

ENQA AGENCY REVIEW

INDEPENDENT KAZAKHSTAN CENTER OF ACCREDITATION (IKCA)

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24 FEBRUARY 2025

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EXECUTIVE SUMMARY

The Report presented below summarizes the findings, evidence and conclusions, as established by the external review panel (further referred to as: 'panel'), in the focused review of the 'Independent Kazakhstan Center of Accreditation' (IKCA), coordinated by the European Association for Quality Assurance in Higher Education (ENQA). The review included the revision of the Agency against the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), following the methodology described in the Guidelines for ENQA Agency Reviews, and as described below.

In 2022, IKCA underwent its first full ENQA review according to the ESGs, for the purpose of ENQA registration. In 2024, the ENQA Board rejected IKCA's application to ENQA, based on the aforementioned report, and in particular, the judgements on non-compliance for the following standards: *ESG 2.5 Criteria for outcomes*, and *ESG 2.6 Reporting*. Additionally, ICA was found to be partially-compliant with: *ESG 3.3 Independence*, *ESG 3.4 Thematic analysis*, *ESG 3.6 Internal quality assurance and professional conduct*, *ESG 2.1 Consideration of internal quality assurance*, *ESG 2.2 Designing Methodologies fit for purpose*, and *ESG 2.3 Implementing processes*. Following the 2022 review, IKCA also applied for membership in The European Quality Assurance Register for Higher Education (EQAR), which was rejected in December 2023, by EQAR's Register Committee, due to the same concerns expressed by the ENQA Board. However, it is relevant to note that EQAR found IKCA to be non-compliant only with the *ESG 2.5 Criteria for outcomes*, whilst the Register Committee found IKCA to be compliant with *ESG 2.6 Reporting* and *ESG 2.3 Implementing processes*. All the other compliance judgements remained the same as those made by ENQA. Following these processes, IKCA requested an ENQA focused review for the purposes of reapplying to EQAR. This focused review therefore covers six standards of the Part 2 and Part 3 of the ESG. The review period was August 2024 – March 2025, with the site visit taking place from November 6th 2024 to November 8th 2024.

IKCA is a non-governmental and non-profit institution with the status of a legal entity. It was established in 2016 by another legal entity, however, in 2023, IKCA was sold, and the current founder is a person with a governing role in IKCA, as defined by the agency's Charter. The agency is actively applying international standards (such as ESGs) in their accreditation procedures on different levels of education (such as vocational training, higher education), and is collaborating with international organizations as a part of their mission. In the context of this review, quality assurance procedures performed by the panel referred only to higher education-related structures and processes within IKCA.

Since the ENQA external review of IKCA in 2022, IKCA invested considerable effort into amending existing documents, among which are the Charter, existing standards and guidelines, internal regulations etc. Most changes to the documents were adopted late in 2023 (from September 2023 onwards mostly), therefore, the panel considered only the period after the adoption of the newly amended or adopted documents, when referring to the gathered evidence for the standards analysed. Those standards were:

- a) ESG 2.1 Consideration of Internal Quality Assurance.
- b) ESG 2.2 Designing Methodologies Fit for Purpose.
- c) ESG 2.5 Criteria for Outcomes.
- d) ESG 3.3 Independence.
- e) ESG 3.4 Thematic Analysis.
- f) ESG 3.6 Internal Quality Assurance and Professional Conduct.

Overall, the panel found that, despite the adoption of new documents, in many cases the practical implementation of those documents was lacking due to different reasons, such as a recent adoption, a recent amendment, an inconsistent translation of documents etc. Significant improvement was noted

for ESG 3.4, where thematic analyses were introduced into IKCA's development strategy for 2023-2027, and the panel was provided with evidence of topics and themes IKCA plans on publishing each year. The panel found IKCA to be partially compliant with ESGs 3.3, 2.1, 2.2 and 3.6; and non-compliant with the ESG 2.5. Concerning ESG 3.3, the panel made the judgement on compliance based on the fulfilment of the criteria set by the Terms of Reference (ToR; see Annex 2) for this review. The panel was able to collect evidence on the independence of the agency from its founder. Concurrently, no evidence was found of the equal involvement of stakeholders in the governance of IKCA (due to their very recent addition to the Working Group where they did not participate in any decision-making procedures or the selection processes at IKCA). The panel also reported on the lack of clarity regarding selection processes and criteria for members of different bodies of IKCA. The biggest concern that remained related to ESG 2.5 is the understanding of the term "consistency" by IKCA and IKCA's stakeholders, and its practical implementation. Although the panel noticed improvements related to the structure and content of the standards and guidelines of IKCA (those related to higher and postgraduate education in particular), the issues still persisted in their implementation across reports and forming judgements on compliance. IKCA did not manage to improve the consistency of its decision making, including the development of thorough analysis and evidence in its reports. It also did not ensure consistency in the use of pre-defined criteria and in the reaching of its judgements on compliance in accreditation procedures.

In conclusion, the panel collected limited evidence on improvement related to most standards covered within this report, therefore indicating that only several of EQAR's concerns were addressed by the agency in the scope of this review.

INTRODUCTION

This report analyses the compliance of the Independent Kazakhstan Center of Accreditation (IKCA) (Независимый Казахстанский центр аккредитации, НКЦА) with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)*. It is based on an external review conducted between August 2024 to March 2025, for the purpose of registration in the European Quality Assurance Register for Higher Education (EQAR). It is relevant to note that this report is based on a focused review, therefore, for a full understanding of the context of IKCA's activities, it is recommended to read the ENQA report from 2022 as well.

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.

ENQA's first review of IKCA was performed from May 2022 to June 2023 for the purpose of application for membership in ENQA and registration in EQAR. On December 11th 2023, the Register Committee of EQAR rejected IKCA's application to EQAR, due to non-compliance with *ESG 2.5 Criteria for outcomes*. On April 22nd 2024, the agency received ENQA's decision on the rejection of IKCA's application for ENQA membership, based on the non-compliance with *ESG 2.5 Criteria for outcomes*, and *ESG 2.6 Reporting*. Additionally, IKCA was found to be partially compliant with *ESG 3.3 Independence*, *ESG 3.4 Thematic analysis*, *ESG 3.6 Internal quality assurance and professional conduct*, *ESG 2.1 Consideration of internal quality assurance*, *ESG 2.2 Designing Methodologies fit for purpose*, and *ESG 2.3 Implementing processes*.

Following the rejection of IKCA's application to EQAR, the agency exercised its right to undergo a focused review to address the standards with partial compliance and non-compliance. The agency has the right to reapply for EQAR registration within 18 months following this focused review. The standards addressed within this focused review include: *ESG 2.1 Consideration of Internal Quality Assurance*, *ESG 2.2 Designing Methodologies Fit for Purpose*, *ESG 2.5 Criteria for Outcomes*, *ESG 3.3 Independence*, *ESG 3.4 Thematic Analysis*, *ESG 3.6 Internal Quality Assurance and Professional Conduct*.

As this IKCA's external review focuses specifically on the improvements of the abovementioned standards that led to the agency's rejection of EQAR application, the panel is expected to provide clear evidence of results in all areas and to acknowledge progress from the previous review. The panel has additionally adopted a developmental approach, as the *Guidelines for ENQA Agency Reviews (2021)* aim at constant enhancement of the agencies. EQAR's document *Use and Interpretation of the ESG for the European Register of Quality Assurance Agencies (2020)* was used as a reference document to ensure the evidence required by the Register Committee was included for the ESGs in the scope of this focused review.

SCOPE OF THE REVIEW

The terms of reference for this focused review are defined based on IKCA's activities, as follows:

- a) Institutional accreditation of higher education institutions.
- b) Programme accreditation of educational programmes in the field of higher education.
- c) Institutional accreditation of medical higher education institutions.
- d) Programme accreditation of educational programmes in the medical field of studies.

- e) Institutional accreditation of pedagogical higher education institutions.
- f) Programme accreditation of educational programmes in the pedagogical field of studies.

For all abovementioned procedures, post-accreditation monitoring was evaluated as well. Concerning the institutional and programme accreditation in the medical field of studies, it is relevant to note that, due to legislative changes in Kazakhstan, IKCA did not perform any such procedures in the period between the last ENQA review until November 2024.

In accordance with the scope of the past ENQA review, accreditation of organisations of additional (further) education was not evaluated, due to it not falling under the scope of higher education. No additional activities were identified during the site visit, which would have to be included in the terms of reference.

MAIN FINDINGS OF THE 2022 ENQA REVIEW

In the 2022 ENQA review of IKCA, the agency was found to be compliant with standards: *ESG 2.4 Peer review experts*; *ESG 2.7 Complaints and appeals*; *ESG 3.1 Activities, policy and processes for quality assurance*; *ESG 3.2 Official status*; *ESG 3.5 Resources*; *ESG 3.7 Cyclical external review of agencies*. The findings on the other standards are described below, and their level of compliance is noted.

- a) **ESG 2.1 Consideration of internal quality assurance (partially compliant).**
The review panel noted inconsistencies between the standards and their corresponding guidelines, available on IKCA's webpage. Those inconsistencies involved differences in the number of criteria assessed. Additionally, in institutional accreditation, there was no coverage of *ESG 1.9 On-going monitoring and periodic review of programmes*. Likewise, in programme accreditation, there was no coverage of *ESG 1.8 Public information*. Overall, the agency needed to focus more on the effectiveness of the internal quality assurance (IQA) rather than its availability, in particular related to *ESG 1.2 Design and approval of programmes*; *ESG 1.4 Student admission, progression, recognition and certification*; *ESG 1.7 Information management*; and *ESG 1.9 On-going monitoring and periodic review of programmes*.
- b) **ESG 2.2 Designing Methodologies fit for purpose (partially compliant).**
The guidelines used by IKCA provide sufficient and comprehensive information on the preparation of the self-assessment reports (SARs) by the higher education institutions (HEIs). The regulations of IKCA do not define the principles and conditions for combined accreditation procedures, including clustering of programmes. When developing IKCA standards, the involvement of HEIs and the experts was considered by the agency, though their role was not active (the experts did not actively participate in the development of standards). Students were not consulted on the development of standards.
- c) **ESG 2.3 Implementing processes (ENQA: partially compliant; EQAR: compliant).**
All processes of IKCA's accreditation procedures are documented, understood and implemented. However, the panel noted the lack of consistency across reports in relation to the terms used and the analysis of the standards.
- d) **ESG 2.5 Criteria for outcomes (non-compliant).**
The regulations published on IKCA's website did not include the criteria for assessment of standards in the accreditation reports. There is a lack of addressing the criteria from the Standards across reports leading to a lack of consistency. The

Accreditation Council of IKCA does not follow the criteria for outcomes set in IKCA's regulations without documented rationale for such actions. The inclusion of the director of IKCA into the Accreditation Council could potentially impact the decision-making process related to accreditation. No clear procedures were set regarding post-accreditation monitoring. The power to revoke the accreditation certificate could be exercised without the involvement of the Accreditation Council. There is a lack of understanding of the term 'consistency' within the Agency.

e) ESG 2.6 Reporting (ENQA: non-compliant; EQAR: compliant).

The reports published on IKCA's website were found confusing by the panel and many inconsistencies were noted, including the use of different compliance scales (e.g. 'satisfactory' versus 'compliant'), as well as the difference in detail and in the analysis. The distinction between the terms 'comment' and 'recommendation' remained unclear. The development of IKCA's database and register is seen as a positive development, yet there were cases in which the reports were not published and available for all institutions/programmes. The reports on negative decisions were not published.

f) ESG 3.3 Independence (partially compliant).

In terms of organisational independence, the panel could not ascertain to an existence of independent processes for the selection or the election of members to IKCA's bodies (Supervisory Board, Accreditation Council etc.). In most cases, choices were made based on group discussions and by relying on communication from and solicitation to an external network of acquaintances. According to the *Charter*, the founder can directly amend it (as well as other regulations), terminate the activities of the agency's governance and advisory bodies, and can 'voluntarily' reorganize the agency. The founder is a for-profit entity and would not be eligible to be registered as a national accreditation agency in Kazakhstan. The agency's human resources and finances are under the ultimate control of the founder. New IKCA experts were recruited based on self-selection, HEI's nominations and expressions of interest. The panel noted their concern over the authority of the director and the founder; however, no such concerns were expressed by the experts.

g) ESG 3.4 Thematic analysis (partially compliant).

At the time of the review, no thematic analyses were completed, and there was no evidence of how the results of thematic analyses were used within the agency for continuous improvement. The lack of necessary resources and expertise for conducting thematic analyses was noted. The examples of thematic analyses provided to the panel during the site visit had little evidence of analysis, as they were summative or reporting in nature. During the review, the agency has shown awareness on the importance of publishing thematic analyses, yet, due to the agency being quite young, there are some challenges present yet.

h) ESG 3.6 Internal quality assurance and professional conduct (partially compliant).

Inconsistencies in terminology used by the agency across different documents was noticed. The purpose of different documents with differing statements was, at times, unclear. The guidelines on the internal quality assurance are not explicit or clear on the processes related to the internal quality assurance procedures. The panel was informed by the agency's regional coordinators that the feedback is collected on the accreditation process, but some interviewees (some members of agency's staff

involved in external accreditations, experts and institutional representatives) seemed unaware of such feedback collection. No specific examples of improvements made based on feedback were provided by the agency. The role of the Expert Councils was unclear.

REVIEW PROCESS

The 2024 external focused review of IKCA 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 IKCA was appointed by ENQA and composed of the following members:

- Heli Mattisen (Chair), Director, Estonian Quality Agency for Higher and Vocational Education, Estonia, quality assurance professional (ENQA nominee).
- Pegi Pavletić (Secretary), Senior Assistant, Faculty for Biotechnology and Drug Development, University of Rijeka, Croatia, academic (EUA nominee).
- Gaga Gvenetadze (Panel member), PhD Student in Applied Social Psychology, Ivane Javakhishvili Tbilisi State University, Georgia; Member of the European Students' Union Quality Assurance Student Experts Pool, student (ESU nominee)

Alexis Fábregas Almirall (Project and Reviews Officer), acted as the review coordinator on behalf of ENQA. After the submission of the initial report to IKCA, Goran Đaković (Head of Agency Reviews) coordinated further steps on behalf of ENQA.

The panel members thank Alexis Fábregas Almirall for all the professionalism and support in the process of preparation for the site visit, his guidance and support during the site visit, and for coordination of activities thereafter.

The self-assessment report was received on August 27th 2024, together with 17 Appendices referenced in the report. The panel had its online briefing on October 2nd 2024, 15:00-16:00 CET, where general information on the focused review of IKCA, together with the planned activities, was provided. On October 18th 2024, 11:00 -13:00 CET, a kick-off meeting of the review panel was organized, online. The online clarifications meeting with IKCA's personell took place on October 28th 2024, 15:00 – 16:00 CET. Following the clarifications meeting, the panel received additional 9 appendices. The site visit was conducted at the premises of IKCA, from November 6th 2024 to November 8th 2024. The priod of drafting the review report lasted from November 11th 2024 to December 23rd 2024. After the initial report was drafted, it was sent to the Agency on January 10th 2025, for factual accuracy check. The corrections were received by IKCA on January 24th 2025, after which the report was finalised and forwarded to the review coordinator on February 6th 2025. Further information on the self-assessment report and on the site-visit is described below.

All decisions of the review panel were made in mutual agreement of all parties. There were instances of misinterpretation of the ESG standards from the side of the agency, where the panel had to invest an additional effort to try and elaborate on the topics, impacting the pace and the duration of the interviews. However, all topics managed to be clarified by the end of the site visit. The panel felt that the period between the two ENQA reviews was quite short, and gathering evidence on the implementation of the newly adopted procedures was challenging, but overall, the panel managed to gather sufficient evidence to form the judgements for this focused review. At the request of the panel, the meeting with the IKCA founder was organized, and the panel had the opportunity to meet all

stakeholders, IKCA employees and collaborators it requested. For the site visit, all panel members were given the original self-assessment report and the 17 original appendices in the printed form.

IKCA adopted several documents in October or November 2024, directly preceding the site visit. These documents were also considered in the scope of this review and they include:

- a) *Instructions for Clustering Educational Programs during Specialized (Programmatic) Accreditation by the Independent Kazakhstan Center of Accreditation.*
- b) *Procedure for Engaging Experts to serve on the Accreditation Council, Supervisory Board, Appeals and Complaints Commission, and Expert Councils, as well as for involving stakeholders in the Development and Updating of Regulatory Documents for the IKCA.*
- c) *Instruction on Ensuring Interaction with Interested Parties.*
- d) *Conflict of Interest Policy of the Non-Profit Institution "Independent Kazakhstan Center of Accreditation".*

Self-assessment report

Following the decision of IKCA to reapply for EQAR registration, the self-assessment report was prepared by the IKCA Director, the Director and staff of the Methodology, Monitoring and Quality Assurance Department, the Director of the Accreditation Department, members of the Supervisory Board, Accreditation Council and the Expert Councils, the IKCA Working Group and the Chief Accountant. The finalised document was translated into English language and was forwarded to ENQA in May 2024.

The composition of the self-assessment report includes information about the development and the preparation of the self-assessment report; the explanation of the quality assurance system in higher education in Kazakhstan; information about IKCA's structure, resources, activities, experts and internationalization; and the descriptions of activities of the agency based on the individual ESGs considered under this review. According to chapter 4 of *Guidelines for ENQA agency reviews*, several other steps could have been taken to have a more comprehensive report. No information was provided about the stakeholders' reflections on IKCA's key activities in external quality assurance. Additionally, the panel did not receive a SWOT analysis or the key challenges identified by the agency for further development.

Received self-assessment report was informative, included links to various documents and examples of initiated activities, but lacked analysis regarding the extent to which the developed documents and initiated activities have contributed to resolving the identified issues. Furthermore, the panel noted misinterpretation of some recommendations received from EQAR, based on the 2022 ENQA report, in particular related to standard *ESG 2.5 Criteria for outcomes*. The terms used across different documents (e.g. standards, guidelines, *Charter*, regulatory documents etc.) referenced in the self-assessment report differed at times, so the panel had to agree which terms to use. For example, terms such as 'Board' and 'Council' were used interchangeably. This was particularly challenging in terms of defining institutional stakeholders, as sometimes they were called 'Universities', but sometimes they were defined as 'HEIs', 'OVPO', 'OHPE' etc. Additionally, appendices 1 and 2 received with the self-assessment report contained different information from that described in the report, therefore, the panel had to request comparative analysis of changes to the documents referenced in those appendices.

While the self-assessment report was detailed and included useful references, it fell short in demonstrating how effectively IKCA has implemented past recommendations or resolved identified

issues. The panel had to search for broad additional evidence, and request many additional documents to be able to collect sufficient evidence and address EQAR's comments, due to such content not being included in the self-assessment report initially. The panel appreciated IKCA's fast response in obtaining additional documents.

Site visit

The site visit was organized on the premises of the agency (November 6th to November 8th 2024), in Astana, Kazakhstan. All communication regarding additional materials, the preparation of the site visit programme and general inquiries related to the site visit were coordinated in collaboration with the Chief Expert of International Projects and Post-Accreditation Monitoring of the Department of Methodology, Monitoring and Quality Assurance. The interviews that took place during the site visit were conducted in a presence of an interpreter for Kazakh and Russian languages. The interpreter was pre-approved by ENQA, and was independent from IKCA. The panel commends the interpreter for his effort in translating the conversations in three languages (Kazakh, Russian and English) accurately and clearly during the entire site visit. His workload and his effort to provide precise information to the panel is recognized and valued by all members of the panel. The panel thanks IKCA's director, deputy director and the senior management team, as well as staff participating in the preparation of the site visit, for their hospitality, availability and openness during the site visit.

A total of 14 separate interview groups were met during the site visit. The panel met with the founder of IKCA; director and the deputy director; Working Group members; senior management; IKCA staff in charge of external quality assurance; members of IKCA's bodies (Expert Council on higher and postgraduate education, Accreditation Council, Supervisory Board); IKCA's external experts; members of the appeals and complaints commission; representatives from HEIs and students. The panel was present onsite for the duration of the site visit, with participants mostly joining onsite during the first day, and mostly joining online during the second day of the site visit. The programme of the site visit, with specific panels for the dates of the review, is available as Annex I. to this report.

General communication with the agency was satisfactory regarding the necessary preparations for the site visit, as well as during the site visit. The members of IKCA's governance structures in particular demonstrated readiness to receive feedback on their work, and were eager to provide additional explanations and materials if there were a need for further clarifications on IKCA's activities. All interview sessions were characterised by the positive attitude of all participants, and they readily engaged in answering panel's questions.

In preparation for the site visit, the panel requested to have no more than 6 participants per one panel, due to the time constraints and the need for an interpreter. Additionally, the panel requested to limit hybrid and online participation of interviewees whenever possible, to avoid potential technical issues. This has proven as a wise decision, as panel was able to speak to all members of all interview panels, benefiting from hearing several opinions on the questions asked. The panel thanks the agency for agreeing to these conditions, thereby allowing smooth running of the site visit.

During the site visit, additional documents were requested by the panel, and delivered by IKCA as evidence of the activities not available to the panel in SAR. A total of 15 different documents were received, some in Russian and some in English language. Overall, the number of additional documents received for this review (appendices of SAR excluded) was 32. The panel recommends that the agency, in the future, try to provide more relevant evidence of activities performed based on the adopted documents, rather than solely the updated text of the documents. This would help in demonstrating the effectiveness of such documents, and it would simplify the initial analysis of the self-assessment report, as well as preparation for the site visit.

HIGHER EDUCATION AND QUALITY ASSURANCE SYSTEM OF THE AGENCY

HIGHER EDUCATION SYSTEM

Since the 2022 ENQA full review of IKCA, there were no significant changes in the field of higher education in Kazakhstan. Therefore, most of the descriptions from the past report remain relevant in the scope of this review.

In 2023, there was a significant increase in the number of representative officers and centres of foreign HEIs in Kazakhstan. In 2022, only ten such centers operated, but in 2023, this number elevated to 16. Currently, 17 Kazakhstani universities actively develop their international presence over 35 offices, branches or centres in 12 other countries.

QUALITY ASSURANCE

The descriptions from the report of the 2022 ENQA full-review remain mostly relevant in the context of this review. The list of agencies registered in the *National registry of accreditation bodies* changed. Accredited Kazakh agencies are: IAAR, IQAA, CAAAE (formerly KazSEE), ARQA, ECAQA, IKCA. Accredited international agencies are: FIBAA (Germany), ASIIN (Germany), ABET (USA), MusiQuE (Belgium), ACQUIN (Germany), ACBSP (USA).

INDEPENDENT KAZAKHSTANI CENTER OF ACCREDITATION (IKCA)

IKCA was established as a non-profit, non-governmental institution in 2016, by the *Department of Justice of Nur-Sultan*. In 2018, by the order of the Ministry of Education and Science of the Republic of Kazakhstan, IKCA became a member of the *National registry of accreditation bodies*. In November 2023, IKCA's membership in the registry was extended by 5 years.

At the time of the 2022 ENQA review, the founder of IKCA was a Republican Scientific and Methodological Centre for the Development of Technical and Vocational Education and Qualifications (RSMC). RSMC was a for-profit Joint Stock Company with a single owner who acted as general director of IKCA since 2020. According to the newly adopted *Charter of the non-profit Institution "Independent Kazakhstani Center of Accreditation"* (September 18th 2023), the founder of the agency was changed from a legal entity to a person. The founder no longer holds the position of a director within IKCA.

According to the self-assessment report: "*The mission of the Center is to assist universities in creating an effective system for ensuring the quality of education and management systems in educational institutions implementing programs at all levels of education and additional education.*" There are 10 main objectives of IKCA, which include organizational and technical aspects of IKCA's accreditation procedures, as well as participation in international networks in the field of quality assurance in higher education. One goal focuses on the organization of trainings, conferences and seminars in the field of quality assurance. These objectives assure that the mission of IKCA is carried out.

IKCA is a full member of the following international networks:

- a) International Agency for Quality Assurance in Higher Education (INQAAHE);
- b) Asia-Pacific Network for Quality Assurance in Higher Education (APQN);

- c) Central and Eastern Network of Agencies for Quality Assurance of Higher Education (CEENQA).

IKCA is an affiliated member of ENQA and is working towards becoming a full member of ENQA and registered in EQAR. Additionally, IKCA has in place memoranda and agreements on mutual cooperation with:

- a) Foundation for Accreditation of International Business Administration (FIBAA);
- b) Social, Humanities and Basic Sciences Accreditation and Rating Association (STAR, Turkey);
- c) Accreditation Organization of the Netherlands and Flanders (NVAO, Netherlands branch);
- d) Rauf Denktas University (Cyprus).

IKCA'S ORGANISATION/STRUCTURE

IKCA currently has 33 employees (including regional coordinators), 3 of which are academic staff members. In the period between 2019 and 2023, a total of 293 institutional assessments were performed (5 universities and 288 colleges) and 1351 programme accreditations (200 at universities and 1151 at colleges). The colleges are not part of the higher education system in Kazakhstan, therefore, the accreditation procedures at these institutions were not evaluated under this review.

The structure of IKCA is presented below, in Figure 1, as documented in the self-assessment report. The following paragraph describes the structure of IKCA, as defined in its [Charter](#).

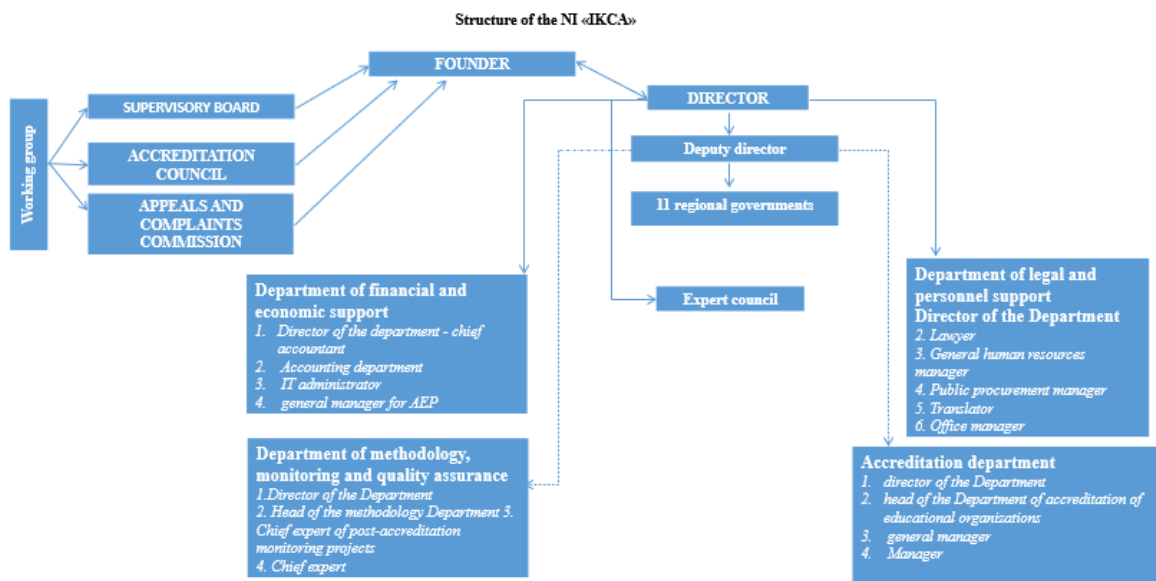


Figure 1. The structure of IKCA

The overarching governing body of IKCA is the founder, while the executive power of the agency lies with the director and the deputy director. The founder can amend the *Charter*, determine IKCA's priorities, define operational and organizational structure of IKCA, determine the frequency of submitting financial statements, decide on IKCA's participation in the creation or activities of other entities, monitor the use of finances, reorganize or liquidate IKCA. Director's responsibilities include daily management of the agency and making decisions on issue not described within the competence

of IKCA's bodies. The director is accountable to the founder in all regards excluding the institutional and programme accreditation.

The bodies of IKCA include: the Working Group, the Supervisory Board, the Accreditation Council and the Expert Council. The Working Group was established in 2023, and its role is not described in the *Charter*, rather within the document: *Regulations on the Working Group for the Definition and Approval of the Composition of the Accreditation Council, Supervisory Board, Appeals and Complaints Commission, Expert Councils of the Non-profit Institution "Independent Kazakhstan Center of Accreditation", as well as for the Attraction and Selection of Stakeholders* (October 10th 2024). As the title of the document states, the main purpose of the Working Group is to select and approve the composition of the Accreditation Council, Supervisory Board, Appeals and Complaints Commission, Expert Committees, as well as to engage and select stakeholders. The Working Group can also interact with different governmental and non-governmental organizations, research institutions, educational organizations, organizations of students (etc.) and labour market representatives when forming the composition of the aforementioned bodies. Based on the collected nominations of candidates, the Working Group conducts an analysis of all candidates and makes the selection. Selection results are then forwarded to IKCA's founder for review (not for approval). The members of the Working Group are approved by the order of the IKCA director, and they consist of a minimum of five members. During the site visit, the panel found out that currently there are eight members of the Working Group, five of which are IKCA employees and three of which are external stakeholder representatives. Students are currently not a part of the Working Group. IKCA's employees from relevant structural units are members of the Working Group by virtue of their position (heads of IKCA departments). To panel's understanding of the selection process for the Working Group, obtained during this review, members of the IKCA departments could theoretically apply for a position in the Working Group, but their department is already represented by the department head. Therefore, it would be unlikely that both the member of the department and the department head would be members of the same body.

Supervisory Board oversees the activities of IKCA, provides assistance in IKCA's operations and it proposes improvements. More detailed information about this body is available in the *Regulation on the Supervisory Board of the Non-profit institution "Independent Kazakhstan Center of Accreditation"*. Some of the main activities of the Supervisory Board include the consideration and the approval of IKCA's strategic plan, approval of annual reports on the activities of the agency, approval of action plans for the implementation of IKCA's development strategy and other issues not in the competence of the founder or the executive body (director). The term of the Supervisory Board members lasts three years.

Accreditation Council is a decision-making and an advisory body of IKCA that decides on the institutional and programmatic accreditation procedures. founder and the director cannot be members of the Accreditation Council and cannot interfere with the accreditation process. Accreditation Council has a role in both internal and external quality assurance of the agency. Its members are selected by the Working Group and a student is a member of this body. The roles and the responsibilities of the Accreditation Council are further described in the *Regulations on the Accreditation Council of the Independent Kazakhstani Center of Accreditation*. The term of Accreditation Council members lasts 3 years. When making decisions on the accreditation procedures of Kazakh and international programmes (except those from Kyrgyzstan), several decisions can be made:

- a) *accredit for seven years if a decision of "Compliance" is made for all standards and there are examples of the dissemination of best practices.*
- b) *accredit for five years if a decision of "Compliance" is made for all standards, or "Compliance with comments" for up to three standards.*

- c) *accredit for three years if a decision of "Compliance with comments" is made for four standards, and also in the case of initial accreditation if a decision of "Compliance" is made for all standards, or "Compliance with comments" for up to three standards.*
- d) *accredit for one year if a decision of "Compliance with comments" is made for five or more standards, and also in the case of initial accreditation if a decision of "Compliance with comments" is made for four or more standards.*
- e) *do not accredit if one of the standards receives a rating of "Non-compliance".*

Expert Council of IKCA is formed by the Working Group, by selecting among the external experts of IKCA. Expert Council should be responsible for the formation of the expert panels, evaluation of the interim reports for programmatic and institutional accreditation and are involved in post-accreditation monitoring (according to the regulations). However, the panel found, from the interviews, that this body is mainly responsible for the formation of external expert groups (EEGs) and aligning IKCA's standards with the guidelines. Currently, there are three Expert Councils in the field of higher education: Expert Council on higher and postgraduate education, Expert Council on teacher education, Expert Council on medical education. Each of these three Expert Councils has a student member, according to the information received during the site visit, however, the panel was only able to confirm students' participation in the Expert Council on higher and postgraduate education (this document was provided by IKCA). Information about the structure and the activities of the Expert Councils is available in the *Regulations on the Expert Council of the Non-profit Institution "Independent Kazakhstani Center of Accreditation"*. The role of the Expert Council in post-accreditation monitoring is described in the *Regulation on the Procedure for Post-accreditation Monitoring of an Educational Organization and/or Educational Programs*. The mandate of the members of the Expert Councils lasts five years.

There are also four departments within IKCA: *Department of legal and personnel support, Accreditation department, Department of financial and economic support and the Department of methodology, monitoring and quality assurance.*

Additionally, there is an appeals and complaints commission which functions as an independent body in charge of reviewing appeals and complaints received by the HEIs that are undergoing or have completed their institutional or programme assessments. There are five members of this body, and the composition is approved by the Working Group for a period of three years. More information about this body is available in the *Regulations on the Appeals and Complaints Commission of NI "Independent Kazakhstani Center of Accreditation"*. In the same documents, templates are available for filing appeals or complaints.

IKCA'S FUNCTIONS, ACTIVITIES, PROCEDURES

IKCA's external quality assurance (EQA) activities within the field of higher education, include institutional and programmatic accreditation on a generalised level, as well as in the specific fields: medicine and pedagogy.

The accreditation procedure is slightly different to the one described in ENQA's 2022 report, therefore, a full description of the process is given further on. Initially, the HEI submits an application for accreditation to IKCA, after which, an accreditation agreement is signed between these two entities. The agreement stipulates the obligations of the HEI and IKCA, the total cost of accreditation and the deadlines. After, the HEI prepares a self-assessment report based on the standards and the guidelines for the preparation of the self-assessment report published by IKCA. After the initial self-assessment report is submitted by the HEI, IKCA has the possibility to form an expert panel for the initial review of such report. The members of such an expert panel are later also involved as the expert panel of the review, including the site visit and the preparation of the final report. This procedure is

mentioned in the Guidelines of IKCA (e.g. in the *Guidelines for the Organization and Conduct of an External Assessment (Audit) within the Framework of Institutional and Specialized (Program) Accreditations*, page 5, point 4.1, bullet point 6). IKCA also organizes at least one training with the representatives of HEI on the preparation of the self-assessment report and the accreditation procedure.

In the second stage, the external expert group is formed among academic staff members within Kazakhstani higher education system, representatives of employees, international experts and students. External expert group for conducting institutional accreditation is composed of at least five to six experts, as follows: one member as a head of the external expert group, two Kazakhstani external experts, one representative of employers, one student, one international expert or public representative. The composition of the external expert group for programmatic assessment is determined based on the number of clustered accreditations and on the number of educational programmes undergoing accreditation. Usually, these external expert groups are composed of: one member as a head of the external expert group, several members depending on the number of educational programmes or clusters, one representative of employers, one student and one international expert or public representative. Heads of the external expert groups are national experts on managerial positions who work or conduct research in the study fields in which institutions or programmes are being accredited. The composition of such formed external expert groups is sent to the HEIs who need to agree with the members proposed (based on potential conflicts of interest). Then, site visit is organized (three days for institutional, two days for programmatic accreditation), followed by report-drafting (no more than 2 weeks from the start of the site visit) and sending the final report to the agency. The report is then forwarded to the HEI for corrections of factual errors, final adjustments are made and the report is submitted to the Accreditation Council, together with the recommendations and comments. The Accreditation Council makes the final decision on the accreditation and prepares the certificates of accreditation. IKCA publishes all accredited programmes and institutions on its website, together with the reports and the certificates. No reports containing negative decisions on accreditations were found on IKCA's webpage at the time of this review.

The final stage includes post-accreditation monitoring, where the HEI sends an action plan to IKCA, which is agreed upon by the two parties. Post-accreditation monitoring report is drawn and analysed, and, if need be, one expert and one IKCA coordinator are sent to the HEI to check on improvements onsite. Then the Accreditation Council prepares an opinion and issues potential recommendations for the HEI undergoing post-accreditation monitoring, in the following cases: if significant comments and recommendations were issued in the accreditation procedures to HEIs or their programmes; if the accreditation was granted with conditions for a period of one or three year/s. (to evaluate the extension of the accreditation period). This procedure is described under Article 4.2 in the *Regulation on the procedure for post-accreditation monitoring of an educational organization and/or educational programs*.

IKCA expert pool includes over 770 people, including 510 national certified experts, 60 international experts from 7 countries (Poland, Turkey, Russian Federation, Azerbaijan, Kyrgyz Republic, Uzbekistan, Ukraine), 100 employers and 100 students. Additionally, IKCA has signed agreements and memoranda with foreign agencies that provide a database of international experts, like Kyrgyzstan.

Below, in Table 1., is the information on the institutional and programme assessment conducted by IKCA since 2019, in the field of higher and postgraduate education, within the scope of the ESGs.

Table 1. Overview of institutional and programmatic assessment in the field of higher education, performed by IKCA since 2019.

Educational organizations	Type of accreditation	2019	2020	2021	2022	2023	Total
Organizations of higher and postgraduate education	Institutional	0	2	1	2	0	5
	Programmatic	0	14	15	45	126	200

Aside from the accreditations in the field of higher and postgraduate education, IKCA also performs accreditations in the field of technical and vocational education and accreditations of additional education. As these activities are not within the scope of the ESGs, they were not evaluated or considered within the scope of this review. Below, in Table 2., is the information on the institutional and programme assessment conducted by IKCA since 2019.

Table 2. Overview of IKCA's assessments outside of the scope of the ESGs, performed since 2019.

Educational organizations	Type of accreditation	2019	2020	2021	2022	2023	Total
Organizations of technical and vocational education	Institutional	46	200	33	7	2	288
	Programmatic	270	663	146	68	4	1151
Organisations of additional education	Institutional	11	4	4	3	6	28

IKCA'S FUNDING

The funding of IKCA did not change in respect to the reported procedures in the 2022 ENQA review report.

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

ESG PART 3: QUALITY ASSURANCE AGENCIES

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.

2022 ENQA review recommendations:

1. The review panel recommends that IKCA supplement the Strategic Development Plan with goals and objectives that are clearly related to the agency's mission, while being specific and measurable and allowing each staff member to relate to them and integrate them into their daily work.
2. The review panel recommends that IKCA involve external stakeholders and members of the agency's governing bodies in the governance of the agency in a more systematic and efficient way.

Issues to be checked in this focused review as defined by the ToR:

Whether:

1. the agency ensures its independence from its founder,
2. the agency distributes the power of governing of the agency in an equal manner among the stakeholders
3. the agency clarified the selection processes of the agency's different bodies.

Evidence

IKCA is an independent, non-governmental, non-profit organization acting as an accreditation body in the field of higher and postgraduate education according to the law 'On education' and the requirements for the accreditation bodies issued by the *Ministry of education and science of the Republic of Kazakhstan*.

The agency demonstrates its operational independence through several documents:

- a) IKCA's *Charter, Article 3. Structure, Order of Formation, and Competence of the Governing Bodies of the Center*.
- b) *Regulation on selection, recruitment and hiring of staff*.
- c) *Regulations on the Working Group for the Definition and Approval of the Composition of the Accreditation Council, Supervisory Board, Appeals and Complaints Commission, Expert Councils of the Non-profit Institution "Independent Kazakhstan Center of Accreditation", as well as for the "Attraction and Selection of Stakeholders", Article 4*.

According to the amended *Charter* of IKCA, the founder of IKCA is no longer an organization, rather a person (Article 1, clause 2). According to Article 1, clause 2 of the *Charter*, 'no third parties (educational organizations, government bodies, and other interested parties, including the founder) can influence the conclusions and recommendations contained in the reports and decisions made by the Center during the

procedures of institutional, specialized (programme) accreditation'. In the Article 3, the roles of the different executive and governing bodies are described to prevent overlaps. The founder is described as the supreme governing body, and it has the power to form and terminate the powers of the director of IKCA, as well as voluntary reorganize or liquidate the centre. However, during the site visit, the panel was informed that the liquidation can occur only according to legal provisions and cannot be arbitrary. This is further described in Article 7 of the *Charter*. No evidence was found on the criteria for the appointment/election of IKCA's director by the founder of the agency. The director of IKCA is responsible for decisions on all issues not falling under the competence of IKCA's governing bodies. The director is responsible for staffing, statutory reporting on IKCA's finances to the founder, approving the decisions of the IKCA governing bodies, among other activities. It is defined that the director cannot execute decisions on issues pertaining to institutional and programmatic accreditation. The director was also removed from the Accreditation Council of IKCA. At the time of the site visit, the deputy director of IKCA served as a chair of the Working Group. A detailed description of the Working group is given under the section '*IKCA's organisation/structure*' in this report (see above). The chair of the Working Group needs to be approved by the founder, who does not participate in the selection process. After the decision is made on the accreditation procedure, the director of IKCA is responsible for publishing accreditation results. The activities of the deputy director are not defined within the *Charter*.

Aside from the regulations on the Working Group, IKCA also adopted documents defining the independence of the other governing bodies, as follows:

- a) Accreditation Council: *Regulation on the Accreditation Council of IKCA*; Articles 2 and 3.
- b) Supervisory Board: *Regulation on the Supervisory Board of IKCA*; Articles 2 and 3.
- c) Expert Councils: *Regulation on the Expert Council of IKCA*; Articles 2 and 3.
- d) Appeals and Complaints Commission: *Regulation on the Appeals and Complaints Commission*; Article 2.

In October 2024, the agency also adopted a *Policy on the conflict of interest*, which defines the situations leading to the conflict of interest, it describes the procedures for the management of the conflict of interest and its resolution. Supervisory Board is confirmed as the body responsible for assessing conflict of interest among executive and governance management of IKCA (deputy director, chief accountant, heads of structural divisions of IKCA), as well as employees. The founder of IKCA is not a subject of this policy.

IKCA also developed a *Procedure for engaging experts* in IKCA's governing bodies, as well as including them in the development and amendments of IKCA's documents. In this document, adopted on October 10th 2024, it is mentioned that the Working Group of IKCA sends '*letters to authorized bodies in the field of education, associations, and professional and student organizations, and conducts negotiations with them regarding the provision of recommended candidates for the development and updating of the normative documents of the IKCA*'. During the site visit, the panel obtained information that the authorised bodies in the field of education, related to higher education, mostly referred to the universities accredited by IKCA (or those whose programmes were accredited by IKCA). There are other stakeholders invited too, for example, the *Republican Association of Private Educational Organizations*. The panel confirmed that the students are recruited in various ways: through the letters sent to the universities, after which the university nominates students to IKCA; or directly via students' associations, like the *Convention of the Youth of Kazakhstan*.

In the '*Procedure for engaging experts to serve on the Accreditation Council, Supervisory Board, appeals and complaints committee, and Expert Councils, as well as for involving stakeholders in the development and updating of regulatory documents for the IKCA*', minimal criteria for the selection of members of IKCA's

governing bodies was provided. In case of the members of the Accreditation Council and the Supervisory Board, those requirements are following:

- a) Candidates must be representatives of government bodies and/or nongovernmental, public organizations, and/or educational institutions (academic staff), research organizations, or representatives from employers, students, or international experts.
- b) A minimum of 5 years of overall work experience is required.
- c) Students enrolled in the second year or above of higher education, postgraduate, technical and vocational, or post-secondary educational institutions are eligible.

IKCA begins recruiting the experts by sending a call to HEIs and students' organizations, who nominate their candidates. Once the nominations are received, the Expert Council makes the decision on their selection. Aside from the experts participating in the accreditation procedures, they can also serve on the Expert Councils of IKCA. The Working Group of IKCA sends emails to HEIs to recommend the experts to serve on the Expert Councils. If a member of an Expert Council withdraws, another call is opened and a new member gets recruited. The panel confirmed, in multiple interviews, that this is the expert recruitment procedure implemented broadly by IKCA. IKCA also offers the possibility for the experts to apply online as a national expert, international expert, expert employer or a student expert (all in the field of higher education), but the panel has not heard of any instances where an online application was considered for inclusion in the experts' registry, and has not met any experts (students, international experts or HEI employees) who applied using this procedure. The panel is aware that this is a recently-introduced possibility, which might not be fully functional yet, but it is commendable that the agency is trying to offer such possibilities to external stakeholders.

Analysis

Based on the evidence provided to the Panel, as well as the discussions during the site visit, the panel noted significant improvements in both organizational and operational independence of the agency. These are described separately below.

The panel noted that the legislative acts assure the agency's independence in the national context. One of the most significant changes for the agency was switching from the organizational founder, to a person in September 2023. However, the agency mentioned that this switch did not impact the organizational activities, as the agency continued to use the same offices and it continued to function in the same capacity after the switch was made. The founder's main activities include the overview of IKCA's activities, approval of the strategic development plan and overview of IKCA's finances. It was confirmed by the founder and the IKCA management that the impact of the founder on the daily operations of the agency is minimised, as the founder has several businesses and they are not involved only in the activities of IKCA. After the *Charter* was amended in 2023, more power was given to the director and the IKCA governing bodies, in particular the Working Group of IKCA. The establishment of this body was seen, by IKCA employees, as a large increase in transparency of IKCA's selection of members in the governing bodies. The panel confirmed, through several interviews, that this new structure made the procedures clearer and that the influence of the director on the accreditation procedures was minimized. Furthermore, the adoption of separate documents for the establishment of IKCA's governing bodies, as mentioned above, helped in the clarification of the functions of these bodies.

However, the panel noted some procedural inconsistencies that should be addressed. Based on the *Charter*, Article 3, clause 3, the founder has the right to define the competencies, organizational structure and the procedure for the formation and the termination of the powers of IKCA's director. During this review, no evidence was collected on formalised procedures to determine the criteria for the appointment or the election of IKCA's director, or the termination of their powers. The panel

was informed that the criteria for termination that the founder could apply could involve cases in which the director is not fulfilling his activities, or if the founder was not satisfied with the results of IKCA's work or finance management. They also mentioned that there are legal provisions on employment, therefore, the termination of employment cannot be arbitrary. Therefore, the panel was able to confirm that IKCA's activities and internal organization are independent from the founder, despite the *Charter* mentioning several provisions for founder's interference. The only issue the panel sees related to founder's activities, is the lack of transparency in the procedure for the appointment/ election of IKCA's director.

According to the *Regulation on the Working Group*, adopted on October 10th 2024, 'the main purpose of the Working Group is to establish and approve the composition of the Accreditation Council, Supervisory Board, Appeals and Complaints Committee, Expert Committees, as well as to engage and select stakeholders. The composition of the Working Group includes representatives from the relevant structural units of the agency (excluding the director), as well as independent stakeholder representatives (government agencies, non-governmental organizations, public organizations and/or educational institutions, associations, and employers) involved in accordance with the *Procedure for Involving Independent Stakeholder Representatives (government agencies and/or nongovernmental, public organizations and/or educational institutions, associations, employers) in the Working Group of the IKCA*. The Working Group consists of at least 5 members. The *Procedure for Involving Independent Stakeholder Representatives* is added to the *Regulation on the Working Group*, as an annex, and it shortly describes the recruitment of independent stakeholders and the basic criteria for their recruitment. In the *procedure for engaging experts for IKCA's bodies*, adopted on October 10th 2024, the procedure for the recruitment of 'government agencies and/or nongovernmental, public organizations and/or educational institutions, research organizations, associations, and employers' is described, and the basic criteria for the selection of members for IKCA's governing bodies are listed. Stakeholders participating in the development and updating of normative documents within IKCA 'must be a representative of government agencies and/or non-governmental, public organizations, and/or educational institutions (academic staff), associations, research organizations, and/or employers, or a student'.

The panel noted a discrepancy in the adopted *Regulation on the Working Group*- the agency changed the content of said regulation within the document dated on October 10th 2024, therefore affecting the panel's understanding of the activities of the Working Group. According to the initial document from October 10th 2024, the director can terminate the activities of the Working Group, however, no specific procedure for doing so was described. During the interviews, it became apparent that some members of IKCA's management were unaware of such a possibility, while the others mentioned that this can be done only in serious cases (not further elaborated). The content of this document was subsequently changed to say that the Working Group can be terminated only in such a case that the agency would be liquidated or reorganized. The panel found these changes non-transparent, as the panel was not informed of the amendment of the documents. Additionally, the panel struggled to get a clear information on how the Working Group is constituted. According to the abovementioned regulation, the Working Group is formed by the order of the director, but the members of IKCA's management mentioned that the group is self-constituted on their first meeting. It was explained that the letter is sent by IKCA to various organizations (universities, external stakeholders) who can propose members for the Working Group, to contribute on a voluntary-basis. Then, the IKCA staff make the pre-selection among the received applications and chooses the final candidates for the Working Group. The invitation for a constitutory meeting is sent by the deputy director of IKCA to the candidates, including the staff members nominated by virtue of their position. At the meeting, the chair and the secretary of the Working Group are selected, and the final decision is delivered to the director for approval. Currently, eight people are members of IKCA's Working Group, five of which are IKCA's employees, and three are external experts. The panel found out that the three external experts were recently added to the Working Group, and therefore had no chance to actively

contribute to its activities by the time of the site visit. Additionally, the structure and the members of the Working Group are not shown anywhere on IKCA's webpages, leading to a lack of transparency in public information.

After the initial report was sent to the Agency, the panel noticed that a third amendment to the *Regulation on the Working Group*, still dated October 10th 2024, happened. This was found concerning, as the panel once again faced the issue of having to analyse multiple documents dated and labelled identically, with no possibility to reference different versions separately. In the latest version, independent stakeholders have to make up at least 51% of the structure of the Working Group (Article 4.6). The agency informed the panel that the Working Group is now constituted of 11 members, six of whom are independent stakeholders. Deputy director still remains a member of the Working Group. The panel stresses the fact that this amendment was implemented after the site-visit, and the panel was not notified, before or during the accreditation process, that such change will be implemented by the agency so soon. Therefore, although the panel commends agency's will to address some concerns expressed during the site-visit so swiftly, the content of this document, and the amendments implemented, cannot be considered within the scope of this review.

The panel considered deputy director's involvement in the Working Group a conflict of interest, due to a person from IKCA's management team leading a body that should be independent from it. The regulation of the Working Group states the following: "*The composition of the Working Group is approved by the order of the director of NI 'IKCA' or a person replacing him, while the director has no right to interfere and/or influence the activities of the Working Group. The Working Group is an independent collegial body.*" Therefore, IKCA's deputy director both has the power to approve the composition of the Working Group and participate in its activities, which should not be the case. During discussions with the agency's management, the director expressed willingness to change this situation and to exclude the deputy director from the Working Group. However, other members of the Working Group, who are department heads and therefore directly subordinate to the director, also face challenges in remaining independent from agency's management. Since the current Working Group consists mostly of agency employees (five out of eight members), the decisions made by this body cannot be considered as "independent collegial body" (*Regulations on the Working Group*, page 2). Therefore, the panel is aware that the presence of an IKCA management representative in the Working Group could potentially impact the decision-making processes. At the same time, the panel also recognizes that the establishment of the Working Group as a collegial decision-making body within the IKCA represents a clear step towards the democratization of decision-making processes and is therefore commendable. It is necessary to take the next step to ensure that external stakeholders are also involved in a balanced manner in the selection of the Accreditation Council, Supervisory Board, and other key bodies of IKCA.

The adoption of a conflict-of-interest policy is a positive step in assuring transparency of procedures, but its scope should extend to cover all governing bodies, including the founder and the director of the agency. The panel found that the document is useful, but there were no procedures described for handling the conflict of interest pertaining to the director or the founder. The panel could therefore conclude that the procedure for avoiding the conflict of interest of IKCA's employees is in place, though improvements are necessary in determining potential conflict of interest coming from the founder or the director of the agency.

The panel found that the '*Procedure for engaging experts to serve on the Accreditation Council, Supervisory Board, appeals and complaints committee, and Expert Councils, as well as for involving stakeholders in the development and updating of regulatory documents for the IKCA*' does not offer help in distinguishing among the candidates for IKCA's governing bodies. The panel finds that the criteria described are very broad and it could complicate the decision process on the selection of members. It could be useful to

broaden these criteria with beneficial requirements, which could help the Working Group of IKCA in easier selection of candidates according to more transparent criteria.

The decisions on the accreditation processes can only be made by IKCA's Accreditation Council. The interviews held with the experts, HEI heads, HEI quality assurance officers and IKCA's external quality assurance staff members all confirm that the procedures set in the standards are regularly conducted by IKCA. The panel also concluded that the removal of the director of IKCA from the Accreditation Council prevented any influence of IKCA's executive management on the outcomes of the accreditation procedures.

IKCA does not have formalised procedures for the prevention of the influence of other institutions or stakeholders on the final outcomes of the accreditation. As the decisions on accreditation outcomes are taken directly by the Accreditation Council of IKCA, no external influences are present in the decision-making processes. Additionally, during the site visit, the panel did not receive any information on potential interference of external stakeholders on the accreditation processes. This process was rather seen as transparent democratic, and was appreciated by IKCA's management and staff members, as well as by the stakeholders (HEIs, students).

Overall, the panel found that the agency was organizationally independent from any third-party influence, such as HEIs, governmental organizations and other stakeholders. Additionally, the influence of IKCA's founder or their other businesses on the organizational and operational activities of IKCA did not seem present, and the panel was able to confirm, during the site visit, that the founder does not interfere with the procedures or decision-making processes, as defined within IKCA's documents. However, regarding the second question in the ToR, whether the agency distributes the power of governing the agency in an equal manner among the stakeholders, the review panel cannot provide an affirmative answer. Although a collegial body named the Working Group has been established within IKCA, which is granted decision-making authority in the selection of the Accreditation Council members, Supervisory Board, and Appeals and Complaints Committee, this is not an independent decision-making body composed of representatives from various stakeholders. Instead, it consists mainly of agency employees who are subordinate to the agency's director in their daily work. Furthermore, the principles for establishing this body have not been clearly outlined, and the regulation underpinning its operation is so recent that its appropriateness cannot yet be assessed.

While the principles for forming the Accreditation Council and Supervisory Board are regulated, it remains unclear what criteria the Working Group uses to make its selection. The agency clarified the selection processes for the different bodies of IKCA, but there were still concerns from the panel that these processes are not defined within IKCA's documents for all the bodies in its structure.

Therefore, the panel was able to confirm that the formal procedures for the selection of agency's governing bodies were present, but the challenges described above make it difficult to assure a transparent selection process due to unclear procedures.

Panel commendations

- I. The panel commends IKCA for the development of regulations pertaining to the formation and the function of IKCA's governing bodies.

Panel recommendations

- I. IKCA should develop a clear procedure for the selection and the constitution of its Working Group. The panel recommends that the Working Group of IKCA gain more independence in terms of its membership. For example, involving the majority of external stakeholders in its composition could help the agency in increasing the transparency.

2. The agency should define the conditions under which the executive management (director, deputy director) of IKCA could be dismissed by the founder as well as define the criteria and procedure for the appointment or the election of IKCA's director.

Panel suggestions for further improvement

1. The agency should work on defining a conflict of interest for the executive management and the founder of the agency.
2. IKCA should publically show the composition of Working Group as an important governing body of the agency, on the agency's website and/or other public channels.
3. In the interest of clarity, transparency, and reliability, it is important to ensure that amendments to the agency's regulations are recorded with the date of the amendment or include a note stating that the amendment takes effect retroactively.

Panel conclusion: partially compliant.

ESG 3.4 THEMATIC ANALYSIS

Standard:

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

2022 ENQA review recommendation

1. The review panel recommends that IKCA add expertise and competence in quantitative and qualitative data analysis to its current resources, to enhance the agency's capacity to analyse data from external QA activities and for development of thematic reports that would increase public awareness and enhance quality of higher education in Kazakhstan.
2. The panel recommends that IKCA insert an explicit statement within its strategic plan committing to the publication of thematic analyses on a predetermined periodic basis, such as one analysis per year and on relevant topics, with the actual publication of thematic analyses identified as key milestones in monitoring implementation of strategic goals.

Issues to be checked in this focused review as defined by the ToR:

1. Whether the agency has developed a systematic approach to thematic analysis;

Evidence

Since 2022, IKCA has published thematic analyses on their webpage, in relation to higher education. IKCA provided the panel with the following thematic analyses:

- a) *Thematic analysis. Comparing educational practices in Kazakhstan with international standards (2023).*
- b) *Thematic analysis based on the results of the NI "Independent Kazakhstani Center of Accreditation" of institutional and specialized accreditations of higher and postgraduate education organizations in the period from 2020 to 2023 (2024).*

The agency also provided two additional articles that they consider relevant for different higher education stakeholders:

- a) *Ways to improve the quality of education in modern conditions in Kazakhstan (2023).*

b) *Features of the development of educational programs of higher education (2023).*

Aside from these documents, the panel was able to see that many documents are listed on IKCA's webpage under thematic analysis, despite the content presented not corresponding to the requirements of the ESG 3.4 (different newspaper articles or journal article as examples).

On October 19th 2023, IKCA adopted the *Development strategy for 2023-2027*, in which the 'number of thematic analyses in the field of accreditation and improving the quality of education' is listed as a key indicator for the development of science. According to the strategy, IKCA is planning on conducting one thematic analysis per year in the period 2023-2027. The *Department of methodology, monitoring and quality assurance* is responsible for producing the thematic analyses.

The panel received a provisional list of topics for the upcoming thematic analyses for the period 2024-2028, where two topics per year are listed by the agency. For 2024, aside from the thematic analysis on 2020-2023 institutional and specialised accreditation, another thematic analysis focused on student-centered learning in higher education should be published in December 2024. For each year, the agency plans on preparing an 'analytical review' of their accreditation procedures in the previous year, alongside a thematic review (as described in the SAR). A thematic review in 2025 should be focused on academic mobility, as confirmed during the interviews with the senior management staff of IKCA and as presented in the provisional list of topics.

During the site visit, the panel requested additional information on the procedures for the preparation of thematic analyses, due to the difference in terms of document structure of the analysed documents. A document titled '*Recommendations on the preparation of a thematic analysis based on the results of specialized (program) and institutional accreditation of educational organizations*', adopted on August 27th 2024 was provided by the agency. In this document, the structure of the thematic analysis is clearly described. All documents must contain an introduction, main body of research, conclusions and recommendations. The data used in thematic analyses should be both qualitative and quantitative, and it should rely on the use of reliable resources.

Analysis

The panel acknowledges the importance and the dedication of the agency to conduct thematic analyses minimally once a year, for the period 2023-2027, as described in IKCA's *Strategic development plan*. However, the panel deemed that additional effort should be invested into using the results of the thematic analyses for internal improvements within IKCA. This is due to no evidence gathered in the interviews on the improvements done based on thematic analyses, and it became apparent that most members of IKCA's supervisory bodies were unaware of the concept of thematic analyses, their relevance and topics. Furthermore, a similar lack of understanding was noted from the heads of the HEIs reviewed by IKCA, who presumed thematic analyses were available on IKCA's webpage, but did not read them. However, they were able to provide the information on the topics which could be useful to them, such as internationalisation of higher education in Kazakhstan and its importance in the national context.

The introduction of the *Recommendations on the preparation of a thematic analysis* is going to help the agency with the structure of the future thematic analyses. However, it should be noted that the content of the listed thematic analyses does not contain a deeper analysis which is required under the *ESG 3.4 Thematic analysis*. Both evaluated thematic analyses contain a summative comparison of reports, but no research analysis was performed based on the results of the accreditation procedures. Thematic analyses should go beyond descriptive summaries to include actionable insights and context for higher education stakeholders. Therefore, the panel found the published documents lacking in this regard. For example, in *Thematic analysis. Comparing educational practices in Kazakhstan with international standards*, key findings are presented as bullet points, without providing the readers with the context

of the relevance of such information in a broader context. Research questions are not well-defined, and even though these documents are meant for institutional use, they are long and descriptive, while providing little new perspectives.

Currently, only the *Department of methodology, monitoring and quality assurance* works on the production of thematic analyses. However, the deputy director also supports the department whenever necessary, due to his experience in preparing past thematic analyses. The panel found that the department is capable of producing thematic analyses in the current capacity. Furthermore, the agency expressed the willingness to hire additional staff in this department, should the workload increase. In the interviews with IKCA's senior management, as well as executive management and the Working Group members, the capacity of the department was described as appropriate by all interviewees.

Since the last ENQA review, IKCA has published all thematic analyses performed, which improves the visibility of the agency and its activities. The panel commends such an effort and wishes to encourage the agency to continue publishing them. However, IKCA should be careful of which publications are considered thematic analyses under the ESGs, and which are not, since the current structure of the webpage does not offer a clear distinction between the published documents.

Overall, the panel found that the agency improved its activities and procedures on conducting thematic analyses, especially adding it to the *strategic development plan*. However, the panel also noted that thematic analyses should have a more analytical approach, compared to a summative approach predominantly present in current thematic analyses. Current thematic analyses still have a broad overarching topics, but the agency is trying to address a specific examples in their content. Sufficient staff members are dedicated to the production of the thematic analyses, recommendations are in place to assure that the analyses follow the same template, and they are publically available on the agency's website, in three languages. There is some space for improvement, and the *Recommendations on the preparation of a thematic analysis* just started being implemented, but the panel is optimistic about the future activities of IKCA in regards to thematic analyses and their planned periodic publishing.

Panel commendations

1. Panel members consider that the addition of the thematic analysis to the strategic development plan of IKCA for 2023- 2027 is an example of good practice by the agency.

Panel recommendations

1. The agency needs to significantly improve the analysis within their thematic analyses. The analysis should rely on clear and concise research questions leading to new or interesting findings relevant for higher education stakeholders. Summarizing reports in a qualitative manner should not be the main portion of the thematic analysis.

Panel suggestions for further improvement

1. The panel recommends to the agency to involve stakeholders in defining the topics of thematic analyses based on their needs.
2. Thematic analyses should be distributed among target groups, ensuring that IKCA's resources invested in preparing the analysis generate added value to the agency and to the stakeholders.

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.

2022 ENQA review recommendations

1. The review panel recommends that IKCA review its internal quality assurance guidelines, internal regulations and its suite of quality assurance documentation to:
 - a. remove inconsistencies and duplication within and between documents;
 - b. clearly indicate the responsibility at all stages within the accreditation process;
 - c. clearly indicate the feedback loops and monitoring stages.
2. The review panel recommends that IKCA establish internal mechanisms to enable systematic feedback and engagement from all staff in the strategic development and monitoring processes.
3. The review panel recommends that IKCA fully implement the functions of the Expert Councils and systematically embed the Expert Councils within the agency's consultation and improvement processes.

Issues to be checked in this focused review as defined by the ToR:

1. whether the agency utilises the feedback gathered through its internal quality assurance feedback mechanisms to improve its work.

Evidence

IKCA adopted a new *Policy on internal quality assurance* in October 2023, which is available on the website of the agency. In it, the objectives of internal quality assurance are:

- a) to ensure the correct implementation of agency's regulated procedures;
- b) to ensure strict adherence to internal regulatory documents;
- c) to inform IKCA's management about violations related to standardised procedures, in a timely manner;
- d) to create conditions for continuous improvement of IKCA's procedures;
- e) to increase the satisfaction of the users of IKCA's services and other stakeholders (students, employers, the public);
- f) to motivate IKCA's employees to continuous professional development;
- g) to contribute to the rational and efficient use of IKCA's resources;
- h) to serve as a basis for cyclical external quality assurance.

The panel is aware that the activities of IKCA in terms of accreditation in higher education increased since the last ENQA review in 2022. However, the number of staff members did not increase during this period. The new *Regulation on selection, recruitment and hiring of staff* was used to hire three people since its adoption in 2023 (two of which in the field of higher education). This document clearly defines the process of staff selection, pertaining to opening a vacancy, staff recruitment, screening of candidates and interview process. It also described the procedure for staff relocation within the agency (defined as 'personnel movement', Article 6), which can be vertical or horizontal.

To assure the competency of its employees, IKCA prescribes the minimal requirements for the vacant positions. IKCA sets professional standards for the employees, and in their work with all subjects (persons, organizations, authorities) they treat their collaborators with respect, dignity and courtesy. All employees adhere to the *Code of Honor of Center Employees*, which has to be individually signed by

all employees. In this document, the relationships of employees with their colleagues, management, HEIs and interested parties are described as having to be based on the principles of integrity, courtesy, tact, responsibility, trust, decency, mutual respect and cooperation. In interaction with external organizations (HEIs, experts, media, public), the employees of IKCA should adhere to the stipulations under the mentioned *Code of Honor of Center Employees*, and they should adhere to business ethics, communication culture, and goodwill in communication.

The policy on internal quality assurance additionally describes that IKCA regulates all processes of the full cycle of accreditation and allows the monitoring of compliance to the standardised procedures of the agency. The development and the approval of documents (standards, regulations, guidelines etc.) is described, as well as revision and updating of documents. IKCA also describes their cooperation with foreign quality assurance agencies, which is based on the principles of equality, partnership, transparency and honesty. They collaborate on the exchange of practices, in accreditation procedures, conducting seminars, improving the standards and criteria for institutional and programmatic accreditation. IKCA does not have a described procedure for subcontractors' adherence to the ESGs, and the panel did not obtain information of any subcontractors hired by IKCA. The agency publishes the results on accreditation procedures on its website accompanied by the certificates issued for specific programme or institution, as well as the decision of the Accreditation Council.

The panel had the opportunity to meet with the members of the following IKCA bodies: Working Group, Accreditation Council, Supervisory Board, Appeals and Complaints Commission, Expert Council on higher and postgraduate education. The roles of some of these bodies are clear (Working Group, Appeals and Complaints Commission) but the Accreditation Council, the Supervisory Board members and the members of the Expert Council at times had difficulties expressing their roles in internal processes. For example, they had difficulties explaining their role in the improvement of standards and guidelines of IKCA (Accreditation Council, Expert Council) or providing feedback for improvement of IKCA's processes (Supervisory Board).

In order to improve agency's activities, IKCA is collecting feedback in different ways: directly from the HEIs that underwent accreditation procedures, from IKCA's experts and online, through their webpage. It is, however, important to note that the public feedback form on IKCA's website can be filled-in by everyone and there are no structured questions. Additionally, in IKCA's policy on internal quality assurance, feedback mechanism is mentioned, but how the feedback results will be used for internal improvements within the agency is not clarified.

The panel received a copy of the feedback form IKCA sends to the experts, which is also included in the *Instruction on Ensuring Interaction with Interested Parties*, adopted on November 1st 2024. In the instruction, a feedback form that IKCA sends to HEIs is available as well. The questionnaire for the experts contains seven questions, allowing the experts to reflect on their satisfaction in collaborating with the agency, they can rate the level of satisfaction with the organizational aspect of the accreditation, and they can generally reflect on IKCA's external evaluation process. The questionnaire for the institutions contains 15 questions, where the HEIs provide the name of the HEI, the type of the organization and the number of accredited programmes, as well as information on various improvements since accreditation (based on recommendations). They also evaluate the professionalism of IKCA's experts during the accreditation. The panel was made aware that the feedback form for HEIs is submitted as a singular form from the head of the HEI to IKCA. The usual practice is that the team responsible for HEI's quality assurance activities, together with the HEI management, meets and they jointly fill-out the feedback form, which is then forwarded to IKCA. Such practice was confirmed in the interviews with HEI heads, HEI quality assurance officers, and the academic staff members. During the discussion with the department heads, the review panel inquired whether and how does the agency employees receive feedback on their work. It emerged that regular

development discussions are not conducted, but the *Department of legal and personnel support* is in the process of developing a feedback survey for employees.

The panel obtained conflicting information regarding the availability of experts' feedback forms. In the discussion with international experts and students, it was apparent that they were unaware of the existence of feedback forms and they did not have the chance to fill them out. However, the agency provided results of the collected experts' feedback for 2023, during the site visit, where the satisfaction rates of experts were analysed by the agency.

During the site visit, the panel also met IKCA's regional representatives who stated that their role in the accreditation procedures is to provide technical and organizational support to the external expert groups. They make sure that the self-assessment reports are submitted in time (and they forward it to the *Department of methodology, monitoring and quality assurance*, they suggest a site visit schedule, they inform the HEIs about the selected EEG members and confirm them, among other tasks. They do not interfere with the accreditation process and they do not provide any feedback on the received self-assessment report.

To maintain the integrity in agency's work, the agency adopted a policy on the conflict of interest for their employees (excluding the founder and the director of IKCA). All IKCA's external experts need to adhere to the *Code of ethics of an external expert in the field of quality assurance*, which is signed individually by each expert.

Analysis

IKCA's newly adopted policy on internal quality assurance was seen by the panel as a step back in terms of the comprehensiveness and coverage of internal quality assurance processes, compared to the manual available to the panel at the last ENQA review. The content of the new policy has decreased almost threefold, leading to the lack of descriptions of various stakeholders' role in accreditation processes. This was one of the issues observed also in the past review, so the panel concluded that the same challenges still persist. Current policy on internal quality assurance is more consistent with the content of the other documents on IKCA's bodies, but there is a lack of description of feedback loops and monitoring stages.

In the policy mentioned above, it is described that the feedback collection and analysis are discussed during the general meetings of IKCA, followed by the preparation of a report. The panel received a document from IKCA, titled '*Survey results from 2023*' which represented a summary of feedback results with no substantive analysis. For example, an excerpt from the document states: "*The answer to question 5 was important for the IKCA: 'Which of the listed principles, in your opinion, are observed in the procedures for external quality assessment of the IKCA? (You can select several answers from the following: Independence, Objectivity, Transparency, Systematicity and Integrity, Non-affiliation, Confidentiality, Compliance with the Expert's Code of Honor, All of the above principles).'*' The analysis showed that more than 83% of experts answered that all of the above principles underline the accreditation procedures of the IKCA and are strictly observed." Therefore, the analysis is limited to stating the result and does not provide separate evaluations of the different aspects of data. Therefore, in panel's view, the principle of conducting an analysis based on feedback results has not been followed by the agency. Furthermore, the panel was unable to ascertain to improvements made within the agency based on the feedback collected from the interviews with IKCA's executive management and senior management staff.

During the visit, the panel also met with IKCA coordinators who oversee the work of the accreditation committees. These coordinators, referred to as '*regional representatives*' or '*employees of regional offices*', are tasked solely with providing technical and organizational support during the accreditation procedure. The involvement of regional representatives in the evaluation process is reasonable, as the agency conducts accreditations across different regions of Kazakhstan. However, during the discussion with the coordinators, it became evident that their role is not to provide substantive support to the

committees or to ensure the consistency during the accreditation process. The review panel believes that, in the interest of ensuring continuity in the accreditation process, coordinators should have a considerably larger, more significant role. Given that the number of higher education accreditations has increasingly grown in the previous years, while the number of agency staff has not increased significantly, the agency should find ways to further support and develop the competencies of its coordinators. This would enable them to take on a more substantive role, provide guidance to the committees regarding IKCA's standards and guidelines, and ensure the avoidance of any conflicts of interest on-site.

It would be useful to expand the feedback forms for EEG members to include specific questions on site visit experiences and report drafting process. This would provide IKCA with more targeted data for internal improvements. The feedback form for HEIs is filled-out jointly and is singular per institution. It requires the HEI to identify itself and for the HEI staff to provide the information on the number of accredited programmes. These forms contain mostly multiple-choice questions with very little space for the provision of constructive feedback to IKCA. Here, the panel noticed several areas for improvement. Firstly, according to the section 4 (*Control*) of the policy on internal quality assurance, '*analysis of the survey results is carried out in the context of each visit (audit) to the educational organization*', meaning that if the HEI is undergoing a single accreditation procedure, only one feedback form will be collected from this procedure. Secondly, under the same section of the policy on internal quality assurance, the agency ensures the anonymity of respondents' participation. Despite this being defined, it is not clear how is anonymity assured in cases in which the institution needs to identify themselves when providing feedback, even in case of multiple site visits, which would require the submission of multiple feedback forms. If a procedure is clustered, and one site visit is organized for multiple accreditation procedures, it is not clear whether feedback is collected only once or for each programme.

The panel welcomes the agency's effort to introduce the feedback form for employees, as stated in IKCA's policy on internal quality assurance (section 2), and providing the employees with regular feedback on the issue of resource requirements and their satisfaction.

Panel recommendations

1. The agency needs to invest further effort to anonymise feedback collection from HEIs who are undergoing institutional or programmatic accreditation, as well as encourage them to provide feedback that supports the agency's development.
2. The agency must review its internal quality assurance guidelines and improve the quality assurance procedures for various aspects of its core process- the accreditation process- such as the methodology for ensuring the quality of accreditation reports and the establishment of competence-based selection criteria for members of the Accreditation Council.

Panel suggestions for further improvement

1. Given the significant increase in the volume of higher education accreditations compared to previous years (while the number of agency staff has remained the same) it is advisable to enhance the skills and knowledge of existing staff to ensure the quality of the accreditation process. For example, regional representatives could be enabled to take on coordinator roles with expertise in content and processes.

Panel conclusion: partially 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.

2022 ENQA review recommendations

1. The review panel recommends that IKCA align the standards published on the agency's website with the self-assessment guidelines.
2. The review panel recommends that IKCA take proactive measures and implement a process to ensure the accreditation reports follow the standards and criteria set out in the respective documents.
3. The review panel recommends that IKCA increase its emphasis on enhancing the understanding of the full meaning of ESG part I, ensuring the implementation of ESG Part I, focussing on the effectiveness of IQA rather than the availability of IQA, and addressing in particular ESG:
 - (1.2) - addressing the concept of outcome-based programmes in a more consistent way;
 - (1.4.) - including the recognition of non-formal and informal prior learning next to the recognition of academic studies;
 - (1.7) - rethinking the concept of information management and applying it as a complex tool for the development of IQA system;
 - (1.9) - addressing the periodic review of programmes in a more holistic way, taking into account all relevant aspects and involving students and other stakeholders.

Issues to be checked in this focused review as defined by the ToR:

- I. whether the practical implementation of Part I is ensured and whether all standards of Part I are included in IKCA's reports;

Evidence

So far, IKCA has developed Standards for institutional assessment of HEIs, for institutions in the medical and for institutions in pedagogy fields; as well as for programme evaluation of HEIs and for the assessment of medical and pedagogical programmes. The Standards for pedagogical institutions and for pedagogical programmes were introduced in October 2023 for the first time.

These Standards are divided as mentioned below:

- a) Standards for institutional accreditation of organizations of higher and post-graduate pedagogical education based on ESG-2015
 - a. Standard 1. Strategic development and quality policy
 - b. Standard 2. Pedagogical educational programs
 - c. Standard 3. Student-centered learning, teaching and assessment
 - d. Standard 4. Student admission, performance, recognition and qualification
 - e. Standard 5. Teaching staff
 - f. Standard 6. Research activities
 - g. Standard 7. Resources and student support services
 - h. Standard 8. Information management and public*
**The title of this Standard was incomplete in the original document.*
 - i. Standard 9. Periodic external quality assurance

- b) Standards for specialized (programme) accreditation of organizations of higher and post-graduate pedagogical education based on ESG-2015
- Standard 1. Policy in the field of ensuring the quality of the educational program
 - Standard 2. Development and approval of an educational program
 - Standard 3. Student-centered learning, teaching and assessment
 - Standard 4. Student admission, performance, recognition and qualifications
 - Standard 5. Teaching staff
 - Standard 6. Student resources and support
 - Standard 7. Information management and public awareness
 - Standard 8. Regular monitoring, periodic evaluation of educational programs, periodic accreditation

The listed standards are accompanied by separate guidelines, but the panel noticed a mismatch between the criteria described in the standards and the respective guidelines, for both documents. This is further described under standard *ESG 2.2. Designing methodologies fit for purpose*.

Below in Table 3, a summary of the alignment of the ESG part I with IKCA's standards for programmatic and institutional evaluation in the field of pedagogy is provided by the panel.

Table 3. The alignment of the ESG Part I with IKCA's standards on institutional and programmatic accreditation in the field of pedagogy.

ESG part I standards	Standards for institutional accreditation of organizations of higher and post-graduate pedagogical education based on ESG-2015	Standards for specialized (programme) accreditation of organizations of higher and post-graduate pedagogical education based on ESG-2015
I.1 Policy for internal quality assurance	<p>Applicable criteria: 1.1- 1.15</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - Existence of a policy for QA: 1.7 - QA policy is published: 1.7 - Organizational units participate in QA: 1.8, 1.11 - Academic integrity and academic freedom are vigilant against fraud and discrimination: 1.9, 1.10 - Involvement of external stakeholders: 1.8 - Internal QA processes are in place at all HEI levels: 1.12-1.15 	<p>Applicable criteria: 1.1- 1.11</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - Existence of a policy for QA: 1.1 - QA policy is published: 1.1 - Organizational units participate in QA: 1.4, 1.5 - Academic integrity and academic freedom are vigilant against fraud and discrimination: 1.9, 1.10 (discrimination not mentioned) - Involvement of external stakeholders: 1.5, 1.11 - Internal QA processes are in place at all HEI levels: 1.6-1.8
I.2 Design and approval of programmes	<p>Applicable criteria: 2.1-2.23</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs have procedures for the approval of their programmes: 2.2 - Qualifications are in line with the NQF, EQF and communicated well: 2.1 - HEI's teaching mission is based on study-programmes: 2.4 - Students are provided with necessary skills and knowledge: 2.8-2.11 - Alignment with the programme requirements according to ESG 1.2: 2.2, 2.5-2.21 (involvement of external stakeholders in the programme design is not described) 	<p>Applicable criteria: 2.1-2.14</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs have procedures for the approval of their programmes: 2.1 - Qualifications are in line with the NQF, EQF and communicated well: 2.2 - HEI's teaching mission is based on study-programmes: 2.1 - Students are provided with necessary skills and knowledge: 2.4-2.6 - Alignment with the programme requirements according to ESG 1.2: 2.1, 2.3-2.14 (no mention of the workload in ECTS credits)
I.3 Student-centered learning,	<p>Applicable criteria: 3.1-3.19, 5.16, 5.17</p> <p>Specific evidence according to the ESG:</p>	<p>Applicable criteria: 3.1-3.12</p> <p>Specific evidence according to the ESG:</p>

teaching and assessment	<ul style="list-style-type: none"> - Student-centered learning and teaching: 3.1- 3.5, 3.19, 5.16 - Students' assessment needs to reflect student-centered learning, according to ESG 1.3: 3.6, 3.8-3.12, 3.16, 5.16, 5.17 	<ul style="list-style-type: none"> - Student-centered learning and teaching: 3.1-3.3, 3.5 - Students' assessment needs to reflect student-centered learning, according to ESG 1.3: 3.4, 3.6-3.12
I.4 Student admission, progression, recognition and certification	<p>Applicable criteria: 4.1-4.6</p> <p>Pre-defined regulations on students' "life-cycle" are described generally in the standards, covering students' admission, progression, recognition and certification.</p>	<p>Applicable criteria: 4.1-4.12</p> <p>Pre-defined regulations on students' "life-cycle" are described broadly in the standards, covering students' admission, progression, recognition and certification.</p>
I.5 Teaching staff	<p>Applicable criteria: 5.1-5.19, 6.1-6.17</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - Teachers should be competent and their personal development supported: 5.1-5.14, 5.19, 6.1, 6.4, 6.9, 6.14, 6.16, 6.17 - Policies for staff-recruitment should be in place: 5.2, 5.5 	<p>Applicable criteria: 5.1-5.10</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - Teachers should be competent and their personal development supported: 5.2-5.10 - Policies for staff-recruitment should be in place: 5.1
I.6 Learning resources and student support	<p>Applicable criteria: 3.3, 3.5, 7.1-7.23</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs should have appropriate funding for educational activities: 7.1-7.5 - Learning resources should be adequate and available: 7.5-7.19 - Student support is provided: 3.3, 3.5, 7.20-7.23 	<p>Applicable criteria: 6.1-6.10</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs should have appropriate funding for educational activities: 6.6 (only pertaining to funds for literature, not programme funding) - Learning resources should be adequate and available: 6.1, 6.3-6.5, 6.7 - Student support is provided: 6.2, 6.8-6.10
I.7 Information management	<p>Applicable criteria: 1.12, 1.15, 3.17, 4.2, 8.2</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs' collection, analysis and use of data are a part of the HEI's internal QA system: 1.15 - Information on graduate career paths; students' profiles, progression, success, drop-out rates, satisfaction with programmes is analysed: 3.17, 4.2, 8.2 - Students and staff are involved in information analysis and follow-up: 1.12 	<p>Applicable criteria: 7.1-7.10</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs' collection, analysis and use of data are a part of the HEI's internal QA system: 1.8 - Information on graduate career paths; students' profiles, progression, success, drop-out rates, satisfaction with programmes is analysed: 7.3 - Students and staff are involved in information analysis and follow-up: 7.4
I.8 Public information	<p>Applicable criteria: 8.1, 8.2, 8.5, 8.6</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs publish information on their activities: 8.1, 8.2 - HEIs make sure their information is up-to-date: 8.5, 8.6 	<p>Applicable criteria: 7.1, 7.2, 7.5, 7.7-7.10</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs publish information on their activities: 7.1, 7.2, 7.5, 7.8-7.10 - HEIs make sure their information is up-to-date: 7.7
I.9 On-going monitoring and periodic review of programmes	<p>Applicable criteria: 2.12-2.16, 8.1, 8.5</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs monitor and periodically review their programmes on a continuous basis: 2.12, 2.14-2.16 - Students and other stakeholders are involved in programme updates: 2.13, 2.14 	<p>Applicable criteria: 8.1-8.7</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - HEIs monitor and periodically review their programmes on a continuous basis: 8.1-8.3, 8.6 - Students and other stakeholders are involved in programme updates: 8.4,

	<ul style="list-style-type: none"> - Revised programme specifications are published: 8.1, 8.5 	<ul style="list-style-type: none"> 8.5 (does not specify the stakeholders involved) - Revised programme specifications are published: 8.6, 8.7
1.10 Cyclical external quality assurance	<p>Applicable criteria: 9.1-9.7</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - Institutions should undergo external QA in line with the ESGs: 9.1 - QA process is continuous: 9.2-9.5 	<p>Applicable criteria: 8.9-8.12</p> <p>Specific evidence according to the ESG:</p> <ul style="list-style-type: none"> - Programs should undergo external QA in line with the ESGs: 8.10-8.12 - QA process is continuous: 8.9

The alignment of the standards for higher education institutions and programmes, as well as the standards for medical educational organizations and medical programmes with the ESG part I was reviewed by the panel in the 2022 ENQA’s full-review of IKCA. Since then, the agency amended the documents for the purpose of alignment between their standards and guidelines. The agency also mentioned, in their self-assessment report, that they added additional criteria in terms of ESG 1.1, ESG 1.4, ESG 1.6, ESG 1.7 and ESG 1.9, to the standards for institutional and programmatic assessment in higher education (see Table 4). However, the coverage of these ESG standards in IKCA’s standards was not an issue identified during the last ENQA review. It was rather the practical implementation of those standards within the reports. Therefore, the amended IKCA documents were not checked again for compliance with the ESG part I, although the panel recognizes the effort of IKCA to add additional criteria and strengthen their existing standards to cover ESG part I.

Table 4. Additional criteria inserted into IKCA’s standards to address ESG part I standards.

Number of IKCA standard	Standards for institutional accreditation of higher education institutions	Standards for specialized (program) accreditation of higher education and postgraduate education based on ESG-2015
Standard 1.	Added criteria: 1.5 - 1.15	Added criteria: 1.5 – 1.11
Standard 4.	Added criteria: 4.4 - 4.6	Added criteria: 4.5 – 4.12
Standard 6.	N/A	Added criteria: 6.5 – 6.10
Standard 7.	Added criteria: 7.5 - 7.23	Added criteria: 7.4 – 7.10
Standard 8.	Added criteria: 8.3 - 8.6	Added criteria: 8.4 – 8.14
Standard 9.	Added criteria: 9.5- 9.7	N/A

IKCA currently does not use their standards for institutional accreditation and programme accreditation in the field of medicine. This is due to not having a status of an agency with the possibility of carrying out recognition procedures according to the World Federation for Medical Education’s criteria. To be able to accredit medical programmes and institutions in Kazakhstan, having this status is necessary. Therefore, since no programmes were accredited according to these standards since 2022, the panel did not address the improvements in the alignment between these standards and the ESG part I in great detail. However, a short summary is provided below, in the analysis section. Like in case of standards for institutional and programmatic accreditation in higher education, the 2022 ENQA review panel found that the standards for institutional accreditation and programme accreditation in the field of medicine cover the ESG part I sufficiently.

The panel also collected evidence of IKCA performing training for experts to further their understanding of ESG part I, through effective use of IKCA’s evaluation criteria. In the self-assessment report, two occasions of such trainings were listed: January 15th 2024 and January 16th 2024. The experts also confirmed, during interviews, that IKCA explained to them the meaning of the ESGs.

Analysis

The panel was initially able to download the *Guideline for Compilation of the Self-Assessment Report Within the Framework of Institutional Accreditation of Medical Educational Organizations* from IKCA’s webpage.

Standards 1. *Mission and deliverables*, 2. *Educational programs*, 6. *Educational resources* and 8. *Management and Administration* had significant discrepancies considering the *Standards for Institutional Accreditation of Medical Educational Organizations*. For example, under standards 1, 2 and 8, cases of missing or differing criterion descriptions are noted (e.g. criteria 1.1.4; 1.1.5; 2.1.1; 2.1.2; 2.5.3-2.5.5; 8.1.2), additional criteria was introduced (e.g. 2.6–2.8; 6.4–6.6) or was missing from the guidelines (e.g. 8.5.3). Later, the panel received another set of guidelines, namely *Guidelines for the Preparation of a Self-Assessment Report Within the Framework of Institutional Accreditation of Medical Educational Organizations*, adopted in October 2023. According to these guidelines, most criteria match with those in the aforementioned standards, but there are still some mismatches noted. For example, additional criteria 6.4 *Medical research and scientific advances*, 6.5 *Educational expertise* and 6.6 *Exchange in education* is still present in the guidelines, not mentioned in the standards. Additionally, criterion description 8.3.3. was missing from the guidelines.

Prior to the site visit, the panel was able to download, from IKCA's webpage, *Standards for Specialized (Program) Accreditation of Medical Educational Organizations*, as mentioned in the SAR. Corresponding guidelines were downloaded too: *Guideline for Compiling a Self-Assessment Report Within the Framework of Specialized Accreditation of Medical Educational Institutions*. However, during the preparation of this report, the panel noticed that a new set of standards, adopted in October 2023, was uploaded to the agency's website, namely *Standards for Specialized (Program) Accreditation of Basic Medical and Pharmaceutical Education Programs (Based on WFME/AMSE/ESG)*. The panel wants to note that no information was received from the agency of this change, and the new document was not received by the panel prior-to, or during the site visit. Therefore, the panel cannot say, with certainty, when was the new document uploaded to the webpage, as initial analysis was done just before the site visit. Therefore, the panel also provided a short analysis of this second document. The content of the initial standards did not match, in its entirety, to the content of the corresponding guidelines. In particular, subdivisions of criteria were not present in the standards, but in the guidelines, the criteria were numbered and described. The titles of standards 2-9 were different in standards, compared to the guidelines. Standard 3 had 12 criteria with no subsections, while in the guidelines, the criteria were only divided into 2 sections with multiple subsections. Same issue was noted for standards 4-9. Additionally, the biggest issue was the lack of correspondence in the content of the criteria between the standards and the guidelines (e.g. 4.1- 4.4; 5.1; 5.2; 6.1-6.6; 7.1-7.4; 8.1-8.5). Additionally, the guidelines contained standard 9. *Continuous improvement*, which was not present in the standards. The content between the new standards and the existing guidelines corresponds, with slight differences in interpretation due to translation. Criterion 5.2.2. was skipped in both documents, therefore, the content matches, but the numbering should be corrected.

Therefore, the panel could conclude that the content between the standards and the guidelines concerning programmatic accreditation in the medical field matches well. Some improvements are necessary to align the standards with the guidelines concerning institutional accreditation in the medical field, concerning standards 6 and 8 in particular. Therefore, the suggestion of the 2022 ENQA panel regarding IKCA adopting a separate set of standards for institutional accreditation of medical educational organizations was addressed fully by the agency. Additionally, the panel found that the newly adopted *Standards for Specialized (Program) Accreditation of Basic Medical and Pharmaceutical Education Programs (Based on WFME/AMSE/ESG)* are much clearer, as they follow a general structure of other IKCA standards and they correspond with their respective guidelines. Similarly, the *Guidelines for the Preparation of a Self-Assessment Report Within the Framework of Institutional Accreditation of Medical Educational Organizations* mostly correspond to the respective standards, with the exceptions of standards 6 and 8, as mentioned above.

Since all the available standards related to higher education were updated late in 2023, the panel considered the implementation of IKCA's standards in the reports produced after October 2023. Between October 2023 and October 2024, IKCA performed three institutional assessments, and 146

individual programme assessments. The reports of these procedures were available online in IKCA's *Register of decisions and reports*, and were analysed in English language. No reports were found where the standards in the field of medicine or pedagogy were applied. Therefore, the panel was only able to assess the effectiveness of the internal quality assurance processes (according to ESG part I) for reports where those standards were applied.

The panel chose to review all three reports from institutional accreditations available, namely:

- a) Accreditation of *Institution A* (April 2024).
- b) Accreditation of *Institution B* (June 2024).
- c) Accreditation of *Institution C* (July 2024).

At random, three reports from programme accreditations were chosen for review, namely:

- a) Accreditation of *'Training teachers of biology and geography'* programme (June 2024); EQF level 6.
- b) Accreditation of *'Informatics'* programme (April 2024); EQF level 7.
- c) Accreditation of *'Computer Science'* programme (November 2023); EQF level 6.

The findings of the panel concerning the effective implementation of ESG part I in the abovementioned reports is reflected below. It is relevant to note that all these reports contained standards with either full compliance or partial compliance, as all the selected institutions and programmes are accredited by IKCA.

a) ESG I.1 Policy for quality assurance

Based on the analysed evidence, the coverage of the ESG standard I.1 is sufficient in IKCA's standards and for all institutional reports. However, the coverage of the ESG I.1 across all institutional reports mostly focuses on policies, and the examples of practices are sometimes missing as evidence of the implementation of policies. This is particularly evident related to criteria I.5 and I.15., related to strategy development and quality policies.

In the report for the programme *Informatics'*, no evidence is provided that an annual monitoring on the implementation of policies takes place. In all three programmatic reports, no evidence of external stakeholders' involvement in the revision of internal QA is present (criteria I.5). In fact, portions or the entire content of criteria I.5-I.11 were copied word-for-word in the report on the *'Computer Science'* programme, with no evidences provided of the adherence of the programme with the policies on academic integrity, inclusion of students and trainees in the system of internal QA, persons responsible for internal QA or examples of documentation of QA procedures.

Overall, the panel concluded that the coverage of ESG I.1 is sufficient in IKCA's standards for institutional and programme assessment, but the implementation of the standards is lacking. This is evident through the lack of evidence presented in institutional reports, and inconsistencies across reports on programmatic accreditation.

b) ESG I.2 Design and approval of programmes

The coverage of the ESG standard I.2 is sufficient for all institutional reports. However, in all three reports, the outcome-based nature of programmes was not addressed and there seemed to be an issue with understanding the term *'learning outcomes'*. Examples of improvements within the internal quality assurance system were not provided in these reports. Examples of inclusive learning and teaching was given only in the evaluation of *Institution B*. In all three of the programmatic reports reviewed, no evidence was presented on criterion 2.2, where the adherence of the programme to the national qualifications framework (NQF) and the European qualifications framework (EQF) should be described. The same occurrence is noted for criterion 2.3 on the development of the learning

outcomes. Word-for-word copying of the text from the standards was noted for criteria 2.4-2.13 in the report on 'Computer Science'. No evidence for students' engagement in updating the programmes was evidenced in any of the programmatic reports (criteria 2.8, 2.11). The panel concluded that the practical implementation of ESG 1.2 in programmatic reports is inconsistent.

c) ESG 1.3 Student-centered learning, teaching and assessment

The coverage of the ESG standard 1.3 is sufficient for all institutional reports. Under this standard, detailed descriptions of each criterion are given and substantiated with evidence. Word-for-word copying of the text from the standards was noted for criteria 3.6-3.12 in the report on 'Computer Science', therefore, this standard remained largely unaddressed within this programmatic report. In the report of 'Informatics' programme, very little evidence is provided on student-centered learning. Therefore, ESG 1.3 is inconsistently addressed in practice, pertaining to programmatic accreditation reports.

d) ESG 1.4 Student admission, progression, recognition and certification

The title of this standard slightly differs between reports on institutional accreditation. It was found that the application of the criteria 4.2 in institutional reports varies, and it does not necessarily reflect the meaning of IKCA's standard. The standard lists the main indicators of the students' "life-cycle" that the HEI should analyse. However, in case of *Institution A* and *Institution B*, under this standard, only the admission of students is described. In the report of the *Institution C*, it is mentioned that a comprehensive analysis of key indicators is performed, but those indicators were not listed. Similar discrepancies, where the content of the report does not match the description of the criteria in the standards for institutional accreditation, is noted for criteria 4.3, 4.4 (this criterion is not addressed at all in the report of *Institution B*), 4.5. These criteria pertain to publishing information about the procedures and rules related to students' study-cycle, as well as recognition of informal and non-formal learning and mobility, respectively. According to the ESG 1.4, in the institutional reports, the following aspects were therefore not addressed: practices (and policies, in case of *Institution B*) in place for the analysis of students' "life cycle"; the implementation and the adoption of policies for the entire period of student education; policies on the recognition of informal and non-formal learning. At *Institution C* and the *Institution A*, an example of a policy for recognition was given, namely 'Rules for the recognition of educational documents' approved by Order No. 268 of the Minister of Science and Higher Education, which refers only to formalised learning. Only one of the three programmatic reports had the title of this standard corresponding to that in the standards ('Informatics'). Word-for-word copying of the text from the standards was noted for criteria 4.2-4.12 in the report on 'Computer Science' (related to student admission, performance, recognition and qualifications). No evidence of the implementation of the student-centered learning in terms of several criteria is provided, despite the programme being found compliant with IKCA's standard 4. Only in the report of the 'Informatics' programme, evidence is collected regarding the recognition of informal and non-formal competencies of students. The panel concluded that the implementation of ESG 1.4 in practice, within reports on programmatic accreditation, varies and is inconsistent across reports.

e) ESG 1.5 Teaching staff

Criteria 5.1 (regarding the number of teaching staff) of IKCA's standards was misunderstood in the report of the *Institution C*, and was therefore, not covered. At times, evidence was not provided for the statements in the reports (some examples: criteria 5.2, 5.4, 5.15, 5.17 in the *Institution A* report, criteria 5.4-5.9 in the *Institution B* report; criteria 5.8, 5.17 in the *Institution C* report). Therefore, despite the ESG 1.5 being sufficiently covered by IKCA's standards for HEI accreditation, the implementation of this standard in the institutional reports is lacking. In particular, following points remained insufficiently addressed: examples of staff and teacher recruitment processes and criteria; the qualifications of the teaching staff; the activities organized by the HEIs to promote the professional

development of teaching staff; the evidence of use of new technologies in teaching. Word-for-word copying in the description of criterion 5.17 (ensuring implementation of progressive approaches to teaching) is noticed for *Institution A* and the *Institution C* reports. IKA's standard 6 pertains to research activities of the teaching staff, and the same issue in evidencing the statements is evident, particularly related to criteria 6.1, 6.7-6.10 in the report of *Institution C*. However, since IKCA has a full standard addressing research activities at HEIs, the coverage of the research activities under ESG 1.5 is sufficient in the report. In case of the report on 'Training teachers of biology and geography' programme, no evidence on policies or procedures for staff recruitment is provided, as well as on the necessary qualifications of the teaching staff (IKCA's criteria 5.1, 5.2). Word-for-word copying of the text from the standards was noted for criteria 5.3-5.11 in the report on 'Computer Science', therefore, this standard remained largely unaddressed within the analysis part of the report. However, under 'Positive practice' section, the analysis was performed and IKCA's criteria was evidenced, which the panel found confusing. Based on these findings, the coverage of the ESG 1.5 in programmatic reports is sufficient, with room for improvement in evidencing the compliance to IKCA's standard 5.

f) ESG 1.6 Learning resources and student support

The same issue with providing evidence on scarce descriptions in the report on institutional accreditation of *Institution C* is noted, where many criteria described contained no evidences or detailed descriptions (criteria 7.1-7.5, pertaining to information management and public awareness). In the same report, as well as *Institution A*'s report, IKCA's criteria 7.4 on transparent budget allocation policy was not addressed at all by the EEG. The accessibility of resources (criteria 7.6) was not addressed by the reports on institutional accreditation of *Institution C* and *Institution B*, aside from classic availability of literature: digital and printed format. The descriptions of resources available to students, as well as support services are covered well. Overall, ESG standard 1.6 is partially covered in institutional reports, due to the lack of descriptions related to accessibility for the non-traditional students. The panel found the report of the 'Computer Science' programme confusing and hard to read, due to all criteria (6.1-6.10, related to student support and services) copied word-for-word under the title of the standard, not corresponding to the title of IKCA's standard 6. Underneath this text, the section 'Analysis and evidence' contains a 90-word description of HEI's financing, and is followed by the section 'Good practice' stretching over 2.5 pages, with the analysis of the standards. It is unclear why this structure of the report is applied, as formally, this would mean no analysis was performed by the external expert group of IKCA. In none of the three programmatic reports can be found evidence of the learning process being organized and available to non-traditional students. Therefore, the coverage of standards ESG 1.6 varies across programmatic reports.

g) ESG 1.7 Information management

ESG 1.7 Information management is not covered under IKCA's standard 8. Information management and public awareness for institutional accreditation. It is rather covered by criteria 1.12, 1.15, 3.17, 4.2 and 8.2, under IKCA's standards for institutional accreditation in higher education. In no institutional reports reviewed did the panel find evidence of effective or structured approach (or policy) for the collection and the analysis of activities related to internal quality assurance. Only the collection of students' feedback is referenced in case of *Institution C*. Word-for-word copying in the description of criterion 1.15 is noticed for *Institution A*'s and *Institution B*'s reports. No information collection about graduates' employment is evident under criteria 3.17 in the report of the *Institution A*. No evidence or description of procedures for information management or publishing the results of internal and external assessments were described in any of the institutional reports. Concerning programmatic accreditation, word-for-word copying of the text from the standards was noted for criteria 7.3-7.10 in the report on 'Computer Science' programme, with more detailed description under the section 'Good practice'. Criteria under standard 7 of IKCA's standards for programmatic accreditation refers to information management and public awareness. In all three reports, evidence was missing on the

collection, analysis and the use of the following data: data on attendance and academic performance, student achievement and dropout rates; satisfaction of students, their parents, graduates and employers with the implementation and results of educational programs; availability of material and information resources; employment of graduates; students' research results; key performance indicators of OHPE activities (IKCA criteria 7.3). Only in the report of the 'Training teachers of biology and geography' programme is the collection and the monitoring of the data on student population described. There is also no evidence, in any of the three programmatic reports, of the involvement of staff or students in the collection, analysis and planning of activities related to programmes. Only in the report on 'Informatics' programme could the panel find information on the use of analysed data for the improvement of educational programmes through an internal system of QA. The panel found that the implementation of the ESG 1.7 in programmatic reports is insufficient for all reports analysed.

h) ESG 1.8 Public information

The standard ESG 1.8 Public information is sufficiently covered in IKCA's standards and in the reports. In case of reports on institutional accreditation procedures, the lack of evidence of published content was noted, though short descriptions were provided. The reports of *Institution A's* and *Institution C's* institutional accreditations failed to provide evidence on the updateability and continuity in public information provision. In programmatic accreditation reports, word-for-word copying of the text from the standards was noted for criteria 7.3-7.10 in the report on 'Computer Science', with more detailed description under the section 'Good practice'. In the same report, no evidence of continuous improvement was provided, and no procedure to assure it was described. In the other programme reports, this standard was well-covered and evidenced. The panel found that the implementation of ESG 1.8 in the programmatic reports was sufficient, yet there is room for improvement in providing more detailed analysis.

i) ESG 1.9 On-going monitoring and periodic review of programmes

ESG 1.9 On-going monitoring and periodic review of programmes is not covered under separate standard for institutional accreditation. It is rather covered by criteria 2.12-2.16, 8.1, and 8.5, under IKCA's standards for institutional accreditation in higher education. Word-for-word copying in the description of criterion 2.12 and 2.14 (related to monitoring the quality of programmes, the collection and the analysis of information) is noticed for *Institution A's* and *Institution C's* reports. The EEG that compiled the 'Q' University report misinterpreted the criterion 2.12, and did not mention the stakeholders involved in the on-going monitoring, while the other two EEGs involved in institutional accreditation mentioned stakeholders, but failed to provide any evidence of their involvement. Overall, there is a sufficient coverage of the ESG 1.9 in the IKCA standards and in the institutional accreditation reports, however, the evidence and the procedures identified in the accreditation process should be further described. In the reports on 'Computer Science' and 'Informatics' programmatic accreditations, procedures for the on-going monitoring of students' satisfaction were described, however, not many other monitoring procedures were described, in line with IKCA's criteria 8.3. Word-for-word copying of the text from the standards was noted for criteria 8.6, 8.8, 8.9 in the report on 'Computer Science'. These criteria refer to monitoring, periodic evaluation of educational programmes and periodic accreditation. There was a lack of evidence or descriptions on the continuous monitoring and publishing information on updated programmes. Overall, the panel concluded that the ESG 1.9 is only partially covered in reports on programmatic accreditation.

j) ESG 1.10 Cyclical external quality assurance

The panel noted that two of the institutional reports did not contain descriptions of compliance with criteria 9.6 and 9.7 of IKCA's standard 9 (*Institution A* and *Institution C*). These criteria refer to the possible situations of suspension and the revocation of HEI's licence, and the panel agrees that these should be the stipulations of the accreditation contract/agreement, as these are statements and cannot

be considered criteria. Word-for-word copying in the description of criterion 9.5 is noticed for *Institution A's* and the *Institution C's* reports. The reports on the accreditation of these two institutions have also shown the respective EEGs' misinterpretation of criterion 9.3 and did not address how the external QA verifies the effectiveness of internal QA. They also did not describe their process of follow-up on accreditation. The panel concluded that the IKCA standards sufficiently and appropriately address ESG 1.10, however, this standard was only partially implemented in the reviewed reports on institutional accreditation. In the '*Computer Science*' report and in the '*Training teachers of biology and geography*' report, only 11 criteria (out of 14) were addressed (a mistake in the numbering of the criteria is present in the latter report). Criteria 8.13 and 8.14 refer to the possible situations of suspension and the revocation of HEI's licence, as previously described. Programme '*Informatics*' was undergoing its first review, therefore, no information of the procedures for regular external QA or post-accreditation monitoring was provided. Still, the panel believes that the procedures in place could have served as evidence of the awareness of these processes and the intention of performing them, and therefore, considers that these criteria (8.9-8.11) are only partially addressed. The panel finds that the ESG 1.10 is sufficiently covered in reports on programmatic assessment.

Overall, the panel was able to confirm that the challenges present during the 2022 ENQA review still persist, and that the institutional and programmatic accreditation reports inconsistently cover *ESG part I*. Particular issue remains the coverage of standard 1.7 across reports, where little to no evidences were collected based on IKCA's criteria, yet the institutions/programmes were still found compliant with IKCA's standards. However, it is relevant to note that IKCA's institutional and programmatic accreditation criteria covers *ESG part I* sufficiently, therefore, the issue arises from the implementation of criteria in the reports by the EEGs.

In particular, the analysis and evidence of improvements needs to be considerably improved concerning ESG 1.2, 1.4, 1.5, 1.7 and 1.9, as follows:

1. *ESG 1.2*: focus needs to be put on learning-outcomes and substantiating the design of the programmes through their definition.
2. *ESG 1.4*: all reports need to address the entire process of students' "life-cycle", from admission to graduation and post-graduation activities. Additional focus should be put on the recognition of informal and non-formal learning, which was not addressed in most reports.
3. *ESG 1.5*: all IKCA's criterion should be addressed by the EEGs. In particular, the information about teaching and other staff recruitment procedures and criteria, as well as teaching staff competencies should be described.
4. *ESG 1.7*: this standard requires most improvements. In the reports, evidence should be collected on the policies and practices of HEIs/ programmes on the internal quality assurance. Additionally, evidence needs to be given on the policies and practices for the collection, analysis and the use of data related to HEI/ programme's mission (such as key performance indicators, profile of student population, students' progression and drop-out rates, career paths of graduates etc.). Information needs to be provided on the involvement of stakeholders (staff members, students) in information analysis and follow-up activities.
5. *ESG 1.9*: stakeholders' involvement in programme design or updates should be evidenced. Descriptions on the continuous monitoring and publishing information on updated programmes should be substantiated with evidence.

Panel recommendations

1. The panel recommends that IKCA invest additional effort into developing a systematic and rigorous process for assuring that the accreditation reports follow IKCA's standards (as mentioned in the last paragraph of the analysis section).
2. IKCA should invest additional effort into developing a systematic and rigorous process for assuring that the institutions, programmes under evaluation, as well as the experts- members of the EEGs, understand the meaning of ESG part I, they implement it to a full extent, and they report on it.

Panel conclusion: partially 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.

2022 ENQA review recommendations

1. The review panel recommends that IKCA establish more formal and systematic processes for involvement of external stakeholders in the development of and continuous improvement of EQA methodologies.
2. The review panel recommends that IKCA develop a policy on consultation and explore mechanisms to broaden and enhance its consultation processes.
3. The review panel recommends that IKCA establish clear rules and procedures for combining several study disciplines in one programme accreditation procedure to assure fitness for purpose and support the institution to improve the quality of programmes.

Issues to be checked in this focused review as defined by the ToR:

Whether:

1. IKCA adopted a clear approach to grouping the programmes in its clustered reviews;
2. The involvement of stakeholders in developing and reviewing the methodologies is systemic and substantial.

Evidence

In October 2023, IKCA updated the eight existing documents related to EQA processes, and they adopted four additional documents, namely 'Standards' with corresponding 'Guidelines'.

Updated documents are:

- a) Standards:
 - a. *Standards for Institutional Accreditation of Higher Education Institutions;*
 - b. *Standards for Specialized (Program) Accreditation of Higher Education and Postgraduate Education Based on ESG-2015;*
 - c. *Standards for Institutional Accreditation of Medical Educational Organizations;*
 - d. *Standards for Specialized (Program) Accreditation of Medical Educational Organizations.*
- b) Guidelines:
 - a. *Guidelines for Compilation of the Self-Assessment Report Within the Framework of Institutional Accreditation of the Higher Education Organizations Based on ESG-2015;*

- b. *Guidelines for The Preparation of a Self-Assessment Report Within the Framework of a Specialized (Programmatic) Accreditation of Higher Education Institutions Based on ESG-2015;*
- c. *Guideline for Compilation of the Self-Assessment Report Within the Framework of Institutional Accreditation of Medical Educational Organizations;*
- d. *Guideline for Compiling a Self-Assessment Report Within the Framework of Specialized Accreditation of Medical Educational Institutions.*

Newly adopted documents are:

- a) Standards:
 - a. *Standards for Institutional Accreditation of Organizations of Higher and Post-Graduate Pedagogical Education Based on ESG-2015;*
 - b. *Standards for Specialized (Programme) Accreditation of Organizations of Higher And Post-Graduate Pedagogical Education Based on ESG-2015.*
- b) Guidelines:
 - a. *Guidelines on the Preparation of a Self-Assessment Report Within the Framework of Institutional Accreditation of Higher And Postgraduate Pedagogical Education Organizations;*
 - b. *Guidelines for the Preparation Of A Self-Assessment Report Within the Framework of a Specialized (Programmatic) Accreditation of Organizations of Higher and Postgraduate Pedagogical Education Based on ESG-2015.*

The definitions of standards related to programme and institutional assessment of HEIs mostly match between the documents. No standards are missing, and the descriptions are quite similar, with differences of little importance due to translation (e.g. descriptions of criteria 5.1, 5.12 in the standards on institutional evaluation of HEIs). There are, however, issues with abbreviations among these standards and their respective guidelines, as many terms are abbreviated differently between the documents (e.g. NQC=NQS='national qualifications system'; SOSE=SES='state educational standards'; OHPE=OVPO='university'). In some cases, terms of different meaning are used interchangeably, like 'domestic' with 'internal'; 'dormitories' with 'hostels'; 'interested parties' with 'stakeholders'. There are similar challenges in terms of abbreviations and the interchangeable use of non-interchangeable terms in the standards and the guidelines for institutional and programme assessment of medical educational organizations and the pedagogical institutions.

The alignment of the standards for the programmatic and institutional assessment of medical educational organizations, with their respective guidelines, was performed by the agency in 2023. Only several issues remained concerning institutional assessment of medical institutions. In case of standard 6. *Educational resources*, criteria 6.4 *Medical research and scientific advances*; 6.5 *Educational expertise*, and 6.6 *Exchange in education* were added to the guidelines, but did not exist in the standards.

There is a mismatch between the criteria in the standards for institutional assessment of pedagogical institutions and the corresponding guidelines, particularly related to standards 2, 6, 7 and 9. This is mostly related to the lack of legibility of the guidelines (portions of criteria were cut by the margins and left out from the document or the translations made no sense). In some cases, the translation of the criteria from the standards to guidelines changed in a way that the meaning of the criteria being addressed changed (e.g. 6.16, 6.17, 7.18, 8.1, 9.6). The same applies to the standards for programme assessment of pedagogical institutions, related to standards 2 and 5. Under these two standards, there is also a mismatch in the number of criteria. In some cases, for example criteria 6.1 and 6.4 in the guidelines for institutional assessment of pedagogical institutions, no evidence is asked from the HEIs to demonstrate compliance with these criteria.

In the period from the last ENQA review, IKCA continued to perform combined programme accreditations in different study fields (examples are found by the panel for programmes accredited in the last quarter of 2023) by the same panel of experts for multiple fields. There were also other cases of institutional and programme assessment combined. According to the 'Guidelines for Organizing and

Conducting External Evaluation (Audit) Within the Framework of Institutional and Specialized (Program) Accreditations, it is specified that, in case of programme accreditations at one institution with multiple educational programmes, a cluster up to seven programmes can be created. In that case, a single self-assessment report is produced based on the training direction, adjacency, similarity of qualifications, integration and complementarity, if a same study field is evaluated at different study levels (bachelor's, master's or doctoral studies). The composition of the experts' panel for clustered reviews is defined in the same document. There is a definition on reporting, under point 14.2, that in case of separate educational programmes, separate reports have to be produced. Reports available at the Register of decisions and reports of IKCA confirm IKCA's practice of producing singular reports per programme. Additionally, in the *'Instructions for Clustering Educational Programs During Specialized (Programmatic) Accreditation by the Independent Kazakhstan Center of Accreditation'*, adopted on October 11th 2024, it was confirmed that up to seven educational programmes can be clustered based on the relation of the programme to different study fields. Those study fields were listed in a tabular form for easier use.

An example of clustered programme accreditation is the accreditation of a single institution, covering the following clustered programmes:

- a) Category: Business, Management and Law; programmes: 'Economics', 'Finance', 'Management'.
- b) Category: Pedagogical sciences; programmes: 'Psychology', 'Psychology (scientific and pedagogical direction)'.

Aside from the described clustering practices, the panel found that IKCA sometimes continues to cluster programmes belonging to different study fields, with the production of separate reports. An example of such clustering is the programmatic accreditation at the Institution accredited in November 2023, where the same panel was responsible for the assessment of programmes from different study fields. Those programmes were: 'Chemistry', 'Biology in Education', 'Translation studies', 'Teacher of chemistry and biology', 'Teacher of geography and history'. The panel also found that IKCA sometimes combines institutional and programmatic accreditation, for example, in the case of an institution accredited in July 2024. Out of five members of the EEG for institutional accreditation, three simultaneously assessed three different programmes (Finance, Economics, Accounting) while two experts assessed five different programmes at the same time (Finance, Economics, Accounting, Management, Customs). Paralelly, during the same site visit, seven experts assessed five different programmes simultaneously (Chemical Engineering, Electroenergetics, Automation and Control, Construction, Oil and Gas Business). The site visit lasted a total of three days, with the interviews conducted mainly during the first day. This means that all programmes were assessed paralelly with the institutional accreditation procedure, in 30-minute interviews, mostly on that first day.

In the *'Instruction Manual to Organize the Process of Developing and Improving Standards and Guidelines'*, adopted on January 23rd 2024, IKCA's Expert Councils are involved in the development and improvement of IKCA's standards and guidelines, as well as their harmonization with the ESG standards. Different stakeholders were consulted on the newly adopted standards, namely the *Convention of Youth of Kazakhstan*, *Republican association of private educational organizations* and two professors from the Abai Kazakh National Pedagogical University and the East Kazakhstan State University named after S. Amanzholov, respectively. From the evidence provided by the Agency, the introduction of the *instruction manual* improved the transparency on the involvement of external stakeholders in consultations about changes to the Standards of IKCA. However, the nature of their involvement was not described, and evidences provided in appendices to the self-assessment report demonstrate IKCA formally inviting several stakeholders to provide written feedback on the already adopted accreditation Standards (letters are from January and April 2024, while the Standards were adopted in October 2023). There was no evidence provided that the external stakeholders were invited to actively participate in the amendments to these Standards, or even in the writing process of the development of new accreditation standards in the field of pedagogy. However, the panel

commends the agency's effort to involve students in the composition of the Expert Council on higher and postgraduate education, which will contribute to their active involvement in the procedures of updating internal documents.

The *Guidelines for the Organization and Conduct of an External Assessment (Audit) Within the Framework of Institutional and Specialized (Program) Accreditations* (clause 4.1) of IKCA state that the members and the chair of the EEG provide feedback on the initial self-assessment report received from the HEI applying to be accredited. Then, IKCA sends the feedback (if necessary) to the HEI, which then has the opportunity to submit the final self-assessment report, taking the feedback into account. The panel asked for further clarifications from IKCA's executive and senior management on this procedure and found out that only two such procedures happened in the past. The panel was also informed that the same panel of experts involved in this procedure is the one later participating in the site visit. This could potentially lead to the conflict of interest, since the self-assessment report gets improved based on the feedback from the EEG, which then performs the final assessment. Additional clarification was provided by the agency that the *Department of methodology, monitoring and quality assurance* checks the initial self-assessment report for compliance with the requirements of the report template. However, the panel highlights that this initial check performed by the *Department* is separate from the abovedescribed procedure on the feedback provision from the EEG.

In the regulation concerning Supervisory Board of IKCA, the tasks of this body include the '*development of recommendations and assistance in the priority areas of activities of IKCA*'. Similarly, in the regulation concerning the Accreditation Council of IKCA, the '*objectives of the Accreditation Council are internal and external assistance in creating an effective system for ensuring the quality of education and management systems in the organization of education*'. Despite both of these bodies having the potential to participate in developing and reviewing the methodologies of IKCA, the panel found no evidence of such engagement. Additionally, no evidence was collected on the involvement of these two bodies in developing and improving IKCA's Standards and Guidelines.

Additionally, the panel found that the stakeholders are not actively involved in planning thematic analyses, as they are determined by IKCA's identification of different focus areas. The panel noted that many interviewed groups of stakeholders were not aware of IKCA's thematic analyses, or how they could contribute to them.

Analysis

The panel found that the standards and the guidelines for institutional and programmatic accreditation of HEIs are well-aligned with each-other and commonly used in practice. However, there were considerable challenges with the alignment of the standards and the guidelines for institutional and programmatic assessment of the pedagogical institutions. The panel is aware that the standards concerning medical field were not used to assess any institutions or programmes so far. But should that be the case in the future, the discrepancy between the contents of these documents could cause some issues in accreditation procedures. Therefore, the panel concluded that there are still inconsistencies between the areas covered in the standards and accompanying guidelines for the programmatic and institutional assessment in the fields of pedagogy and medicine.

The panel found out, during the site visit, that the standards for the field of pedagogy were used in the accreditation of programmes at one of the universities accredited in December 2023. Due to the issues of alignment of standards with guidelines on programmatic assessment in the field of pedagogy, the panel wanted to check whether the report included the analysis of criteria mentioned in the standards, or those mentioned in the guidelines. However, it was instead established that the report was based on the '*Standards for Specialized (Program) Accreditation of Higher Education and Postgraduate Education Based on ESG-2015*'. The consistency of reports is described in detail under *ESG 2.5 Criteria for outcomes*.

However, it remained unclear to the panel whether the students are involved in the other Expert Councils (pertaining to the fields of medicine and pedagogy). In the appendix received by the panel, which contained the minutes of the Expert Council's meeting, it is not possible to determine whether the teachers and HEI Heads had an active consultative role on the content of the standards and guidelines, as external stakeholders. From the decisions made, it was apparent that they voted 'to approve the work of IKCA on updating regulatory documents', but their level of involvement itself is unknown. IKCA still does not have a policy on consultation developed, and in the interviews with academic staff and the students, they were unaware of the agency's efforts to consult on the improvements of standards, for example. Therefore, the panel concluded that IKCA's cooperation with the stakeholders (and the Supervisory Board) remains formal and it does not allow for their active participation in the amendment or the development of IKCA's methodologies.

The Panel recognized that the adoption of *'Instructions for Clustering Educational Programs during Specialized (Programmatic) Accreditation by the Independent Kazakhstan Center of Accreditation'* helped in the better understanding of clustered accreditation procedures IKCA performs. In this document, it is clearly stated that no more than seven programmes may be clustered together, and that a separate report is produced for each educational programme by the EEG. This document is aligned with the pre-existing regulation on clustering, namely *'Guidelines for Organizing and Conducting External Evaluation (Audit) Within the Framework of Institutional and Specialized (Program) Accreditations'*. Indeed, the panel found that the clustering procedure described in the guidelines was never performed by the agency, concerning programmes in the same field but at different study-levels. Instead, the clustering according to the new *instruction manual* was more correspondent with the practices of clustering programmes in the same study-fields. The panel was able to confirm this by reading the reports in IKCA's Register of decisions, reports and evidence. The review panel additionally found that the time constraint for performing clustered reviews makes the parallel assessment difficult. It also remains unclear what is the procedure for combining programme assessments with the institutional assessments (as this was not described anywhere in IKCA's documents). The panel finally concluded that the criteria for clustering of programmes is developed but further clarifications are necessary for clustering according to the study-level or when combining institutional and programme accreditation under one site visit. As the *'Instructions for Clustering Educational Programs during Specialized (Programmatic) Accreditation by the Independent Kazakhstan Center of Accreditation'* were approved on October 11th 2024, the panel was not able to check the implementation of this document. However, the agency has provided minutes of the meeting of the expert group where the composition of EEGs for specific programmes and institutions was discussed. According to the minutes, the instruction for clustering was followed. However, there are several cases since October 2023 where the recommendation from the previous review was not taken into account (one panel was accrediting several study fields, for example). The panel received a suggestion from the academic staff members during the site visit, which could help lower the workload for the HEIs in preparation for the accreditation. They mentioned that, in case of the same programme being conducted at two different study levels (eg. EQF level 6 and EQF level 7), the HEI is asked to produce two separate self-assessment reports, with the large majority of content overlapping. The content takes a lot of time to be prepared for both procedures, and the academic staff members would find it easier if only one self-assessment report would be produced with the description of differences between the two programmes. The panel considers it very important that the entire evaluation process be as resource-efficient as possible. Therefore, higher education institutions should have the option to decide which curricula within the same field of study are sufficiently similar to include them in a single report. Interestingly, this option is mentioned in the guidelines for conducting external audits (see page 3, section 2.3), but it is not described in the guidelines for compiling the self-assessment report. The panel recommends considering a similar approach for EEG reports prepared for individual curricula. Since there are significant overlaps between reports on curricula within the same field of study, including different levels of the same

specialty, we recommend exploring the possibility of addressing curricula of different levels of the same specialty in a single evaluation report (e.g., Sociology BA, Sociology MA, Sociology PhD).

Based on the past ENQA recommendation, the panel wanted to evaluate whether the Expert Councils participate in the consultation and improvement processes within IKCA. From the interview with the Expert Council members, it was confirmed that they have a role in updating IKCA's standards and guidelines, but even in this case, they could not describe clear procedures to do so. However, the panel noted that the organizational consultants (*Convention of Youth of Kazakhstan, Republican association of private educational organizations*) were asked to provide their feedback only after the new standards were adopted in late 2023. More specifically, the *Convention of Youth of Kazakhstan* was contacted via letter (sent by IKCA director) in January 2024, while the *Republican association of private educational organizations* was contacted in March 2024. Therefore, the stakeholders did not actively participate in the consultation process on the adoption of the standards and guidelines, but were rather requested to provide feedback on the already adopted documents. The panel also noted that the Accreditation Council and the Supervisory Board did not have any roles in updating IKCA's methodologies or even providing council/ recommendations/ suggestions on updating IKCA's activities or documents. During the interviews with the members of these bodies, it was apparent that, should the members of these bodies be willing to provide any such feedback, they would be welcomed. However, they were never actively involved or consulted regarding updating IKCA's internal documents. The panel finds that the Accreditation Council, as well as the Supervisory Board, could offer expertise to IKCA in updating its standards and guidelines in the field of higher education.

Furthermore, the panel believes that the involvement of stakeholders in planning and performing thematic analyses should be considered by IKCA for several reasons. Firstly, stakeholders could help determine what could be the topics of the upcoming analyses, boosting the relevance of these publications for the other HEIs. Secondly, stakeholders' involvement could ensure IKCA receiving support from the experts in different topics, helping with IKCA's workload and improving the research component of these publications.

Panel recommendations

1. IKCA should prioritize aligning the standards with the guidelines for both programmatic and the institutional accreditation procedures in the field of medicine and pedagogy.
2. IKCA should actively involve external stakeholders (including students), Accreditation Council and the Supervisory Board in amending the standards on accreditation related to higher education.
3. The procedures on clustering need to be unified across all documents where clustering is mentioned and ensure the consistent application of these principles across all procedures.
4. The panel recommends applying, as much as possible, the "fitness for purpose" principle when designing the methodology of external quality assurance and reducing the workload for both higher education institutions and experts.
5. The agency's decision to provide feedback on the initial self-evaluation report of a HEI is entirely appropriate. However, to avoid conflicts of interest, it must be ensured that the initial feedback to the self-assessment report is not given by the same experts who are part of the evaluation committee for the given institution or programme.

Panel conclusion: partially 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.

2022 ENQA review recommendations

1. The review panel recommends that IKCA review the regulations on accreditation, including standards for institutional and programme accreditation as well as standards for accreditation of medical institutions and programmes, to ensure clear criteria for decisions at all levels, from the assessment criteria expert reports and to the criteria for decisions as result of post-accreditation monitoring, so that all parties involved have an overview of the assessment criteria applied throughout the entire process.
2. The review panel recommends that IKCA implement proactive measures to develop understanding and capacity of staff members, experts and members of the Accreditation Council, on the need for consistency and methodologies to ensure consistency of decisions.
3. The review panel recommends that IKCA implement measures to support the Accreditation Council in following the criteria for decisions set in the regulations and published and ensure that any deviation from the rules should be thoroughly justified and made available for the public as part of the accreditation decision.
4. The review panel recommends that IKCA formalise and publish all decisions on withdrawal of accreditation, to include an accreditation report and initial accreditation decision.
5. The review panel recommends that IKCA ensure that the withdrawal of the accreditation decision as a result of the post-accreditation monitoring stays within the sole competence of the Accreditation Council.

Issues to be checked in this focused review as defined by the ToR:

1. Whether IKCA improved the consistency of its decision making, including the developing of thorough analysis and evidence in its reports, and ensured consistency in the use of pre-defined criteria and in the reaching of its judgements;

Evidence

The criteria for decision making are described and published on IKCA's website, in several documents:

- *Guidelines for the Organization and Conduct of an External Assessment (Audit) Within the Framework of Institutional and Specialized (Program) Accreditations;*
- *Regulation on the Accreditation Council;*
- All standards for institutional and specialised (program) accreditation also include the criteria for decision-making by the Accreditation Council.

The work of EEGs is described in the '*Guidelines for the Organization and Conduct of an External Assessment (Audit) Within the Framework of Institutional and Specialized (Program) Accreditations*, adopted on October 3rd 2023. In guidelines, point 12 states that experts evaluate the fulfillment of criteria on a four-point scale:

- 'Strong'- indicates a high level of the indicator according to one criterion, which can serve as an example of positive practice for dissemination among other public organizations;
- 'Satisfactory' - indicates the average level of the indicator according to one criterion;

- 'Suggests improvement' - indicates a low level of the indicator according to one criterion;
- 'Unsatisfactory' - indicates that this criterion of EO and/or EP does not meet the criterion.

Moreover, the report template included in the guidelines clearly states that the EEG provides evaluations for each criterion on a four-point scale (page 21): 'EEG conclusions by criteria (strong/satisfactory/suggest improvement/unsatisfactory).' In practice, however, most of the reports do not provide evaluations for individual criteria but rather for standards, and they do so, using mainly a three-point scale: *complies, complies with comments, does not comply*.

At the final meeting with the agency's management, the review panel requested confirmation that all documents on the IKCA website are up-to-date and relevant. Therefore, the panel highlighted, during the initial feedback, that the evaluation scale in the reports does not align with the guidelines for experts available on the agency's website. It's worth mentioning that guidelines are detailed and comprehensive. However, the reports are not aligned with them. The panel's remark caused confusion among the IKCA staff members, as they were seemingly not aware of any inconsistencies between the guidelines and the reports. Specifically, the panel found that the Russian version of the guidelines for experts (which has the same approval date as the English version) uses a three-point scale, which is more consistent with the reports available. Since the panel bases its assessments on information available up until the end of the evaluation visit, the panel's evaluation will maintain the reference that the scale used in the reports does not align with the scale provided in the guidelines for experts.

However, the training slides for experts, which the agency shared with the panel, included instructions for using the three-point scale and for distinguishing between the terms 'comments' and 'recommendations', which was missing in the guidelines for experts. Additionally, the slides clearly explained the meaning of the term 'comments': 'Determine the non-compliance or partial non-compliance of the institution's/program's activities with one or more accreditation criteria. Experts must clearly and explicitly identify those aspects of the institution's/program's activities that do not comply or partially comply with the specialized accreditation standards and specify the proposed steps to achieve 'compliance' in the 'recommendations' section. Comments must be clear, understandable, and well-reasoned' (Slides for the training of staff members, members of governing bodies and expert groups; last revision made November 7th 2024). Thus, according to the training slides, 'comments' refer to non-compliance with one or more criteria, while 'recommendations' refer to suggestions for further development. This means that opportunities for improvement are provided to the HEI or a programme, even in cases which do not indicate non-compliance with a criterion. Therefore, the task of the EEG is to evaluate, for each criterion, whether it is met or not, and to formulate a 'comment' at the end of the standard if a criterion or part of a criterion is not fulfilled. In practice, it was found that different scales were used by the EEGs in the reports. Some examples of the use of three-level scale 'Corresponds; Corresponds with comments; Does not correspond' were found in the reports from the accreditation of *Institution C*, accredited in July 2024; and *Institution B*, accredited in June 2024.

There are other examples of programme assessment, where two different scales of compliance were used within the text of the report. In the EEG report on 'Foreign language: two foreign languages' programme at an institution accredited in June 2024, a three-scale assessment is used with similar meaning 'Complies; Complies with remarks; Does not comply'. Since the original language of the expert reports is either Kazakh or Russian, it is clear that the variations in the names of the three-point scale arise from the inconsistent use of terminology during translation. Based on the Russian-language reports, it can be stated that the same terms are consistently used for the three-point scale: 'Соответствует - Соответствует с замечаниями - Не соответствует' (Complies; Complies with comments; Does not comply). Therefore, the variations in the names of the three-point scale are due to a translation error. However, it is relevant to note that there were also cases of inconsistent assessment which did not originate from the translation errors. For example, if the assessment

'Соответствует с замечаниями' (eng. 'complies with comments') is included in the evaluation report, but the expert group still had the possibility to recommend the accreditation of the programme for three years (as occurred in the case of the afore referenced curriculum).

In some reports, a four-level scale was used. The report on the programme 'Geography-History' of an institution accredited in October 2023 uses the scale 'Complies/good practice; Complies with recommendations; Complies with comments; Does not comply'. The same scale was used in the report on the programme 'Computer Science' of an institution accredited in October 2023. In the report on the programme 'Architectural Design' of the institution accredited in November 2023, in the conclusion all standards were assessed as 'complies with the recommendation'. However, almost no recommendations were provided by the EEG, and the proposal for the Accreditation Council was to accredit the programme for five years. In the report on the programme 'Chemistry' of the institution accredited in April 2024, the scale used by the panel is 'Compliant; Complies with recommendations; Does not match'. However, the report includes the proposal to the Accreditation Council to accredit the programme for three years, even though, in the conclusion part of the report, all standards are marked as 'Compliant' with 'no comments'. This decision could be consistent with IKCA's standards for programme accreditation in higher education, in case of initial programme evaluation. However, all other programmes evaluated at the same HEI during the same period (and with full compliance for all standards), were accredited for five years, with no (known) previous accreditation by IKCA. According to the regulation on the Accreditation Council, in a case of full compliance for any accreditation except the initial one, a five-year accreditation should be granted. The EEG has not justified its proposal provided in the report. The Accreditation Council considered the committee's proposal and decided to accredit the study program for three years without providing any justification for its decision.

In the report on the program 'Applied computer science in design' of the institution accredited in June 2024, three standards (2, 3 and 5) were marked as 'consistent with comments', however there are no comments (nor recommendations) under standard 3. *Student-centered learning, teaching and assessment*. In standard 2. *Development and approval of an educational program*, the EEG provided two recommendations ('Continue work on annual updating of the educational programme with the publication of all changes made on the university website; Consider opportunity development joint educational programs with universities near and far abroad.'), but no comments (as non-compliance with one or more criteria'). The panel could not find the evidence on the clear differentiation between the 'recommendations' and 'comments' provided by the EEGs (in the accreditation reports) across IKCA's documents.

According to the guidelines for experts, the EEG should form a proposal on accreditation for the Accreditation Council. The proposal was included in some reports (eg. the report on institutional accreditation of the *Institution B*), but the majority of the reports the review panel studied, did not include any such suggestion.

According to the "Regulations on the Accreditation Council" as well as 'Standards for institutional accreditation of higher education institutions' (as in other standards as well), the Accreditation Council can make a following decision on compliance with IKCA's standards, for both institutional and programme assessment:

- a) Accredite for seven years (demonstrated compliance with all IKCA standards; examples of broadcasting best practices are present);
- b) Accredite for five years (up to three standards are found to be 'Compliant with comments');
- c) Accredite for three years (four standards are found to be 'Compliant with comments'; or in case of primary accreditation with full compliance or 'Compliance with comments' for up to three standards);

- d) Accredited for one year (five standards are found to be 'Compliant with comments'; or in case of primary accreditation with full compliance or 'Compliance with comments' to four or more standards);
- e) Refuse accreditation (one or more standards are 'Non-compliant').

The regulations of the Accreditation Council do not provide possibility for exceptions. However, the possibility of making exceptions is outlined, for example, in the standards for institutional accreditation (p 11): 'In exceptional cases, a decision of the Accreditation Council may determine a different accreditation period'. The general standards for institutional accreditation do not include clarification on exceptional cases. In the 'Standards for institutional accreditation of organizations of higher and postgraduate pedagogical education based on the ESG-2015', the Accreditation Council may define a different accreditation period based on specific examples of exceptional cases, listed below:

- a) Individual points from articles of legislation in the field of education and science.
- b) Individual paragraphs of the Model Rules for the activities of educational organizations of the relevant type.
- c) Certain provisions of the State Educational Standard.
- d) Individual points of qualification requirements for licensing educational activities.
- e) Individual paragraphs of orders of the authorized body for core activities.
- f) Numerous violations of the Standard of Academic Integrity by teaching staff, employees or students.

The decisions that the Accreditation Council can make according to the *Standards for Specialized (Program) Accreditation of Higher Education and Postgraduate Education Based on ESG-2015*, *Standards for Specialized (Program) Accreditation of Medical Educational Organizations* and *Standards for Specialized (Programme) Accreditation of Organizations of Higher and Post-Graduate Pedagogical Education Based on ESG-2015* correspond to those described above for the institutional assessment of the corresponding fields.

The Accreditation Council's decisions are published on the agency's website in the format of a letter sent to the higher education institution. The letter includes the name of the institution, the type(s) of accreditation, and a list of accredited curricula. The list is structured based on the accreditation periods of the curricula. The letters do not contain justifications for the accreditation decisions but only refer to the obligation to submit an "action plan" by a specified deadline and to undergo "post-accreditation."

Analysis

While analysing the consistency of outcomes, two levels of decision-making must be considered:

- a) Decision made by the EEG in the report, e.g. whether there is non-compliance with one or more criteria which would lead to the assessment of the standard 'complies with comments'. To panel's knowledge, this assessment is preceded by a thorough evidence-based analysis, because the EEG should be aware that the number of standards with the assessment "complies with comments" leads to a decision on accreditation by the Accreditation Council (e.g. five-year accreditation with no more than three standards with 'comments'; four standards with 'comments' are equal to a three-year accreditation; five and more standards with 'comments' will lead to a one-year accreditation);
- b) The decision made by the Accreditation Council, which primarily depends on how many standards the EEG has provided 'comments' to. While the Accreditation Council does have the option to make exceptions in specific cases, the process is generally quite automatic. The Accreditation Council does not have the discretion of deciding on the exceptions, as the accreditation regulations specify very precisely which decision is to be made based on each configuration of assessments.

Therefore, it can be concluded that the key to ensuring consistency in accreditation decisions lies in the hands of the EEGs. However, the panel identified a significant mismatch between the guidelines for EEGs and their practical implementation in reports (as shown in the part of evidence), indicating that the use of this key is at times random or even arbitrary. This finding is consistent with the 2022 ENQA full review of IKCA. An application of different or multiple scales of compliance within and across the reports, the occasional absence of accreditation proposals by the EEG to the Accreditation Council, insufficient or missing analysis in several cases, instances of word-for-word copied text in the reports (from the standards), and confusion surrounding terminology (e.g., 'comments' and 'recommendations') are of particular concern. Especially concerning is the fact that 'comments', which were supposed to indicate non-compliance with a criterion, lacked references to the relevant criterion and did not include justification for such decisions.

During the site visit, the panel wanted to find out more about the procedures for ensuring consistency across reports. However, as the term 'consistency' does not exist in Russian or Kazakh languages, participants struggled to provide a clear answer. Despite that, some information was still provided, useful for the understanding of IKCA's internal procedures on assuring consistency. There is no formal procedure in place, but IKCA organizes trainings for experts to familiarize them with their tasks and roles in the accreditation procedures. The panel received many examples of training materials, and deemed them very useful for the experts, as the training encompasses the introduction to the ESGs and to IKCA's structure and standards. The training materials are undoubtedly relevant, guiding experts to analyze the fulfillment of criteria and justify their assessment. Unfortunately, these principles have not been consistently implemented in all reports. As already mentioned under ESG standard 3.6, the agency must carefully consider and implement quality assurance mechanisms for EEG reports to assure the consistency of outcomes.

The panel found the use of terms 'recommendations' and 'comments' confusing, as their purpose and distinction between each other was not clear in the reports. During the interview, members of the Accreditation Council mentioned that, according to them, comments are mandatory improvement requirements, while the recommendations are suggestions. However, the panel found out from IKCA's senior management team, that in the post-accreditation monitoring procedure, the *Department of methodology, monitoring and quality assurance* checks institutions' improvements performed based on both the comments and recommendations to determine compliance. The panel found particularly concerning that none of the experts, excluding the international experts, were able to distinguish between the terms 'recommendations' and 'comments'.

The panel also noted that, at times, the text from the criteria of the IKCA standards is identical to the one in the EEG reports. One such example is the text of criterion 1.11, from the 'Standards for specialized (program) accreditation of higher education and postgraduate education based on ESG-2015', which is identical to the wording under 1.11 in the EEG's report on the accreditation of the programme 'International relations in the context of globalization' at one of the accredited institutions. Another example of a similar approach is present in the report on programme "Computer Science" of an institution accredited in October 2023, where some of the criteria in almost all standards are repeating the wording of the criteria set in the standards for programme accreditation. There are more cases of word-for-word matches (see also examples provided under ESG 2.1) in other reports, leading to the lack of EEG's addressing the criteria in an analytical and evidence-based way. Moreover, the fact that several criteria in many reports have essentially been left unassessed undermines the credibility and transparency of the accreditation process and ultimately leads to 'inconsistency of outcomes'.

The reason for a three-year accreditation, even when no non-compliance with the criteria has been identified, could be explained by the fact that it was the initial accreditation of the programme. Specifically, according to the Accreditation Council's regulations, in the case of initial accreditation, the Accreditation Council decides to accredit a programme for three years if all standards are met,

or if up to three standards receive the evaluation '*complies with comments*'. Unfortunately, the report does not indicate whether it is the initial accreditation or not. Regardless, the panel believes it is not appropriate to accredit a programme for a shorter period if no non-compliance has been identified for any of the standards. Both the EEG's and the Accreditation Council's decisions must clearly state the reasons why a programme, for which the EEG has not identified any non-compliance with the standards ('*complies with comments*'), has been granted a shorter accreditation period. The reason cannot solely rely on the fact that a programme (which already has enrolled students) is being accredited for the first time.

If a decision is made, by the Accreditation Council, to accredit HEIs for seven years, examples of broadcasting best practices should be provided, according to IKCA's standards. However, the panel was unable to find any examples of those best practices in cases of seven-year accreditation. Some examples of the decisions missing this information include the ones on the accreditation of programmes at an institution accredited in December 2023, and at the institution accredited in April 2024. The panel wishes to highlight that some good practices identified during the programmatic or institutional accreditation by the EEG are mentioned in the EEG reports. However, as the Accreditation Council of IKCA grants accreditation to programmes/ institutions, examples of broadcasting best practices should be listed in the decision on accreditation directly. It also remained unclear to the panel what "broadcasting best practices" means, as it could encompass good practices, but it could also be understood in a different way by different stakeholders.

Exceptional cases under which a different accreditation period could be granted by the Accreditation Council, are described only in the standards related to pedagogy. This leaves space for arbitrary decisions on the duration of the accreditation in cases of those institutions and programmes accredited based on the remaining standards in higher education. The panel was informed, during the site visit, that the Accreditation Council has not previously used the provision on exceptional cases to modify the original assessment of the EEG.

The accreditation decision by the Accreditation Council depends on how many standards the EEG has added '*comments*' to, indicating non-compliance with one or more criteria. If '*comments*' are added to up to three standards, the accreditation decision should be for five years. If '*comments*' are added to four or more standards, the accreditation period is reduced to three years, and so on. Confusion regarding the use of the evaluation scale and the interpretation of '*comments*' (based on discussions with experts and Accreditation Council members) leads to a situation where equal treatment of higher education institutions and consistency in accreditation decisions are not ensured.

Overall, the panel concluded that all issues present during the 2022 ENQA full-review of IKCA still persisted. This refers to the lack of use of pre-defined judgements for the EEGs assessing HEI/ programme compliance with IKCA's standards; lack of addressing all of IKCA's criteria in the reports (and the issue of word-for-word copying); and the absence of thorough analysis and evidence to form judgements on compliance. The panel recognizes that the training of experts is a step forward in assuring the consistency in the work of the EEGs, however, it is deemed by the panel that this process is not efficient enough to contribute to consistency significantly.

Panel recommendations

Based on the analysis, the following recommendations are proposed to improve the consistency, credibility, and transparency of outcomes:

- I. IKCA is recommended to review the Guidelines for EEGs, thereby creating clear and detailed instructions for EEGs to ensure consistent and evidence-based assessments of criteria. To help with clarity, standardized definitions for terms like '*comments*' and '*recommendations*', should be provided, as well as standardised evaluation scales should be used.

2. IKCA should require all assessments of standards to include justifications and evidence referencing specific criteria.
3. IKCA needs to assure that both EEG and the Accreditation Council decisions explicitly justify their '*comments*' and '*recommendations*', particularly in cases of shorter accreditation periods despite no identified non-compliance.
4. IKCA should require that all the decisions on accreditation (made by the Accreditation Council) follow IKCA's regulatory documents. In particular, evidence of best practices should be provided when granting seven-year accreditations, and any decisions deviating from standard accreditation periods should be supported by a rationale.
5. IKCA should introduce periodic reviews to identify and address discrepancies in accreditation outcomes across similar cases.
6. IKCA should use templates for EEG reports that ensure uniformity while allowing space for analytical insights.
7. IKCA should make sure that the experts use their own wording (thereby avoiding word-for-word copying) when compiling accreditation reports, and that they address the implementation of the ESG part I. within reports.

Panel conclusion: non-compliant

CONCLUSION

SUMMARY OF COMMENDATIONS

1. The panel commends IKCA for the development of regulations pertaining to the formation and the function of IKCA's governing bodies.
2. Panel members consider that the addition of the thematic analysis to the strategic development plan of IKCA for 2023- 2027 is an example of good practice by the agency.

OVERVIEW OF JUDGEMENTS AND RECOMMENDATIONS

In light of the documentary and oral evidence considered by it, the review panel is satisfied that, in the performance of its functions, IKCA is in compliance with the ESG. In particular, the panel found IKCA to be compliant with ESG 3.4; partially compliant with ESG 3.3, 2.1, 2.2 and 3.6; and non-compliant with the ESG 2.5. The panel strived to provide a balanced judgement and to argue well those standards IKCA was found to be partially compliant with.

An overview of recommendations per each standard is given below.

a) ESG 3.3:

1. IKCA should develop a clear procedure for the selection and the constitution of its Working Group. The panel recommends that the Working Group of IKCA gain more independence in terms of its membership. For example, involving the majority of external stakeholders in its composition could help the agency in increasing the transparency.
2. The agency should define the conditions under which the executive management (director, deputy director) of IKCA could be dismissed by the founder as well as define the criteria and procedure for the appointment or the election of IKCA's director.

b) ESG 3.4:

1. The agency needs to significantly improve the analysis within their thematic analyses. The analysis should rely on clear and concise research questions leading to new or interesting findings relevant for higher education stakeholders. Summarizing reports in a qualitative manner should not be the main portion of the thematic analysis.

c) ESG 3.6:

1. The agency needs to invest further effort to anonymise feedback collection from HEIs who are undergoing institutional or programmatic accreditation, as well as encourage them to provide feedback that supports the agency's development.
2. The agency must review its internal quality assurance guidelines and improve the quality assurance procedures for various aspects of its core process- the accreditation process- such as the methodology for ensuring the quality of accreditation reports and the establishment of competence-based selection criteria for members of the Accreditation Council.

d) ESG 2.1:

1. The panel recommends that IKCA invest additional effort into developing a systematic and rigorous process for assuring that the accreditation reports follow IKCA's standards (as mentioned in the last paragraph of the analysis section).
2. IKCA should invest additional effort into developing a systematic and rigorous process for assuring that the institutions, programmes under evaluation, as well as the experts-

members of the EEGs, understand the meaning of ESG part I, they implement it to a full extent, and they report on it.

e) ESG 2.2:

1. IKCA should prioritize aligning the standards with the guidelines for both programmatic and the institutional accreditation procedures in the field of medicine and pedagogy.
2. IKCA should actively involve external stakeholders (including students), Accreditation Council and the Supervisory Board in amending the standards on accreditation related to higher education.
3. The procedures on clustering need to be unified across all documents where clustering is mentioned and ensure the consistent application of these principles across all procedures.
4. The panel recommends applying, as much as possible, the "fitness for purpose" principle when designing the methodology of external quality assurance and reducing the workload for both higher education institutions and experts.
5. The agency's decision to provide feedback on the initial self-evaluation report of a HEI is entirely appropriate. However, to avoid conflicts of interest, it must be ensured that the initial feedback to the self-assessment report is not given by the same experts who are part of the evaluation committee for the given institution or programme.

f) ESG 2.5:

1. IKCA is recommended to review the Guidelines for EEGs, thereby creating clear and detailed instructions for EEGs to ensure consistent and evidence-based assessments of criteria. To help with clarity, standardized definitions for terms like 'comments' and 'recommendations', should be provided, as well as standardised evaluation scales should be used.
2. IKCA should require all assessments of standards to include justifications and evidence referencing specific criteria.
3. IKCA needs to assure that both EEG and the Accreditation Council decisions explicitly justify their 'comments' and 'recommendations', particularly in cases of shorter accreditation periods despite no identified non-compliance.
4. IKCA should require that all the decisions on accreditation (made by the Accreditation Council) follow IKCA's regulatory documents. In particular, evidence of best practices should be provided when granting seven-year accreditations, and any decisions deviating from standard accreditation periods should be supported by a rationale.
5. IKCA should introduce periodic reviews to identify and address discrepancies in accreditation outcomes across similar cases.
6. IKCA should use templates for EEG reports that ensure uniformity while allowing space for analytical insights.
7. IKCA should make sure that the experts use their own wording (thereby avoiding word-for-word copying) when compiling accreditation reports, and that they address the implementation of the ESG part I. within reports.

SUGGESTIONS FOR FURTHER IMPROVEMENT

- I. The agency should work on defining a conflict of interest for the executive management and the founder of the agency.

2. IKCA should publically show the composition of Working Group as an important governing body of the agency, on the agency's website and/or other public channels.
3. In the interest of clarity, transparency, and reliability, it is important to ensure that amendments to the agency's regulations are recorded with the date of the amendment or include a note stating that the amendment takes effect retroactively.
4. The panel recommends to the agency to involve stakeholders in defining the topics of thematic analyses based on their needs.
5. Thematic analyses should be distributed among target groups, ensuring that IKCA's resources invested in preparing the analysis generate added value to the agency and to the stakeholders.
6. Given the significant increase in the volume of higher education accreditations compared to previous years (while the number of agency staff has remained the same) it is advisable to enhance the skills and knowledge of existing staff to ensure the quality of the accreditation process. For example, regional representatives could be enabled to take on coordinator roles with expertise in content and processes.

ANNEXES

ANNEX I: PROGRAMME OF THE SITE VISIT

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
[02.10.2024] - Online meeting with the agency's resource person				
1	18.10.2024 11:00-13:00 CET	Review panel's kick-off meeting and preparations for site visit	Review Panel	
2	28.10.2024 15:00-16:00 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	<ol style="list-style-type: none"> 1. Director of IKCA. 2. Deputy Director of IKCA. 3. Director of the Department of Methodology, Monitoring and Quality Assurance. 4. Director of the Accreditation Department. 5. Director of the Department of Personnel and Legal Support. 6. Chief Expert in International Projects and Post-Accreditation Monitoring 	
[05.11.2024] – Day 0 (pre-visit)				
3	15:30-16:15	Review panel's pre-visit meeting and preparations for day 1	Review panel	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
[06.11.2024] – Day I				
	09:30- 10:00	Review panel's private meeting	Review panel	
4	10:00- 10:45	Meeting with the IKCA founder	founder	Online
	10:45- 11:00	Review panel's private discussion	Review panel	
5	11:00-11:45	Meeting with IKCA Director and IKCA Deputy Director	1. Director of IKCA. 2. Deputy Director of IKCA.	
	11:45- 12:00	Review panel's private discussion	Review panel	
6	12:00- 13:00	Meeting with Working Group members	1. Director of the Department of Methodology, Monitoring and Quality Assurance. 2. Director of the Accreditation Department. 3. Director of the Department of Personnel and Legal Support. 4. Chief Expert of the Department of Methodology, Monitoring and Quality Assurance.	
	13:00-14:00	Review panel's private discussion, lunch (panel only)	Review panel	
7	14:00- 14:45	Meeting with Supervisory Board members	1. Deputy of the Senate of the Parliament of the Republic of Kazakhstan (online). 2. Candidate of technical sciences, associate professor, one of the founders of the IKCA.	Hybrid

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			3. Student, doctoral student in the "Computer Science" program at Astana IT University	
	14:45- 15:00	Review panel's private discussion	Review panel	
8	15:00- 16:00	Meeting with Senior Management Team at IKCA (responsible for higher education) and the team responsible for the preparation of SAR	<ol style="list-style-type: none"> 1. Director of the Department of Methodology, Monitoring and Quality Assurance 2. Director of the Accreditation Department 3. Director of the Department of Personnel and Legal Support 4. Director of the Department of Financial and Economic Support - Chief Accountant. 	
	16:00-16:15	Review panel's private discussion	Review panel	
9	16:15- 16:45	Meeting with the members of Appeals and Complaints Commission	<ol style="list-style-type: none"> 1. Candidate of Economic Sciences, Associate Professor, Director of the Department of Academic Affairs, Turan-Astana University. 2. Candidate of legal sciences, associate professor of the department of national and international law, deputy chairman of the commission. 3. Main expert department sciences, postgraduate education And accreditations. Academy choreography, G. Astana. 	
	16:45- 16:50	Review panel's private discussion	Review panel	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
10	16:50- 17:15	Meeting with international experts	<p>1. Doctor of Economics. Professor at the Upper Silesian University of Economics named after W. Korfanteg, Katowice, Poland, international expert</p> <p>2. Candidate of legal sciences, deputy dean for research work of the faculty of law of the Kyrgyz-Russian Slavic University named after the first President of the Russian Federation B.N. Yeltsin, associate professor of the department of international and constitutional law, Bishkek, international expert.</p>	Online
	17:15- 17:45	Wrap-up meeting among panel members and preparations for day 2	Review panel	
	TBC	Dinner (panel only)	Review panel	
[07.11.2024] – Day 2				
	8:30- 09:00	Review panel's private meeting	Review panel	
11	09:00- 09:45	Meeting with IKCA Accreditation Council members	<p>1. Chairman of the Accreditation Council, member of the expert commission on human rights under the President of the Republic of Kazakhstan, Doctor of Law, Professor, Rector of the Eurasian Law Academy named after D. Konaev (Almaty), member of the Council on Legal Policy under the President of the Republic of Kazakhstan, President of the Criminological Association of Kazakhstan, member of</p>	Hybrid

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			<p>the International Union of Lawyers. Experience as a member of the IKCA Accreditation Council - 6 years.</p> <p>2. Deputy Chairman of the Accreditation Council. Deputy of the Mazhilis of the Parliament of the Republic of Kazakhstan of the IV-V convocations. Candidate of Pedagogical Sciences, Honorary Professor of KARSTU, VKSU, Vice-President of the "Republican Council" of Women, Full Member of the International Academy of Informatization. Experience as a member of the IKCA Accreditation Council - 3 years.</p> <p>3. Doctor of Physical and Mathematical Sciences, Professor of the Department of Technical Physics of the Gumilyov Eurasian National University, Astana. Experience as a member of the IKCA Accreditation Council - 6 years.</p> <p>4. First Deputy General Director of KZ – VRD. (Kazakhstan wagon repair depots), Astana. Experience as a member of the IKCA Accreditation Council – 6 years.</p> <p>5. Master of Pedagogical Sciences. PhD candidate. Head of educational and methodological work of the Educational and Training School "Zerdeli", Astana, student. Experience as a member of the IKCA Accreditation Council - 3 years.</p>	
	09:45- 10:00	Review panel's private discussion	Review panel	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
12	10:00- 10:45	Meeting with key staff of the agency/staff in charge of external QA activities	<p>1. Regional representative for Akmola region, coordinator of IKCA.</p> <p>2. Regional representative for the Turkestan region and Shymkent city, coordinator of IKCA.</p> <p>3. Regional representative for Astana, coordinator of IKCA.</p>	Hybrid
	10:45-11:00	Review panel's private discussion	Review panel	
13	11:00- 12:00	Meeting with heads of some reviewed HEIs	<p>1. Candidate of economic sciences, professor, first vice-rector of the Institution Kokshetau University named after Abay Myrzakhmetov. Specialized accreditation, programs are accredited for 7 years. (05.04.2024 - 04.04.2031)</p> <p>2. Acting Vice-Rector for Academic Affairs, Institution "Kazakh Automobile and Road Institute named after L.B. Goncharov", Almaty. Institutional and Specialized accreditation, programs are accredited for 5 years. (05.04.2024 - 04.04.2029)</p> <p>3. Ph.D. in Physics and Mathematics. Vice-Rector for Academic Affairs, Kyzylorda University "Bolashak" LLP. Specialized accreditation, programs are accredited for 3 years. (06/07/2024 - 06/07/2027)</p> <p>4. Vice-Rector for Strategy and Internationalization, PhD, Associate Professor, NAO "Abai Kazakh National Pedagogical University", Almaty. Specialized</p>	Online

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			<p>accreditation, programs are accredited for 5 and 7 years. (22.12.2023 - 21.12.2030)</p> <p>5. Vice-Rector for Academic Development, Institution "Kostanay Engineering and Economics University named after M.Dulatov". Specialized accreditation, programs are accredited for 5 years. (05.04.2024 - 04.04.2029)</p> <p>6. Vice-Rector for Academic Affairs, Atyrau University named after H. Dosmukhamedov. Specialized accreditation, programs are accredited for 5 years. (08.11.2023 - 07.11.2028)</p>	
	12:00- 13:00	Review panel's private discussion, lunch (panel only)	Review panel	
14	13:00- 14:00	Meeting with quality assurance officers of reviewed HEIs	<p>1. Director of the Department of Academic Affairs of the Institution Kokshetau University named after Abay Myrzakhmetov. Specialized accreditation, programs are accredited for 7 years. (05.04.2024 - 04.04.2031)</p> <p>2. Head of the Internal Quality Assurance System of the Institution "Kostanay Engineering and Economics University named after M. Dulatov". Specialized accreditation, programs are accredited for 5 years. (08.11.2023 - 07.11.2028)</p> <p>3. Head of the Department for Internal Quality Assurance and Strategic Analysis, LLP "Kyzylorda University "Bolashak". Specialized accreditation,</p>	Online

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			<p>programs are accredited for 3 years. (07.06.2024 - 07.06.2027)</p> <p>4. Dean of the Faculty of Mathematics, Physics and Computer Science, Candidate of Technical Sciences, Associate Professor, NAO "Kazakh National Pedagogical University named after Abay", Almaty. Specialized accreditation, programs are accredited for 5 and 7 years. (12/22/2023 - 12/21/2030)</p> <p>5. Director of the Department of Strategy and Development of the M. Kozybev SKU, Candidate of Pedagogical Sciences, Associate Professor; Petropavlovsk. Specialized accreditation, programs are accredited for 3 years and 5 years. (06/22/2023 - 06/21/2028)</p> <p>6. Senior Manager, NAO "Kazakh Agrotechnical Research University named after S.Seifullin", Astana. Specialized accreditation, programs are accredited for 5 years. (16.03.2023 - 15.03.2028)</p>	
	14:00- 14:15	Review panel's private discussion	Review panel	
15	14:15- 15:15	Meeting with academic staff members from HEIs reviewed by IKCA	<p>1. PhD, Institution Kokshetau University named after Abay Myrzakhmetov. Specialized accreditation, programs are accredited for 7 years. (05.04.2024 - 04.04.2031)</p> <p>3. Candidate of economic sciences, professor, associate professor of the Higher Attestation Commission of the Institution "Kazakh Automobile</p>	Online

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			<p>and Road Institute named after L.B. Goncharov", Almaty. Institutional and Specialized accreditation, programs are accredited for 5 years. (05.04.2024 - 04.04.2029)</p> <p>3. PhD, Associate Professor, Head of the Department of Philology, Journalism and History, LLP "Kyzylorda University "Bolashak". Specialized accreditation, programs are accredited for 3 years. (07.06.2024 - 07.06.2027)</p> <p>4. Candidate of pedagogical sciences, senior lecturer, NAO "Kazakh National Pedagogical University named after Abay", Almaty. Specialized accreditation, programs are accredited for 5 and 7 years. (12/22/2023 - 12/21/2030)</p> <p>5. Associate Professor of the Department of Transport and Mechanical Engineering of the North Kazakhstan University named after Manash Kozybayev, Petropavlovsk. Specialized accreditation, programs are accredited for 3 years and 5 years. (06/22/2023 - 06/21/2028)</p> <p>6. Candidate of agricultural sciences, associate professor of the Department of Agriculture and Crop Production, NAO "Kazakh Agrotechnical Research University named after S.Seifullin", Astana. Specialized accreditation, programs are accredited for 5 years. (16.03.2023 - 15.03.2028)</p>	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
	15:15- 15:30	Review panel's private discussion	Review panel	
16	15:30- 16:15	Meeting with representatives from the Expert Councils	<p>1. Candidate of agricultural sciences, head of the department of monitoring, quality management systems and accreditation, associate professor of the department of Chemistry, Biology and Ecology, Central Asian Innovation University, Shymkent. - Chairman of the Expert Council, experience in the council - 2 years. Experience of an expert in specialized accreditation - Institution "Peoples' Friendship University named after Academician A. Kuatbekov", 12/22/2023 - 12/21/2028, Private Institution "Shymkent University" - 06/22/2023 - 06/21/2028.</p> <p>2. Doctor of Economics, Professor of the Department of Management, NAO "L.N. Gumilyov Eurasian National University", Astana. Expert experience in specialized accreditation - Institution "Kostanay University of Engineering and Economics named after M. Dulatov", 05.04.2024 - 04.04.2029., Institution "Humanitarian and Technical Academy" - 08.11.2023 - 07.11.2028., new member of the Expert Council.</p> <p>3. Director of the Quality Assurance Department, IT University, Astana. New expert and member of the Expert Council.</p> <p>4. Eurasian National University named after L.N. Gumilyov, doctoral program: Social pedagogy</p>	Hybrid

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			<p>(8D01801) Astana. New expert and member of the Expert Council.</p> <p>5. A 4th year student, faculty of Higher School of Education, specialty: Foreign language: two foreign languages, NAO L.N. Gumilyov Eurasian National University, Astana</p>	
	16:15- 16:30	Review panel's private discussion	Review panel	
17	16:30- 17:15	Meeting with representatives of students (members of student bodies and student evaluators)	<p>1. Member of official representative body - Youth Convention; Astana IT University, specialty - Computer science, course -3 (new expert)</p> <p>2. A 1st year master's student, OP Pedagogy and Psychology, Miras University, Shymkent. Participated in specialized accreditation procedures - Shymkent University - 10.04.2023, Institution "Peoples' Friendship University named after Academician A. Kuatbekov" - 19.12.2023)</p> <p>3. A 4th year EP "Law" Caspian Public University, Almaty. Participated in the specialized accreditation procedure - "Almaty Economics and Humanities University" in the period from 1.10.23 - 2.10. 2023.</p> <p>4. A 3rd year student of the OP "Tourism", University "Turan Astana", 87072707207 (new expert)</p> <p>5. Kazakh Kazakh National Women's Pedagogical University, 6B015111-Geography 3rd year. Participated in the specialized accreditation</p>	Hybrid

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
			procedure. 11/28/2023 - NAO "Kazakh National Pedagogical University named after Abai"	
	17:15- 17:45	Wrap-up meeting among panel members: preparation for day 3 and provisional conclusions	Review panel	
	TBC	Dinner (panel only)	Review panel	
[08.11.2024] – Day 3				
18	09:00- 10:00	Meeting among panel members to agree on final issues to clarify	Review panel	
19	10:00- 11:00	Meeting with IKCA Director and key staff members to clarify any pending issues	<ol style="list-style-type: none"> 1. Director of IKCA. 2. Deputy Director of IKCA. 3. Director of the Department of Methodology, Monitoring and Quality Assurance. 4. Director of the Accreditation Department 5. Director of the Department of Personnel and Legal Support. 	
20	11:00- 12:30	Private meeting between panel members to agree on the main findings	Review panel	
	12:30- 13:30	Lunch (panel only)	Review panel	

SESSION NO.	TIMING	TOPIC	PERSONS FOR INTERVIEW	NOTES
21	13:30-14:00	Final de-briefing meeting with staff and Board members of the agency to inform about preliminary findings	<ol style="list-style-type: none"> 1. Director of IKCA. 2. Deputy Director of IKCA. 3. Director of the Department of Methodology, Monitoring and Quality Assurance. 4. Director of the Accreditation Department. 5. Director of the Department of Personnel and Legal Support. 6, Director of the Department of Financial and Economic Support - Chief Accountant 7. Regional representative for the Akmola region, coordinator of the IKCA, 8. Regional representative for the Turkestan region and Shymkent city, coordinator of the IKCA 9. Regional representative for Astana, IKCA coordinator. 	

ANNEX 2: TERMS OF REFERENCE OF THE REVIEW

Annex I: Terms of Reference for a focused review of the Independent Kazakhstan Center of Accreditation (IKCA)

This document is to agree on the Terms of Reference (ToR) that address the request of the Independent Kazakhstan Center of Accreditation (IKCA), Kazakhstan, to undergo a focused review against the Standards and guidelines for quality assurance in the European Higher Education Area (ESG). The request follows EQAR Register Committee's decision to reject the application by IKCA (Ref. RC41/AI30, 12 December 2023, annex I to this document).

Chapter 1: Background and request of IKCA for a focused review

IKCA approached ENQA to coordinate a focused review addressing those issues that led to the rejection of the agency's application for inclusion on the Register. EQAR's 'Procedures for Applications' (§3.21) allow the agency to undergo such a focused review, and to reapply within 18 months based on this review.

Subsequently, on 11 February 2024 IKCA officially approached ENQA to coordinate the abovementioned focused review and prepare a review report that will be considered for the purpose of EQAR-registration. On 16 February 2024, ENQA agreed to coordinate the focused review. The review follows ENQA methodology for partial reviews (see ENQA Rules of Procedure, article 7, and ENQA's policy on partial reviews of members under review) that is aligned with the requirements of a focused review for the purposes of EQAR-registration. In case of provisions not covered by ENQA's policy on partial reviews of members under review, the Guidelines for ENQA Agency Reviews (for full reviews) are to be followed.

Chapter 2: Purpose and scope of the focused review

Chapter 2.1: Activities within the scope of the ESG

The focused review will address the above mentioned ESG standards through the following external QA activities of IKCA:

1. Institutional accreditation of higher education organizations (incl. post-accreditation monitoring)¹
2. Specialized (programmatic) accreditation of educational programs (incl. post-accreditation monitoring),²

The following activities are considered to be outside of the scope of the ESG as they do not cover provisions on EHEA QF level 6-8, unless the panel comes across new evidence that proves otherwise³:

3. Institutional and program accreditation of technical and vocational education and

¹ Including the Standards for Institutional Accreditation of Medical Educational Organisations and Standards for Institutional Accreditation of Pedagogical Educational Organisations. The specific standards follow the standard methodology for institutional accreditation, but add set of further criteria depending on the field of study (e.g. WFME criteria for the evaluations of the Medical Educational Organisations).

² Including the Standards for specialised (programme) accreditation of Medical Educational Organisations, Standards for specialised (programme) accreditation of Pedagogical Educational Organisations and Standards for accreditation of third cycle programmes (Doctoral studies). The specific standards follow the standard methodology for programme accreditation, but add set of further criteria depending on the field of study (e.g. WFME criteria) or the QF level of the programme.

³ Should this be the case, the coordinator is expected to inform EQAR at the earliest convenience and request an amendment of the terms of reference.

4. Accreditation of organizations of additional (further) education (incl. post-accreditation monitoring).

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

The following standards were judged as partially or non-compliant by EQAR Register Committee (see [EQAR Register Committee's decision not to include the agency on the Register](#), Ref. RC41/A130, 12 December 2023), and the following aspects are thus expected to be covered in the review:

- ESG 2.1 (Consideration of internal quality assurance) regarding whether the practical implementation of Part I is ensured and whether all standards of Part I are included in IKCA's reports;
- ESG 2.2 (Designing methodologies fit for purpose) regarding whether:
 - (a) IKCA adopted a clear approach to grouping the programmes in its clustered reviews and
 - (b) the involvement of stakeholders in developing and reviewing the methodologies is systemic and substantial;
- ESG 2.5 (Criteria for outcomes) regarding whether IKCA improved the consistency of its decision making, including the developing of thorough analysis and evidence in its reports, and ensured consistency in the use of pre - defined criteria and in the reaching of its judgements;
- ESG 3.3 (Independence) regarding whether:
 - (a) the agency ensures its independence from its founder,
 - (b) it distributes the power of governing of the agency in an equal manner among the stakeholders, and
 - (c) it clarified the selection processes of the agency's different bodies;
- ESG 3.4 (Thematic analysis) regarding whether the agency has developed a systematic approach to thematic analysis;
- ESG 3.6 (Internal quality assurance and professional conduct) regarding whether the agency utilises the feedback gathered through its internal quality assurance feedback mechanisms to improve its work.

The report should also confirm whether the other findings (in regard of those standards not covered in depth now) of the full review report of 19 April 2023 remain valid.

Chapter 2.2: Content and preparation of the review report

The agency is expected to produce a self-assessment report on the points raised above, indicating in particular changes that have taken place since the last full review. In addition, the agency will indicate any eventual changes and developments in the agency's activities beyond those listed under the criteria under scrutiny, and that might be relevant in view of the agency's ESG compliance. This requirement follows ENQA's policy on partial reviews of members under review, Content, p. 2, and EQAR's Procedures for Applications⁴.

The focused review foresees a site visit (in person) to the agency.

Following the site visit, a review report will be drafted in consultation with all review panel members and correspond to the purpose and scope of the review as defined above. In particular, the review report will concentrate on the same criteria as in a full review and assess how the compliance has evolved since this last review. Furthermore, it will provide a clear rationale for its findings concerning each ESG. When preparing the report, the review panel should bear in mind the Use and interpretation

⁴ <https://www.eqar.eu/about/official-documents/#procedures-for-applications>

of the ESG by EQAR⁵ to ensure that the report will contain sufficient information for the Register Committee for application to EQAR. Finally, the report will also assess any eventual changes that have been brought to the attention of the panel in the self-assessment report.

Chapter 3: Panel composition

The ENQA Agency Review Committee will nominate three external reviewers to complete the task. The composition of the panel for the ECAQA full review in 2023 was as follows:

Heli Mattisen	Chair (ENQA nominee), quality assurance professional
Marie Gould	Secretary (ENQA nominee), quality assurance professional
Paolo Cherubini	Panel member (EUA nominee), academic
Stanimir Boyadzhiev	Panel member (ESU nominee, member of the European Students' Union Quality Assurance Student Experts Pool)

For the focused review, ENQA will use **one member of the panel which carried out the last full review, to the extent possible**, in order to ensure consistency, sufficient background knowledge on the agency, and the external trust in the outcomes (independent of the Agency Review Committee). The two other panel members will be selected so to complement the panel with altogether three viewpoints, that of a student, an academic and a quality assurance professional.

One of the panel members will be appointed as a Chair of the panel. The panel secretary will be appointed by the Chair, should the Chair not cover the secretary tasks.

The panel members will be asked whether they are willing and able to carry out the work within the timeline as listed in chapter 4 of the terms of reference.

Chapter 4: Timeline

	Deadline
Terms of Reference agreed with IKCA and EQAR	May 2024
Completion of focused review SAR by IKCA	31 May 2024
Appointment of focused review panel members and agreement on reviewer contracts	June 2024
Site visit to IKCA	October/November 2024
Delivery of draft report to ENQA Secretariat	January 2025
Draft report to IKCA for a factual check	February 2025
Completion of report and submission to ENQA	February 2025
Report validation by ENQA Agency Review Committee	March 2025
EQAR Register Committee meeting and decision on the application	Spring/Summer 2025

Chapter 5: Costs

ITEM	COST
Expert fee - Chair	€ 2 000
Expert fee - panel member	€ 1 500
Expert fee - panel member	€ 1 500
Coordination fee ENQA	€ 2 500
Site visit (estimate, full actual cost to be covered by the	€ 4 000

⁵ The Use and Interpretations of the ESG are available at the following link:
https://www.eqar.eu/assets/uploads/2020/09/RC_12_1_UseAndInterpretationOfTheESG_v3_0.pdf

agency) ⁶	
TOTAL	€ 11 500

Chapter 6: Annexes

Annex 1: EQAR Register Committee's decision not to include the agency on the Register, Ref. RC41/A130, 12 December 2023

⁶ Calculation is based on four return flights to Kazakhstan (three experts and a review coordinator), and two nights in a hotel as proposed by the agency under review.

ANNEX 3: GLOSSARY

ENQA	European Association for Quality Assurance in Higher Education
EEG	External expert group
ESG	<i>Standards and Guidelines for Quality Assurance in the European Higher Education Area, 2015</i>
HE	higher education
HEI	higher education institution
QA	quality assurance
SAR	self-assessment report

ANNEX 4. DOCUMENTS TO SUPPORT THE REVIEW

DOCUMENTS PROVIDED BY IKCA

- **Self-assessment report**
- **Appendices to the self-assessment report:**
 - The program of the seminar “Implementation of the report of an external expert group within the framework of specialized (program) accreditation of universities”
 - Letter from IKCA’s director to the director of *Convention of youth of Kazakhstan*
 - Comparison table: “Guidelines for Compiling a Self-Assessment Report Within the Framework of Specialized (Program) Accreditation of Organizations of Higher and Postgraduate Education”
 - Letter to IKCA’s director from the *Convention of youth of Kazakhstan*
 - Letter from IKCA’s director to the head of the *Republican association of private educational organizations*
 - Letter to IKCA’s director from the *Republican association of private educational organizations*
 - Minutes of the meeting of the Expert Council on Higher and Postgraduate Education (October 25th 2023)
 - Composition of the Expert Council on Higher and Postgraduate Education
 - Comparison table: “Guidelines for Organizing and Conducting External Assessment (Audit) Within the Framework of Institutional and Specialized (Program) Accreditation” 14.2.
 - Memorandum of cooperation and interaction within the framework of the process of institutional and specialized accreditation in educational institutions (October 20th 2023)
 - Comparison table: “Guidelines for Organizing and Conducting External Assessment (Audit) Within the Framework of Institutional and Specialized (Program) Accreditation” 11.2.
 - Comparison table: *Charter*
 - Comparison table: “*Charter, founder*”
 - Order of IKCA’s director on amendments to the Regulation on the Accreditation Council of IKCA
 - Survey for IKCA’s external experts

OTHER SOURCES USED BY THE REVIEW PANEL

- **Agency’s website**
- **Additional materials requested:**
 - Guideline for compiling a self-assessment report within the framework of institutional accreditation of medical educational organizations
 - List of consultants who participated in the update of the standards and guidelines of the IKCA
 - Comparison table: “Standards for Specialized (Program) Accreditation of Organizations of Higher and Post-Secondary Education”
 - Comparison table: “Standards for Institutional Accreditation of Higher Education Organizations”

- Comparative Table of Criteria for Specialized Accreditation Standards of Higher Education and Postgraduate Pedagogical Institutions
- Names of the authors (or groups of authors) of IKCA's thematic analyses to date relating to higher education (and mobility)
- Names and positions of the IKCA staff involved in the external quality assessment of higher education
- List of IKCA procedures from 01.01.2023
- **Materials obtained after the clarification meeting:**
 - Instructions for Clustering Educational Programs during Specialized (Programmatic) Accreditation by the Independent Kazakhstan Center of Accreditation
 - Conflict of Interest Policy of the Non-Profit Institution "Independent Kazakhstan Center of Accreditation"
 - *Charter*
 - Regulation on the Supervisory Board of the Non-Profit institution "Independent Kazakhstan Center of Accreditation"
 - Regulations on the Accreditation Council of the Independent Kazakhstani Center of Accreditation
 - Regulations on the Appeals and Complaints Commission
 - Procedure for engaging experts to serve on the Accreditation Council, Supervisory Board, Appeals and Complaints Committee, and Expert Councils, as well as for involving stakeholders in the development and updating of regulatory documents for the IKCA
 - Planning of thematic analyses
 - Regulations on the Working Group for the Definition and Approval of the Composition of the Accreditation Council, Supervisory Board, Appeals and Complaints Commission, Expert Councils of the Non-profit Institution "Independent Kazakhstan Center of Accreditation", as well as for the Attraction and Selection of Stakeholders"
- **Materials obtained during the site visit:**
 - Materials in Russian language:
 - Expert Council- introductory presentation
 - Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)- introductory presentation
 - Minutes of the staff meeting
 - Minutes of the meeting of the Expert Council
 - The principles of external audit- introductory presentation
 - Supervisory Board- introductory presentation
 - Appeals and Complaints Commission- introductory presentation
 - Internal Quality Assurance and ESG- introductory presentation
 - Accreditation Council- introductory presentation
 - Survey results for 2023
 - Structure of the Report of the External Expert Group- presentation
 - Materials in English language:
 - Recommendations on the preparation of a thematic analysis based on the results of specialized (program) and institutional accreditation of educational organizations
 - On the essence and criteria of best practices in vocational education- presentation
 - Analysis of the accreditation standards requirements- presentation

- Accreditation of higher and post-graduate educational institutions-
presentation

ENQA AGENCY REVIEW 2025

THIS REPORT presents findings of the ENQA Agency
Review of the Independent Kazakhstan Center of
Accreditation (IKCA), undertaken in 2024.

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European Association for
Quality Assurance in Higher Education