based on a preliminary analysis of the Plans for Implementation of Recommendations received by KAA, over 80% of the recommendations from the final reports are being addressed by higher education institutions within the first year of accreditation.

c) Whether the follow up approach is consistently implemented

Following additional staff capacity allocated, KAA has been able to implement follow-up procedures consistently since September 2024. This is a result of the following actions:

- Established the dedicated Department for Monitoring and Post-Accreditation Procedures, which is included in KAA's organizational chart. This department has a clear objective and scope of work as part

of KAA, with well-defined roles and responsibilities for its administrative officers as outlined in the Regulation on the Organization and Systematization of Jobs in KAA, dated January 23, 2024. The Department comprises two divisions: The Division for Follow-Up Procedures and the Division for Monitoring.
- Increased the number of administrative officers within the Department. Currently, there are 10 administrative officers dedicated to follow-up and monitoring procedures.
- Since November 2024, KAA has conducted 15 follow-up procedures and drafted 9 follow-up reports, with another 6 currently being drafted. This marks a substantial increase from the 3 follow-up procedures at the time KAA submitted the "Progress Report to EQAR." The 9 completed follow-up reports can be found under the following link.

In conclusion, KAA considers that it has made significant progress in consistently implementing its follow-up procedures. While KAA acknowledges the observations made by the review panel and Register Committee, KAA is confident that the follow-up process is effective and useful in practice.

While we understand that the usefulness of the follow-up procedures can only be comprehensively assessed based on a panel's review, we consider that the consistent implementation is clearly demonstrated by the 9 published reports now available.

As it was never in question that the follow-up procedures are clearly defined, we consider that at most the sub-question of "usefulness" should be regarded as partially open on follow-up procedures. Moreover, KAA has also fully implemented the other three key elements mentioned by the standard: self-assessment, external assessment with site visits and resulting reports.

ESG 2.4 – Peer-review experts - The agency did not involve peer review experts in its monitoring activities at the time of the site visit. Instead, the monitoring was an exercise fully performed by the KAA's staff. In the Register Committee's view, all ESG aligned activities should be based on the peer-review methodology which involves external experts, including a student. Following this, the Register Committee was unable to follow the panel's conclusion and found the agency to be partially compliant with the standard.

According to the legal framework, monitoring aims to ensure that higher education institutions (HEIs) continue to meet the minimum criteria throughout the entire accreditation period. Its goal is to serve as a mechanism to prevent misuse or potential breaches of accreditation standards. It is thus important to clarify that monitoring is not a distinct external quality assurance process, but rather a part of the usual accreditation and re-accreditation cycle.

The monitoring process focuses on the formal and technical aspects of compliance throughout the accreditation cycle. While it is different from the follow-up process (see above, happening after accreditation or re-accreditation, focused on the HEI's response to recommendations), the relationship to the "main" activities (institutional accreditation, programme accreditation and evaluation of PhD programmes) is similar: an initial accreditation or re-accreditation triggers (a) the follow-up procedure during the months immediately after the accreditation decision and (b) the continuous monitoring until the next re-accreditation. That is, neither follow-up nor monitoring stand on their own, and both are only conducted for institutions and programmes that passed accreditation.

Considering the characteristic (c) mentioned in the EQAR Policy on the Use and Interpretation of the ESG, section 4.1, the monitoring process is thus clearly of a different nature: while it does follow a predefined process, it does not represent a self-standing evaluation or assessment. It is only a technical mechanism to monitor certain formal requirements. These are a subset of the accreditation criteria and not a separate set of criteria. Moreover, monitoring does not lead to any kind of certificate, label or mark on its own, but is linked to the "main" institutional or programme accreditation.

The auxiliary nature of monitoring is also reflected in the Law on KAA, which describes monitoring (article 42 & 43) in the same section and at the same level as follow-up procedures (article 44). We also found this reflected in the external review report, for example under ESG 2.1: "For monitoring, the SAR does not specifically establish direct connection with the individual ESG, because monitoring directly builds on the standards for institutional or programme accreditation."

We noticed that the Register Committee characterised monitoring "as *complementary* activity to the main procedures, institutional and programme accreditation" (italics by KAA). We consider that monitoring is not a complementary activity, but rather an integral part or step of the main accreditation procedures and the re-accreditation cycle. Monitoring is thus not accurately described as a separate quality assurance activity.

We understand that the different "categorisation" in the terms of reference goes back to our clarification call of 4/3/2024. It was a misunderstanding on our behalf to describe monitoring as a "separate procedure". When listing KAA activities at application stage we wanted to avoid any risk that parts of the KAA processes are omitted or unreported but were unaware of the potential for misunderstandings resulting from this.

We trust that the above explanations clarify that the monitoring process cannot be considered as a separate, stand-alone procedure. We believe that this should be reflected in the Register Committee's decision regardless how monitoring was classified in the Terms of Reference, considering that this was not accurate in light of the actual nature of the monitoring process. We thus consider that the monitoring process should not be assessed against ESG 2.4 (or any other standard) as if it were a separate activity, but as part of or an administrative step within the main accreditation cycle.

Further to the above, we also would like to elaborate on the concept and methodology of monitoring. **Monitoring aims at verifying whether HEIs continue to employ the academic staff members they designated during the accreditation process as their full-time faculty and program leaders. Another example is checking if the designated academic staff actually delivers lectures at the HEIs, as demonstrated during the accreditation site visit.** The monitoring process also responds to any potential breaches of accreditation standards that KAA becomes aware of based on information received from third parties. If the complaint is substantiated, a report is submitted to the KAA Board, which then requires the institution to take corrective measures.

Monitoring focuses on verifying contractual statuses, teaching assignments and other formal data. For HEIs, monitoring does not involve a formal self-assessment or the preparation of documentation that will be reviewed by an expert team during a planned site visit. **Monitoring is an administrative process that involves solely technical verification of formal criteria rather than academic judgment.** Hence it does not require the expertise of external experts. Given the nature of monitoring we thus believe it is most appropriately performed by KAA staff, who are fully competent and authorized to perform these checks. Finally, it is important to underline that any recommendations, decisions or subsequent communications resulting from monitoring are decided on by the SCQ.

It is common practice amongst EQAR-registered agencies that such type of monitoring is performed by agency staff under the responsibility of a governing body (for example, see NOKUT's "knowledge-based quality assurance and enhancement" or AQ Austria's collection and screening of annual reports by accredited higher education institutions).

In conclusion, we consider that the "partial compliance" judgement is not justified in light of the nature of monitoring as a technical, yet integral component of the accreditation cycle and in view of typical practices in other agencies.

ESG 3.1 – Activities, policy and processes for quality assurance - The Register Committee, however, found that further panel insight is needed to analyze whether students and employers are engaged in the decision-making processes in a meaningful way in practice. Therefore, the Register Committee concurred with the panel and found the agency to be partially compliant with the standard.

KAA wishes to reiterate that both student and industry representation is now ensured within the SCQ. The election process for the student member of the SCQ took place on July 2024. The student member was elected in accordance with the procedures outlined in the Law on KAA. She was proposed by the Kosovo Government and officially appointed by the Parliament of Kosovo on December 5, 2024, based on Article 9, point 2.2 of the Law on the Accreditation Agency. The elected student member is Shkurte Bajgora. She has actively participated in all SCQ meetings since the 133rd SCQ meeting held on January 17, 2025, e.g. the 135th meeting held on March 10, 2025 most recently.

Following the site visit in July 2024, the Ministry of Education, Science, Technology, and Innovation (MESTI) also appointed two industry members (non-voting) to the SCQ: Mr. Ermal Sadiku and Ms. Arieta Pozhegu Vula. Both are actively involved in SCQ meetings and activities. Additionally, an agenda (edited to only include topics and a participant list) illustrating the involvement of the student representative and the industry members in the meeting can be found here.

The formal appointment of the student member by the Parliament of Kosovo represents a significant milestone, highlighting the strong commitment of all stakeholders in Kosovo to align with ESGs and to enhance the student voice in Kosovo's higher education. KAA is fully dedicated to sustaining and promoting this engagement, ensuring that the student member continues to play an active and influential role in the agency's activities.

We do understand that the full impact in practice, including whether the student and employer members participate in the SCQ work in a meaningful way, cannot be analysed based on documents and without panel insights. At the same time, we consider that the appointment and consistent presence of the student and employer members is clearly demonstrated by the documents provided and linked above. Even without a full impact analysis by a panel we thus consider that the main shortcoming should be acknowledged as "resolved" and that a "partial compliance" conclusion should no longer be justified.

ESG 3.5 – Resources - The Committee, however, could not assess whether the current number of employees is sufficient for optimal work of the agency, and whether the plan for upskilling of the staff team is implemented, without a further panel insight. Therefore, the Register Committee concurred with the panel and found the agency to be partially compliant with the standard.

KAA wishes to address the concerns raised by the review panel regarding Standard 3.5 on resources, an area where the agency has previously expressed dissatisfaction with the panel's assessment. While significant progress has been made in strengthening the administrative capacity of the agency — progress that can be objectively demonstrated — it remains unclear why this advancement has not been fully acknowledged.

Since the site visit in July 2024, KAA has continued to increase the number of its administrative staff from 18 to 26. An open recruitment process is underway to fill two additional positions, which will bring the agency to its currently planned staffing level of 28.

To clarify any possible misunderstandings, KAA emphasizes that the target of 28 is based on its Strategic Plan and the current activities assigned to KAA. Whilst the legal framework allows for a maximum staffing capacity of 32, which was referred to in the self-evaluation report and the external review report, this figure represents the upper limit and not the current operational need. This would only be required once KAA

would expand its responsibilities particularly in the area of academic promotion within higher education institutions.

Internal staff surveys support the adequacy of existing resources: 100% of employees report having an optimal work-life balance, and over 92% find their workload manageable. Moreover, as shown above with regard to follow-up procedures, it is clear that the current staff enables KAA to fully implement the activities according to the Law and its own procedures.

All recruitment procedures were conducted in strict accordance with national laws. The formal qualifications of applicants were thoroughly checked, and interviews were carried out by professional committees to ensure the selection of the best candidates. This has allowed KAA to recruit renowned professionals such as former Director of education department of the Municipality of Prishtina, former deputy director of the largest private school in Kosovo, division director of the largest bank in Kosovo (finance department) etc. Along with KAA's reputation for professionalism, this approach has generated significant interest in employment at the agency, as demonstrated by receiving over 80 applications for the most recent job openings.

Additionally, all new members of KAA were comprehensively informed about their roles. The majority have already undergone training and participated in international workshops and study visits. KAA would also like to direct your attention to the staff development document, which is designed to structure the training of new employees as part of the upskilling initiative for the staff team. This document serves also as a framework for transitioning to a more enhancement-led approach.

KAA appreciates the panel's recognition of the continuous improvement so far. KAA would appreciate full acknowledgment of the concrete steps that have been taken to ensure the agency's effectiveness and operational capacity, not excluding also the huge improvement to financial and material aspect of resources.

We are confident that the recruitments of additional staff have largely closed the quantitative gap between actual and planned staff. The panel had no concerns that the targeted/planned number of staff will be quantitatively sufficient to optimally manage the work of the agency. With the gap now closed we thus consider that a main issue leading to “partial compliance” should be regarded as resolved.

ESG 3.6 – Internal quality assurance and professional conduct - The Register Committee welcomed the steps taken by the agency to strengthen its internal quality assurance process through analysis of the feedback gathered through the questionnaires. It, however, found that the agency is yet to demonstrate that the feedback tools are implemented systematically and that the reflections are used for enhancing the work of the agency. Following this, the Register Committee concurred with the panel that the agency is partially compliant with the standard.

Internal quality assurance is an area where time is essential to provide evidence and demonstrate the systematic use of feedback for enhancement. KAA has made significant progress in establishing a comprehensive and functional internal quality assurance system.

One of the key initiatives has been the introduction of surveys targeted at representatives of higher education institutions. These surveys (see results of the 2024 analysis) are designed to gather structured feedback on various aspects of the external quality assurance process, including communication, accreditation procedures, and the support provided by the KAA.

KAA has initiated further procedure-specific surveys that engage all stakeholders, including HEIs, panel members, and students. The results of these surveys will be analysed and used to implement documented improvements, effectively closing the feedback loop. These measures aim to address the panel's concerns and support the continuous enhancement of KAA's activities in line with international best practices.

The panel reflected critically on the fact that some of these surveys are carried out annually rather than after each specific procedure. The reason is that we aim to avoid survey fatigue amongst those people who are routinely involved in several accreditation procedures in one year. This also allows respondents to share their overall reflections on the KAA processes rather than to comment on single procedures.

We consider that an annual performance of the surveys is a regular and systematic approach. We do not consider that the standard imposes a specific approach, e.g. carrying out a survey after every accreditation procedure instead of annually.

Conclusion from KAA

We consider that many of the facts outlined above could be better taken into consideration in the judgements on different standards. While we acknowledge that there are remaining minor shortcomings and that certain matters require a future analysis by a panel to assess their full impact in the long run, we find that these issues do not weigh so heavily as to justify a negative overall judgement.

Kosovo Accreditation Agency has seen significant progress in the last few years. The recognition of this progress by the EQAR Register Committee would affirm the agency's commitment to quality assurance and continuous improvement. It would also have a broader, positive impact and strengthen Kosovo's higher education system, ensuring quality education and facilitating quality enhancement of its institutions. In addition, KAA's reform trajectory could serve as a role model for accreditation agencies across the region, inspiring similar efforts toward transparency, accountability, and alignment with European Standards and Guidelines (ESG). This collective advancement would contribute to greater regional integration and quality enhancement in higher education.