ENQA AGENCY REVIEW

INDEPENDENT AGENCY FOR RECOGNITION AND QUALITY ASSURANCE IN EDUCATION (ARQA)

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EXECUTIVE SUMMARY

The Independent Agency for Recognition and Quality Assurance in Education (ARQA) was established in 2015 to conduct institutional and programme accreditation, the ranking of educational organisations and independent assessment of the level of technical and vocational education and training (TVET) specialists' qualifications. It has been an affiliate of ENQA since 2019 and is now applying for membership. It is also applying for registration in the European Quality Assurance Register for Higher Education (EQAR).

The review evaluated the extent to which ARQA 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). It was conducted in accordance with the Guidelines for ENQA Agency Reviews and the EQAR Procedures for Applications.

A review panel was appointed by ENQA including two quality assurance experts, a senior academic from a higher education institution (HEI) and a student member. The panel visited the agency in Astana, Kazakhstan in October 2022.

In preparation for the review the agency submitted a detailed self-assessment, evaluating the quality of its activities and identifying areas for improvement. It also provided access to a range of relevant documentation to assist the panel in its enquiries.

The agency's mission is the dissemination of a quality culture in higher and technical education and the implementation of the best international quality assurance practices. It supports educational organisations in the development of internal quality assurance (IQA) procedures and the introduction of standards requirements and criteria for accreditation.

The review panel commended ARQA on a number of aspects of its work including the comprehensive reporting of the conduct and outcomes of accreditation reviews, the incorporation of the spirit and purpose of ESG 2015 in the development of the agency's standards for institutional and programme accreditation, the support provided for institutions in preparing for accreditation, the comprehensive arrangements for following-up on the outcomes of accreditation and the involvement of students in the revision of ARQA's standards. There were also areas where the panel considered that there is scope for further improvement particularly with regard to the current governance arrangements, the agency's approach to thematic analysis and the procedures established for the evaluation of complaints and appeals.

Overall, the panel finds that the agency is compliant with the ESG. The judgements with regard to the individual ESG standards are as follows:

Compliant: ESG 3.1, 3.2, 3.5, 3.6, 3.7, and ESG 2.1, 2.2, 2.3, 2.4, 2.5, 2.6

Partially compliant: ESG 3.3, 3.4 and ESG 2.7

INTRODUCTION

This report analyses the compliance of the Independent Agency for Recognition and Quality Assurance in Education (Независимое агентство по аккредитации и экспертизе качества образования, ARQA), with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG). It is based on an external review conducted between February 2022 and February 2023. The review was conducted for the purposes of membership of ENQA and for inclusion in the European Quality Assurance Register for Higher Education (EQAR).

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.

The agency is currently an affiliate of the European Association for Quality Assurance in Higher Education (ENQA).

As this is ARQA's first external review, the panel has paid particular attention to the policies, procedures, and criteria in place, being aware that full evidence of material results in all areas may not be available at this stage.

SCOPE OF THE REVIEW

ARQA was established in 2015 to carry out procedures for institutional and specialised accreditation and other functions, to create an effective system for assessing technical and vocational education, higher and postgraduate education in accordance with the Law on Education for the Republic of Kazakhstan. It is also committed to the production of rankings for educational organisations.

The following activities of the agency were addressed in the external review:

- Institutional accreditation of higher and postgraduate education
- Specialized (programme) accreditation of higher and postgraduate education, hereafter referred to as 'programme accreditation'

The agency's activities for technical and vocational education and for independently assessing the level of TVET specialists' qualifications, are not included within the terms of reference for the review. The review is exclusively focused on all activities which fall within the scope of the ESG.

REVIEW PROCESS

The 2022 external review of ARQA 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 ARQA was appointed by ENQA and composed of the following members:

 Tatjana Volkova (Chair), Professor, BA School of Business and Finance Latvia – academic (EUA nominee)

- **Stephen Jackson** (Secretary), Director, Assessment, Research & Evaluation Associates Ltd, UK quality assurance professional (ENQA nominee)
- Eva Fernandez de Labastida, Internationalisation and projects manager, Agency for the Quality of the Basque University System (Unibasq), Spain – quality assurance professional (ENQA nominee)
- Iuliu Gabriel Cocuz, PhD student in Medicine Doctoral School of Medicine and Pharmacy, University of Medicine, Pharmacy, Sciences and Technology George Emil Palade of Targu Mures, Romania – student (ESU nominee, member of the European Students' Union Quality Assurance Student Experts Pool)

Milja Homan, Project and Reviews Officer (ENQA) acted as the review coordinator.

Self-assessment report

In preparation for the review the agency produced a self-assessment report (SAR) detailing the agency's organisation and activities, and indicating the extent to which it has addressed the expectations of the ESG. In accordance with the Guidelines for ENQA Agency Reviews, the process of developing the report involved a number of working sessions and seminars with staff, as well as meetings of the Accreditation Council and discussions with stakeholders. A small working group of senior staff was assembled to oversee the process of self-assessment and the production of the report.

The report provided evidence of the agency's assessment of the effectiveness and quality of its activities and its recognition of areas that required further improvement. It also included a SWOT analysis indicating its current strengths and weaknesses, and key challenges for its future development. The report included links to a wide range of documents that were available on the agency's Quality Management System (QMS) as well as references to other significant materials.

The panel found the report to be well structured and informative. It provided a framework for the schedule of meetings during the review visit and gave access to sources of evidence to support the agency's analysis of its own performance. It was largely descriptive in character and some areas were lacking in detailed evaluation. Nevertheless the panel noted the information provided and were able to explore key issues with relevant representatives during the review process.

Site visit

The site visit took place between the 3rd and 5th October 2022 in business facilities in Astana, in the same building as the agency's temporary office accommodation. In preparation for the review, a detailed schedule of meetings was agreed with the agency and appropriate representatives were invited to attend each meeting (see Appendix I). Some representatives, not based in Astana, participated online. The panel had the opportunity to discuss matters in detail and to receive further information to augment the evidence in the SAR and other documents. The schedule included meetings with the agency's Director and Founder, senior managers and staff of the agency, members of the key committees, expert members of review panels, employer and student representatives, staff from higher education institutions and representatives from the Ministry of Education and Science (MOES). All meetings were conducted in English with the assistance of professional interpreters.

The panel recognised the level of organisation and planning that had gone into the preparation for the visit and acknowledged the willingness of those they met to engage in discussion about the issues raised.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

In order to appreciate the context for the review the panel received a briefing on higher education (HE) in Kazakhstan from ARQA's Adviser to the Director. The briefing covered the principles of state policy on education, the classification of higher and postgraduate programmes, tuition fees and the priorities for improving the quality of provision. It also included statistical information about the current size and structure of the higher education sector.

At present there are I28 universities and higher education institutions operating in Kazakhstan, largely concentrated in Almaty and Astana. The majority of institutions are privately owned. Only 29 are state universities. The total number of institutions has declined in recent years as a result of the government's policy to improve the quality of higher education by reducing the number of universities and introducing stricter qualification requirements.

The total number of students recorded in 2021 was 618,090 of which 576,557 were undergraduates, 34,619 were master's students and 6,914 PhD students. The number of teaching staff was 36,307. 6.7 percent of students studying in Kazakhstan institutions were from other countries. Approximately 19,000 Kazakhstan students were studying abroad, many through involvement with the ERASMUS programme.

The higher education sector has been through a major period of structural change since Kazakhstan signed the Bologna declaration and joined the European Higher Education Area (EHEA) in 2010. There has been a significant transformation from the previous Soviet model of centrally managed provision to the Bologna structures of Bachelors, Masters and PhD programmes. Universities have adopted a standardised model of credit transfer, developed in accordance with the European Credit Transfer and Accumulation System (ECTS) and developed new curricula based on the principles of learning outcomes (LO). There has also been extensive development in the use of new technologies and methods of teaching and learning, including online provision.

The Law of the Republic of Kazakhstan on education sets out key principles that determine the direction of higher education development including the rights to a quality education, the respect of human rights and freedoms, the equality of access to education and the democratic nature of university management. Citizens of Kazakhstan have the right to receive higher education free of charge on the basis of the national competition results. Government funding has been aimed primarily at supporting key areas of development in Science, Technology, Engineering and Mathematics (STEM) subjects and in Information technologies.

A new National Development Plan for the period up until 2025 outlines key priorities for addressing the consequences of the Covid 19 pandemic and the promotion of accelerated economic growth for a more sustainable and inclusive economy. There is a recognised need to improve the quality of higher education and to raise the profile of universities, including investment in research and professional development. The government wishes to see higher education institutions featuring more prominently in international rankings of universities.

QUALITY ASSURANCE

In the context of the adoption of the Bologna model there have been significant developments in the national framework for quality assurance over the past 12 years, involving a transfer of responsibility from government and state organisations to independent accreditation agencies operating external accreditation based on the judgements and recommendations of panels of experts. In accordance with the Law of the Republic of Kazakhstan on education, the responsibility for the quality of education rests with the MOES and within the Ministry, the Committee for Quality Assurance in Education and Science. The committee performs the function of implementing state policy in the field of education. The practice of quality assurance is conducted by non-profit, non-governmental agencies which are required to be officially recognised by the Ministry.

There are currently 12 independent agencies included on the National register of recognised accreditation bodies in Kazakhstan, six of which are national organisations and six are based in other countries (three in Germany, two in the USA and one in Belgium). Institutions that need to undergo institutional or programme accreditation may choose one of the agencies listed on the National register or publish a tender on the government portal to allow agencies to submit bids for the contract. The agency with the lowest priced bid is then invited to conduct the accreditation. In the greater majority of cases, institutions opt to deal directly with a chosen agency.

The accreditation agencies define their own quality assurance policies and methodologies, based on the ESG. Final decisions on accreditation are made by accreditation councils of the respective agencies, composed of representatives from higher education and stakeholder organisations.

The MOES has developed a National Quality Assurance Model for Higher Education which brings together state compulsory education standards, the National framework for higher education qualifications and various qualification requirements for specific academic programmes. The model includes internal and external quality assurance systems as well as a quality assurance system at the state level. Expectations on quality are detailed in Quality Assurance Guidelines which define a set of standards for both internal and external quality assurance systems based on the principles outlined in the ESG.

More recently, the introduction of new rules for the recognition of accreditation bodies have strengthened the controls over the activities of the independent agencies and made it more difficult for new organisations to be included on the National register. It is now necessary for all agencies to be members of ENQA or included on the European Quality Assurance Register (EQAR), before they can submit applications for recognition at the state level.

The independent agencies are responsible for providing public information about the quality and standards of higher education institutions and programmes. They are accountable for the judgments that are made about institutions and programmes and may be held liable if an institution fails to deliver its obligations or is made bankrupt.

ARQA

The Independent Agency for Recognition and Quality Assurance (ARQA) was established in 2015. It is a non-profit, non-governmental organisation that promotes the development of quality assurance systems in higher education through institutional and programme accreditation and the ranking of educational providers. It is a private organisation with a sole founder who is also the agency's Director.

The agency was included on the national register of recognised accreditation bodies (Register I) in September 2017. As a consequence it has the authority to conduct institutional accreditation of educational organisations and programme accreditation of educational programmes (EPs). Inclusion

on the register has to be confirmed once every five years. ARQA's renewed confirmation was pending at the time of the ENQA site visit.

Its initial mission included the promotion of a quality culture in the educational environment and the building of trust in the Kazakh education system. Its aim was to support and implement the best international quality assurance practices, taking into account the legislation of the Republic of Kazakhstan. This has recently been revised to reflect the agency's activities in 2018-2022. It now simply states that the mission is 'Disseminating the quality culture ideology in the Agency's field of activity (see p.15 below). The mission and the agency's goals are based on a set of values that define its relationship with all stakeholders, employees and educational organisations. These are: trust, transparency, diversity, collaboration and innovativeness.

Its principal objectives include:

- 'Increasing the level of compliance of higher and postgraduate, as well as technical and vocational education with the best international practices in the field of education through quality assurance activities
- Becoming one of the leading quality assurance agencies operating in Kazakhstan and Central Asia
- Becoming a full member of the European Association for Quality Assurance in Higher Education (ENQA) and enter the European Register of Quality Assurance Agencies (EQAR)
- Increasing the number of highly qualified experts in the field of education quality assurance by training them.'

In addition to ARQA's affiliation of ENQA, the agency is a member of the International Network for Quality Assurance Agencies in Higher Education (INQAAHE), the Central and Eastern European Network of Quality Assurance Agencies (CEENQA) and the IREG Observatory on Academic Ranking and Excellence.

ARQA'S ORGANISATION/STRUCTURE

ARQA is a relatively small organisation with nine full-time employees and four divisions. The roles of staff include: Director, Deputy Director, Adviser to the Director, Head of higher education accreditation department, Head of technical and vocational education accreditation department, Manager for international cooperation, an accountant, a lawyer and an office manager. The accreditation departments are responsible for the management and organisation of all accreditation processes reporting to the Accreditation Council. The administrative and legal department manages contracts, operations and recruitment. It is also responsible for the monitoring and submission of financial accounts. The international cooperation manager links with international networks and partner agencies. With a small team temporarily sharing a single office there is regular contact between staff and the potential for mutual support and cooperation.

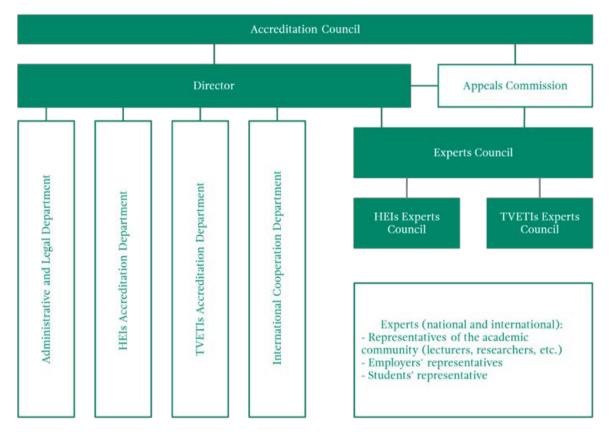
The committee structure includes the Accreditation Council, the Experts Council and the newly formed Appeals Commission. Operational matters are addressed within the management structure.

The Accreditation Council is the senior coordinating body that oversees the accreditation business of the agency. It approves the decisions on accreditation and on post-accreditation activities. It is also the body that has the ultimate responsibility for appeals referred by the Appeals Commission. Complaints are handled separately by the Director.

The Experts Council was established to ensure consistency in the completion of accreditation reports and to ensure that all reports fulfilled the agency's expectations and complied with regulatory

requirements. It is also expected to advise on proposals for the improvement in accreditation procedures.

The Appeals Commission is yet to receive any official appeals. Previously, it had been assumed that the Council could be called into operation once it was necessary to consider any formal submissions. However, it is now recognised that there are opportunities for the Commission to become established as a formal part of the governance structure and to advise on any issues of concern arising from accreditation activities.



ARQA Organisational structure, (SAR p.13)

ARQA'S FUNCTIONS, ACTIVITIES, PROCEDURES

ARQA was established to promote and facilitate the development of a quality assurance system in education through institutional and programme accreditation procedures, rankings of educational organisations and independent assessment of TVET specialists' qualifications.

The agency's accreditation procedures are based on established practice within the EHEA. Both institutional and programme accreditation assess the extent to which educational organisations fulfil the expectations detailed in the agency's accreditation standards. The procedures include: initial self-assessment, external evaluation (site visit), judgments and recommendations, a published report and follow-up activities. The final decisions of the Accreditation Council are one of the following:

- full accreditation
- conditional accreditation
- accreditation deferral
- accreditation rejection.

To date all accreditation reviews have resulted in a decision of full accreditation.

Accreditation type	2018	2019	2020	2021	2022	
Institutional		6				
Programme	19	134	71	17	73	

Number of accreditations by year 2018-2022 (SAR, p.48)

At present, the agency does not produce rankings of educational organisations or independent assessments of the level of specialist's qualifications. A questionnaire has been developed to gain feedback from accredited institutions and to provide an indication of institutional ratings. It is also currently considering the appropriateness of ranking methodologies.

The agency has participated in the development of national legislation that regulates the activities of educational organisations and regularly participates in the discussion of draft amendments to policy documents on education. It also conducts seminars on academic topics related to quality assurance, including a recent series of seminars on the development of modular educational programmes.

ARQA is considering opportunities for applying its methodology in other countries. It has close links with a number of agencies in Kyrgyzstan and is in the process of signing a memorandum of cooperation to facilitate future cooperation. It has recently concluded a contract for the accreditation of the TVET Medical and Pharmaceutical College, in Bishkek, Kyrgyzstan (SAR, p.21). An application has also been submitted to the Ministry of Education and Science in Kyrgyzstan for inclusion in the country's National Register of Accreditation Bodies.

The agency's work with training and vocational providers and the recognition of TVET qualifications falls outside the scope of the ENQA review.

ARQA'S FUNDING

ARQA is an independent non-profit, non-governmental organisation. It does not receive funding from the MOES or from other government departments. Its primary source of income is the fees that it charges for its services, principally its accreditation activities.

The agency provided details of its revenues and expenses for the period 2020-2022, to illustrate its current financial position. (see discussion of ESG 3.5 below)

FINDINGS: COMPLIANCE OF ARQA 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.

Previous review recommendation

No previous recommendations as this is the agency's first review

Evidence

The agency's mission is 'Disseminating the quality culture ideology in the Agency's field of activity'. It seeks to promote the improvement of the quality culture in higher education and strengthen confidence in the education system. The mission is published on the agency's website.

The principal decision making body is the Accreditation Council, which receives advice and guidance from experienced professionals on the Experts Council. The Accreditation Council is an independent body that has responsibility for decisions on the accreditation of institutions and programmes. Its membership includes senior representatives from Universities in Kazakhstan and from other national bodies. It also includes a student representative. The Experts Council was created to assist the agency in providing expert evaluation of assessment reports and in the selection of experts to conduct site visits. Its membership is similarly made up of representatives from the higher education sector with extensive experience of conducting accreditation activities. (see further details under ESG 3.3 below)

Evidence of how the agency's goals and objectives are translated into its daily activities is provided by the procedures that have been developed for both institutional and programme accreditation. The agency conducts accreditations in accordance with its published standards and guidelines, which have been developed in line with Part 2 of the ESG, on a regular basis. The methodology takes into consideration all relevant legal and regulatory requirements including the existing Law on Education, State Compulsory Education Standards and decrees of the MOES. The goals and objectives are defined in the agency's Charter. They include the implementation of the requirements of the Law on Education, the development of educational quality systems in Kazakhstan and the modernisation of the educational system.

Both accreditation methodologies include the following stages: Institutional preparation for review, the production of a reflective self-assessment, external evaluation by a panel of experts, a published report including judgments and recommendations and follow-up procedures. The principal focus of the review process is the effectiveness of the institutions' internal quality assurance processes (see ESG 2.1 below). Accreditation panels analyse all relevant documentation and meet with governing boards, institutional management, academic faculty, students and stakeholders. They also review

educational facilities and student support arrangements. It is a peer review process in which experienced panel members are able to assess the extent to which the accreditation standards have been fulfilled and students have received a valued educational experience. Training is provided for experts to ensure that they are prepared for the requirements of the reviews.

In addition to the accreditation activities the agency also engages in discussions with the MOES on matters of educational policy and initiates academic debate on educational development issues. There is a particular focus on international recognition and cooperation. One of the agency's key strategic aims is to ensure that institutions in Kazakhstan adhere to international standards and best practice in higher education provision. The agency is engaged with a number of international organisations, including the International Network for Quality Assurance in Higher Education (INQAAHE), The Network of Central and Eastern European Quality Assurance Agencies in Higher Education (CEENQA) and the IREG Observatory of Academic Ranking and Excellence. It has also built-up links with agencies in other countries.

Stakeholder involvement is a critical aspect of the way in which the agency conducts its operations. It ensures participation of senior staff from Kazakhstan universities, national and international experts, students and employers in its governance and in its external accreditation procedures.

Analysis

The review panel evaluated the details provided in the agency's self-assessment document about how it conducts its responsibilities for quality assurance and reviewed the documents that were provided in support of its submission. It also had the opportunity to discuss the agency's key activities with staff and stakeholders, and with the experts who conducted the accreditation activities as members of its review panels. Stakeholders are represented in most of the agency's principal committees and the panel acknowledged the importance that is attached to their participation in decision making and advising on developments. The agency cooperates with the Kazakhstan Students' Alliance and student representatives have an input into the selection of expert groups and the membership of the Accreditation Council. However, there is scope for greater involvement of students in other elements of the agency's governance arrangements, including the participation of a student representative in the Experts Council.

Over the past five years the agency has conducted six institutional accreditations and 314 programme accreditations, all of which have resulted in a judgement of 'full accreditation'. The sample of accreditation reports, translated into the English language and made available to the panel, showed a comprehensive and detailed approach to the conduct of the accreditation process, carried out in accordance with the agency's standards. The reports included a summary check-list that indicated whether or not each element of the standards had been satisfactorily addressed. The reports also included recommendations for improvement.

What is less clear in the reports is the extent to which the agency's mission of disseminating a 'quality culture ideology' is apparent in the activities of institutions - particularly the lack of comment on quality enhancement developments. The methodology enables consistency of practice and the implementation of a framework for quality, but may be seen by institutions as mainly an exercise that is necessary to meet the requirements for recognition rather than an opportunity for promoting institutional and programme improvement. It would be possible, for example, to require details of institutions' quality enhancement plans.

The panel enquired about possible conflicts of interest, between accreditation activities and other services offered to institutions. It received assurance that the agency does not engage in any activity that would compromise its operations.

Panel commendations

 The review panel commends ARQA on the comprehensive reporting of the conduct and outcomes of accreditation reviews.

Panel recommendations

I. The agency should consider greater involvement of students in its governance arrangements including membership of the Experts Council.

Panel suggestions for further improvement

1. The agency is encouraged to consider ways of promoting a focus on quality enhancement as part of its procedures for accreditation.

Panel conclusion: 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.

Previous review recommendation

No previous recommendations as this is the agency's first review

Evidence

ARQA has been registered as an independent legal entity since 2015 with the purpose of carrying out institutional and programme accreditation procedures, producing rankings of educational organisations and independent assessment of the level of specialists' qualifications.

In 2017, ARQA was included in the Register of Recognized Accreditation Bodies (Register I) by the decision of the National Accreditation Council (the Council). The decree for the inclusion in the Register was issued by MOES on 27th of September 2017 for a period of five years.

Analysis

At the time of the site visit, ARQA was officially recognised by the legal entities from the Republic of Kazakhstan, by the MOES and it is also included in the Register of Recognized Accreditation Bodies (Register I). As the decree of the MOES from 4th of October 2021 states, ARQA will also apply for the EQAR registration after the ENQA review to establish the compliance with the ESG guidelines.

The five year approval for ARQA's inclusion on the Register of Recognised Accreditation Bodies came to an end during the site visit. Since 2021 it has been a requirement of the Ministry that agencies are members of ENQA, or included on the EQAR, to be included on Register I. The Director of the Agency was in discussion with the Ministry about allowing time for the outcome of the current ENQA review to be published before deciding on an extension of approval for a further five year period.

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.

Previous review recommendation

No previous recommendations since it is the first external review.

Evidence

Organisational independence. ARQA is a non-commercial non-governmental organisation. The Founder is the current Director of the agency. It has civil rights in accordance with the objectives of its operations established in its Charter. It also has financial independence, owning a property provided for the implementation of services financed from the funds of statutory services and in the right of full management. The panel notes that as a legally independent entity, the agency can decide with which organisation it contracts with for external assessment.

The decisions on formal outcomes of accreditation activities are made by the Accreditation Council which, as an independent body, is responsible for making decisions on accreditation of both education organisations and education programmes and approves the results of post–accreditation monitoring and re-accreditation. Its activities are guided by the agency's Charter, the standards for institutional and programme accreditation and the Regulations of the Accreditation Council (see also p.15)

The Accreditation Council consists of 11 members: a chairman, vice-chairman, secretary and its members, including a foreign member. According to the Regulation on Accreditation Council the Council is formed from representatives of the academic community, stakeholders and students on the proposal of state bodies, educational organisations, stakeholders and students proposal of state bodies, educational organisations, the National Chamber of Entrepreneurs, associations of employers and industrial enterprise as well as students' organisations. A foreign member is appointed by the Director of the agency on the recommendation of the members of the Accreditation Council. Accreditation Council candidates are approved by order of the Director of the agency if the candidates meet established criteria under the Regulations on the Accreditation Council. Representatives of the academic community must have at least five years of experience in a leadership position and active participation in quality improvement. Stakeholders are expected to have experience of practical work in enterprise and organisations for at least five years. Students should have active participation in the work of student organisations.

The composition of the Accreditation Council is subject to rotation of at least one quarter of the composition for at least 3 years. The change in the composition is made by the Director in the manner determined for the formation of the composition of the Accreditation Council. The Director of the agency is a member of the Accreditation Council with voting rights. The Chairman of the Accreditation Council and the Deputy Chairman are elected by its members with the exception of the Director of the agency and the foreign member by open voting by a majority of the members present at the meeting of the Accreditation Council. Decisions of the Accreditation Council are taken by open vote by a majority of at least two-thirds of the members of the Council present at the meeting. If it is necessary, or at the suggestion of one of the members of the Accreditation Council, a secret ballot is held. Dismissal from the Accreditation Council is determined by violations of the Code of Ethics. Various sanctions are defined including exclusion from the Council.

The Experts Council was created to carry out an examination of the accreditation reports to ensure compliance with the established requirements and to prepare proposals to the Accreditation Council

for decision-making on institutional and programmes accreditation. The Experts Council consists of experienced scientists and practitioners who are actively involved in the work to improve the quality of education. There is no predefined nomination process for membership of the Council. The composition, membership and the term of office of the members of the Experts Council is approved by the Director in agreement with the Founder. Recommendations and conclusions prepared by the Experts Council are presented at meetings of the Accreditation Council by the Chairman or his deputy. The Experts Council reports on its work to the Director. The change in the composition of the Experts Council is made by the Director in agreement with the Founder.

The Appeals Commission's role is to analyse the arguments of the Accreditation Council on the objections to the appeal and make decisions based on the results of the discussion of the appeal. The Appeals Commission members are recruited from one of a number of organisations including representatives of the academic community, stakeholders and students on the proposal of state bodies, educational organisations, the National Chamber of Enterprises, associations of employers and industrial enterprises. as well as student organisations. Candidates to the Appeals commission are approved by the order of the Director of the agency if the candidates meet the established criteria. The Appeal Commission consists of three permanent members and two members involved in the appeal under consideration, normally a student; and an employer (see also p.43). Members of the commission should not be employees of the organisation under review.

Operational independence. The definition and operation of the agency's procedure and methods, as well as the nomination and appointment of external experts, are undertaken independently from third parties such as HEIs, governments and other stakeholders. The agency creates and approves a plan for its activities, organises its implementation and reports to the Founder on the results of its activities. The organisational structure and the appointment of staff are determined by the agency itself, as well independently deciding the system and type of remuneration. It has its own accreditation standards and methodological basis for its implementation.

The higher body of ARQA is the Founder. The executive management body is the Director who carries out current management of the agency. The Director is personally responsible to the Founder for the results of the agency's activities, the preservation, intended use and increase of given property, and the preservation of occupational safety. The director recruits and dismisses employees and distributes responsibilities between staff, defining their responsibilities and giving mandatory instructions. Employees are not involved in decision-making regarding accreditation issues. The agency has an approved set of employee ethics outlined in its regulations on personnel policy.

Independence of formal outcomes. The appointment of national and international experts is undertaken by the agency in accordance with the regulation which defines the requirements, tasks, rights, and obligations of experts. The Code of ethics requires their independence from the educational institutions that they engage with for accreditation activities. The director approves all selected candidates. Although experts from relevant stakeholder backgrounds, including students, take part in quality assurance processes, the final outcomes of the quality assurance processes remains the responsibility of the agency. (See also Standard 2.4 below, page 32)

All reports of external QA procedures clearly indicate that ARQA is the conducting agency.

Analysis

The formal recognition of the outcomes of the agency's activities by public authorities confirms the agency's official recognition. The panel established that the agency is recognized as a partner in the HE system of the Republic of Kazakhstan by the stakeholders and representatives from HEIs that the panel met.

The panel also noted that the agency considers that their status is 'semi-autonomous' due to the imposition of the obligations set out in the Rules on accreditation bodies no 499 by the Ministry of education and science of Kazakhstan from 4th of October, 2021. For example, the Ministry's quality assurance guidelines, introduce the concept of joint and several liability for the results of accreditation. An accreditation body, along with a HEI, may be held responsible for the failings of an accredited university's quality assurance system (see p.11 above)

The Accreditation Council is responsible for the final outcomes of the accreditation process. MOES has a role to advise the accreditation bodies, but cannot influence the internal decision making processes. Similarly, the higher education organisations undergoing review cannot have undue influence on the expert groups' recommendations as the outcomes are not reported until the Accreditation Council has concluded its deliberations.

The Experts Council fulfils the role of ensuring consistency of practice and compliance with the requirements for accreditation. It was noted in the panel's discussions, that the Council's role has changed over the years from ensuring compliance with the established requirements for reporting and preparing proposals to the Accreditation Council for decision-making on institutional and programmes accreditation to a more advisory role. for improvement of institutional and programme accreditation procedures. It was explained during discussions that the quality of the reports during recent years had improved and, therefore, the expertise of the experts is used primarily for improving the quality activities of the agency. This requires reflection on the changed role of the Experts Council over the years and to elaborate further on its role as an independent advisory body.

The Founder plays a key role in the governance of the agency and according to the Charter has the authority to make decisions on any of the changes made, such as additions to the founding documents, voluntary reorganisation and liquidation of the agency and its organisational structure, the procedure for the formation and termination of the authority of the management body and the order and sequence of the submission of financial statements by the executive body. The Founder also oversees the procedure for conducting accreditations and approving their results. Since the Founder and Director are the same person, the panel found the situation where one single individual or stakeholder has overall authority in an agency as incompatible with the requirements of the ESG. Independence is at risk when one single actor or stakeholder has a controlling stake in an agency. The combination of the roles of the Founder and the Director is considered to be out of line with good governance practice.

The agency's Charter clearly states that no third parties are able to influence the operation of the organisations or its activities. Safeguards are embedded in the structure, composition and operation of the agency's management bodies.

Panel recommendations

- 2. The agency should reconsider its governance structures to ensure that the organisational independence is formally secured by separating the roles of Founder and Director.
- 3. The agency should reconsider the remit of the Experts Council to secure its advisory role and organisational independence.

Panel conclusion: partially compliant

FSG 3.4 THEMATIC ANALYSIS

Standard:

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

Previous review recommendation

No previous recommendations as this is the agency's first review

Evidence

The agency's interpretation of the expectations for thematic analysis involves the '...search for significant topics which contribute to the systematisation of qualitative research data' as stated in its SAR. In the SAR the agency also describes the chosen topics for analysis and sources of information as:

- details of the results of agency's activities included in the annual reports to the MOES;
- the identification of examples of best practice. (Examples are provided in Table 5 and annex 3 of the SAR);
- the analysis of systemic deficiencies in the institutions' activities. (Recommendations are listed in annex 4 of the SAR);
- analysis of the comments and suggestions received from the institutions;
- information available from the educational programmes rankings.

The agency submits information annually to the MOES on the accreditation of institutions and educational programmes. During the site visit a sample of these annual reports, and other details regarding the changing of rules and the evolution of the education quality assurance system, were provided as additional evidence since they are not published. Additionally, in the SAR there was a list of publications by ARQA staff (SAR, Annex 2) about different quality assurance topics of interest for the agency. However, these are not reports describing and analysing the general findings of external quality assurance (EQA) activities. A questionnaire to evaluate the uniqueness of educational programmes accredited by the agency has been developed and is aimed at producing a ranking of educational programmes which is yet to be published.

In the framework of collaboration with the Agency for Quality Assurance in the Field of Education in Kyrgyzstan 'EdNet', ARQA has made a comparison of the content of the standards and criteria of the Kazakhstan and Kyrgyzstan accreditation agencies (SAR, Annex 5).

Analysis

The panel has examined all the information provided with the SAR and during the site-visit, including the annual reports to the Ministry. In the SAR the agency concludes '...that more thorough and systematic work is needed on the use of thematic analysis' results for continuous improvement of activities. The regularity of the thematic analysis is determined by the Ministry's requirement to submit annual reports, as well as by the constant collection of data for producing EPs ranking'. It adds that 'ARQA should strive to collect and analyse facts and data for an in-depth and systematic thematic analysis.'

The annual reports cannot be considered as thematic analysis under ESG 3.4. They provide useful information about ARQA's accreditation activities, including the recommendations given to the accredited institutions and programmes, but there is no analysis of the findings of the agency's quality assurance activities and these reports are not published. As described in the guidelines, the expectation of this standard is that '..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.'

The identification of best practice and the analysis of systemic deficiencies in the institutions' activities could be considered as thematic analysis if they were used to produce structured reports, which should be published and shared with the institutions to further improve the higher education system. ARQA's justification for not publishing a specific report on the recommendations given to the institutions is that all external review reports are posted on the Agency's website. The panel considers that as the ARQA staff have been involved in several publications (see annex 2 of the SAR) regarding different quality assurance topics from the impact of the Bologna process in higher and postgraduate education in the Republic of Kazakhstan to the models of quality assurance of higher education including the EFQM model. Considering also the ESG-2015 as the basis of criteria and standards of accreditation agencies of Kazakhstan and Kyrgyzstan, among others, there is an opportunity for the agency to gather the available information on the accreditation activities, analyse it and disseminate thematic reports based on these findings.

The agency has also conducted questionnaire surveys of institutions aimed at assessing the quality of standards, guidelines, and rules. This is primarily used to improve ARQA's quality assurance procedures and processes both methodically and organisationally, but it could also feed into a thematic analysis report on the agency's accreditation activities considering also the stakeholders' perspective.

Regarding the comparison of the content of the standards and criteria of the Kazakhstan and Kyrgyzstan accreditation agencies, it seems a very interesting exercise to adapt the standards, but it is not considered as thematic analysis under ESG 3.4. There is a similar situation with the ranking of educational programmes, which is not available yet and does not seem to include any analysis of the findings of the agency's activities.

The panel agrees with ARQA that it needs to collect and analyse facts and data for an in-depth and systematic thematic analysis. All thematic reports should also be published on the agency's website so that they are easily available to all interested stakeholders. It is recognised that the arrangements for accreditation, involving up to 12 different agencies, makes it difficult for any one agency to analyse activities across the higher education sector as a whole.

Panel recommendations

- 4. The agency should take a more in-depth approach to analysing findings from its accreditation procedures and publish these thematic reports on its website.
- 5. The agency should plan for future regular publications and provide the necessary resources for conducting research and preparing thematic reports.

Panel suggestions for further improvement

2. The agency could develop a clear process for identifying the topics for thematic analysis as part of its quality management system.

Panel conclusion: partially compliant

ESG 3.5 RESOURCES

Standard:

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

Previous review recommendation

No previous recommendations as this is the agency's first review.

Evidence

Information about the agency's resources was included in the SAR. ARQA believes that it has sufficient resources to achieve its mission and goals to an appropriate standard. The agency has a team of nine full time employees, all of whom met with the panel at some stage during the site visit. There is also a pool of national and international experts that are responsible for carrying out external quality assurance activities.

The agency receives no public funding. Its income is principally derived from accreditation fees, and post accreditation services. The accreditation procedures are based on bilateral contracts between the agency and the educational organisations. The revenues and expenses statement of the ARQA was provided for the period of 2020-2022 which confirmed the current financial stability of the agency. It is expected that the number of experts will increase in the future in-line with the agency's planned developments.

ARQA has its own dedicated office space which at the time of the site visit was under reconstruction. The panel had the opportunity to visit the temporary office, which was located in the same building where the review took place, and confirmed that there was sufficient space and facilities to conduct all necessary operations.

Analysis

From the information gathered the panel noted that the staff of the agency are motivated and fully engaged in its activities. The resources available enable it to organise activities in an effective and efficient manner. This view was confirmed by feedback received from the educational organisations and other stakeholders, including from the Experts Council and Accreditation Council. The SAR notes that the agency's staff are satisfied with the technical equipment that is available to support the accreditation procedures.

The available financial resources are sufficient to provide for the agency's services. The recent financial statement demonstrates a positive net balance. The largest element of the revenues is income from the services. The biggest out-goings are staff salaries and payments under civil contracts (including experts), and payments to suppliers and contractors.

Panel suggestions for further improvement

3. The agency could develop a comprehensive plan to cover future predicted workload which will assist with ensuring the capacity for managing operations.

Panel conclusion: 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.

Previous review recommendations

No previous recommendations as this is the agency's first review

Evidence

ARQA's Quality Management System (QMS) has been implemented to facilitate the efficient management of its core business activities. It is based on the Kazakhstani standard ST ISO 9001-2016 and covers the key elements of organisation, process and documentation as well as the methods for carrying out activities. It also includes information on the internal quality management system and the details of each structural unit.

Internal quality management is performed with the assistance of the following documents:

- The Quality Manual;
- The Quality policy (aligned with the ESG);
- Quality objectives;
- Documented procedures.

The SAR Annex 6 provided a list of Quality System Procedures and Quality System Documentation.

The Quality Manual describes an internal quality system based on a process approach that incorporates the Plan-Do-Check-Act (PDCA) cycle and risk-based thinking. The Quality policy defines the main directions and goals of the agency related to quality. The accreditation standards and procedures and additional guidelines and templates developed by ARQA are also part of the documentation of the Quality Management System. They are updated or amended when necessary due to regulations changes or comments or suggestions from the feedback of different stakeholders.

As evidenced during the interviews with the institutions' representatives and the experts working with the agency, ARQA collects feedback from institutions and experts. There is both formal and informal collection of feedback from institutions, including discussions during institutions' assessments, official free-form appeals, and customer questionnaires on satisfaction with the agency's services.

Information from experts is collected during the process of institutional and programme accreditation including the assessment of the agency's standards and criteria. In addition there is informal feedback on the quality of recommendations in some individual reports. In order to facilitate the collection of information there is a new feedback tab available on the agency's website.

The Regulation on Personnel Policy includes considerations on agency employee's ethics and the Regulation on Experts includes the Code of Ethics that the experts are required to adhere to.

The agency does not subcontract any of its external QA activities within the scope of the ESG to third parties.

Analysis

The panel analysed the agency's quality manual and other relevant documents relating to the arrangements for internal quality assurance. The panel considers that the agency could include in its quality management documentation a general process map where all the processes and their relations/interactions could be seen to facilitate the integration of all the processes. During the sitevisit, the panel discussed the implementation and effectiveness of the internal quality assurance system (IQA) with the Director, staff members of the agency and external stakeholders. The panel believes that the agency could consider more developmental approaches to quality, going a step beyond ISO including quality enhancement.

The panel confirms that a comprehensive IQA system is in place that covers all relevant areas of the EQA activity of the agency as well as the professional and ethical conduct of all involved. The panel

also confirms that feedback from internal and external stakeholders is gathered, although there were no specific examples given of improvements made, based on the analyses produced by the IQA system. Despite the fact that changes and improvements are evident, the agency does not present a plan of improvement actions which would address the expectations for further developments.

The general documentation of the system is dated in 2018 and should have been reviewed after 3 years, as stated as a requirement in the quality assurance documents. Only the updated standards and procedures have a more recent date of approval including the recently updated Rules for Complaints and Appeals.

Panel recommendations

- 6. The agency should ensure that all documents are updated according to the deadlines stated.
- 7. The agency should implement developments to its IQA system. It is necessary that the agency ensures that the cycle of continuous quality improvement is completed. For example, with the incorporation of a plan of improvement actions.

Panel suggestions for further improvement

- 4. The agency could consider more developmental approaches to quality, including quality enhancement.
- 5. The agency could include in its quality management documentation a general process map where all the processes and their relations/interactions could be seen.

Panel conclusion: 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.

Previous review recommendation

No previous recommendations as this is the agency's first review

Evidence

This report provides details of the first external review of ARQA by ENQA. There is no previous review for the compliance with the ESG. ARQA is committed to undergothe review for demonstrating the compliance with the ESG every five years.

Analysis

As noted above (ESG 3.2), ARQA was included in the Kazakhstan Register of Recognized Accreditation Bodies (Register I) by the decision of the National Accreditation Council (the Council). The decree for the inclusion in the Register was issued by the MOES on 27th of September 2017 for a period of five years. Renewal of membership became due in September 2022. It has been deferred awaiting the evidence that will become available from this current review.

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 I of the ESG.

Previous review recommendation

No previous recommendations as this is the agency's first review

Evidence

In accordance with the requirements of the MOES all higher education institutions have been required to develop internal quality assurance systems that are based on the ESG 2015. As a consequence the agency's own standards for the accreditation of institutions and programmes have been designed to specifically address the expectations of the ESG as well as taking into consideration the legal obligations of the existing laws on education in the Republic of Kazakhstan. The agency expects that a specific policy on quality assurance is implemented in all higher education organisations aimed at the development of a 'quality culture' and reflecting international best practice. In its SAR the agency provided information applying to both programme and institutional accreditation, which summarised how each external quality assurance activity complied with the part 1 of the ESG:

ESG Standards	Standards for Institutional Accreditation	Standards for programme accreditation
I.I Policy for quality assurance	Standard I. Quality Assurance Policy	Standard I Quality assurance policy implementation
I.2 Design and approval of programmes	Standard 2. Educational programmes: design, constant monitoring and periodic evaluation	Standard 2. Educational programmes: development and approval
1.3 Student – centred learning, teaching and assessment	Standard 3. Student-centred learning, teaching and assessment of academic performance	Standard 3. Student-centred learning, teaching and assessment of academic performance
1.4 Student admission, progression, recognition and certification	Standard 4. Students: admission, academic performance, recognition and certification	Standard 4. Students: admission, support of academic achievements, certification

1.5 Teaching staff	Standard 5. Teaching staff	Standard 5. Teaching staff
I.6 Learning resources and student support	Standard 6. Educational resources and student support systems	Standard 6. Creative and personal development of students
1.7 Information management	Standard 7. Information analysis and management	Standard 7. On-going monitoring and periodic evaluation of educational programmes
1.8 Public information	Standard 8. Public information	Standard 8.1. Specifics of the educational programme for the undergraduate level
I.9 On-going monitoring and periodic review of programmes	Standard 9. Scientific activities management	Standard 8.2. Specifics of the educational programme for the master's level
1.10 Cyclical external quality assurance	Standard 10. Periodic external quality assurance procedures	Standard 8.3. Specifics of the educational programme for the doctor's level

In addition to the ESG, some standards also specifically refer to the national context and the implementation of State Compulsory Education Standards. The agency has recently revised and updated its guidelines for both institutional and programme accreditation standards, which are available on its website. The documents provide a statement of the general provision of each standard accompanied by a list of evaluation criteria that indicate how the standards should be implemented and what issues may be examined as part of the accreditation process. Evidence of the assessment of the agency's standards is provided within the reports of the accreditation activities which include a section that addresses the institution's compliance with each standard. Comments are recorded for each of the criteria listed for the standards with notification of examples of best practice and recommendations for improvement. There is also a summative statement about whether or not the expectations of each standard have been fulfilled.

Analysis

The panel considered the detail provided in the SAR about the alignment of the agency's standards to the ESG 2015 and reviewed the published guidelines for both institutional accreditation and the specialised accreditation of educational programmes. It also sought clarification on the development of standards in its discussions with the agency. The same basic standards are applied to both forms of accreditation although the focus of their application is tailored to the difference in the level of review. Specific information is provided in the general provisions and evaluation criteria for each standard. One example quoted in the SAR illustrates the difference in approach. The standard, based on ESG I.I is defined as 'Quality Assurance Policy' in the guidelines for institutional accreditation, and as the 'Implementation of quality assurance policy' in the guidelines for programme accreditation.

Although there is a close mapping of the ESG to the agency's standards, there are some differences in the interpretation of the expectations for individual standards which reflect procedural differences and the current structures and practices within institutions. For example, the agency's procedures are designed primarily for the purposes of accreditation rather than quality assurance review and involve less of an emphasis on the importance of providing public information – particularly with regard to programme accreditation where the requirement is for fulfilment of a checklist of criteria rather than a published report on the outcomes of the accreditation.

The panel also reviewed a sample of reports of both institutional and programme accreditation activities to confirm that the expert panels gave appropriate attention to the individual standards. The panel noted that the reports included comprehensive and systematic assessment of each standard, although not all were reported with the same level of detail. To date, only six institutions have been through the process of institutional accreditation by ARQA.

The review provided an evaluation of the effectiveness of the coverage of the ESG standards in the agency's accreditation activities. The accreditation reports include an analytical section which provides details of the experts' recommendations for each of the standards and a checklist of compliance with the criteria.

ESGI.I Policy for Quality Assurance

ARQA Standard I. An organisation of higher and postgraduate education must have a published quality assurance policy that complies with the legislation of the Republic of Kazakhstan in the field of education and is freely available to all stakeholders.

- Institutional accreditation: comments are included on the discussion of the quality policy with key staff and the need to focus on developing a quality culture leading to the enhancement of educational programmes. Examples of best practice are identified. Recommendations indicate the need to ensure that the expectations of the policy are widely disseminated.
- Programme accreditation: reporting focuses on discussions about the development and
 effectiveness of internal quality assurance systems and the need to align these with strategic
 objectives and with programme development plans. Stakeholders also need to be made aware
 of the implementation of the policy.

The ARQA standards and procedures address ESG 1.1 for both institutional and programme accreditation.

ESG 1.2 Design and approval of programmes

ARQA Standard 2. Organisations of higher and postgraduate education must have rules and procedures for developing, approving and updating educational programmes

- Institutional accreditation: experts report on the involvement of students, employers and foreign partner universities in the development of educational programmes. Joint programmes with scientific institutes provide opportunities for cooperation in research.
- Programme accreditation: recognition that procedures for designing, reviewing and approving
 educational programmes need to be brought into line with institutional academic policy. There
 is a need to ensure that learning outcomes (LOs) are set at the appropriate level for individual
 programmes and that opportunities for interdisciplinary study should be included.

The ARQA standards and procedures address ESG 1.2 for both institutional and programme accreditation.

ESG 1.3 Student-centred learning, teaching and assessment

ARQA Standard 3. Organisations of higher and postgraduate education must implement student-centred learning processes in their educational activities

- Institutional accreditation: experts have noted the move towards a more student-centred
 approach to teaching and to the assessment of LOs. Improvements in the learning experience
 of students are linked to the need for staff to complete advanced training in teaching methods
 and student assessment.
- Programme accreditation: the review process focussed on issues of student satisfaction, the
 development of new approaches to learning, including the use of IT systems, the
 implementation of staff development opportunities and the link between teaching and
 research.

The ARQA standards and procedures address ESG 1.3 for both institutional and programme accreditation.

ESG 1.4 Student admission, progression and certification

ARQA Standard 4. Organisations of higher and postgraduate education must consistently apply approved and published rules that cover all stages and processes of the student's "life cycle", starting from admission to study to the awarding of an academic degree / qualification.

- Institutional accreditation: the issues reported on include the information available to students, opportunities for student mobility, career guidance and the engagement with employers in supporting student opportunities. The links with secondary and technical institutions were also considered. Although it was noted that the standard was being addressed it was acknowledged that there was scope for further development, including the provision of information on the rules and conditions for admission to undergraduate, graduate and doctoral studies.
- Programme accreditation: the panel members considered the institutional support for the
 employment of graduates and the links between the educational programmes and the
 employment centre. Programme development takes into account the requirements of the
 labour market, the expectations of employers and the individual interests of students.

The ARQA standards and procedures address ESG 1.4 for both institutional and programme accreditation.

ESG 1.5 Teaching staff

ARQA Standard 5. Organisations of higher and postgraduate education must ensure the impartiality and transparency of the recruitment process and professional growth and development of the teaching staff (faculty members)

- Institutional accreditation: the standard is identified as 'teaching structure' in the report and considers both staffing arrangements and the professional competence of staff. It is acknowledged that there is a need for a systematic analysis and monitoring of the activities of the teaching staff and the effectiveness of teaching. It is recommended that the university implements procedures for the attestation of all teaching staff.
- Programme accreditation: there are concerns about the low level of participation of staff in research and innovation activities. Questions are also raised about whether staff meet all the qualifications requirements for the educational programmes. It is suggested that there is a need to monitor how staff implement the principles of student-centred learning. There is also a need for the provision of further staff development opportunities.

The ARQA standards and procedures address ESG 1.5 for both institutional and programme accreditation.

ESG 1.6 Learning Resources and student support

ARQA Standard 6. Organisations of higher and postgraduate education must ensure that material educational resources that meet the requirements and needs of educational programs are sufficient and accessible to all students.

- Institutional accreditation: reference is made to 'educational resources and student support system' in the agency's standards. The report identifies as best practice the development of a single service centre bringing together educational, social, cultural and leisure services as primary health care. It also includes comments on the survey of student satisfaction with the quality of the provision of educational services including conditions of education, the quality of the educational process and the quality of learning outcomes. The analysis indicated that the greater majority of students were satisfied with the quality of the provision of the services.
- Programme accreditation: there is not a specific standard on learning resources included
 within the procedures for programme accreditation. Aspects of student support are included
 in an agency standard entitled 'creative and personal development of students' and reports include
 information from site visits which involve an inspection of learning facilities including teaching
 rooms, library and IT provision. The accreditation procedure involves a survey of the
 satisfaction of teaching staff and students with working conditions and training.

The ARQA standards and procedures address ESG 1.6 for institutional accreditation. Programme accreditation includes lines of enquiry, including the inspection of learning facilities, that also fulfil the standard.

ESG 1.7 Information management

ARQA Standard 7, Organisations of higher and postgraduate education must ensure regular collection, analysis and use of relevant information for effective management of the organisation of higher and postgraduate education and other areas of their activities

- Institutional accreditation: the agency's standard on information refers to the need for the regular collection, analysis and use of relevant information for effective management of the organisation. Institutional investment in information management systems is indicated as an example of best practice in the report. It is noted to enhance procedures for collecting and monitoring information and for planning purposes. Smart technologies in campus infrastructure management and big data technologies also contribute to a high-tech unified information network for the management of the university.
- Programme accreditation: the agency's standard requires constant monitoring and periodic evaluation of the educational programmes to ensure that they are up-to-date.

The ARQA standards and procedures address ESG 1.7 for institutional accreditation. However, there is no specific focus on information management in programme accreditation.

ESG 1.8 Public information

ARQA Standard 8. Organisations of higher and postgraduate education should publish information about the implementation of educational programs in a timely manner.

• Institutional accreditation: the agency's standard is entitled 'Informing the public'. The accreditation procedure involves scrutiny of the institution's website and consideration of the availability of information for students and employers. Recommendations included the

- provision of information about employment and demand for graduates and improved systems for testing the accuracy of information about educational programmes.
- Programme accreditation: there is no specific agency standard for public information in the procedures for programme accreditation.

The ARQA standards and procedures address ESG 1.8 for institutional accreditation. There is no specific focus on public information in programme accreditation. This is an issue yet to be fully addressed.

ESG 1.9 Ongoing monitoring and periodic review of programmes

ARQA Standard 9. No direct comparison. This standard refers to Scientific activities management

- Institutional accreditation: there is only limited information about arrangements for the periodic review and monitoring of educational programmes in the report. It is identified by the expert panel that the institution should provide a '...documented procedure for monitoring, evaluating and updating educational programmes, taking into account the latest scientific achievements in specific disciplines, to ensure the relevance of the taught disciplines, control of the workload, progress and graduation of students, monitoring the educational environment and support system and their compliance with the goals of the programme.'
- Programme accreditation: the agency's standard requires constant monitoring and periodic evaluation of the educational programmes to ensure that they are up-to-date.

The ARQA standards and procedures partially address ESG 1.9 for institutional accreditation. There is no specific focus on monitoring and review in programme accreditation.

ESG 1.10 Cyclical external quality assurance

ARQA Standard 10. Educational organisations should undergo external quality assurance procedures in accordance with the European Standards and recommendations on a regular basis.

The ARQA standards and procedures make reference to the need for compliance with ESG 1.10 in both institutional and programme accreditation.

Conclusion

The detailed examination of the guidance for institutional and programme accreditation and the reports of reviews provide confirmation that the agency has developed standards that generally fulfil the expectations of Part I of the ESG 2015. The standards have also taken into account the requirements of the laws of Kazakhstan on education and the existing context of higher education. They are intended to assist educational organisations in developing their internal quality assurance systems and adopting best international academic standards.

The mapping of the agency's standards against ESG part I, whilst reasonably comprehensive, nonetheless indicates some areas of difference in interpretation and some gaps in coverage. The standards for institutional accreditation are a fairly close match, but those for programme accreditation are more reflective of the practices and priorities of subject disciplines.

It is recognised that the higher education system is currently engaged in an extensive programme of modernisation and reform in which institutions are expected to take more responsibility for their own quality and standards. In this context it is appropriate to view that the ESG and the accreditation standards provide a guide to the intended arrangements for quality assurance and a blueprint for institutional and programme development.

Panel commendations

2. The review panel commends ARQA on the incorporation of the spirit and purpose of ESG 2015 in the development of its standards for institutional and programme accreditation.

Panel recommendations

- 8. The agency should include the consideration of information management in its procedures for programme accreditation.
- 9. The agency should develop a specific standard for public information in the procedures for programme accreditation.

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.

Previous review recommendations

No previous recommendations as this is the agency's first review

Evidence

The agency conducts both institutional accreditation and programme accreditation. As stated in the SAR, and confirmed during the interviews with stakeholders, ARQA's processes and criteria have been developed, reviewed, and updated taking into account the relevant regulations and the ESG. Senior staff, stakeholders, members of the Accreditation Council and students have all been involved in the development process.

The methodology is based on approaches to quality assurance systems in the EHEA, which focus on the development of a quality culture and continuous improvement. It is a four-stage model involving self-assessment, external assessment by peers, publication of a report and follow-up procedures. The processes are defined in the agency's Regulation on the Procedure for Conducting Institutional and Programme Accreditation. There are separate documents defining the standards applied in institutional and programme accreditation. The Regulation on post-accreditation establishes the monitoring of the implementation of the experts' recommendations, based on the results of the institutional and programme accreditation. This involves the institution in the process of continuous feedback and development of its activities aimed at addressing its strategic challenges, as well as facilitating the improvements in the quality of education.

Changes in the national legislation have led to developments in the methodology. The standards for programme and institutional accreditation were revised in 2018, and in 2019-2020 a single set of standards were adopted for all levels of education, taking into account the specifics of each level. Further developments were introduced in 2022 following the production by the MOES of Quality Assurance Guidelines which are closely aligned to standards in the ESG. Procedures have been developed for amending the existing standards involving consideration of proposals by senior agency employees in line with the ESG and sign-off by the Director.

Analysis

The panel assessed the evidence, provided in the SAR and from the discussions with the agency staff and the Accreditation Council, regarding the procedures followed to develop and review the accreditation standards. The representatives from the Higher Education Institutions (HEIs) and students confirmed that the agency took their feedback into account. Moreover, the institutions indicated that the standards and the accreditation procedures were useful as a tool to develop their own internal quality assurance systems (IQAS).

However, the documents available to the panel did not define any specific mechanism explaining the agency's process for designing and updating the methodologies. For example, it is not explained which staff are responsible, how consultations on newly developed or revised methodologies are done, or how the feedback from stakeholders is collected. In the opinion of the panel, documents describing the procedures for the revision of existing methodologies and developing new approaches could be drawn up and integrated into the Quality Management System (ESG 3.6). The procedure for amendments or changes in the standards is included in the "Regulation on the procedure for conducting institutional/programme accreditation".

The review panel concluded that overall the procedures and standards developed by ARQA have been designed appropriately to meet the agency's aims and objectives, and are fit for purpose.

Panel commendations

3. The review panel commends ARQA on the involvement of student experts in the revision of ARQA's standards which is good practice and assures the importance of student involvement in the quality assurance processes in higher education.

Panel recommendations

10. The agency should formally establish the internal processes to develop, review and update standards and criteria, including defining the internal and external stakeholders involved in the processes.

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

Previous review recommendations

No previous recommendations as this is the agency's first review

Evidence

The agency's regulation on the procedure for conducting institutional and programme accreditation is published on the agency's website and is made available electronically to institutions that contract for accreditation services. The regulations set-out a six-stage process for the completion of an accreditation which involves: a preparatory stage, a self-assessment process, external assessment (site visit) by an expert panel, decisions on outcomes and recommendations, communication of results and follow-up procedures. In order to ensure consistency in approach, the agency provides detailed guidelines for the drafting of self-assessment reports for both institutional and programme accreditations. It also provides a report template that covers the main elements of the self-assessment procedure. ARQA offers training seminars for institutions to explain the methodology for accreditations and the requirements for an internal quality assurance system that addresses the agency's standards.

Once the self-assessment report is submitted to the agency it is reviewed by the members of the expert panel for the review to ensure that it complies with the agency's self-assessment guidelines. If accepted, the experts then conduct a critical assessment of the report's content to consider if the institution can progress to external assessment, involving a site visit.

The site visit normally takes 3-4 days and involves an evaluation of the institution's teaching and student support facilities and a programme of meetings with key groups and individuals. The agency has also prepared questionnaires to gather information and feedback from teaching staff and students. The expert panel prepares a report on the outcomes from the external assessment providing an account of the conduct of the assessment together with specific recommendations for improvement as well as examples of good practice. Draft reports are considered by the Experts Council for consistency and compliance with established requirements. The final decision on the outcome of the review is taken by the Accreditation Council and communicated to the institution.

ARQA has developed a programme of post-accreditation activity to ensure that the recommendations of the expert panel are implemented and to maintain an engagement with the institution to facilitate further improvements in the internal quality assurance arrangements. The agency conducts post-accreditation monitoring throughout the entire period of the accreditation. Proposed actions are detailed in an action plan which is monitored by the agency through the receipt of interim reports from the institution. Accreditation is awarded for a specified time period (1, 3 or 5 years) after which the institution needs to submit an application for re-accreditation.

Analysis

The site visit provides the opportunity for the experts to review the institution's facilities and to meet with all groups of stakeholders. The evidence from the reports of both institutional and programme accreditations indicate that experts engage in constructive discussions and identify recommendations and examples of good practice.

The reports of institutional and programme accreditation reviews provide evidence of the implementation of the agency's accreditation procedures. It is apparent that the institutions' self-assessment process identifies issues for development and improvement. Institutions are encouraged to express their perceived strengths and weaknesses by the use of a SWOT analysis and to plan improvements as appropriate. Expert panels conduct an assessment of the compliance with the agency's standards and provide an analysis of the extent to which each standard meets the expectations.

Particular attention is given to the follow-up procedures through the arrangements for post-accreditation monitoring. These ensure that the recommendations made by the expert panels are translated into comprehensive action plans which are reported on a regular basis. Failure to submit

interim reports may result in the suspension of accreditation certificates. Experts report to the Accreditation Council on post-accreditation monitoring and whether the actions meet the expectations of the action plan.

The agency's approach to accreditation is primarily defined by its underlying mission to promote the development of a quality culture in educational organisations. The assessment of institutional performance is supported by guidance on how the accreditation process is implemented and by training on the methodology and how institutions can fulfil the expectations of the agency's standards. This approach defines accreditation as a process rather than an event. It is developed over an extended time period, beginning with the critical self-assessment of what an institution currently does to assure the quality of its provision. It then takes advantage of the advice and guidance given by experts and feedback from the agency, to put in place comprehensive plans for the improvement of institutional practices and the quality of programmes. Finally, it reports on the effectiveness of its actions through the subsequent re-accreditation process.

Panel commendations

- 4. The review panel commends ARQA on the support provided for institutions in preparing for accreditation including the detailed guidance on the conduct of self-accreditation activities and the preparation of a report.
- 5. The panel also commends ARQA on the comprehensive arrangements for following-up on the outcomes of accreditation in support of continuing developments in the quality assurance.

Panel conclusion: 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).

Previous review recommendation

No previous recommendations as this is the agency's first review

Evidence

External reviews are carried out by a group of experts including academic staff, an international expert, employers' representatives, and student representatives. Institutional accreditations are carried out by groups of 4-5 experts, whereas for programme accreditation experts are selected for each evaluated Educational Programme. The international expert and the student expert assesses all the programmes reviewed. Expert groups have a group head who is responsible for preparing the external review, distributing the roles to each panel member and drafting the report for submission to the agency. The expert panel members are selected based on their qualifications and experience. For programme accreditation, the selection process is based on the national classification framework. The agency has set clear requirements for selection based on its Regulation for Experts. The Experts Council has a role in assuring that proposed experts have the competence and expertise for proposed accreditations and advices on the final panel composition. Experts are either recommended by a higher education institution, or by an existing reviewer. Alternatively they can apply directly to the agency for consideration. For all accreditation reviews experts sign a contract with the agency detailing their

obligations and responsibilities, including compliance with the agency's code of ethics and avoidance of conflicts of interest.

Reports are written by the whole team, including the international expert and the student expert. The report is drafted in accordance with the guidance in the 'Rules for developing a report on the results of external assessment of the activities of educational organisations and delivery of educational programmes'.

The selection process of the experts is based on recruitment criteria for each category of expert. Academic experts need to meet qualitative and quantitative requirements including independence from the institution under review. Individuals who want to become experts are selected based on university recommendations or by applying on the ARQA website. The international experts are members of the international expert's pool. They are recruited on their knowledge and experience of quality assurance in higher education. Not all the international experts are English-speaking experts. The criteria for the employers' representatives are based on their involvement in business and industry, but also their experience in the implementation of QA processes. The criteria for students is based on their academic achievements and their involvement in student organisations as well as experience in quality assurance. The students are recruited through the national student's organisation and also by recommendation from universities. The student experts have the same rights as all the other panel members and are involved in all the procedures of the accreditation process. At the moment of the site visit, the expert pools for each category of experts were not published on ARQA's website.

The experts must adhere and comply with the agency's code of ethics for experts. For each category of experts, the agency is organising periodical training in order to assure that the experts are well prepared for every review that they are selected for. Also, a training is organised by the agency for each panel of experts immediately before the site visit to set out and discuss all the necessary details specifically for each review. The agency has also arranged specific training for student experts to emphasise their role on the panel and their understanding of how to apply the standards.

Analysis

ARQA has well established procedures for the recruitment and selection of panel experts. It has developed procedures for the expert reviewers to assure a transparent process of selection and to avoid any conflict of interests. The procedure for applying to become an expert is not currently well displayed on the agency's website. In the section on 'apply now', both options for HEIs application for accreditation and invitation to become an expert are on the same webpage. Because of this, there is a misunderstanding about each procedure. The agency provides periodic training for all experts, but more could be done to ensure that all experts, including the international experts are involved in the training.

The agency has established criteria for the selection of international experts who bring accreditation experience into the agency's procedures. However, their functions are not clearly defined. The agency finds it necessary to accommodate individual requirements and preferences which may mean that their contribution may be limited. Experts are selected mainly from those who can speak and write in Russian. This limits the transfer of international experience to the agency's activities.

Panel recommendations

- 11. The agency should publish the list of experts for all the categories on their website.
- 12. The agency should provide more periodic training for each category of expert.
- 13. The agency should ensure that the procedure for applying to become an expert is more clearly displayed on its website.
- 14. The agency should assure that the international experts have an equal role in the panel and participate in all the procedures regarding each review.

Panel suggestions for further improvement

- 6. The agency could try to ensure the diversity of international experts by recruiting from a wider range of countries.
- 7. The agency could attract more English-speaking international experts to ensure transfer of broader international experience to the Kazakhstan higher education system.

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.

Previous review recommendation

No previous recommendations since it is the first external review.

Evidence

The agency's process for accreditation is detailed in its Regulation on the Procedure for Conducting Institutional/Programme Accreditation. The guide includes defined decision criteria for the outcomes from external assessment. The formal decision is made by the Accreditation Council which can specify one of the following outcomes: full accreditation, conditional accreditation, accreditation deferral or accreditation rejection.

Full accreditation is given in cases where an educational organisation or programme has no identified shortcomings and fully meets the criteria of the standards for institutional programme accreditation. If such a decision is made by the Accreditation Council, an educational organisation or programme is granted accredited status and is issued an accreditation certificate for a period of five years.

Conditional accreditation involves the imposition of requirements for changes as the procedure reveals shortcomings in the content of programmes or structural irregularities that must be addressed during the validity period of the conditional accreditation. The institution is granted an accredited status and certificate for a period of up to three years. After the expiration of the conditional accreditation period, the agency conducts a further external assessment in accordance with the agency's accreditation standards. If successful, accreditation is extended to the full five years.

Accreditation deferral is a decision made on the basis of the educational organisation's application. It should indicate the reasons and the period for the deferral, during which the organisation has the right to apply for the procedure resumption. When the procedure is resumed, if necessary, decisions can be made to repeat the stages of the accreditation procedure.

Accreditation rejection decision is made if there are significant shortcomings in the content of programmes or structural irregularities that indicate non-compliances with the criteria of the standards for institutional or programme accreditation.

Since the commencement of its accreditation activities the agency has awarded full accreditation for all of its reviews. There is a process of pre-filtering those higher education organisations that are most likely to meet the agency's criteria. Submissions are analysed by an expert who carefully examines

them for completeness and information, and critically to establish whether the content of the report meets the expected standards for accreditation. An expert conclusion report is prepared based on the information provided which may lead to one of three outcomes: the report needs to be finalised; to conduct an external assessment; or rejection of the application. After receiving the expert conclusion report the institution has 30 days to finalise their self-assessment report to address any issues identified. If the revised report complies with ARQA requirements the agency sends experts for an external evaluation (site visit).

Analysis

The procedures for accreditation are clearly stated in the Regulation and the decisions taken by the Accreditation Council are based on defined criteria. This ensures the objectivity and reliability of the outcomes. There are differences in the formulation of the criteria for accreditation decisions and length of the accreditation in the Regulation on procedure for conducting program/ institutional accreditation and the Regulation on the Accreditation Council (2018). In the Regulation on procedure for conducting program/ institutional accreditation (art. 20, p. 8) in the case of conditional accreditation the period for issuing the certificate is mentioned as three years, but in the Regulation on Accreditation Council (art. 7.5.3., p.9) it is 'one or three years'. In the Regulations of the Accreditation Council, it is mentioned that 'the decision on conditional accreditation for a period of one year is given in cases of complete non-compliance with one criteria of any standard. The decision on conditional accreditation for a period of three years is made in cases of incomplete compliance with one criterion (all sub-criteria, if the criterion has sub-criteria) of any standard' (art. 7.5.3., p. 9).

The outcome judgement criteria are defined in the Regulation on procedure for conducting program/ institutional accreditation but not described in detail in available information on the website (https://arqa.agency/en/accreditations - in Russian). On the website the period of conditional accreditation is three years.

Panel recommendations

15. The agency should confirm alignment of the criteria for outcomes in the Regulation on procedure for conducting program/institutional accreditation and Regulation on Accreditation Council, as well on the website, to ensure the consistent application of the information for decisions on formal outcomes.

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.

Previous review recommendation

No previous recommendations since it is the first external review.

Evidence

The full reports and formal decisions including the period of accreditation for both institutional accreditation and program accreditations are available on the agency's website (in Russian version of

website) in Russian. The reports on programme accreditation are available in Russian also in for both the Russian and English versions of the website which is not the case for institutional reports.

The reports include a general characteristic of the educational organisation/programme, description of the procedure, including experts involved, documentary and factual materials, analysis and identified results, conclusions, examples of good practices and recommendations on follow-up actions. There is the same structure for both institutional and programme accreditation. According to the Regulations on the procedure for conducting institutional / programme accreditation the reports on the external evaluation are sent to the educational organisations for "technical or factual inaccuracies" check-up before reports are forwarded to the Accreditation Council for decision making.

Decisions by the agency are published together with a report indicating the time period for accreditation in the Russian version of the website. In the English version of the website the accreditation period is available for both institutional and programme accreditation.

Analysis

The reports are well structured and understandable to the general academic community, external partners and other interested individuals. Regarding the readability there are different formats for the reports available for the institutional and programs accreditation on the website in Russian. The reports on institutional accreditation are in a format that is difficult to read. The reports of study programs are available in a downloadable document format that is more accessible in comparison with the reports of educational organisations on the website in Russian. More could be done in general to improve the accessibility and readability of the accreditation reports on the website. The summary of both institutional and programme reports in English and its publishing on the English version of the website would ensure accessibility for the public.

There is also a need for close monitoring of the accuracy of information published on the website. For example, the not-for-profit joint stock company Makhambet Utemisov West Kazakhstan University, is listed on the website, in English and in Russian, as having acquired institutional accreditation for 11 years. There are other occasions when under the section for Institutional accreditation on the website in English, the reports of programme accreditation are published. Instead of this, a summary version of the institutional accreditation reports in English could be published. The date when the decision was taken by the Accreditation Council is also missing on the website in English for the not-for-profit joint stock company Makhambet Utemisov West Kazakhstan University.

Panel recommendations

16. The agency should improve the accessibility and readability of the accreditation reports on its website.

Panel suggestions for further improvement

8. The agency could ensure consistency of decisions and information published related to the institutional and programme accreditation on its website.

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.

Previous review recommendations

No previous recommendations since it is the first external review.

Evidence

The procedure to handle complaints and appeals is defined in the Rules for the Review of Complaints and Appeals. This document was recently updated and the new version was made available to the panel for the site visit and is currently published on ARQA's webpage. A meeting with the newly appointed Appeals Commission was held during the site visit to discuss the role of the Commission.

The Rules for the Review of Complaints and Appeals establish two different situations:

- Handling complaints. Written or oral complaints about the action/inaction of officials or experts during the accreditation procedure are considered and the decision is taken by the Director.
- Consideration of appeals. Only written applications regarding experts' opinions, decisions
 on accreditation or results of the post-accreditation monitoring are considered.

The institutions' right to file an appeal is stated in the Accreditation Contract and in the Guidelines for Institutional/Programme Accreditation of the Organisation of Higher and Postgraduate Education.

The appeal application is submitted to the agency's Accreditation Council. In the first version of the Rules for the Review of Complaints and Appeals, sent with the SAR, an Appeals Commission was created "ad hoc" (min three members among reputable scientists and practitioners and no students). The current version of the rules establishes that the Appeals Commission consists of three permanent members and two members involved in the appeal under consideration (expert-student; expert-employer). The Appeals Commission makes a recommendation to the Accreditation Council that makes the final decision.

Until now, there have been no appeals from institutions and very few complaints, which were resolved by the Director.

Analysis

The complaints and appeals procedures clearly explain the reasons for which a complaint or an appeal can be lodged, and how it will be considered. Although students may be asked to participate as experts for individual cases they are not included as a permanent member of the Appeals Commission. The effectiveness of the procedures are yet to be tested in the case of appeals as none have so far been submitted.

The panel considers that the transparency of the appeals process is undermined by the arrangement that the final appeals decision is taken by the Accreditation Council, which is the same body that has taken the decision that is challenged by the appeal. The role of the Appeals Commission is limited to making a recommendation to the Accreditation Council. The Accreditation Council holds a second vote, the outcome of which is final and not subject to revision.

In the view of the panel the agency should enable the Appeals Commission to have the authority to make final decisions, with no involvement of the Accreditation Council in the appeals process. The findings of the Appeals Commission should be based on sound evidence of procedural irregularity or

the availability of critical evidence that was not presented to the Accreditation Council. In this scenario, it would be even more important for ARQA to ensure consistency in the decision-making in the appeals processes.

Panel recommendations

17. The agency should separate the decision-making of the accreditation and appeals processes by allowing the Appeals Commission to overturn the decisions made by the Accreditation Council.

Panel suggestions for further improvement

9. The agency could consider having a student member as a permanent member of the Appeals Commission.

Panel conclusion: partially compliant

CONCLUSION

SUMMARY OF COMMENDATIONS

ESG 3.1 ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE

I. The review panel commends ARQA on the comprehensive reporting of the conduct and outcomes of accreditation reviews.

ESG 2.1 CONSIDERATION FOR INTERNAL QUALITY ASSURANCE

2. The review panel commends ARQA on the incorporation of the spirit and purpose of ESG-2015 in the development of the agency's standards for institutional and programme accreditation.

ESG 2.2 Designing Methodologies Fit for Purpose

3. The review panel commends ARQA on the involvement of students in the revision of ARQA's standards, which is good practice and assures the importance of the student involvement in the quality assurance processes in higher education.

ESG 2.3 IMPLEMENTING PROCESSES

- 4. The review panel commends ARQA on the support provided for institutions in preparing for accreditation including the detailed guidance on the conduct of self-accreditation activities and the preparation of a report.
- 5. The review panel also commends ARQA on the comprehensive arrangements for following-up on the outcomes of accreditation in support of continuing developments in the quality assurance.

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

ESG Part 3: QUALITY ASSURANCE AGENCIES

ESG 3.1 ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE

I. The agency should consider greater involvement of students in its governance arrangements including membership of the Experts Council.

Panel conclusion: compliant

ESG 3.2OFFICIAL STATUS

Panel conclusion: compliant

ESG 3.3 INDEPENDENCE

- 2. The agency should reconsider its governance structures to ensure that the organisational independence is formally secured by separating the roles of Founder and Director.
- 3. The agency should reconsider the remit of the Experts Council to secure its advisory role and organisational independence.

Panel conclusion: partially compliant

ESG 3.4 THEMATIC ANALYSIS

4. The agency should take a more in-depth approach to analysing findings from its accreditation procedures and publish these thematic reports on its website.

5. The agency should plan for future regular publications and provide the necessary resources for conducting research and preparing thematic reports.

Panel conclusion: partially compliant

ESG 3.5 RESOURCES

Panel conclusion: compliant

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

- 6. The agency should ensure that all documents are updated according to the deadlines stated.
- 7. The agency should implement developments to its IQA system. It is necessary that the agency ensures that the cycle of continuous quality improvement is completed. For example, with the incorporation of a plan of improvement actions.

Panel conclusion: compliant

ESG 3.7 CYCLICAL EXTERNAL REVIEW OF AGENCIES

Panel conclusion: compliant

ESG PART 2: EXTERNAL QUALITY ASSURANCE

ESG 2.1 CONSIDERATION OF INTERNAL QUALITY ASSURANCE

- 8. The agency should include the consideration of information management in its procedures for programme accreditation.
- 9. The agency should develop a standard for public information in the procedures for programme accreditation.

Panel conclusion: compliant

ESG 2.2 DESIGNING METHODOLOGIES FIT FOR PURPOSE

10. The agency should formally establish the internal processes to develop, review and update standards and criteria, including defining the internal and external stakeholders involved in the processes.

Panel conclusion: compliant

ESG 2.3 IMPLEMENTING PROCESSES

Panel conclusion: compliant

ESG 2.4 PEER-REVIEW EXPERTS

- 11. The agency should publish the list of experts for all the categories on their website
- 12. The agency should provide more periodic training for each category of expert.
- 13. The agency should ensure that the procedure for applying to become an expert is more clearly displayed on its website.
- 14. The agency should assure that the international experts have an equal role in the panel and participate in all the procedures regarding each review.

Panel conclusion: compliant

ESG 2.5 CRITERIA FOR OUTCOMES

15. The agency should confirm alignment of the criteria for outcomes in the Regulation on procedure for conducting program/institutional accreditation and Regulation on Accreditation Council, as well on the website, to ensure the consistent application of the information for decisions on formal outcomes.

Panel conclusion: compliant

ESG 2.6 REPORTING

16. The agency should improve the accessibility and readability of the accreditation reports on its website.

Panel conclusion: compliant

ESG 2.7 COMPLAINTS AND APPEALS

17. The agency should separate the decision-making of the accreditation and appeals processes by allowing the Appeals Commission to overturn the decisions made by the Accreditation Council.

Panel conclusion: partially compliant

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, the Independent Agency for Recognition and Quality Assurance in Education is in compliance with the ESG.

SUGGESTIONS FOR FURTHER IMPROVEMENT

ESG 3.1 ACTIVITIES, POLICY AND PROCESSES FOR QUALITY ASSURANCE

I. The agency is encouraged to consider ways of promoting a focus on quality enhancement as part of its procedures for accreditation.

ESG 3.4 THEMATIC ANALYSIS

2. The agency could develop a clear process for identifying the topics for thematic analysis as part of its quality management system.

ESG 3.5 RESOURCES

3. The agency could develop a comprehensive plan to cover future predicted workload which will assist with ensuring the capacity for managing operations.

ESG 3.6 INTERNAL QUALITY ASSURANCE AND PROFESSIONAL CONDUCT

- 4. The agency could consider more developmental approaches to quality, including quality enhancement.
- 5. The agency could include in its quality management documentation a general process map where all the processes and their relations and interactions could be seen.

ESG 2.4 PEER-REVIEW EXPERTS

- 6. The agency could try to ensure the diversity of international experts by recruiting from a wider range of countries.
- 7. The agency could attract more English-speaking international experts to ensure transfer of broader international experience to the Kazakhstan higher education system.

ESG 2.6 REPORTING

8. The agency could ensure consistency of information published related to the institutional and programme accreditation on its website.

ESG 2.7 COMPLAINTS AND APPEALS

9. The agency could consider having a student member as a permanent member of the Appeals Commission.

ANNEXES

ANNEX I: PROGRAMME OF THE SITE VISIT

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	
	28 September 2022 - Online meeting with the agency's resource person			
	09.30 – 11.30 CET	Review panel's kick-off meeting and preparations for site visit		
	11.30 – 13.00 CET	An online clarifications meeting with the agency's resource person regarding the specific national/legal context in which an agency operates, specific quality assurance system to which it belongs and key characteristics of the agency's external QA activities	Advisor to the Director Advisor for international cooperation	
		2 October 2022 – Day 0 (pre-	visit)	
	16.00 – 18.00	Review panel's pre-visit meeting and preparations for site visit		
		3 October 2022 – Day I		
	09:00 – 09:30	Review panel's private meeting to consider the agenda for Day I		
I	09.30 - 10:00		I. Manager for international cooperation	
2	10:00 – 11:00	Introduction to the role of the agency, its current activities and vision for the future.	I. ARQA Director	
		Review panel's private meeting		
3	11:15 – 12:15	Meeting with the ARQA team responsible for the preparation of the self-assessment report	 Advisor to the Director Deputy Director Manager for HEIs Accreditation Manager for international cooperation 	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
	12:15 – 13:00	Lunch (panel only)	
4	13:00 – 14:00		 ARQA Director Deputy Director Adviser to the Director
	14:00 – 14:15	Review panel's private meeting	
5	14:15 – 15:15	Meeting with Department Leaders	 Director of HEIs Accreditation Department Manager for International Cooperation
	15:15 – 15:30	Review panel's private meeting	
6	15:30- 16:15	Meeting with other agency staff	 Coordinator of HEIs Accreditation Department Accountant Lawyer Office Manager
	16:15 – 16:30	Review panel's private meeting	
7	16:30 – 17:30		1. Chair of the Accreditation Council 2. Director of Centre for Innovative Educational Technologies at Angel Kanchev University of Ruse 3. Rector of Alikhan Bokeikhan University 4. Head of the Management Department of the Economics Faculty at L.N. Gumilyov Eurasian National University 5. Professor of the Jurisprudence Department at S. Amanzholov East Kazakhstan University 6. Director of the Karaganda Commercial College 7. Vice dean for Science and Quality management at M.Kozybayev North Kazakhstan University 8. Expert of Department of Human Resources Development at Atameken National Chamber of Entrepreneurs 9. Jurisprudence student at Karaganda University of Kazpotrebsoyuz

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
	17:30 - 18:15	Wrap-up meeting among panel members and preparations for day 2	
		Dinner (panel only)	
		4 October 2022 – Day 2	
	09:00 – 09:30	Review panel's private meeting to consider the agenda for Day 2	
8	09:30 – 10:30	Meeting with members of the Experts Council	 Vice President at Astana International University Vice Rector for Science and International Relations at Pavlodar Pedagogical University Member of the Ulytau Educational Foundation» Board of Trustees Dean of Faculty of Physics, Mathematics and Information Technologies at Toraighyrov University
	10:30 - 10:45	Review panel's private meeting	
9	10:45 – 11:45		Associate Professor of the Higher School of Natural Sciences at Pavlodar Pedagogical University Associate Professor of Physical and Economic Geography Department at L.N. Gumilyov Eurasian National University Associate Professor of Economics Department at Toraighyrov University Associate Professor of the Higher School of Natural Sciences at Pavlodar Pedagogical University Associate Professor of Computer Science Faculty (Information Technologies EP) at Toraighyrov University Head of the Management and Innovations Department at Karaganda University of Kazpotrebsoyuz

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
			7. Researcher at the Laboratory of Geoinformation Systems, Institute of Geography and Water Safety 8. Deputy Director of Nazarbayev Intellectual School of Chemistry and Biology
	11:45 – 12:00	Review panel's private meeting	
10	12:00 – 12:45	Meeting with international experts (including representatives from Kyrgyzstan)	Director of Centre for Innovative Educational Technologies at Angel Kanchev University of Ruse Director of the Sapattuu Bilim Accreditation Agency Head of the Economics and Econometrics Department at Altay State University Head of the Chair of Linguistics and History of Slavic Languages at Dresden University of Technology Professor of Energy Supply and Automation of Technological Processes Department at South Ural State Agrarian University
	12:45 – 13:30	Lunch (panel only)	
II	13:30 – 14:30	Meeting with student representatives (members of Accreditation Council and students involved in reviews)	 4th-year Jurisprudence student at Toraighyrov University 4th-year Informatics student at Abai Kazakh National Pedagogical University 4th-year Tourism student at Utemisov West Kazakhstan University 4th-year Foreign Languages: Two Foreign Languages student at Pavloadar Pedagogical University 2nd-year International Law student at M. Narikbayev KAZGUU University 3rd-year Information Systems PhD Student at L.N. Gumilyov Eurasian National University
	14:30 – 14:45	Review panel's private meeting	

SESSION	TIMING	TOPIC	PERSONS FOR INTERVIEW
NO.	14:45 – 15:45	Meeting with representatives of higher education institutions that have been involved in institutional and/or programme accreditation (both activities should be represented)	Rector of Shoqan Ualikhanov Kokshetau University Rector of Serikbayev East Kazakhstan Technical University Vice Rector for Academic Affairs at Toraighyrov University Vice Rector for Academic Affairs at Kazakh National Women's Teacher Training University Vice Rector For Strategic Development at Karaganda Industrial University Vice Rector for Academic Affairs at Dosmukhamedov Atyrau University Toirector of Academic Quality Improvement Department at Zhubanov Aktobe Regional University
	15:45 – 16:00	Review panel's private meeting	,
13	16:00 – 17:00	Meeting with representatives from the national authorities, including the Ministry of Education and Science	Chief Expert of the Committee for Quality Assurance in the Field of Education and Science of MOES Head of the Content and Internationalisation of Higher Education of the Committee of Higher and Postgraduate Education of MOES
	17:00 – 18:00	Wrap-up meeting among panel members: preparations for Day 3 and provisional conclusions	
		Dinner (panel only)	
		5 October 2022 – Day 3	
	09:00 – 09:30	Review panel's private meeting to review the agenda for Day 3 and agree on final issues for clarification	
14	09:30 – 10:15	Meeting with the Appeals and Complaints Commission	Doctor of Historical Sciences, Professor, Academician of the Academy of Humanities of the Republic of Kazakhstan

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW
			2. Vice-rector for scientific work and interaction with
			the region at Ualikhanov Kokshetau University, Doctor
			of Philological Sciences, Professor
			3. Dzhumat Kargin (online) –
			Researcher of the Department of Technical Physics at
			L.N. Gumilyov Eurasian National University
	10:15 – 10:30	Review panel's private meeting	
15	10:30 – 11:00	Meeting with the Director and Advisor to the Director	I. ARQA Director
		to discuss any outstanding issues	2. Advisor to the Director
	11:00 – 12:00	Private meeting between panel members to agree on	
		the main findings of the review	
16	12:00 – 12:15	Visit to the agency premises	
	12:15 – 12:30	Review panel's private meeting	
17	12:30 - 13:00	Final de-briefing meeting to inform about preliminary	I. ARQA Director
		findings	2. Advisor to the Director
			3. Director of HEIs Accreditation Department
			4. Manager for International Cooperation
	13:00 – 14:00	Lunch (panel only)	

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

External review of the Agency for Recognition and Quality Assurance in Education (ARQA) by ENQA

Annex I: TRIPARTITE TERMS OF REFERENCE BETWEEN ARQA, ENQA AND EQAR February 2022

I. Background and context

«ARQA» the independent agency for recognition and quality assurance in education was established in 2015. The Agency is a non-profit non-governmental organisation for the implementation of institutional and specialised accreditation procedures, and other functions to create an effective system for assessing technical and vocational education, higher and postgraduate education. The agency's mission is dissemination of the quality culture ideology in the Agency's field of activity.

The «ARQA» agency was established to carry out procedures for institutional and specialised accreditation, rating educational organisations and independent assessment of the qualifications of specialists and other functions to create an effective system for assessing the quality of technical and vocational education (TVET), higher and postgraduate education.

The Agency provides information to the public about the standards for ensuring the quality of education, guidelines for carrying out certain procedures, about the results of assessing the quality of educational programs and the activities of educational organisations by posting the results of an external assessment of educational organisations and / or educational programs on the agency's website, informing the Ministry of Education and Science of the Republic of Kazakhstan on the results of an external evaluation of educational organisations and / or educational programs.

ARQA has been an affiliate of the European Association for Quality Assurance in Higher Education (ENQA) since 2019 and is applying for ENQA membership.

ARQA is applying for inclusion on EQAR.

2. Purpose and scope of the review

This review will evaluate the extent to which ARQA 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 ENQA membership and/or for EQAR registration.

2.1 Activities of the agency within the scope of the ESG

To apply for ENQA membership 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 of higher and postgraduate education
- Specialized (programme) accreditation of higher and postgraduate education

The following activities of the agency are outside of the scope of the ESG and are not relevant for the application for inclusion on EQAR:

- Institutional accreditation of TVET
- Programme accreditation of TVET

Should anything change between now and the review, including introduction or change of the activities within and outside of the scope of the ESG, the agency should inform EQAR at the 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 ARQA, ENQA and EQAR (including publishing of the Terms of Reference on ENQA's website¹);
- 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 selfassessment 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;
- A decision from the ENQA Board on ENQA membership;
- 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

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¹ The agency is encouraged to publish the ToR on its website as well.

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 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/reconfirmed membership with ENQA or 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 Agencies² to ensure that the report contains sufficient information for the Register Committee to consider the agency's application for registration on EQAR.

² Available at: https://www.eqar.eu/about/official-documents/#use-and-interpretation-of-the-esg

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.

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. In the case of an unsuccessful application to EQAR, the report may also be used by the ENQA Board to reach a conclusion on whether the agency can be admitted/reconfirmed as a member of ENQA. The review process is thus designed to serve two purposes. In any case, 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 or ENQA membership.

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 and before the decision on ENQA membership by the ENQA Board.

To apply for ENQA membership, the agency is also requested to provide a letter addressed to the ENQA Board outlining its motivation for applying for membership and the ways in which the agency expects to contribute to the work and objectives of ENQA during its membership. This letter will be considered by the Board together with the confirmation of EQAR listing when deciding on the agency's membership. Should the agency not be granted the registration in EQAR or the registration is not renewed, the decision on ENQA membership will be taken based on the final review report, the application letter, and the statement from the Agency Review Committee. The decision on membership will be published on ENQA's website.

5. Indicative schedule of the review

Agreement on Terms of Reference	January 2021
Appointment of review panel members	March 2022
Self-assessment completed	31 May 2022
Screening of SAR by ENQA Review Coordinator	June 2022
Preparation of the site visit schedule and indicative timetable	July 2022
Briefing of review panel members	September 2022
Review panel site visit	October 2022
Draft of review report and its submission to ENQA Review	December 2022
Coordinator for verification of its compliance with the	
Guidelines	
Draft of review report to be sent for a factual check to the	January 2023
agency	
Agency statement on the draft report to the review panel (if	January 2023
necessary)	
Submission of the final report to ENQA	February 2023
Validation of the review report by the Agency Review	March 2023
Committee	
Publication of report	March 2023
EQAR Register Committee meeting and initial consideration	Spring/Summer 2023
Decision on ENQA membership by the ENQA Board	Summer/Autumn 2023
	(TBC, depending on EQAR
	RC meeting)

ANNEX 3: GLOSSARY

ARQA Independent Agency for Recognition and Quality Assurance in Education

ENQA European Association for Quality Assurance in Higher Education

EO educational organisation EP educational programme

EFQM European Foundation for Quality Management

EHEA European Higher Education Area

EQA external quality assurance

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

ISO International Organisation for Standardisation

IQAS Internal Quality Assurance System

MOES Ministry of Education and Science of the Republic of Kazakhstan

NAC National Accreditation Centre

PDCA Plan-Do-Check-Act
QA quality assurance

QMS quality management system SAR self-assessment report

STEM Science, Technology, Engineering and Mathematics

SWOT Strengths, weaknesses, Opportunities and Threats - analysis

TVET Technical and Vocational Education and Training

ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY ARQA

Self-Assessment Report for the External Review of the Agency for Recognition and Quality Assurance in Education (ARQA) by ENQA

ARQA Charter

ARQA Institutional Accreditation Standards 2022

ARQA Programme Accreditation Standards 2022

ARQA revenues and expenses 2020-2022

Annual Report submitted to the Ministry (2020)

Annual Report submitted to the Ministry (2021)

Annual plan of activities and developments for 2022-2023

Agency's accreditation activities over the past 5 years

Institutional Accreditation Report

Programme Accreditation Report

Quality Manual

Quality Policy at ARQA

Quality Objectives at ARQA

Regulation on the Accreditation Council

Regulation on expert councils

Rules for the Review of Complaints and Appeals

Self-assessment guidelines for institutional/programme accreditation

Strategic Development Plan 2018-2022

OTHER SOURCES USED BY THE REVIEW PANEL

Guidelines for Quality Assurance in Education (2022) Ministry of Education and Science

Merril, M. (2019) Differences in International Accreditation: Kyrgyzstan and Kazakhstan. Asian Education and Development Studies, vol 9, No 4, pp. 465-478

National report on the state and development of the education system of the Republic of Kazakhstan (2020), Ministry of Education and Science

On Education: The Law of the Republic of Kazakhstan (2007)

Rules for the recognition of accreditation bodies (2021) Ministry of Education and Science

Register of the Ministry of Education and Science of the Republic of Kazakhstan, Ministry of Education and Science enic-kazakhstan.edu.kz/en/accreditation/accredited_organizations

